



Broker Briefing

SOLO 1st Quarter Rates & Renewal Information

SOLO 1st Quarter Rates Available December 1

The 1st Quarter 2011 rates for SOLO Outlook Health Plans for individuals and families will be available beginning December 1. There will be a base rate increase of approximately 3.8 percent.

Effective January 1, 2011, RMHP SOLO rates reflect state mandates requiring gender neutral rating and mandatory coverage of maternity care. Additional information on state mandates effecting SOLO individuals plans are noted below.

Online quoting tool coming soon

access|RMHP, our online instant quoting tool will be released this month. We will be hosting training sessions on how to use the quoting tool starting next week. Once the new quoting tool is released, you will no longer receive the Rocky Rapid Rates CD.

RMHP will have Q1 2011 rating CDs available upon request this month. Please email [SOLO Sales](#) and request either a zip file or rating software CD. The rating tool is available by visiting our [FTP site here](#).

Rocky Mountain Health Plans Child-Only Enrollment Periods

As a reminder, RMHP can allow enrollment for child-only plans in accordance with state regulations. The open enrollment periods are January and July. We have received clarification from the Division of Insurance that will allow RMHP to accept child-only applications for enrollment on January 1, 2011.

Following our child-only enrollment policy, child-only applications received November 1, 2010 through December 5, 2010 will be accepted for a January 1, 2011 effective date. The following cut-off and effective dates will apply for the child-only January Open Enrollment period:

Applications Received	Effective Date
November 1 through December 5	January 1, 2011
December 6 through January 5	February 1, 2011
January 6 through January 31	March 1, 2011

SOLO Health Care Plan 1st Quarter Renewals

Annual renewal notices for current SOLO Members with an anniversary in January, February or March will be in the mail shortly. A customized premium quote for each SOLO Outlook plan option is provided to assist Members interested in a plan change. You will receive a copy of the renewal letter and the customized premium quote for your clients.



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Should your clients request a change to a different health care plan, Medical Underwriting is required on specific plan changes. Each renewal letter describes plan change availability for the SOLO Select, Smart Choice and View plans.

A SOLO Health Care Plan Change Form is included with each renewal and will be required to request a plan change, the Plan Change Form can be [viewed here](#).

Plan change requests should be submitted at least 15 days prior to the renewal date.

We value our SOLO Members and want to help them maintain their health plan coverage. If you need assistance with renewals, please contact the SOLO Sales Team at 800-453-2981, option 4 or 970-244-7800, option 4 or email.

Important Note: Premium on current SOLO plans must continue to be paid, during the plan change request period. If your client does not pay the premium on their current plan, coverage will be terminated and your client will need to reapply and go through medical underwriting. Please advise your clients to continue to pay the premium on the current plan. If the plan change request is approved the bill will be adjusted accordingly.

Updated SOLO Application

The SOLO Application has been updated, please [view here](#).

Call or email the SOLO Sales Team to request a new supply of enrollment booklets with the updated application. Please begin using the updated application immediately - older versions of the application may be returned to you.

State Mandated Benefit Changes for all Individual Plans - Effective January 1, 2011

Colorado General Assembly Bill Number		Details of Benefit Change
HB-1021	Coverage for Reproductive Services	<ul style="list-style-type: none"> • Mandatory coverage for contraceptive drugs and devices, as well as coverage for pre-natal care and delivery. • Generic oral contraceptives will be added to the RMHP drug discount plan and to medical plans without a prescription drug rider

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HB10-1008	Prohibition against consideration of gender in setting rates for Individual Policies.	<ul style="list-style-type: none"> • Gender neutral rating methodology mandate for all Individual Plans, effective January 1, 2011.
HB-1201	Health Coverage for Chemotherapy Treatment	<ul style="list-style-type: none"> • Mandatory coverage for FDA-approved, orally administered anticancer medication.
HB10-1252	Breast cancer screening with mammography	<ul style="list-style-type: none"> • Mandatory coverage for annual breast cancer screening with mammography for patients possessing at least one risk factor, including: <ul style="list-style-type: none"> ○ Family history of breast cancer ○ Being 40 years of age or older ○ Having a genetic predisposition to breast cancer

As always, if you have any questions, comments or need assistance, please call your Rocky Mountain Health Plans or CNIC Account Executive.

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