

State: Virginia

Filing Company: CareFirst BlueChoice, Inc.

TOI/Sub-TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004E Small Group Only  
- Other

Product Name: VA CFBC GF SG SmartShopper Form

Project Name/Number: VA CFBC GF SG SmartShopper Form/VA CFBC GF SG SmartShopper Form

## Table of Contents

### User Usage Agreement

#### Attachments

Usage Agreement

[Usage Agreement.pdf](#)

### Form Attachments

(ex. Form Name      Form Number      Attachment Name)

VA/CFBC/GF SG/SMART SHOP  
(1/21)VA/CFBC/GF  
SG/SMART SHOP  
(1/21)[VA CFBC GF SG SMART SHOP \(1 21\).pdf](#)

### Supporting Document

(ex. Supporting Document Name      Attachment Name)

#### Attachments

Certification of  
Compliance/Readability[VA Comp Cert - Smart Shopper.pdf](#)

Submission Letter

[CFBC Submission Letter.pdf](#)

Explanation of Variations

[EOV - VA CFBC GF SG SMART SHOP \(1 21\).pdf](#)

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## Filing at a Glance

Company: CareFirst BlueChoice, Inc.  
Product Name: VA CFBC GF SG SmartShopper Form  
State: Virginia  
TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)  
Sub-TOI: HOrg02G.004E Small Group Only - Other  
Filing Type: Form  
Date Submitted: 06/26/2020  
SERFF Tr Num: CFBC-132440060  
SERFF Status: Closed-Approved  
State Tr Num:  
State Status: Approved  
Co Tr Num: VA CFBC GF SG SMARTSHOPPER FORM  
Effective: 01/01/2021  
Date Requested:  
Author(s): Cheryl Hager, Dwayne Lucado, Gina Harrison, Danielle Vipperman, Kimberly Taylor, Karen Cooper-Coleman  
Reviewer(s): Edward Whyte (primary), Marilu DeSimone  
Disposition Date: 08/20/2020  
Disposition Status: Approved  
Effective Date:

State: Virginia

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## General Information

Project Name: VA CFBC GF SG SmartShopper Form

Status of Filing in Domicile:

Project Number: VA CFBC GF SG SmartShopper Form

Date Approved in Domicile:

Requested Filing Mode: Review &amp; Approval

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Group

Submission Type: New Submission

Group Market Size: Small

Group Market Type: Employer

Overall Rate Impact:

Filing Status Changed: 08/20/2020

Deemer Date: 07/26/2020

State Status Changed: 08/20/2020

Submitted By: Cheryl Hager

Created By: Cheryl Hager

Corresponding Filing Tracking Number:

State TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)

State Sub-TOI: HOrg02G.004E Small Group Only - Other

PPACA: Not PPACA-Related

PPACA Notes: null

Include Exchange Intentions:

No

Filing Description:

**State:** Virginia **Filing Company:** CareFirst BlueChoice, Inc.

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NOTE: The information below with proper formatting is included within the Submission Letter under Supporting Documentation.

June 26, 2020

Elsie Andy, Manager  
Forms and Rates Section  
Life and Health Division  
Bureau of Insurance  
State Corporation Commission  
P.O. Box 1157  
Richmond, Virginia 23218

Re: CareFirst BlueChoice, Inc. NAIC: 96202  
SERFF Tracking Number: CFBC-132339745

Form Number: VA/CFBC/GF SG/SMART SHOP (1/21)

Dear Ms. Andy:

Attached for your review and approval is the above-referenced form.

This form has been submitted in compliance with HB2639 – Smart Shopper Incentive Program. The form will be used for existing grandfathered small group plans issued by CareFirst BlueChoice, Inc.

The form will be effective on January 1, 2021 and after. The form may be included on our website at [www.carefirst.com](http://www.carefirst.com). The compliance certification with the requirements of Title 38.2 of the Code of Virginia and the regulations promulgated pursuant thereto is attached under Supporting Documentation.

Please note that the CFBC Smart Shopper Incentive Program contract form to be used for non-grandfathered ACA small group plans is currently under review by your office under the following SERFF Tracking numbers. The forms are identical with the exception of the form number.

CFBC Small Group ON Exchange - CFBC-132339659

CFBC Small Group OFF Exchange - CFBC-132339745

We appreciate your consideration of this matter and look forward to your acknowledgement and approval of the attached form. If you have any questions regarding this submission, please contact me at (202) 680-5238, via SERFF or email at [cheryl.hager@carefirst.com](mailto:cheryl.hager@carefirst.com).

