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Submitted electronically via: www.regulations.gov

The Honorable Julie Su
 Acting Secretary
 Office of Regulations and Interpretations
 Employee Benefits Security Administration
 Room N-5655
 U.S. Department of Labor
 200 Constitution Ave. NW
 Washington, DC 20210

Re: RIN 1210-AC16- Definition of “Employer”—Association Health Plans

Dear Acting Secretary Su:

The Cigna Group welcomes the opportunity to respond to the proposed rule on the Definition of “Employer”—Association Health Plans (AHPs) issued by the Department of Labor (DOL). We appreciate and strongly support the DOL’s proposal to rescind the 2018 AHP rule. We agree with the DOL that AHPs should be limited to true employee benefit plans that are the product of a genuine employment relationship. Therefore, we believe the existing pre-rule guidance that specifies three criteria a group or association must meet to be recognized as a bona fide group or association that can offer an AHP is sufficient and further rulemaking is not necessary.

The Cigna Group is a global health company committed to improving health and vitality. Our Cigna Healthcare and Evernorth Health Services divisions are major providers of medical, pharmacy, dental, behavioral health, and related products and services, with over 178 million customer relationships in the more than 30 countries and jurisdictions in which we operate. Within the United States, Cigna provides medical coverage, including behavioral health coverage, to approximately 16.1 million Americans in the commercial group health plan market, predominantly in the self-insured segment. For 2024, we are providing individual market coverage in 350 counties across 14 states, both on- and off-Exchange. As of December 2023, we insured over 976,000 customers in the individual market. Additionally, we serve more than 3.6 million people through our Medicare Advantage, Medicare Prescription Drug Program, and Medicare Supplemental products. Across all segments, Cigna is focused on creating products and services that support a quality, affordable, equitable, and sustainable health care system for all Americans.

Cigna offers the following comments on the proposed rule.

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In the proposed rule, the DOL notes a number of concerns with the 2018 AHP rule that could have increased adverse selection in the individual and small group markets, which could result in market instability and higher premiums for consumers. We appreciate the DOL’s awareness and understanding of these concerns. As we noted in our 2018 comments, the expanded criteria in the proposed rule presented significant opportunities for fraud and abuse, imbalanced the playing field for market actors, and diminished the distinctions between associations and licensed and regulated insurers.

We share the goals of expanding access and increasing competition and choice in health care through market-based policy solutions. When properly administered by licensed health insurers and third-party administrators in a regulated market, AHPs can be a viable option for small businesses to offer health benefits and for consumers to enroll in comprehensive health insurance coverage. It is our opinion that the pre-rule guidance sufficiently protects consumers by restricting AHPs to those that are the product of a genuine employment relationship, without adding unnecessary barriers to their formation. AHPs

must continue to meet the business purpose, commonality, and control standards in order to prove they meet organizational requirements unrelated to the provision of benefits. The pre-rule guidance is functioning appropriately and further rulemaking and/or guidance is not necessary for AHP oversight.

Conclusion

Thank you for your consideration of these comments. Cigna would welcome the opportunity to discuss these issues with you in more detail at your convenience.

Respectfully,

A handwritten signature in blue ink that reads "Kristin Julason Damato".

Kristin Julason Damato