Dear Health Plan Representative:

The DMHC offers current and prospective Qualified Health and Dental Plans, Covered California for Small Business Issuers, and health plans offering non-grandfathered Individual and Small Group product(s) outside of the California Health Benefit Exchange (Covered California), guidance to assist in the preparation of Plan Year 2020 regulatory submissions, in compliance with the Knox-Keene Act at California Health and Safety Code Sections 1340 et seq. (Act) and regulations promulgated by the DMHC at California Code of Regulations, title 28 (Rules).

**Qualified Dental and Health Plans on Covered California**

For Qualified Health Plans (QHPs) and Qualified Dental Plans (QDPs) licensed pursuant to the Act, the DMHC has primary responsibility for regulatory review and preliminary recommendations with respect to certain selection criteria identified by the Exchange in evaluation of whether an applicant is in “good standing.” All licensure, regulatory and product requirements of the Act and Rules apply to QHPs and QDPs offered through the Exchange.

QHPs, QDPs, or prospective applicants should review the Checklist and attachments provided for regulatory requirements, deadlines, and filing expectations. Please see the checklist and accompanying attachments on the [DMHC website](https://www.dmhc.ca.gov).

**Product(s) Off of Covered California**

For health plans offering non-grandfathered Individual and Small Group product(s) off of Covered California (outside of the Exchange), product(s) and/or benefit plan designs amended for the 2020 Plan Year must have DMHC approval of necessary filings, including, but not limited to, licensure, networks, product, benefit plan design, and rate filings.

Health plans should review the Checklist and attachments provided for regulatory requirements, deadlines, and filing expectations. Please see the checklist and accompanying attachments on the [DMHC website](https://www.dmhc.ca.gov).

Thank you.