

STATE OF MAINE  
DEPARTMENT OF PROFESSIONAL AND FINANCIAL REGULATION  
BUREAU OF INSURANCE

IN RE:	)	
	)	
ANTHEM BLUE CROSS AND BLUE	)	
SHIELD REQUEST FOR	)	
AUTHORIZATION TO DISCONTINUE	)	<b>NOTICE OF PENDING</b>
AND REPLACE LEGACY	)	<b>PROCEEDING AND HEARING</b>
INDIVIDUAL HEALTH PLANS	)	
EFFECTIVE JANUARY 1, 2017	)	
	)	
Docket No. INS-15-802	)	

Superintendent of Insurance Eric Cioppa issues this Notice of Pending Proceeding and Hearing in the above-captioned matter.

**I. PENDING PROCEEDING**

The Superintendent hereby gives notice that he has convened an adjudicatory proceeding to consider the request filed by Anthem Health Plans of Maine, Inc., doing business as Anthem Blue Cross and Blue Shield (“Anthem”), for authorization to discontinue the existing grandmothered (“GM”) and grandfathered (“GF”) individual health plans effective January 1, 2017, and to replace those existing plans with plans that are in compliance with the federal Patient Protection and Affordable Care Act (“ACA”). Anthem’s GM and GF plans are collectively referred to as the “Legacy Individual Health Plans.” The Legacy Individual Health Plans include Anthem’s HealthChoice, HealthChoice Standard and Basic, HealthChoice HDHP, HMO Standard and Basic, and Lumenos Consumer Directed Health Plan products.

Specifically, this proceeding concerns Anthem’s proposed discontinuance and replacement of the Legacy Individual Health Plans purchased before January 1, 2014 that are either (a) grandfathered plans under the ACA or (b) non-grandfathered plans (commonly referred to as “grandmothered” plans) that the federal government has deemed exempt from certain requirements of the ACA pursuant to its transitional policy announced on November 14, 2013 and extended on March 5, 2014.

Anthem explains that as of September 2015, policyholder count for the Legacy Individual Health Plans was under 4,000, consisting of approximately 2,112 GF policyholders and 1,753 GM policyholders. Anthem’s proposal is to transition the GF and GM policyholders to Anthem’s most comparable ACA-compliant plans that include the same type of broad network to which those policyholders currently have access. Anthem’s members also have the option of choosing among the other insurance options available in the individual market instead of remaining with their broad-network ACA-compliant Anthem plan.

## II. HEARING

Pursuant to 24-A M.R.S. §§ 229 and 230, 5 M.R.S. § 9052, and Insurance Rule Chapter 350 the Superintendent hereby gives notice that he will hold a public hearing in the above-captioned matter beginning at 9:00 a.m. on March 28, 2016, in the Central Conference Room at the Department of Professional and Financial Regulation, Gardiner Annex, 76 Northern Avenue, Gardiner, Maine.

Members of the public are invited to attend the hearing and may offer sworn testimony or unsworn comments beginning at 9:00 a.m. on March 28. Only sworn testimony will be admitted into evidence. *See* 5 M.R.S. § 9057(3). The Superintendent will consider unsworn statements or comments for their persuasive value to the extent that they are relevant to facts in the record.

## III. PURPOSE

The purpose of the proceeding and hearing is for the Superintendent to determine, pursuant to 24-A M.R.S. § 2850-B(3)(G)(3), whether Anthem's proposed discontinuance of the Legacy Individual Health Plans, and the product replacements proposed by Anthem, will be in the best interests of the policyholders and otherwise in compliance with applicable law.

## IV. PARTIES; INTERVENTION

As the applicant, Anthem is designated a party to this proceeding. All persons wishing to intervene as parties in this proceeding shall file their applications in writing with the Superintendent no later than February 5, 2016. If granted party status, an intervenor may immediately commence discovery as provided in Section V below.

Applicants should either hand deliver their intervention applications to the attention of Elena Crowley at the offices of the Bureau of Insurance, 76 Northern Avenue, Gardiner, Maine or mail them to the Superintendent at the following address:

Eric Cioppa, Superintendent  
Attn: Elena Crowley  
Docket No. INS-15-802  
Bureau of Insurance  
Maine Department of Professional and Financial Regulation  
#34 State House Station  
Augusta, Maine 04333-0034

Only those persons willing to undertake the responsibilities placed upon parties to an adjudicatory proceeding under Maine law and Insurance Rule Chapter 350 should seek intervenor status.

An applicant claiming intervention as of right pursuant to 5 M.R.S. § 9054(1) shall include in the application a statement either explaining how the applicant is or may be, or is a member of a class that is or may be, substantially and directly affected by the proceeding or

identifying the applicant as an agency of federal, state, or local government. Applications for permissive intervention pursuant to 5 M.R.S. § 9054(2) shall contain a statement explaining and substantiating the applicant's interest in the proceeding. The Superintendent will not grant late applications without a compelling demonstration of good cause.

Any party that opposes an application for intervention shall file a statement in opposition with the Superintendent by February 9, 2016. The Superintendent in his discretion may rule on intervention applications at any time, without having to wait for the expiration of the opposition to intervention deadline.

V. DISCOVERY

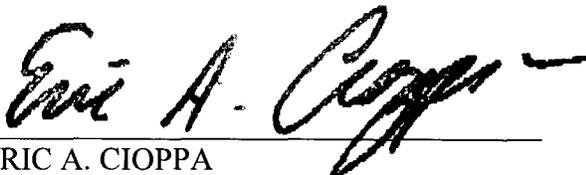
Upon being designated or granted party status in this proceeding by the Superintendent, a party may immediately commence the issuance of information requests. Discovery in this proceeding shall be as provided for by Insurance Rule Chapter 350(10), subject to modification by further order of the Superintendent.

VI. PROCEDURE

The Superintendent will conduct the proceeding and hearing in accordance with the provisions of the Maine Administrative Procedure Act, 5 M.R.S. chapter 375, subchapter 4; 24-A M.R.S. §§ 229 to 236; Bureau of Insurance Rule chapter 350; and any rulings of the Superintendent. All parties to the proceeding have the right to present evidence and witnesses at the hearing and have the right to be represented by counsel. Failure of any party to appear may result in disposition by default with respect to that party. The Superintendent, however, may set aside a default for good cause.

The Department of Professional and Financial Regulation does not discriminate on the basis of disability in the admission to, access to, or operation of its programs, services, or activities. Individuals in need of auxiliary aid for effective communication at the hearing are invited to make their needs and preference known to Elena Crowley at the Bureau of Insurance, telephone 207-624-8421, sufficiently in advance of the hearing so that appropriate arrangements can be made.

January 7, 2016

  
ERIC A. CIOPPA  
Superintendent of Insurance