



Access Health Connecticut

Health Plan Benefits & Qualifications Advisory Committee (HPBQ AC) Meeting
January 29, 2020

Agenda

- Call to Order and Introductions
- Public Comment
- Vote: Meeting Minutes (December 18, 2019)
- AHCT Vision, Mission and Values
- Follow-Ups from Prior Meeting
- 2020 Individual Market Landscape
- Value Based Insurance Design (VBID)
- Reinsurance Study Update
- Certification Requirements
- 2021 Individual Market Standard Plan Designs
- Meeting Schedule for 2021 Plan Year Certification Review
- Next Steps

Public Comment

Vote:

**Review and Approval of Minutes:
December 18, 2019 HPBQ AC Special Meeting**

AHCT Vision and Mission

AHCT Vision

- The CT Health Exchange supports health reform efforts at the state and national level that provide CT residents with better health, and an enhanced and more coordinated health care experience at a reasonable, predictable cost.

AHCT Mission

- To increase the number of insured residents, improve health care quality, lower costs and reduce health disparities through an innovative, competitive marketplace that empowers consumers to choose the health plan and provider that give them the best value.

AHCT Values in Action

At Access Health CT, it is with our customers and our employees in mind that we seek to promote these collective values and to live by these behaviors. Our culture of acceptance welcomes and values everyone. We challenge the status quo to find new ways to grow and improve our community, our company and ourselves. Our people take pride in the service we provide, and in the spirit of the common good that we share.

Authenticity

Act with sincerity, credibility and self-awareness.

Integrity

Commit to doing the right thing with genuine intention.

Excellence

Aim high and challenge the status quo.

Ownership

Take responsibility and initiative.

One Team

Collaborate to succeed.

Passion

Dedication to creating opportunities for greater health and well-being.

Follow-Ups from Prior Meeting

Action Item	Status
<p>December 18, 2019 Presentation - Appendix Exhibit (slide 34): “Standardized Plans: Actuarial Value Compliance”</p> <ul style="list-style-type: none">• <i>Question: What does the “N/A” represent for the Silver CSR plans for 2015?</i>	<p>The Silver CSR plans implemented for 2014 were not tested with the Actuarial Value Calculator (AVC) for the 2015 Plan Year because there were multiple options of the Silver 70% AV plan that were under consideration; the CSR plans were run through the AVC for 2015 subsequent to the plan selection at the 70% AV level</p>
<p>Resource Materials Binder</p>	<p>When new exhibits are released for a meeting, an updated ‘Table of Contents’ will be provided to replace the previous version</p>
<p>VBID-X Report released June 2019 available at the following URL: http://vbidcenter.org/wp-content/uploads/2019/07/VBID-X-FINAL-REPORT-7.1.19-1.pdf</p>	<p>Provided to Committee Members for pre-reading on 1/8/2020 for discussion during this meeting</p>



2020 Connecticut Individual Market Landscape

Carrier	Exchange Status	HMO	POS	PPO	Total
Anthem	Off	8			8
Anthem	On	3		6	9
CBI	On		8		8
CCI	Off	2	1		3
CICI	Off		6		6
Grand Total		13	15	6	34

50% of plans filed in the Individual Market are offered through AHCT

Carrier	Exchange Status	Gold	Silver	Bronze	Catastrophic	Total
Anthem	Off	1	3	3	1	8
Anthem	On	3	1	4	1	9
CBI	On	2	1	4	1	8
CCI	Off		1	2		3
CICI	Off	1	4	1		6
Grand Total		7	10	14	3	34

Over 40% of plans filed in the Individual Market are at the Bronze metal level

2020 Connecticut Individual Market Landscape

Individual Market Plans (On & Off Exchange) Approved by Connecticut Insurance Department (CID) for 2020 Plan Year

Bronze

- In every county, at least two Bronze plans offered via AHCT are lower in premium than any of the other 12 Bronze plans filed for Plan Year 2020 in the Individual Market

Silver

- In all counties, one Silver plan offered “Off-Exchange” is lower in premium than any of the other 9 Silver plans filed for Plan Year 2020

Gold

- In every county, one Gold plan offered via AHCT is lower in premium than any of the other 6 Gold plans filed for Plan Year 2020
- In all counties, the AHCT Standard Gold plans are in the top 3 of the highest premium plans

Value-Based Insurance Design (VBID)

