



**Health Insurance Connector Authority - Public Hearing**

**Re: 956 CMR 5.00 MINIMUM CREDITABLE COVERAGE (MCC)**

**September 9, 2008**

On behalf of the Massachusetts Business Roundtable (MBR), I appreciate this opportunity to provide comments relative to Minimum Creditable Coverage (MCC) and regulatory changes proposed by the Connector Authority. Last year, MBR, in collaboration with the Greater Boston Chamber of Commerce and the Massachusetts Taxpayers Foundation, through correspondence to the Connector, conveyed our belief that MCC was “meant to be a minimum and not a universal standard of adequacy.” We advised against enacting changes to MCC that would force existing policyholders to change their coverage, to avoid raising costs for insurance coverage already in place for individuals and employers. These remain our sentiments today as you consider regulatory changes to MCC.

MBR’s Health Care Task Force maintains that the best way to achieve universal access, and to keep it, is to make basic medical care more affordable through a system where consumers exercise choice in selecting insurers and providers in a competitive market. To help achieve that goal, we have proposed that reasonable Consumer Directed Health Plans (CDHPs) be available for those who can afford them. High deductible CDHPs combine increased patient cost sharing with improved information for more cost effective health care decisions. We strongly urge that the draft regulations not limit the availability of CDHPs to meet MCC standards, and that federally-approved CDHPs be included as part of Minimum Creditable Coverage in Massachusetts.

As we have testified many times, MBR fully supports the state’s health reform law to achieve health care insurance coverage for all individuals in Massachusetts. The Commonwealth has made impressive progress to-date toward that objective, but we still have work to do. Before setting new MCC standards that will raise the costs and mandate additional coverage for individuals already insured, we need to reach the remaining uninsured population. We also need to do more to provide affordable health plans for truly basic coverage, before adding costs and mandates to existing plans. Therefore, MBR urges the Connector to allow flexibility in plan-design and consumer choice to meet current standards for Minimum Creditable Coverage, while giving the Commonwealth more time to accomplish its first goal of achieving universal statewide coverage for the uninsured.

Respectfully submitted,

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Executive Director, MBR