Sincerely,

Cheryl E. Hager  
Senior Contract Specialist

SERFF Tracking #: CFBC-132440060

State Tracking #:

Company Tracking #: VA CFBC GF SG

SMARTSHOPPER FORM

State: Virginia

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Product Name: VA CFBC GF SG SmartShopper Form

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cc: Gina Harrison

## Company and Contact

### Filing Contact Information

Cheryl Hager, Senior Contract Specialist      cheryl.hager@carefirst.com  
840 First Street NE      202-680-5230 [Phone]  
Washington, DC 20065      202-680-7625 [FAX]

### Filing Company Information

CareFirst BlueChoice, Inc.	CoCode: 96202	State of Domicile: District of
840 First Street NE	Group Code:	Columbia
Washington, DC 20065	Group Name:	Company Type:
(202) 479-8000 ext. [Phone]	FEIN Number: 52-1358219	State ID Number:

SERFF Tracking #: CFBC-132440060

State Tracking #:

Company Tracking #: VA CFBC GF SG

SMARTSHOPPER FORM

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## Filing Fees

### State Fees

Fee Required? No

Retaliatory? No

Fee Explanation:

<b>State:</b>	Virginia	<b>Filing Company:</b>	CareFirst BlueChoice, Inc.
<b>TOI/Sub-TOI:</b>	HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004E Small Group Only - Other		
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## Correspondence Summary

### Objection Letters and Response Letters

#### Objection Letters

Status	Created By	Created On	Date Submitted
Info has been requested from company	Edward Whyte	08/17/2020	08/17/2020

#### Response Letters

Responded By	Created On	Date Submitted
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**State:** Virginia  
**TOI/Sub-TOI:** HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004E Small Group Only  
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## Objection Letter

Objection Letter Status	Info has been requested from company
Objection Letter Date	08/17/2020
Submitted Date	08/17/2020
Respond By Date	08/19/2020

Dear Cheryl Hager,

### Introduction:

One or more forms included within the submission were found to be in non-conformity with statutory, regulatory or administrative requirements as set forth below.

### Objection 1

- VA/CFBC/GF SG/SMART SHOP (1/21), VA/CFBC/GF SG/SMART SHOP (1/21) (Form)

Comments: Please advise us of the rate filing corresponding to the submitted form.

Thank you.

### Conclusion:

We will be glad to reconsider this submission upon receipt of the revised forms to address the objections noted above. Should you need clarification of any of the information contained in this letter, please contact the undersigned.

If you would like to discuss any of the objections or provide additional information related to any of the objections, please contact the undersigned.

Any revisions made to the submitted forms, other than those requested by the BOI, should be described in the resubmission. After 6/17/2020, these voluntary revisions must be approved by the Bureau prior to submission. A Note to Reviewer describing the proposed voluntary changes is required. Proposed changes may only be submitted once BOI approval is given.

Thank you for your courtesy and consideration in this matter.

Sincerely,  
Edward Whyte



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## Form Schedule

Lead Form Number: VA/CFBC/GF SG/SMART SHOP (1/21)								
Item No.	Schedule Item Status	Form Name	Form Number	Form Type	Form Action	Action Specific Data	Readability Score	Attachments
1	Approved 08/20/2020	VA/CFBC/GF SG/SMART SHOP (1/21)	VA/CFBC/GF SG/SMART SHOP (1/21)	CERA	Initial			VA CFBC GF SG SMART SHOP (1 21).pdf

### Form Type Legend:

<b>ADV</b>	Advertising	<b>AEF</b>	Application/Enrollment Form
<b>CER</b>	Certificate	<b>CERA</b>	Certificate Amendment, Insert Page, Endorsement or Rider
<b>DDP</b>	Data/Declaration Pages	<b>FND</b>	Funding Agreement (Annuity, Individual and Group)
<b>MTX</b>	Matrix	<b>NAP</b>	Network Access Plan
<b>NOC</b>	Notice of Coverage	<b>OTH</b>	Other
<b>OUT</b>	Outline of Coverage	<b>PJK</b>	Policy Jacket
<b>POL</b>	Policy/Contract/Fraternal Certificate	<b>POLA</b>	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider
<b>PRC</b>	Provider Contract/Provider Addendum/Provider Leading Agreement	<b>PRD</b>	Provider Directory

<b>SERFF Tracking #:</b>	CFBC-132440060	<b>State Tracking #:</b>		<b>Company Tracking #:</b>	VA CFBC GF SG SMARTSHOPPER FORM
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## Supporting Document Schedules

<b>Satisfied - Item:</b>	Certification of Compliance/Readability
<b>Comments:</b>	
<b>Attachment(s):</b>	VA Comp Cert - Smart Shopper.pdf
<b>Item Status:</b>	Received & Acknowledged
<b>Status Date:</b>	08/20/2020

<b>Bypassed - Item:</b>	Product Checklist
<b>Bypass Reason:</b>	Not Applicable...this submission contains the filing of an amendment only.
<b>Attachment(s):</b>	
<b>Item Status:</b>	Received & Acknowledged
<b>Status Date:</b>	08/20/2020

<b>Satisfied - Item:</b>	Submission Letter
<b>Comments:</b>	
<b>Attachment(s):</b>	CFBC Submission Letter.pdf
<b>Item Status:</b>	Received & Acknowledged
<b>Status Date:</b>	08/20/2020

<b>Satisfied - Item:</b>	Explanation of Variations
<b>Comments:</b>	
<b>Attachment(s):</b>	EOV - VA CFBC GF SG SMART SHOP (1 21).pdf
<b>Item Status:</b>	Received & Acknowledged
<b>Status Date:</b>	08/20/2020