



STATE OF CONNECTICUT
LIEUTENANT GOVERNOR NANCY WYMAN

**Connecticut Health Insurance Exchange
Board of Directors Regular Meeting**

Legislative Office Building
Room 1D
Hartford, CT

Thursday, October 16, 2014

Meeting Minutes

Members Present:

Vicki Veltri, Vice-Chair (Office of Healthcare Advocate); Secretary Benjamin Barnes, Office of Policy and Management (OPM); Deputy Commissioner Anne Melissa Dowling, Connecticut Insurance Department (CID); Commissioner Roderick Bremby, Department of Social Services (DSS); Maura Carley; Paul Philpott, Grant Ritter, Robert Tessier; Robert Scalettar, MD; and Cecelia Woods

Members Absent: Lt. Governor Nancy Wyman, Commissioner Jewel Mullen, Department of Public Health (DPH); and Commissioner Patricia Rehmer, Department of Mental Health and Addiction Services

Members Participating by Telephone: None

Other Participants:

Health Insurance Exchange (HIX) Staff: James Wadleigh, Virginia Lamb, James Michel, Peter Nichol, Julie Lyons, Jason Madrak, Chad Brooker

Department of Administrative Services, Bureau of Enterprise Systems and Technology (BEST) Staff: Eric Lindquist

Amtex Systems, Inc.: Rina Singh

National Committee for Quality Assurance (NCQA): Tricia Barrett, Will Robinson

The Meeting of the Connecticut Health Insurance Exchange Board of Directors was called to order at 9:01 a.m.

A. Call to Order and Introductions

Vice-Chair Vicki Veltri called the meeting to order at 9:01 a.m.

B. Public Comment

Jane McNichol, Director, Legal Resource Center of Connecticut, made a public comment.

C. Review and Approval of Minutes

Vice-Chair Veltri requested a motion to approve the minutes from the September 18, 2014 Regular Meeting. Motion was made by Roderick Bremby and seconded by Maura Carley. ***Motion passed unanimously.***

Vice-Chair Veltri requested a motion to add an agenda item entitled Human Resources. Motion was made by Paul Philpott and seconded by Robert Tessier. ***Motion passed unanimously.***

D. Cancelling/Rescheduling November Board Meeting

Virginia Lamb, General Counsel, presented a proposal to reschedule the November Board meeting. This would allow Access Health CT (AHCT) to provide the Board with an additional update prior to the start of Open Enrollment on November 15, 2014.

Vice-Chair Veltri requested a motion to adopt the resolution to revise the regular Board of Directors' 2014 Meeting Schedule filed with the Secretary of State and posted on the Connecticut Health Insurance Exchange website as follows: Cancel the November 20, 2014 Board of Directors Meeting and schedule a Special Board of Directors Meeting for November 6, 2014. Motion was made by Benjamin Barnes and seconded by Robert Tessier. ***Motion passed unanimously.***

E. CEO Update

Acting CEO Jim Wadleigh provided an update on AHCT activities. Current focus is on Open Enrollment readiness and continued customer service improvements. AHCT is on track for a successful start to Open Enrollment on November 15. Renewal kits have been mailed to approximately 55,000 households. The New Britain and New Haven customer service centers are open. All carrier plans and individual dental plans have been loaded into the AHCT system. The mobile application continues to decrease the time it takes to enroll.

The Finance team applied for a new Level I Grant which would fund marketing for individual and SHOP programs, improvements to the web application and the long term assister program. Mr. Wadleigh acknowledged the Plan Management Team's comprehensive review of network adequacy.

SHOP is being relaunched under Julie Lyon's direction and is expected to have a much larger market impact in 2015. New branding and kickoff will take place in the first quarter of 2015. Mr. Wadleigh also expressed appreciation to the brokers for their support in the individual and SHOP programs. AHCT would not be successful without their efforts or the efforts of all of AHCT's partners. AHCT is close to executing a contract with a vendor to implement the All Payer Claims Database (APCD).

Dr. Scalettar inquired about the amount of funds that would be available under a new Level I grant. Mr. Wadleigh and CFO Steven Sigal reported that \$50 million would be available, though a significant portion would be allocated to Medicaid, bringing the net amount available to AHCT to approximately \$13 to 14 million.

F. Operations Update

James Michel, Director of Operations, provided the operations update. Total membership is 282,802; 15,991 members are insured in a Qualified Health Plan (QHP) without an advance premium tax credit (APTC); 58,383 members are insured in a QHP with an APTC; and 208,468 members are covered through Medicaid.

