

Silver State Health Insurance Exchange

Monthly Meeting of Nevada's
On-Exchange Insurance Carriers

July 8, 2025



nevada
health link

Introductions - SSHIX

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Agenda

- Six Month Look-Ahead
- NV Health Authority Update
- Open Enrollment Metrics Summary
- Plan Certification Update
- Policy Update
- July RCNI Submission
- Q&A

Six Month Look-Ahead

July, 2025

- 7/14: First data transfer from SERFF to the Nevada Health Link SBE Platform (TBD)
- 7/14-8/22: Issuer Plan Preview begins on Nevada Health Link SBE Platform

August, 2025

- 8/1 – 9/30: QHP Quality Rating preview
- 8/15: Draft Plan Year 26 Issuer Agreements sent to issuers for review
- 8/22: Plan Preview ends, deadline for all plans to be verified; Letters of Good Standing submitted to the Exchange from DOI
- 8/22: Final deadline for issuers to change QHP application w/o state authorization
- 8/29: Rate filings approved by DOI; Final data transfer from SERFF to NVHL SBE Platform
- 8/29: Plans reverified for rates – rates must be approved by DOI

Six Month Look-Ahead (cont'd)

September, 2025

- 9/5/25: Final Plan Year 2026 Issuer Agreements sent to issuers with final plan confirmation list
- 9/5 – 9/12: Issuers send signed agreements and confirm final plan listings
- 9/15: SSHIX to send final plan confirmation list and countersigned issuer agreements to issuers
- 9/15: Plans Certified in SERFF

October, 2025

- 10/1: Approved rate changes posted on DOI website
- 10/1: Consumer window shopping begins on NevadaHealthLink.com
- 10/1: URL links need to be posted for window shopping to begin
- 10/6 – 10/10: Limited data correction window

November, 2025

- 11/1: Anticipated public display of QHP quality rating information
- 11/1: Open Enrollment Begins

December, 2025

- No updates

Nevada Health Authority

- July 1, 2025 NV Health Authority was launched upon the passage and signage of SB 494
- The Silver State Health Insurance Exchange has transitioned under the new Division of Consumer Health Services
 - Along with the Public Option (BBSPs), PPC, PEBP, Purchasing and Compliance, NV Medicaid, Eligibility Policy for Medicaid
- Leadership Appointments
- Goals of NVHA Dept

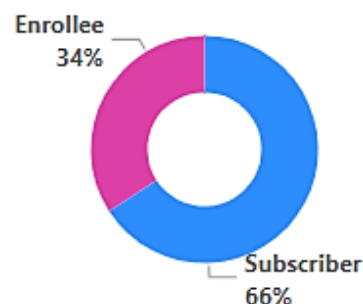
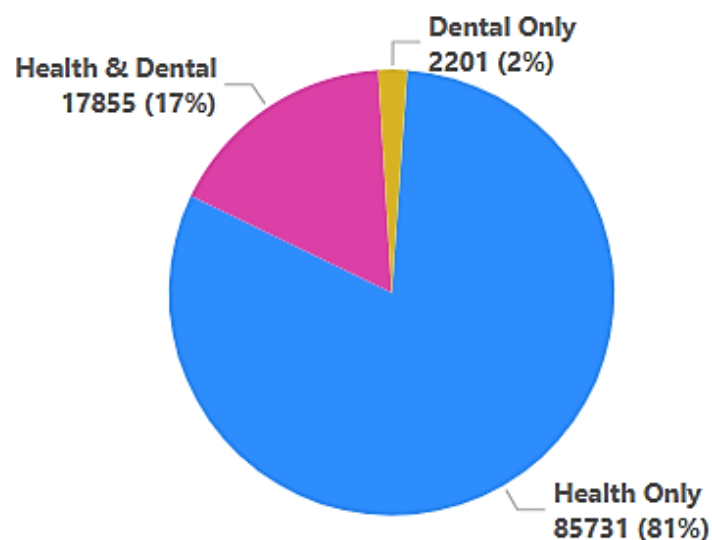
July 2025 Enrollment Summary