- Report*: “V-BID X: Creating a Value-Based Insurance Design Plan for the Exchange Market”
 - VBID is an approach to align cost-sharing for health care services with clinical value by reducing cost-sharing (including waiving deductible) for higher value services and increasing cost-sharing for low-value services
 - Expected results include but are not limited to better health outcomes and lower out-of-pocket costs for people with specified chronic conditions
 - Report provides a potential approach to incorporating VBID elements in a plan, indicating the concept is possible in fully-insured Exchange plans
 - Intent was to modify a typical plan offered through an Exchange by favoring high-value over low-value services without impacting the actuarial value (AV) of the plan
 - Sample plan included in the report increases copays on targeted service categories, not specific low-value services, as there was insufficient impact to AV by increased cost sharing on over-used and/or low-value services to offset the decreased cost sharing on high-value services
 - Information provided includes listing of services that may be considered “low-value” (e.g., Vitamin D testing) vs. “high-value” (e.g., Hemoglobin A1C testing)

Weakly Reinsurance Analysis


- **Analyzed how a potential reinsurance program would impact premiums in 2020**
 - Potential pass-through (i.e., Federal reimbursement amounts) might be if the state pursues a reinsurance-based 1332 waiver
 - Potential state-funding needed
 - Potential reinsurance payment parameters for select funding scenarios

Funding for Various Levels of Premium Reduction

2020 Range of Results

Funding Level	5% Premium Reduction	10% Premium Reduction	20% Premium Reduction
Total Funding Level	\$45.4 to \$49.6 M	\$90.9 to \$99.3 M	\$182.4 to \$199.0 M
Federal Pass-through	\$25.6 to \$28.4 M	\$51.1 to \$56.8 M	\$102.1 to \$113.5 M
Needed State Funding	\$19.2 to \$21.2 M	\$38.6 to \$42.5 M	\$77.7 to \$85.5 M
Federal Pass-through %	51.5% to 57.9%	51.5% to 57.8%	51.3% to 57.7%

Certification Requirements

Certification Requirements: Topics	Modified for 2020	2021 Suggested Topics
Essential Health Benefits (EHB) Benchmark Plan	x	CMS EHB benchmark plan selection submission deadline: 5/6/19 for 2021 & 5/8/20 for 2022 (State of CT)
Prescription Drug Formulary Review Responsibility	x	x
Tobacco Use Premium Surcharge in the Individual Market	x	x
Broker Compensation	x	x
Network Adequacy Standards	x	x
Essential Community Provider (ECP) Contracting Standards	x	x
Pediatric Dental Coverage in Medical Plans	x	x
Lowest Cost Silver Plan in the Individual Market	✓	x
“Plan Mix”: Individual Market Medical	✓	x
“Plan Mix”: Individual Market Stand-Alone Dental Plans (SADP)	x	x
“Plan Mix”: SHOP Medical	x	x
“Plan Mix”: SHOP Stand-Alone Dental Plans (SADP)	x	x
Standardized Plan Development – Individual Market Medical	✓	✓
Standardized Plan Development – SADP	x	x
<p>OTHER:</p> <ul style="list-style-type: none"> • Topics impacted by new federal / state regulations and guidance [e.g., impact to changes in funding for CSR plans, public option, reinsurance, etc.] • Items suggested by AHCT Board of Directors, HPBQ AC or other constituents • VBID • 13 Customer Preferences / Input 	x	<p>TBD</p> 

HPBQ AC Meeting Schedule

Proposed Meeting Agendas	Target Dates
Kick-off Meeting: <ul style="list-style-type: none"> Plan Management Certification Life Cycle Certification Requirements & Review of Exhibits Potential Meeting Schedule for 2021 Plan Year Certification Review 	December 18, 2019
<ul style="list-style-type: none"> 2020 Individual Market landscape and considerations for 2021 certification requirements, including standard plans Actuarial Value Calculator (AVC) results: impacts of draft 2021 tool on 2020 standardized plans (Wakely & carriers with samples of plan changes) 	January 29, 2020
<ul style="list-style-type: none"> Certification requirements: proposed changes AVC results: draft 2021 Tool & recommended changes for 2021 standardized plans (Wakely & Carriers) 	February 20, 2020*
<ul style="list-style-type: none"> Certification requirements: proposed changes AVC Results: impacts of final 2021 tool on recommended changes for 2021 standardized plans (Wakely & carriers) 	March 2020** (2 nd week)
<ul style="list-style-type: none"> Certification requirements: proposed changes AVC Results: impacts of final 2021 tool on recommended changes for 2021 standardized plans (Wakely & carriers) 	March 2020** (4 th week)
<ul style="list-style-type: none"> Certification requirements: recommendations for AHCT Board of Directors, including modifications to standardized plans for 2021 	April 2020 (2 nd week)

**Revised from previously presented schedule to one meeting in February*

***May want to consider a 3-week interval between meetings in March to ensure ample time for carriers/Wakely to assess Actuarial Value and Mental Health Parity compliance of potential plan changes*

Next Steps