



STATE OF CONNECTICUT
LIEUTENANT GOVERNOR NANCY WYMAN

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

Legislative Office Building
Hartford, CT

Thursday, October 17, 2013

Members Present:

Lieutenant Governor Nancy Wyman (Chair); Dr. Robert Scalettar; Robert Tessier; Vicki Veltri, Office of the Healthcare Advocate (Vice Chair); Secretary Benjamin Barnes, Office of Policy and Management (OPM); Grant Ritter; Commissioner Jewel Mullen, Department of Public Health (DPH); Deputy Commissioner Anne Melissa Dowling, Connecticut Insurance Department (CID), Commissioner Roderick Bremby, Department of Social Services (DSS); and Commissioner Patricia Rehmer, Department of Mental Health and Addiction Services

Members Absent: Mary Fox; Paul Philpott; Maura Carley

Members Participating by Telephone: Cee Cee Woods

Other Participants:

Health Insurance Exchange (HIX) Staff: Kevin Counihan, Peter Van Loon, James Wadleigh, Julie Lyons, Steve Sigal, Virginia Lamb, Jason Madrak; Michael Lengvarsky

The Meeting of the Connecticut Health Insurance Exchange Board of Directors was called to order at 9:02 a.m.

A. Call to Order and Introductions

Lt. Governor Wyman opened the meeting at 9:02 a.m.

B. Public Comment

Evelyn Barnum provided a public comment.

C. Review and Approval of Minutes

Lt. Governor Wyman requested a motion to approve the minutes from the September 19, 2013 meeting. Motion was made by Vicki Veltri and seconded by Robert Scalettar. ***Motion passed unanimously.***

D. CEO Report

Kevin Counihan, CEO, reported that Access Health CT (AHCT) opened as scheduled on October 1 and has been in full operation ever since. Individuals have been successful in navigating the web-site and completing their applications. Connecticut is the only state consistently operational since October 1. This success is primarily attributable to the AHCT management team making three fundamental business decisions last winter: to focus

on maintaining stability of the system; to create a transparent and easy customer experience and to outsource certain business processes. The Healthcare.gov website has experienced significant challenges with its website activity declining 88% in the second week of operations.

E. Operations and Information Technology Update

Peter Van Loon presented the operations update including a summary of current web-site activity and enrollment and information about the Contact Center, Sir Speedy, Scan Optics and Xerox activity.

Commissioner Rehmer arrived at 9:25 a.m.

Enrollment data by metal level, age group and carrier was provided for the first two weeks of operation. The current age trend is towards individuals above the age of 50. This trend will be monitored. Small employer enrollment is lower than expected. Gender split is approximately 50/50. Minority reports have not been started yet, since that information is optional and is only being captured for those enrolling in Medicaid. Mr. Wadleigh noted that the scheduled December release will capture minority information. Dr. Scalettar asked about CCIIO's reporting requirements. Mr. Van Loon reported that a formatted report is submitted to CMS on a weekly basis. That information is expected to be released in mid-November by the federal government and on a monthly basis going forward. Jewel Mullen asked how many applications were self-initiated and how many were processed through an assister? Mr. Van Loon reported that that information has not yet been generated. Vicki Veltri asked whether application information through ConnectCT is being collected? Commissioner Bremby replied that that data is not yet being consolidated. Mr. Counihan stated that the next release will include this information.

The Exchange is managing a quick transition from IT build and process development to customer service. Consumer interest in AHCT is more than expected for this initial period of operations and wait times with the call center were higher than anticipated. Additional staffing has been added to address this problem. Other operations issues include: getting brokers into the system; broker training; reporting; clarity of benefits presentation and applicant information to carriers. Consumers have concerns about price and the complexity of the law.

F. Operations Risk Management

Michael Lengvarsky, Operations Analyst, presented AHCT's operations risk management (ORM) program. ORM is an approach for identifying, analyzing, monitoring and responding to an organization's risks with the primary goal being protecting the consumer. Other benefits include assuring health plan integrity and the sustainability of operations. A number of scenarios were presented followed by a discussion of identified risk mitigation strategies.

