



# AMERICAN ACADEMY of ACTUARIES

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**Health Practice Council Cycle Report**  
**Vice President, Health: Michael S. Abroe**  
**Staff Liaisons: Holly Kwiatkowski (Federal) and Geralyn Trujillo (State)**  
**January 2005**

## **HEALTH PRACTICE COUNCIL HIGHLIGHTS**

*In December 2004, the Mental Health Parity Work Group published the issue brief “Mental Health Parity: Often Separate, Usually Unequal.”*

*In an effort to address emerging international issues, the HPC has created a new work group, which is charged with the responsibility to respond on behalf of the HPC to fast-track issues that come from the IAA.*

*The HPC has also created a group, led by Dale Yamamoto, to develop a practice note on the Medicare Modernization Act (MMA) requirement that actuaries certify the actuarial equivalence of retiree health plans.*

*The Medicare Steering Committee and the Actuarial Equivalence Work Group worked with several other Academy groups to develop 3 comment letters on the CMS proposed regulations for Medicare prescription drug plans and Medicare Advantage plans under the MMA. The letters were submitted to CMS on October 4, 2004 and they addressed issues including actuarial equivalence, submission of bids, payments to prescription drug plans and Medicare Advantage organizations, etc.*

## **SENIOR HEALTH FELLOW HIGHLIGHTS**

*Cori Uccello played a significant role in coordinating the Academy’s comment letters on the proposed MMA regulations. She has since received follow-up questions from CMS and she has either responded herself or has assisted in coordinating a response to CMS’s questions. She has also participated in ongoing calls with CMS on issues related to MMA.*

*Cori drafted an op-ed regarding Medicare’s financial problems and the need for policymakers to address them. The op-ed will be published in Contingencies.*

*Cori recently answered questions regarding risk pooling and market segmentation from Linda Hirsch, field producer for Peter Jennings Reporting. She has also received inquiries from Christopher Windham of the Wall Street Journal regarding high deductible health plans, and she responded to Kelly Hearn, a reporter for the Christian Science Monitor and Alternet.org regarding the new Medicare prescription drug program.*

*Cori is a featured Medicare expert on a list compiled by the National Academy of Social Insurance (NASI) for inclusion in their “Tool Kit” for the Presidential election debates and citizen forums.*

## **EXTERNAL RELATIONS HIGHLIGHTS**

*Holly Kwiatkowski and Cori continue to coordinate and participate on conference calls with CMS regarding various issues related to the MMA including risk adjustment, a bidders data set for the part D drug benefit, and Medicare Advantage. CMS has expressed appreciation for the Academy’s continued efforts on these issues.*

*Geralyn Trujillo continues to develop relationships with the NAIC, NCOIL, and other associations.*

*On November 23, Holly coordinated a meeting between CBO and several Academy members to discuss health care trends. This was the second meeting on this topic with CBO. Dale Yamamoto, Lisa Tourville, Dave Pottschmidt, and Cori Uccello participated.*

*Academy members and staff continue to have an open dialogue with key white house staff on uninsured issues.*

## **I. ISSUES**

### **A. Association Health Plan Work Group**

On May 14, 2004, the Academy hosted a Capitol Hill briefing on AHPs. Karen Bender and David Shea presented background information on risk pooling mechanisms and specifics on AHPs. Cori Uccello served as moderator. With President Bush touting AHPs as a key element of his health care package, the AHP Work Group is now getting poised to respond on this issue early in 2005. They are currently drafting an issue brief that examines myths v. realities regarding AHPs. The work group has also been discussing a potential issue brief on risk pooling that would address market segmentation and solvency issues, but, for the moment, this has taken a back seat to their activities on AHPs.

*Outlook:* The work group will be monitoring action on AHPs and preparing for possible Congressional debate on this issue in the new congressional session. They continue to meet by conference call to develop an issue brief on AHPs.

