

# Section 1332 of the Patient Protection and Affordable Care Act (PPACA) State Innovation Waivers – Reinsurance Waiver Quarterly Report

**Reporting Instructions:** Use the following template to capture data for quarterly 1332 waiver grant reporting, as specified in 45 CFR 155.1324(a), and referenced in your grant specific terms and conditions (STC). Quarterly reports are due 60 days following the end of each calendar quarter.

STATE:

A. GRANTEE INFORMATION			
<b>1. Reporting Period End Date</b> September 30, 2020		<b>2. Report Due Date</b> November 30, 2020	
<b>3. 1st Quarterly Report</b> <input type="radio"/>	<b>2nd Quarterly Report</b> <input type="radio"/>	<b>3rd Quarterly Report</b> <input checked="" type="radio"/>	<b>4. Federal Agency and Organization Element to Which Report is Submitted</b> Consumer Information & Insurance Oversight (CCIIO)
<b>5. Federal Grant Number Assigned by Federal Agency</b> SIWIW200014	<b>6a. DUNS Number</b> 082406534	<b>6b. EIN</b> 81-0302402	
<b>7. Recipient Organization Name</b> Montana State Auditor			
<b>Address Line 1</b> 840 Helena Ave			
<b>Address Line 2</b>			
<b>Address Line 3</b>			
<b>City</b> Helena	<b>State</b> MT	<b>Zip Code</b> 59601	
<b>Zip Extension</b>		<b>8. Grant Period Start Date</b> Jan 1, 2020	
<b>9. Grant Period End Date</b> Dec 31, 2024			
<b>10. Other Attachments (attach other documents as needed or as instructed by the awarding Federal agency)</b>			

## Section 1332 of the Patient Protection and Affordable Care Act (PPACA) State Innovation Waivers – Reinsurance Waiver Quarterly Report

B. REPORT CERTIFICATION	
<b>11. Certification: I certify to the best of my knowledge and belief that this report is correct and complete for performance of activities for the purposes set forth in the award documents.</b>	
<b>11a. Typed or printed name and title of Authorized Certifying Official</b>  Mary Belcher	<b>11b. Signature of Authorized Certifying Official</b>  <div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">Mary Belcher</div> Digitally signed by Mary Belcher Date: 2020.11.30 14:26:22 -07'00'
<b>11c. Telephone (area code, number, and extension)</b>  406-444-3467	<b>11d. E-mail address</b>  Mary.Belcher@mt.gov
<b>11e. Date report submitted (month/day/year)</b>  November 30, 2020	
C. PROGRESS OF SECTION 1332 WAIVER - General	
<b>12. Provide an update on progress made in implementing and/or operating the approved 1332 waiver.</b>  <p>The Montana Commissioner of Securities and Insurance (CSI) will propose two changes in the upcoming 2021 legislative session to the state-based statutes governing the Montana reinsurance program and board; specifically:</p> <p>(1) Section 33-22-1316(5), MCA. The disbursement date for reinsurance payments will be changed from August 15 to December 31 of the year following the applicable benefit year.</p> <p>(2) Section 33-22-1313(5), MCA. The federal citation will be changed from 45 CFR 158.221 to 45 CFR 158.232(f), such that the calculation of an insurer's medical loss ratio will be based on a single year of experience, without applying any credibility assessment.</p> <p>The Montana reinsurance program will make its first member assessment in 2020. The 2020 annual member assessments and FAQs have been drafted, shared with the Reinsurance Board for comment, and will be mailed no later than December 4, 2020 (payable by December 31, 2020).</p> <p>Thus far in 2020, the Montana reinsurance program has only incurred operational expenses. All expenses have been paid from draws on the grant. Please see the attached operation report dated 9/30/2020 for more details.</p> <p>A new website (<a href="http://MTreinsurance.org">MTreinsurance.org</a>) is in the process of being implemented for the reinsurance program,</p>	

**Section 1332 of the Patient Protection and Affordable Care Act (PPACA)  
State Innovation Waivers – Reinsurance Waiver Quarterly Report**

and will be available on or after December 1, 2020.

**13. Describe any implementation and/or operational challenges, including plans for and results of associated corrective actions. After the first quarter, only report on changes and/or updates, as appropriate.**

**The Montana Reinsurance Association has not faced any implementation or operational challenges.**

**Section 1332 of the Patient Protection and Affordable Care Act (PPACA)  
State Innovation Waivers – Reinsurance Waiver Quarterly Report**

<b>D. POST-AWARD FORUM</b> <i>(for Quarter Post-Award Forum was held)</i>
<p><b>14. Was the date, time, and location of the Post-Award Forum advertised 30 days in advance?</b></p> <p><input checked="" type="radio"/> <b>Yes</b></p> <p><input type="radio"/> <b>No</b></p>
<p><b>15. State website address where Post-Award Forum was advertised</b></p> <p>Please see second quarterly report.</p>
<p><b>16. Date Post-Award Forum took place</b></p> <p>Please see second quarterly report.</p>
<p><b>17. Summary of Post-Award Forum, held in accordance with §155.1320(c), including all public comments received and actions taken in response to concerns or comments.</b></p>          <p>A summary of the post-award forum, held on June 12, 2020, was included in the second quarterly report.</p>
<p><b>18. Other Attachments (attach other documents as needed pertaining to Post-Award Form</b></p>