G. Marketing Update

Jason Madrak, Chief Marketing Officer, presented the marketing update including an update on media efforts; an overview of the Outreach Program; and, a Navigator and In Person Assister update. AHCT's new testimonial campaign will be launched during the last week of October. Current "animated" media is being updated which includes the contact center phone number. Media activity has been pushed to mid-October and will focus on key enrollment milestones. A summary of outreach lead generation was presented. Over 100 Enrollment fairs are planned in 18 cities with frequency based on the number of uninsured residents. Navigator regional

meetings have been held throughout the state. Six navigator organizations are working with assisters in their areas.

Lt. Governor Wyman asked what the Exchange was doing about consumers who do not sign up by March 31? Mr. Madrak stated that consumers are being provided penalty information and also advised that if they do not act within the open enrollment period, they could have a gap in health coverage until January 1, 2015.

Commissioner Benjamin Barnes left at 10:39 a.m.

Robert Scalettar asked about the Exchange's plans to use existing delivery systems to educate and sign up consumers. Mr. Madrak explained the Exchange's Certified Application Counselor program. This program trains employees from health care organizations such as hospitals and FQHCs on the ACA. These counselors will be allowed to access the web-site and qualify individuals for a QHP, QHP with APTC or for other insurance affordability programs such as Medicaid or CHIP.

H. Legal Update

Virginia Lamb, General Counsel, presented the legal update. AHCT has three ways to contract: direct contract, purchase order (PO) to a state contract and a memorandum of understanding (MOU) with another state agency. Currently, the Exchange has more than 55 direct contracts. The actual count is somewhat problematic, since while AHCT has signed over 200 individual contracts with assister organizations and six contracts with navigator organizations, each contract type (assister or navigator) is reported as only one contract. Similarly, each carrier agreement also includes multiple contracts but is reported as only one contract. AHCT leverages the terms and conditions and rates of the state's contracts wherever possible. This is accomplished by adding an Exchange purchase order to an appropriate state contract. Each PO is generally accompanied by a detailed Statement of Work (SOW). AHCT has 20 of these PO/SOWs. AHCT's largest PO is the \$42.5M PO/SOW to a Department of Administrative Services contract with Deloitte Consulting LLP for Systems Integration. In addition AHCT has 11 MOUs with seven different state agencies or the federal government. Key state MOUs are with the Connecticut Insurance Department (CID); the Department of Administrative Services (DAS) for web-site hosting; and, the Office of the Healthcare Advocate (OHCA) for administration of the Navigator and In-person Assister program. AHCT is also working on MOUs for data sharing with the Departments of Labor, Public Health and Motor Vehicles. Ms. Lamb emphasized the support various state agencies have provided AHCT in implementing the Exchange.

I. Finance Update

Steve Sigal, Chief Financial Officer, provided the financial update. AHCT can continue to operate, even with a federal government shutdown. The Exchange's focus has shifted to those tasks required to effectively operate as an ongoing entity. AHCT has been advised that its new Level I Application was approved in full. This grant will be subject to the 7 percent federal sequestration. Progress continues on the audit of AHCT's 2013 financial statements; fixed asset physical inventory; end user reporting tools; and the market assessment process. Fiscal year-to-date budget results and the finance dashboard were presented along with a report on grant funding. The lifting of restrictions on additional funding from awarded grants has been delayed.

Lt. Governor Wyman left at 11:01 a.m.

J. Strategy Committee Update

Dr. Scalettar reported on activities of the Strategy Committee. The Committee focused on how to: refine infrastructure and operations; maximize enrollment; ensure Exchange sustainability; identify appropriate healthcare reform initiatives and work with carriers on innovative plan designs. The Committee is currently working with AHCT senior staff to develop the first three strategic year plan. This plan will be drafted by year's end. With respect to Exchange sustainability, Mr. Counihan reported that two other states had contacted AHCT about potentially franchising AHCT's platform. Mr. Counihan also reported that he and other Exchange CEOs expected the All Payers Claim Data Base (APCD) to play a significant role in Exchange operations going forward.

K. Adjournment

Co-Chair Vicki Veltri requested a motion to adjourn the board meeting. Motion was made by Patricia Rehmer and seconded by Anne Melissa Dowling. ***Motion passed unanimously.*** The meeting adjourned at 11:04 a.m.