### **B. Defined Contribution Health Plans**

In 2004, the Defined Contribution Health Plans Work Group, chaired by Jim Murphy, published the monograph, *The Impact of Consumer-Driven Health Plans on Health Care Costs: A Closer Look at Plans with Health Reimbursement Accounts*. Two subgroups have since been created to manage new projects on emerging data and Health Savings Accounts (HSAs).

Patrick Collins chairs a subgroup that developed a comment letter on HSA guidelines issued by the Department of Treasury. The letter was submitted to the Treasury Department on March 30, 2004. Dave Tuomala chairs a subgroup that is looking at studies on emerging consumer-driven health plan (CDHP) experience.

*Outlook:* The HSA Subgroup continues to monitor guidelines released from the Department of Treasury and will comment as appropriate. The Emerging Data Subgroup has begun to analyze various reports on consumer driven health plans and they plan to produce a paper this year on their analyses.

### **C. Disease Management**

The Disease Management Work Group, chaired by Rob Parke, is continuing to work on a paper on actuarial issues associated with the measurement of disease management programs. The group may also consider a practice note on this issue. The Academy will also be cooperating with the SOA on a project on chronic versus acute care and the challenges of providing coordinated care for chronic conditions.

*Outlook:* The group is currently consolidating and incorporating internal comments on the draft and held a conference call to discuss the next steps in January.

### **D. Financial Reporting**

The Health Practice Financial Reporting Committee (HPFRC), chaired by Rowen Bell, continues to work on a number of small projects for the NAIC.

The Committee is also working on an effort, led by Jim O'Connor, to update a number of health practice notes that were published initially in 1995. The practice notes under revision cover: General Considerations, Small Group, Large Group, Individual Long-Term Care, Individual Major Medical, Medicare Supplement, Group Long-Term Disability, Individual Disability, and Small Group Rating and Underwriting.

*Outlook:* The Committee is actively engaged in a dialogue with the NAIC on premium deficiency reserves. The Committee also continues to work on the AOMR/health blank issue, the practice note updates, and the actuarial opinion project for the NAIC. Three practice notes have undergone internal Academy review. The Small Group Medical Business practice note is currently available for comment on the Academy's website. The comment period will end on February 11<sup>th</sup>. The remaining practice notes continue to develop appropriately.

#### **E. Health Risk-Based Capital**

The Health Risk-Based Capital Task Force (HRBC) Task Force and its work groups remain active in work with the NAIC.

The Stop-Loss RBC Work Group, chaired by Kelly Munger, is working on creating a process chart for its projects. Monthly conference calls have been implemented to ensure communication and progress is made.

*Outlook:* The task force continues to monitor developments with respect to capital adequacy issues for health. The task force will have a conference call to discuss next steps in late January.

#### **F. Long-Term Care**

The Federal Long-Term Care Task Force will be considering a background document on various long-term care issues this year.

*Outlook:* The task force is expected to produce an issue brief on the basics of long-term care this year.

The State Long-Term Care Task Force, chaired by Bob Yee, oversees a project on reserving for long-term care insurance and provides oversight for Academy comments on NAIC activity related to LTCI.

*Outlook:* Task force members are monitoring NAIC discussions on several issues related to long-term care insurance, including how LTCI fits into the Interstate Compact and if there would be minimum standards created for it.

A Long-Term Care Work Group, with Warren Jones as chair, has been created to work on Experience Forms.

*Outlook:* The Long-Term Care Work Group was to meet during the SOA's LTCI Conference in Orlando in late January to discuss experience forms and the next steps in this project.

#### **G. Medicaid**

Tony Hammond and Kevin Russell lead the CMS Medicaid Rate Certification Work Group, which has developed a draft practice note on the CMS regulation that requires actuaries to certify that Medicaid managed care premium rates are actuarially sound. The Health Committee of the ASB is also aware of this issue.