All Enrollees – All Counties

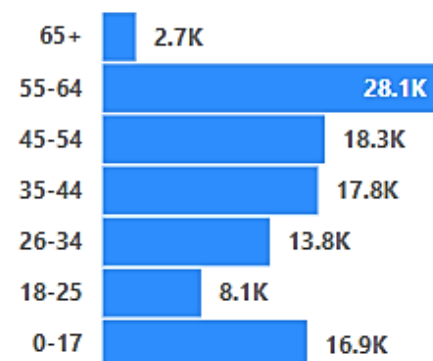
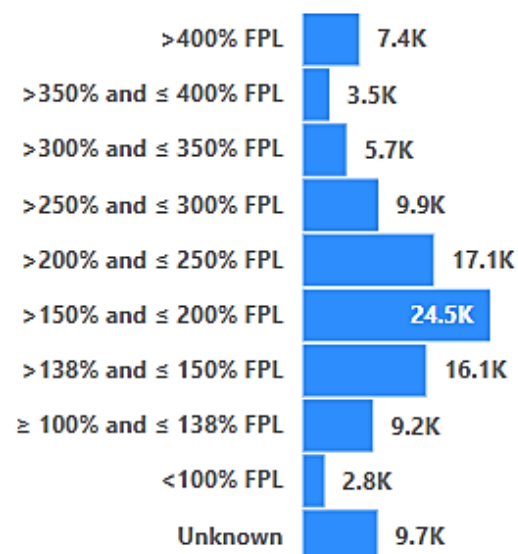
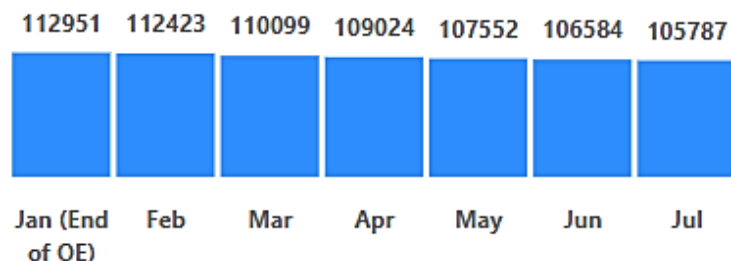


Total Enrollees*

105,787



Clark	83,429
Washoe	13,250
Douglas	2,385
Carson City	1,512
Nye	1,268
Lyon	1,225
Elko	799
Churchill	715
Humboldt	463
Storey	177
White Pine	129
Pershing	120
Lincoln	94
Lander	84
Eureka	65
Mineral	65
Esmeralda	14



*Includes unique enrollees with a PY25 plan selection in Confirmed or Pending status as of 7/1/25. Consumers with Terminated or Cancelled policies have been removed from these counts.

July 2025 Enrollment Summary

Health Enrollees – All Counties



Total Enrollees*

103,586

Pending

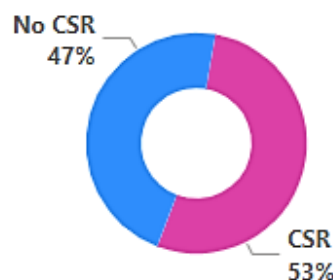
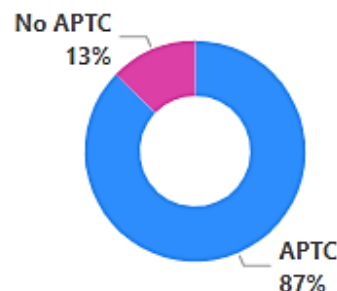
957

Confirmed - Passive

53,598

Confirmed - Active

49,031



Avg Premium Before APTC**

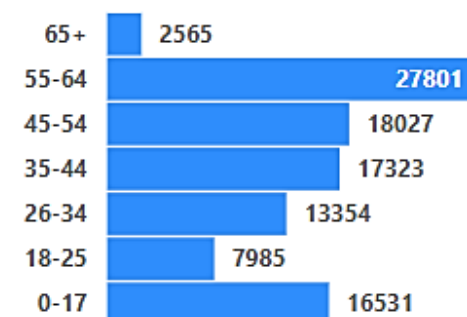
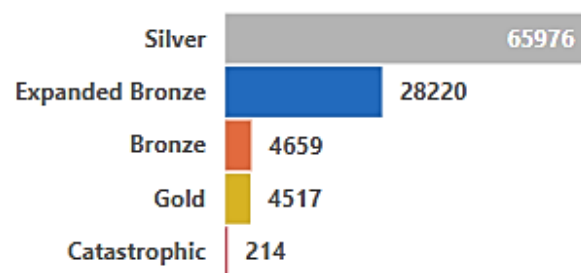
\$554

