

State: Virginia
TOI/Sub-TOI: H16G Group Health - Major Medical/H16G.003A Small Group Only - PPO
Filing Company: Group Hospitalization and Medical Services, Inc.
Product Name: VA GHMSI GF SG SmartShopper Form
Project Name/Number: VA GHMSI GF SG SmartShopper Form /VA GHMSI 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/CF/GF SG/SMART SHOP (1/21) VA/CF/GF SG/SMART SHOP (1/21) [VA CF GF SG SMART SHOP \(1 21\).pdf](#)

Supporting Document

(ex. Supporting Document Name Attachment Name)

Attachments

Certification of

Compliance/Readability

[VA Comp Cert - SmartShopper.pdf](#)

Submission Letter

[GHMSI Submission Letter.pdf](#)

Explanation of Variations

[EOV-VA CF GF SG SmartShop Amend \(1 21\).pdf](#)

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Filing at a Glance

Company: Group Hospitalization and Medical Services, Inc.
Product Name: VA GHMSI GF SG SmartShopper Form
State: Virginia
TOI: H16G Group Health - Major Medical
Sub-TOI: H16G.003A Small Group Only - PPO
Filing Type: Form
Date Submitted: 06/26/2020
SERFF Tr Num: CFBC-132440037
SERFF Status: Closed-Approved
State Tr Num:
State Status: Approved
Co Tr Num: VA GHMSI GF SG SMARTSHOPPER FORM
Effective: 01/01/2021
Date Requested:
Author(s): Cheryl Hager, Dwayne Lucado, Gina Harrison, Danielle Vipperman, Kimberly Taylor
Reviewer(s): Edward Whyte (primary), Marilu DeSimone
Disposition Date: 08/20/2020
Disposition Status: Approved
Effective Date:

State: Virginia
TOI/Sub-TOI: H16G Group Health - Major Medical/H16G.003A Small Group Only - PPO
Product Name: VA GHMSI GF SG SmartShopper Form
Project Name/Number: VA GHMSI GF SG SmartShopper Form /VA GHMSI GF SG SmartShopper Form

Filing Company: Group Hospitalization and Medical Services, Inc.

General Information

Project Name: VA GHMSI GF SG SmartShopper Form
Project Number: VA GHMSI GF SG SmartShopper Form
Requested Filing Mode: Review & Approval
Explanation for Combination/Other:
Submission Type: New Submission
Group Market Type: Employer
Filing Status Changed: 08/20/2020
State Status Changed: 08/20/2020
Created By: Cheryl Hager
Corresponding Filing Tracking Number:
State TOI: H16G Group Health - Major Medical

Status of Filing in Domicile:
Date Approved in Domicile:
Domicile Status Comments:
Market Type: Group
Group Market Size: Small
Overall Rate Impact:

Deemer Date: 07/26/2020
Submitted By: Cheryl Hager

State Sub-TOI: H16G.003A Small Group Only - PPO

PPACA: Not PPACA-Related

PPACA Notes: null

Include Exchange Intentions:

No

Filing Description:

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NOTE: The information below is contained with proper formatting 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:Group Hospitalization and Medical Services, Inc. doing business as
CareFirst BlueCross BlueShield (CareFirst)
NAIC Number: 53007

Form Number: VA/CF/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 Group Hospitalization and Medical Services, Inc.

The form will be effective on January 1, 2021 and after. The form may be included on our website at 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 GHMSI 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.

GHMSI Small Group ON Exchange - CFBC-132339900

GHMSI Small Group OFF Exchange - CFBC-132339806

We appreciate your consideration in 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.

Sincerely,

Cheryl E. Hager

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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

Group Hospitalization and Medical Services, Inc.	CoCode: 53007	State of Domicile: District of Columbia
840 First Street NE	Group Code:	Company Type:
Washington, DC 20065	Group Name:	State ID Number:
(202) 479-8000 ext. [Phone]	FEIN Number: 53-0078070	

SERFF Tracking #: CFBC-132440037

State Tracking #:

Company Tracking #: VA GHMSI GF SG
SMARTSHOPPER FORM

State: Virginia
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Filing Fees

State Fees

Fee Required? No

Retaliatory? No

Fee Explanation:

SERFF Tracking #:	CFBC-132440037	State Tracking #:		Company Tracking #:	VA GHMSI GF SG SMARTSHOPPER FORM
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Filing Company: Group Hospitalization and Medical Services, Inc.

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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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/CF/GF SG/SMART SHOP (1/21), VA/CF/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/CF/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/CF/GF SG/SMART SHOP (1/21)	VA/CF/GF SG/SMART SHOP (1/21)	CERA	Initial			VA CF GF SG SMART SHOP (1 21).pdf

Form Type Legend:

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

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Supporting Document Schedules

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

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

Bypassed - Item:	L&H Readability - Health
Bypass Reason:	Not Applicable...the readability certification is now included within the Certification of Compliance above.
Attachment(s):	
Item Status:	Received & Acknowledged
Status Date:	08/20/2020

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

Satisfied - Item:	Explanation of Variations
Comments:	
Attachment(s):	EOV-VA CF GF SG SmartShop Amend (1 21).pdf
Item Status:	Received & Acknowledged
Status Date:	08/20/2020