*Outlook:* The work group is revising the practice note based on comments from the exposure period and they are expected to publish the document early in 2005. The work group is also considering whether to recommend that the ASB develop an ASOP on this topic.

The Medicaid Work Group, chaired by Grady Catterall, recently published the issue brief *Medicare Modernization Act: Financial issues for State Medicaid Programs*.

*Outlook:* The Work Group was to have a conference call to discuss priorities and future projects in January.

## **H. Medicare**

### Medicare Financing

In 2004, several publications were published related to Medicare's financing. First, the issue brief *Medicare's Financial Condition: Beyond Actuarial Balance* was updated and redistributed. Second, Cori submitted a statement for the record to the House Ways and Means Committee for a hearing on the Board of Trustees 2004 Annual Reports, which followed closely the issue brief on Medicare's financial condition. The guidebook, *The Questions Candidates Should Answer About Medicare*, addressed issues related to Medicare reform including Medicare's financing. Cori is now reformatting the guidebook for policymakers since much of the information is still pertinent.

In December 2004, the Medicare Steering Committee held a conference call to discuss future projects and to discuss how best to publicize concerns with Medicare's long-term financial situation. Potential projects include a mailing to Capitol Hill staff at the start of the new congressional session, a letter on the findings of the Medicare Technical Panel, an update of the Medicare solvency issue brief, a response to MedPAC's recommendations, and a possible Capitol Hill briefing. The Committee felt that Medicare's financial problems could be addressed through several of these projects.

*Outlook:* Academy staff is currently drafting a cover letter to congressional aides to be sent as part of a mailing along with relevant public statements, and Cori Uccello is revising the Medicare guidebook.

### Medicare Modernization Act

For a large part of 2004, the Medicare Steering Committee, in addition to the Actuarial Equivalence Group and many other HPC groups, were kept busy by preparing for, reviewing, and responding to the proposed MMA regulations. The Committee included input from other HPC groups in their comment letters, which addressed issues related to the prescription drug benefit and the Medicare Advantage program. The Actuarial Equivalence Work Group submitted a comment letter that addressed only issues pertaining to actuarial equivalence issues.

*Outlook:* Members of both the Medicare Steering Committee and Actuarial Equivalence Group are participating in ongoing follow-up conference calls with CMS related to Titles I and II of MMA. Dale Yamamoto, a member of the Actuarial Equivalence Group, has volunteered to lead a work group that will develop a practice note on the MMA requirement for actuaries to certify to the actuarial equivalence of retiree health plans. The HPC is also considering whether a separate practice note is needed on the actuarial equivalence of PDPs.

## **I. Medicare Supplement (MedSupp) Insurance**

The Medicare Supplement Insurance Work Group, chaired by Mike Carstens, continues to participate in the discussions of the NAIC's new Medicare Supplement advisory group, which is developing new Med Supp plans in cooperation with the Center for Medicare and Medicaid Services. This advisory group was formed after the passage of MMA, when it became clear that the standardized benefits offered by Med Supp plans would need to be altered. The work group will be particularly influential when the NAIC group looks at actuarial equivalence.

*Outlook:* The group will continue to participate in NAIC discussions about new Medicare Supplement plans and continues to work on their loss ratio project.

## **J. Mental Health Parity**

Donna Novak chaired a work group on mental health parity issues that recently published the issue brief *Mental Health Parity: Often Separate, Usually Unequal*. The issue brief addresses issues such as the scope of mental health coverage, the effect of mental health parity on medical costs, etc.

*Outlook:* The work group will be disbanded.

## **K. Prescription Drug Coverage**

The Prescription Drug Work Group, chaired by Tom Tomczyk, continues to monitor prescription drug issues. The work group has discussed working with the Medicare Steering Committee on prescription drug issues. The group reviewed and provided input to the Medicare Steering Committee on various aspects of the proposed Medicare regulations.

*Outlook:* The work group chair is currently considering activities for 2005.