Avg Premium After APTC**

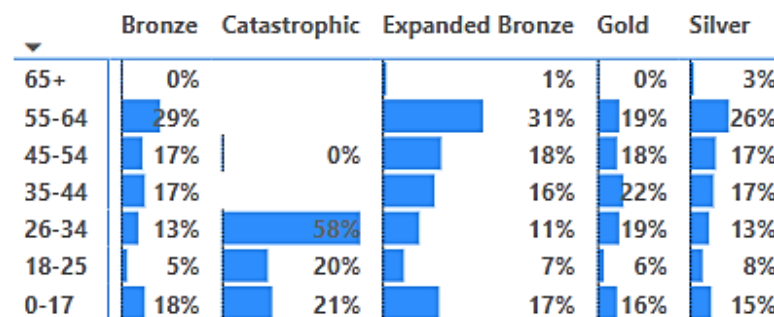
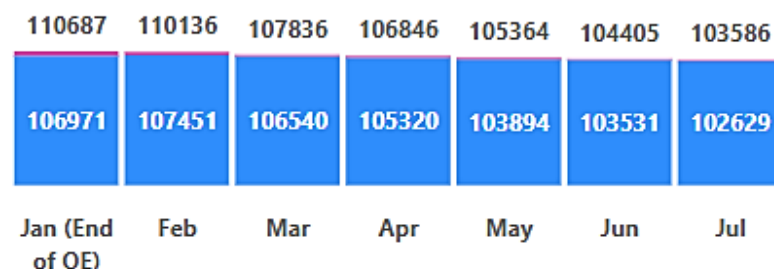
\$151

Avg APTC**

\$462



● Confirmed ● Pending



*Includes unique enrollees with a PY25 plan selection in Confirmed or Pending status as of 7/1/25. Consumers with Terminated or Cancelled policies have been removed from these counts;

**Average Premium values are monthly averages for all enrollees; Average APTC is the monthly average for enrollees with monthly APTC > \$0.

July 2025 Enrollment Summary

Dental Enrollees – All Counties



Total Enrollees*

20,056

Pending

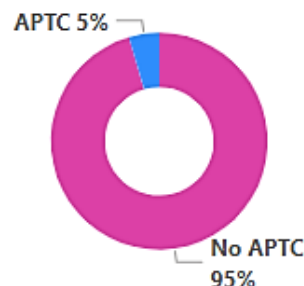
286

Confirmed - Passive

11,575

Confirmed - Active

8,195



Avg Premium Before APTC**

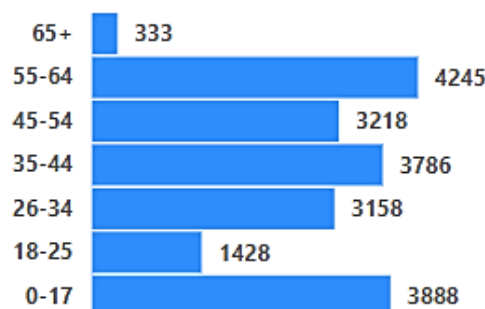
\$21

Avg Premium After APTC**

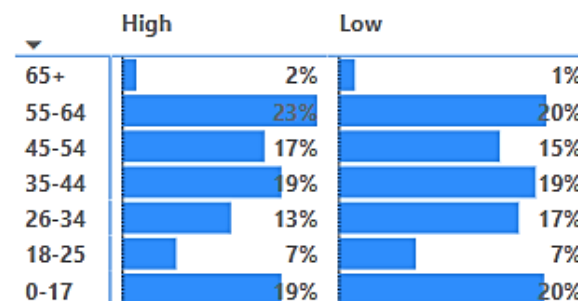
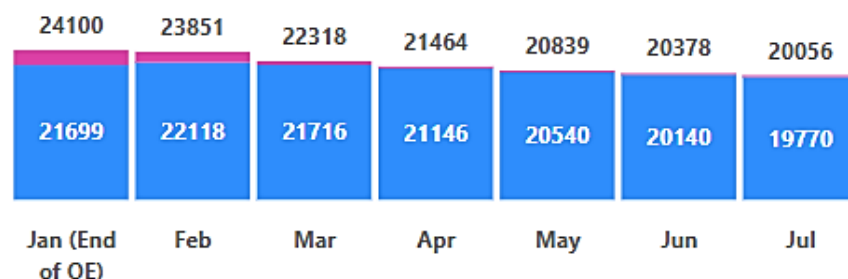
\$21