Membership has remained steady. AHCT continues to collaborate with OHA, DSS and carriers to resolve individual customer issues. Starting in the latter part of January 2015, IRS form 1095A will be mailed to all QHP enrollees. The 1095A will confirm coverage and reconcile APTCs with the IRS. An operational/strategic plan is being developed to address the anticipated consumer questions and will be discussed at a future Consumer Advisory Committee meeting. Operations will return to the Board at the December meeting to present the detailed plan. Mr. Michel reported that Operations is working with AHCT's Marketing Department on notices to send to consumers in early December prior to the 1095A mailing. There also will be information, including a video, on AHCT's website. Robert Scalettar, MD asked about the drop in membership from last month. Mr. Michel replied that the decline is due mainly to nonpayment of premium.

G. IT Update

Peter Nichol, Director of IT, reported that the IT Department remains focused on Open Enrollment readiness, including volume testing, performance testing and minimizing the manual processing time and costs for identity proofing. Equifax has been retained to provide secondary identity proofing in the event that the federal data hub is unavailable. Updates on the September and November releases were also provided. Testing with CMS is taking place. IT continues to focus on enterprise content management to ensure documents are secure and partners have appropriate access. Mr. Nichol also provided current statistics of AHCT's mobile application -- 6,000 consumers downloaded the app; 2,500 consumers verified documents; 4,000 consumers prescreened to confirm eligibility; and 10,000 consumers viewed messages. Rina Singh, of Amtex Systems, Inc., demonstrated the mobile application, which is currently available for unsubsidized plans. Mr. Nichol recognized BEST staff for their work with the Exchange. BEST hosts the integrated eligibility system.

H. Access Health CT Exchange Solutions

Peter Van Loon, COO and Executive Director of Access Health CT Exchange Solutions, provided an update on Access Health CT Exchange Solutions (AHES). AHES is intended to support AHCT sustainability by availing itself of market opportunities and opportunities for cost-sharing among exchanges. Potential market opportunities include: assisting other state-based exchanges, states interested in alternatives to the federal exchange, and private exchanges; consulting; technology licensing (including licensing of the mobile application); opportunities to sell our core system as a software as a service or otherwise; and exploring involvement with ancillary products such as life and vision insurance. Commissioner Bremby asked for more detail about technology. Mr. Van Loon responded that AHES is exploring a cloud-based technology platform. Mr. Nichol added that we currently have a hybrid solution which is part virtual and partly at BEST.

I. Open Enrollment Update

Jason Madrak provided an update on Open Enrollment (OE) readiness focusing on five key topics: (1) status across work streams; (2) renewal process update; (3) 90-day in-person assistance plan update; (4) full year consumer support update; and (5) sales estimates and distribution. Weekly meetings concerning OE readiness continue. Status of progress in functional areas was reviewed. Overall, the OE readiness project plan is approximately 52% complete. Mr. Madrak summarized the renewal process and reported that Connecticut is the first state to send out renewal communications to enrollees and the only state to mail a "renewal kit" to enrollees. Approximately, 55,000 households have received a renewal kit. An additional renewal communication will be sent on October 27 detailing new premium and subsidy levels. Carriers are sending communications detailing any benefit changes. Execution of a 90-day enrollment support program is underway and support efforts were shared with the Consumer Advisory Committee on October 6. The Connecticut Health

Foundation will be awarding grants to support the activities of in-person assisters for the 90-day enrollment period.

Full year consumer support efforts were discussed at the Consumer Advisory Committee Meeting and there is a broad agreement to have a full year program. AHCT is working in collaboration with the Connecticut Health Foundation to set up a meeting of key community and advocacy leaders to determine the structure of this program. AHCT has submitted a grant request for \$1 million to the Centers for Medicare and Medicaid Services (CMS) to help support this full year program.

Sources of new enrollment were discussed. New membership is forecasted to come from three sources: remaining uninsured; individuals in plans lapsing from “grandfathered” status or leaving the existing individual market; and Medicaid re-determinations now qualifying for QHPs. Net enrollment across these three categories is anticipated to yield approximately 70,000 total new enrollees adding to the existing membership base resulting in a new uninsured rate of 2-3%.

Commissioner Bremby left at left at 10:29.

Ms. Veltri inquired about notification to consumers of the cancellation of grandfathered (non-ACA compliant) plans. Mr. Wadleigh responded that carriers are notifying customers before November 15 of cancellations that will be effective at the end of 2014. Mary Ellen Breault, of CID, confirmed.