## **L. Rate Filing for Individual Health Insurance**

The Health Rate Filing Task Force, chaired by Bill Bluhm, has completed work on the proposed revisions to the NAIC's guidelines for filing individual health insurance premiums. During the December NAIC meeting, the task force was commended by Julia Philips, chair of the Accident and Health Working Group, for all of its hard work over the past years on this project. The task force was represented at the December NAIC meeting to answer any technical questions.

## **M. Retiree Health Insurance**

In 2004, the Joint Retiree Health Committee published two letters. A letter to FASB addressed accounting and disclosure requirements related to MMA and a letter to GASB addressed their proposed statement on accounting and financial reporting by governmental employers for other postemployment benefits (OPEBs). The GASB letter supported the principal proposed change, eliminating the exemption from reporting implicit rate subsidies.

In October 2004, co-chairs Adam Reese and Jeff Petertil held a luncheon meeting of the Joint Retiree Health Committee. The Committee discussed several issues including the development of a retiree health monograph and NAIC activity on accounting for retiree health benefits with respect to MMA.

*Outlook:* The joint committee plans to develop an informational/educational piece on retiree health issues.

## **N. The Uninsured**

In March 2004, a group led by Cathy Murphy-Barron published the guidebook *The Questions Candidates Should Answer About Americans Without Health Insurance*. Cathy is now leading a separate subgroup that is developing an issue brief on health care tax credits for the purchase of health insurance. Steele Stewart is also leading his own subgroup that is updating information that was provided in the 2003 issue brief *Health Coverage Issues: The Uninsured and the Insured*. Karl Madrecki, the chair of the full Uninsured Work Group, has considered an issue brief that would address the idea "What is health coverage?"

A new work group on medical reinsurance, chaired by Patrick Collins, has drafted an issue brief on medical reinsurance. The issue brief addresses the current commercial medical reinsurance market and

outlines some of the issues policymakers should consider when designing and implementing a government-sponsored medical reinsurance program.

*Outlook:* Cathy's subgroup has conference calls every other week and they are actively drafting a paper on tax credits. They hope to have it finished early this year. Steele's subgroup has sent the updated issue brief for review by the full work group and they expect to publish the update in the next several weeks. Patrick's work group expects to publish the medical reinsurance issue brief in the next couple weeks.

#### **O. Experience Rating Work Group**

The Work Group, chaired by Bill Weller, is currently developing a list of the types of experience rating.

*Outlook:* The work group was to have a conference call in January to continue discussions on the types of experience rating.

## **II. PEOPLE ISSUES**

Sandra Loyal has recently joined the Disease Management Work Group.

The following people have recently joined the Committee on Federal Health Issues:

- Karen Bender
- Patrick Collins
- Karl Madrecki
- Jim Murphy
- Rob Parke
- Tom Tomczyk

Lynette Trygstad is the new Vice Chairperson of the Medicare Steering Committee. And, the following people have recently joined the Committee:

- Jan Carstens
- Alice Rosenblatt
- John Wandishin

John Fleming has joined the Association Health Plan Work Group and the Consumer-Driven Health Plans Work Group.

Jeff Nohl has also joined the Consumer-Driven Health Plans Work Group.

## **III. BOARD OF DIRECTORS/EXECUTIVE COMMITTEE ATTENTION**

None.

## **IV. EXTERNAL CONTACTS**

Holly and Cori remain in contact with CMS staff and congressional staff regarding proposed Medicare regulations. Conference calls have been scheduled with CMS to discuss various aspects of both Title I and Title II of the proposed MMA regulations. Future ongoing calls between CMS and Academy members on the regulations are scheduled.

In January, Holly was contacted by a congressional staffer with questions regarding state mandates. Holly is currently following-up on this request.

In January, Holly was received a request for a speaker to talk about PBMs and the Medicare Prescription Drug Benefit at a conference hosted by the Pharmaceutical Care Management Association. Holly is currently working on this request.