Avg APTC**

\$10



● Confirmed ● Pending



*Includes unique enrollees with a PY25 plan selection in Confirmed or Pending status as of 7/1/25. Consumers with Terminated or Cancelled policies have been removed from these counts;

**Average Premium values are monthly averages for all enrollees; Average APTC is the monthly average for enrollees with monthly APTC > \$0.

Plan Certification Update

- PY26 Plan Certification and review process is ongoing
 - Next Milestone: July 14th – First data transfer to platform (This date is anticipated to change based on updates to filings)
- SSHIX Acceptable Use Agreement forms (due July 14th)
 - Form is under Carrier Resources on the NV Health Link website
 - One form per person must be completed yearly
- PY26 Open Enrollment dates
 - October 1st – Window Shopping
 - November 1st – Open Enrollment begins
 - January 15th – Open Enrollment ends

Plan Certification - Continued

- Marketplace Integrity and Affordability Rule
 - CMS is finalizing widening the de minimis ranges to +2/-4 percentage points for all individual and small group market plans subject to the AV requirements under the EHB package, other than for expanded bronze plans, for which CMS is finalizing a de minimis range of +5/-4 percentage points.
 - CMS is also finalizing removing from the conditions of QHP certification the de minimis range of +2/0 percentage points for individual market silver QHPs and specifying a de minimis range of +1/-1 percentage points for income-based silver CSR plan variations.
 - CMS is finalizing that, effective beginning in plan year 2026, issuers subject to EHB requirements (that is, non-grandfathered individual and small group market plans) may not cover specified sex-trait modification procedures, as an EHB.
 - In the final rule, CMS is also adding a definition of the term “specified sex-trait modification procedure” in response to comments and specifying that certain services would not qualify as a “specified sex-trait modification procedure” under this definition.
 - This policy will not prohibit issuers of coverage subject to EHB requirements from voluntarily covering specified sex-trait modification procedures, nor will it prohibit states from requiring coverage of such services, subject to the rules related to state-mandated benefits at **45 CFR § 155.170**.

Policy Update

- Big Beautiful Bill Act (H.R.1)
 - Passed the House on 6/3/25
 - Passed the Senate on 7/1/25
 - Became Law on 7/4/25
- The Exchange is still currently analyzing the potential impacts and will communicate further guidance soon.

Policy Update - Continued

- Marketplace Integrity and Affordability Rule
 - CMS final rule published to the Federal Register on 6/25/25
- Key Changes:
 - DACA Eligibility: Removes Deferred Action for Childhood Arrivals (DACA) recipients from the “lawfully present” definition, making them ineligible for enrollment in Exchanges and Basic Health Programs (BHP), and thus ineligible for federal health insurance subsidies.
 - Past-Due Premiums: Permits health insurers to require repayment of outstanding premiums, including attributing new payments to past debts, before effecting new coverage—subject to state law.
 - APTC Failure-to-Reconcile Policy: For plan year 2026, returns to a one-year threshold (from two years) before advance premium tax credits (APTC) are discontinued for individuals who have not filed and reconciled their taxes (reverting to the two-year policy in 2027).

Policy Update - Continued

- **Income Verification:** Tightens eligibility checks by ending the automatic 60-day extension for income data matching issues, and adding new documentation requirements when attested income is just above subsidy thresholds but trusted data sources indicate otherwise. These stricter verifications will sunset after 2026.
- **Open Enrollment Period:** Shortens and standardizes the annual Open Enrollment Period for all individual market Exchanges to a maximum of nine weeks between November 1 and December 31, effective for 2027 and beyond.
- **Premium Payment Thresholds:** For 2026, restricts issuer flexibility to accept partial premium payments under fixed-dollar or gross percentage thresholds, reverting to prior policy in 2027.