Chad Brooker, AHCT Manager, Policy and Strategy, provided a summary of the auto-renewal criteria and process. The goal is to auto-renew as many members as possible through AHCT. Auto-renewal criteria is based on 2015 eligibility. There will be three avenues through which consumers may renew– online, paper or by phone through the call center. On December 5, QHP coverage will automatically renew if the household is eligible and has not otherwise renewed coverage or returned the mailing. AHCT will send a notice to enrollees of the final eligibility determination or updated determination for the upcoming plan year. If the coverage cannot be auto-renewed and no action is taken, coverage will be terminated at the end of December and may result in a coverage gap. Relevant dates were reviewed. Mr. Brooker confirmed that renewal notices will state that an enrollee may go to the website and shop for other plans as prices may have changed and additional plans have been added. Mr. Tessier asked whether an enrollee will be able to make a change after December 5. Mr. Brooker replied that changes may be made through the end of the OE period. Mr. Tessier requested additional information on the notifications regarding eligibility for tax credits and the implications of the 1095 form. Mr. Brooker advised that the renewal kit will contain a tax credit reconciliation. There have been meetings with tax preparers and CPAs to discuss the 1095s. Mr. Philpott asked what percentage of enrollees is expected to auto-enroll. Mr. Brooker replied that it is unclear.

J. Small Business Health Options Program (SHOP) Update

Julie Lyons, Director of Plan Management, provided an update on SHOP strategy, including re-engagement of brokers, expanded marketing, focus on strengths, and growing offerings like dental coverage. AHCT is committed to working with brokers to promote SHOP products and to providing them with administrative support, superior customer service and educational materials. AHCT is finalizing a contract with Benefits Central, which operates an online a tool used by the broker community, to provide access to AHCT plans through the tool. A tax credit calculator is being developed to help small businesses identify potential savings and plan designs are being improved.

John Carbone, Sales SHOP Manager, provided an update of SHOP sales strategy. The target audience includes over 600 certified brokers, small employer worksites, and stakeholder groups like local chambers of commerce. Outreach includes working with brokers, employers with 50 or less employees, CPA groups, small business associations and non-profit organizations. A new website is being developed based upon feedback received from the Urban Institute Survey and public/consumer comments. The new website should be completed by November 15, 2015. The development of new marketing collateral for SHOP is complete. Other marketing communications include “email blasts” to brokers, a broker newsletter and direct mailings to employers.

Mr. Philpott asked whether an employee choice model is supported within the SHOP offerings and Mr. Wadleigh replied that it is. Mr. Tessier asked whether the rates remain higher for small groups than for individuals. Mr. Carbone replied that rates were just received and a full analysis is taking place.

Deputy Commissioner Dowling arrived at 11:31 a.m.

K. Plan Management

Ms. Lyons provided an update on the Plan Management Department’s network access review and analysis. Plan Management has worked with carriers on network adequacy issues. A detailed network access summary was provided, illustrated by maps. (To access the presentation materials, click here: [Network Access Information materials](#).) Next steps include partnering with CID and OHA to ensure that any complaints concerning network adequacy are addressed and establish reasonable access standards and continued network adequacy monitoring.

Secretary Barnes left at 11:39 a.m.

Tricia Barrett and Will Robinson of the National Committee for Quality Assurance (NCQA) provided an overview of NCQA and network adequacy standards. (To access the presentation materials, click here: [NCQA Presentation](#).)

L. Strategy Committee Update

Dr. Scalettar provided the Strategy Committee update. The Committee recently met with Mr. Wadleigh and reviewed and reaffirmed the three core strategic ideas: (1) business processing outsourcing (AHES); (2) delivery system change and data analytics (APCD); and (3) consumer education and empowerment. A three-year strategic plan is expected to be documented in the near term. Dr. Scalettar thanked AHCT’s legal team for their work on the making AHCT a founding member of the Connecticut Choosing Wisely Collaborative.

M. Human Resources

Vice-Chair Veltri requested a motion to authorize the Human Resources Committee to negotiate compensation for James Wadleigh, Acting CEO. Motion was made by Paul Philpott and seconded by Robert Tessier. ***Motion passed unanimously.***

N. Adjournment

Vice-Chair Veltri requested a motion to adjourn the meeting. Motion was made by Cecelia Woods and seconded by Robert Tessier. ***Motion passed unanimously.*** Meeting adjourned at 12:22 p.m.

As approved by the Board of Directors on November 6, 2014

*The next meeting will be held on November 6, 2014 at the
Legislative Office Building, Room 1D, Hartford, CT.*