In December, Holly was contacted by the National Managed Health Care Congress regarding an opportunity for an actuary to speak about the Academy's practice note on Medicaid actuarial soundness at their conference. Holly was able to arrange for Marty Staehlin to participate.

In December, Holly was contacted GAO staff who wanted to talk to actuaries about HSAs and other consumer-directed health plans. A call is scheduled for January between GAO and Academy members Brent Greenwood, Dan Plant, Dave Tuomala, and Penny Hahn.

In December, Geralyn attended the Winter NAIC meeting in New Orleans.

In November, Holly coordinated a meeting with CBO on medical trends. Academy participants included Cori Uccello, Lisa Tourville, Dale Yamamoto, and David Potts Schmidt.

In November, Geralyn attended the NCOIL Annual Meeting in Duck Key, Florida. While there, she heard discussions on a variety of health issues, including the new MMA regulations, CDHPs, and prescription drug issues.

In October, Holly coordinated a response to an inquiry from a House committee staffer regarding HSAs.

Holly Kwiatkowi remains in contact with key staff of the administration regarding issues related to the uninsured.

In September, Academy staff coordinated an Open Door Forum with CMS on PDP data needs for bidding.

In September, Holly attended a briefing at the White House on the President's health care agenda. Speakers included the President's top health policy advisors.

In August, Holly met with a House staffer to discuss HSAs and other health issues.

In July, Holly coordinated Academy testimony on the use of genetic information for the House Education and the Workforce Committee Employer-Employee Subcommittee. Tom Wildsmith presented the testimony on behalf of the Academy.

On July 12, Holly and Rick Lawson attended a meeting at the White House regarding implementation of the Medicare Modernization Act. Several White House staffers and CMS staffers were in attendance, along with a staffer from Sen. Frist's office. Other policy organizations also participated.

On June 9, Academy members and staff participated on a conference call with key health staff of the Administration to discuss solutions to reducing the number of uninsured.

## **V. SENIOR HEALTH FELLOW ACTIVITIES**

Below is a listing of the activities of Cori Uccello, senior health fellow, on behalf of the Academy over the past few months:

### Outreach—Government:

- Helped coordinate and participated in a meeting with CBO regarding trends in the private insurance market.

- Helped coordinate several follow-up conversations with CMS on their risk adjustment method for the new Medicare prescription drug plans, bidder datasets, and the Medicare Advantage regulations.
- With Holly Kwiatkowski, coordinated the Academy's comment letters regarding CMS proposed regulations for Medicare prescription drug plan and Medicare Advantage (MA) plans under MMA.
- With other Academy members, participated in a CMS Open Door Forum regarding prescription drug plan data needs for bidding purposes. The Academy worked closely with CMS on this issue and played a featured role in the forum.
- Along with Dale Yamamoto, met with the U.S. General Accounting Office to discuss trends in employment-based retiree health coverage. The new Medicare law includes a provision directing GAO to conduct studies on this issue.
- Helped organize and moderated an Academy hill briefing on Association Health Plans.
- Met with CRS staff as a follow-up to the Health Practice Council hill visit in February, and focused on issues related to HSAs and the uninsured.
- Answered questions from a Senate Finance staffer regarding actuarial equivalence for retiree health plans under the new Medicare prescription drug law.
- Participated in a second meeting and a follow-up conference call on various uninsured issues in the nongroup market with the Department of Treasury. Previously, with John Bertko, met with staff at Treasury on these issues.

#### Outreach—Research Community:

- Submitted announcement regarding the Academy issue brief, "Medicare Modernization Act: Financial Issues for State Medicaid Program," which was included in the August issue of AcademyHealth's monthly e-newsletter for all AcademyHealth members.
- Coordinated Academy participation in a NASI (and AcademyHealth) meeting regarding disease management related to MMA. Academy member Rob Parke subsequently participated.
- Contacted a professor at the University of Alabama at Birmingham who is doing a project on medical malpractice reform. Sent him several Academy publications on medical liability insurance.
- Spoke with a Research Associate at the Economic and Social Research Institute, about actuarial equivalence under the new Medicare law, in particular regarding subsidies for retiree health plans.
- Received a request from a researcher at Georgetown University who is working on a project for Medpac that examines how firms manage transitions from one PBM to another, particularly with regard to how they try to anticipate or limit disruptions for workers and retirees during the transition.