Policy Update - Continued

Provision	Proposed Applicability Date	Finalized Applicability Date	Sunset at the End of PY 2026?	Applicable to SBE?
Coverage Denials for Failure to Pay Premiums for Prior Coverage (§ 147.104(i))	Effective date of this rule	Effective date of this rule	No	Yes – state options
Deferred Action for Childhood Arrivals (DACA) (§ 155.20)	Effective date of this rule	Effective date of this rule	No	Yes
Standards for Termination of an Agent's, Broker's, or Web-broker's Exchange Agreements for Cause (§ 155.220(g)(2))	Effective date of this rule	Effective date of this rule	No	No
Failure to File Taxes and Reconcile APTC Process (§ 155.305(f)(4))	PY26	PY26	Yes	Yes
60-Day Extension to Resolve Income Inconsistency (§ 155.315)	Effective date of this rule	Effective date of this rule	No	Yes
Income Verification When Data Sources Indicate Income Less Than 100 Percent Federal Poverty Level (§ 155.320(c)(3)(iii))	Effective date of this rule	Effective date of this rule	Yes	Yes
Income Verification When Tax Data is Unavailable (§ 155.320(c)(5))	Effective date of this rule	Effective date of this rule	Yes	Yes
Annual Eligibility Redetermination (§ 155.335(a), (n))	Exchanges on the FFE: PY26 SBE: PY2027	Exchanges on the FFE: PY26 SBE: Not finalized	Yes	No
Annual Eligibility Redetermination (Automatic Re-enrollment Hierarchy) (§ 155.335(j))	PY26	PY26	No	Yes - with flexibility
Gross Premium Percentage-based and Fixed-dollar Premium Payment Thresholds (§ 155.400(g))	Effective date of this rule	Effective date of this rule	Yes	Yes
Annual Open Enrollment Period (OEP) (§ 155.410)	PY 26 OEP	PY 27 OEP	No	Yes
Monthly Special Enrollment Period for APTC-Eligible Qualified Individuals with a Household Income at or Below 150 Percent of the Federal Poverty Level (§ 155.420)	Effective date of this rule	Effective date of this rule	Yes	Yes

Policy Update - Continued

All Exchanges Conducting Eligibility Verification for SEPs (§ 155.420(g))	PY 26	Exchanges on FFE: PY26 SBE: Not finalized	Yes	No
All Exchanges Conducting Eligibility Verification for 75 Percent of New Enrollments through SEPs (§ 155.420(g))	PY 26	Exchanges on FFE: PY26 SBE: Not finalized	Yes	No
Prohibition on Coverage of Specified Sex-Trait Modification Procedures as an EHB (§§ 156.115(d) and 156.400)	PY 26	PY 26	No	Yes
Premium Adjustment Percentage Index (PAPI) (§ 156.130(e))	PY 26	PY 26	No	Yes
Levels of Coverage (Actuarial Value) (§§ 156.140, 156.200, 156.400)	PY 26	PY 26	No	Yes

<https://www.federalregister.gov/documents/2025/03/19/2025-04083/patient-protection-and-affordable-care-act-marketplace-integrity-and-affordability>

July RCNI Submission

- The next RCNI Submission Deadline is **Monday, July 21.**
- Carriers are expected to submit an RCNI for Plan Year 2025.
- SSHIX has published a calendar of [2025 Monthly RCNI Submission Deadlines](#) to Nevada Health Link's [Carrier Resources Page](#)

Month	Submission Deadline	2026 RCNI	2025 RCNI	2024 RCNI
January 2025	Monday, January 20		X	X
February 2025	Thursday, February 20		X	X
March 2025	Thursday, March 20		X	X
April 2025	Monday, April 21		X	
May 2025	Monday, May 19		X	
June 2025	Thursday, June 19		X	
<u>July 2025</u>	Monday, July 21		<u>X</u>	
August 2025	Thursday, August 21		X	
September 2025	Thursday, September 18		X	
October 2025	Monday, October 20		X	
November 2025	Thursday, November 20	X	X	
December 2025	Thursday, December 18	X	X	X

Questions and Answers

Please submit questions re: EDI/Reconciliation or Carrier Connector to the SSHIX Recon Team at:

reconsupport@exchange.nv.gov

Please submit questions re: Plan Certification to SSHIX Plan Certification Manager at:

pmanagement@exchange.nv.gov

Please submit Policy questions to Meagan W. Ranson at:

mranson@exchange.nv.gov