#### Outreach—Other Organizations:

- Responded to questions on small group premium fluctuations from Len Nichols, the Vice President of the Center for Studying Health System Change.
- Spoke to Gerry Smolka of AARP regarding actuarial equivalence under MMA.
- Answered questions from a research economist at the International Association of Machinists (IAM) regarding actuarial equivalence under the new Medicare prescription drug law.

#### Outreach—Media:

- Answered questions regarding risk pooling and market segmentation from Linda Hirsch, field producer for Peter Jennings Reporting. I also put her in touch with Rod Turner and Cecil Bykerk who could address more specific questions on high-risk pools.
- Drafted an op-ed regarding Medicare's financial problems and the need for policymakers to address them.
- Answered questions from Christopher Windham of the *Wall Street Journal* regarding high deductible health plans.
- Answered questions from Kelly Hearn, a reporter for the *Christian Science Monitor* and *Alternet.org* regarding the new Medicare prescription drug program.



- The National Academy of Social Insurance (NASI) recently released a “Tool Kit” for the Presidential election debates and citizen forums. This toolkit includes a sourcebook of experts to contact on various social insurance issues. I am included in the list of Medicare experts.
- Spoke with Dennis Cauchon of USA Today regarding the long-term financing of Medicare and Social Security.
- Spoke with John Leland of the *New York Times* regarding Medicare drug discount cards.

Conferences/Forums Attended:

- Participated in an Academy sponsored session on Medicare reform at the CCA/Academy annual meeting.
- Participated on two CMS Special Open Door Forum conference calls: The Medicare Prescription Drug Benefit and the Medicare Advantage Program, which discussed the MMA Title I and Title II draft regulations; and the Medicare Prescription Drug Benefit Retiree Subsidy, which discussed in part the subsidy options available to employers and unions who provide retiree health coverage.
- Attended the health policy discussion “Employer Decisions to Self-Insure: Does State Regulation Matter?” sponsored by AEI and AcademyHealth.
- Attended an invitation-only grantee briefing on Medicare and health disparities, sponsored by AcademyHealth and the RWJ Changes in Health Care Financing and Organization (HCFO) project.

Other Academy Activities:

- Participated in a conference call of the AHP work group to discuss next steps related to AHP legislation. I will be working with Holly and the group on an AHP issue brief.
- Worked with the reinsurance work group to finalize the draft of an issue brief on reinsurance basics.
- Commented on a draft that updates the uninsured group’s revision of its issue brief on the uninsured.
- Participated in the Health Practice Council’s annual planning meeting and subsequent conference calls. Also participated in conference calls of the mental health parity work group, uninsured subgroup, and the SOA’s Health Benefit Systems Practice Advancement Committee.
- Provided comments on the latest draft of the mental health work group’s paper on mental health parity issues.
- Chair the Academy’s Medicare Coordination Work Group.
- Participated on conference calls and have been actively involved in the work of the Actuarial Equivalence Subgroup.
- Spoke with Rob Parke, chair of the Academy’s disease management work group regarding a possible letter to CMS regarding a recently issued notice related to the chronic care improvement demonstration project under the new Medicare law.
- Drafted an outline for an issue brief to be written by the Association Health Plans Work Group. The brief will discuss risk pooling and market segmentation basics.

**VI. PUBLICATIONS**

The following Health Practice Council public statements have been issued in the past year:

<b>Publication</b>	<b>Audience</b>	<b>Publication Date</b>
Issue brief <i>Mental Health Parity Often Separate, Usually Unequal</i>	Congress, public policy orgs., general public, media, etc.	December 2004
Comment letter on the draft revisions of the HIRMR	NAIC Accident and Health Working Group	November 2004
Comment letter to CMS on proposed Medicare prescription drug benefit regulations	CMS	October 4, 2004
Comment letter to CMS on proposed Medicare Advantage regulations	CMS	October 4, 2004

Comment letter to CMS on actuarial equivalence aspects of proposed Medicare prescription drug benefit regulations	CMS	October 4, 2004
Comment letter on the MedSupp Rate Filing Compliance Manual	NAIC Accident and Health Working Group	September 2004
LTC Risk-Based Capital report supplement	NAIC Capital Adequacy TF	September 2004
Premium Deficiency Reserves examples	NAIC Accident and Health Working Group	September 2004
Testimony on the use of genetic information	House Education & Workforce Subcommittee on Employer-Employee Relations	July 22, 2004
Exposure draft of practice note on actuarial soundness of Medicaid managed care rates	Actuaries	July 2004
LTC Risk-Based Capital report	NAIC Capital Adequacy TF	June 2004
Issue brief on Medicaid provisions of MMA	States, Congress, policy orgs., etc.	June 2004
Health Rate Filing Task Force report on individual insurance regulation	NAIC Accident and Health Working Group	May 2004
Comment letter to GASB on their proposed statement on acct. and financial rptg. by governmental employers for other postemployment benefits	GASB	April 30, 2004
Comment letter on FASB's staff position regarding accounting for the Medicare Rx subsidy impact	FASB	April 13, 2004
Guidebook on Medicare issues	Congress, public policy orgs., general public, media, etc.	April 2004
Letter Re: Treasury guidelines on HSAs	Department of Treasury	March 30, 2004
Testimony: Regarding 2004 Medicare Trustees' Report	House Ways and Means Committee	March 24, 2004
Updated Issue brief on Medicare's financial condition	Congress, public policy organizations and general public	March 2004
Report on MedSupp plan loss ratios	NAIC A&H Working Group	March 10, 2004
Guidebook on Americans without health insurance	Congress, public policy orgs., general public, media, etc.	March 2004
Monograph on consumer-driven health plans	Congress, public policy organizations and general public	January 2004

The following HPC publications are expected to be completed within the next six months:

<b>Future Publication</b>	<b>Audience</b>	<b>Expected Publication Date*</b>
Issue brief on medical reinsurance	Congress, public policy orgs., general public, media, etc.	February 2005
White paper on "Best Estimates" (Done through RMFR Council)	Actuaries, accountants, public policymakers	Early 2005
Issue brief on health care tax credits	Congress, public policy orgs., general public, media, etc.	Early 2005
Update of issue brief <i>Health Coverage Issues: The Uninsured and the Insured</i>	Congress, public policy orgs., general public, media, etc.	Early 2005
Issue brief on disease management	Actuaries, policy organizations, interested parties	Spring 2005
Final practice note on Medicaid rate certification requirement	CMS and/or actuaries	Early 2005

Practice notes on Small Group Medical Business, Statutory Reserves for Individual DI, and Indiv. Major Medical Business	Actuaries	Spring 2005
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## **VII. KEY ISSUES/PRIORITIES FOR 2005**

During the fall planning meeting, the HPC identified the following issues to guide their efforts in 2005:

### 2005 Key Issues

Long-Term Medicare Viability  
 Health Care Affordability  
 Coverage for the Uninsured  
 Individual Health Accounts  
 Implementation of the Medicare Modernization Act

### Other Priorities

Retiree Health Insurance  
 Medicaid  
 Long-Term Care  
 AHPs, Risk Pooling, etc.  
 Health Improvement and Disease Management  
 Genetic Information  
 Risk Management and Solvency Protection  
 Mental Health Parity and Other Mandates