

Board Agenda

- A. Call to Order and Introductions
- B. Public Comment
- C. Vote:
 - Review and Approval of Minutes
- D. CEO Report
- E. 2020 Enrollment Report
- F. Open Enrollment 7 Marketing Wrap Up and Next Steps

- G. Adverse Selection Study
- H. Legal Update
- I. Future Agenda Items
 - ACA 10th Anniversary
 - Reinsurance/1332 Waiver
 - FY2021 Budget
 - Future Board of Directors Meeting Location
 - AHCT Call Center in Bristol
- J. Adjournment



Public Comment



Vote

Review and Approval of Minutes (*January 16, 2020 Regular Meeting Minutes)



CEO Report James Michel





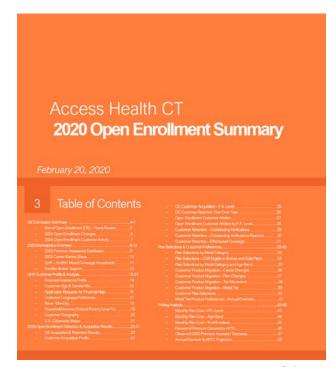
Access Health CT

2020 Enrollment Report



2020 Open Enrollment Update

- 2020 OE Annual Report Posted To Agency Website:
 - agency.accesshealthct.com/meetings#one
- Report Includes Figures On:
 - Marketplace Overview
 - QHP Customer Profile
 - Acquisition & Retention Results
 - Plan Selections and Product Preferences
 - Pricing Analysis
- AHCT Available To Answer Questions From Readers





2020 Leaver Survey Results

Do you have health insurance coverage for 2020?

- Yes 76.4%
- No, I do not have coverage 16.3%
- No, but I plan to get covered within next 3 months (7.3%)

Where are you getting your health insurance coverage in 2020?

My employer (or spouse/parent plan) –
 67.7%

Why are you not continuing coverage for 2020 through Access Health CT? (Choose all that apply)

• I cannot afford it— 70.6%

Would you consider getting health insurance coverage through Access Health CT in the future?

Yes/Maybe—82.3%



^{*12,635} former enrollees surveyed

^{**6.6%} response rate

Enrollment By Eligible Immigrant Citizenship Status

Application Question: "Please indicate any applicant that has eligible immigration status?"

Proportion of Non Citizen Enrollment by Open Enrollment (OE) Period, Program, and Acquisition Status

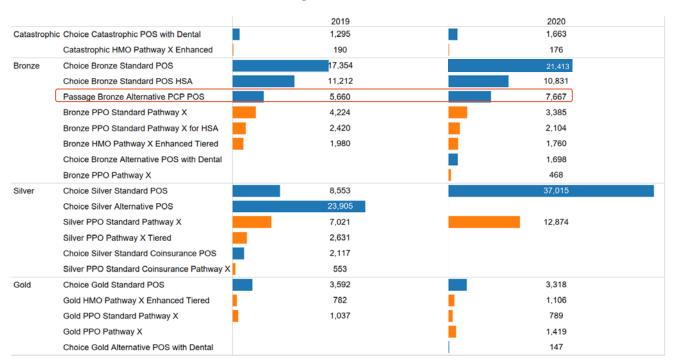
	QHP			HUSKY		
OE Acquisition	2018	2019	2020	2018	2019	2020
Acquired During OE ¹	9.1%	12.1%	13.0%	8.3%	9.5%	8.6%
Retained During OE ²	13.3%	12.9%	12.1%	5.1%	5.0%	5.2%

- 1) Enrollees without active coverage prior to respective Open Enrollment period beginning, but enrolled during OE.
- 2) Enrollees with active coverage prior to respective Open Enrollment period beginning.



Annual Enrollment by Plan

2019 - 2020 Enrollment by Plan Name and Plan Year



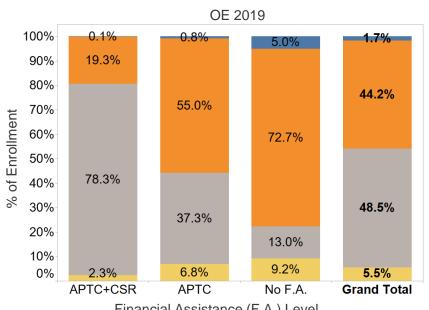
The Passage Bronze Alternative PCP POS plan was the lowest priced bronze plan in both 2019 and 2020.

This is the only plan that does not cover "non-Hyde" abortion services.

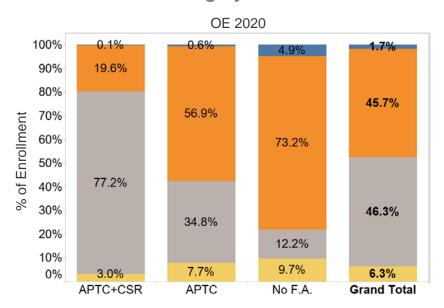


Annual Enrollment by Metal Tier

Proportion of Enrollees by Financial Assistance Level and Plan Metal Category



Financial Assistance (F.A.) Level



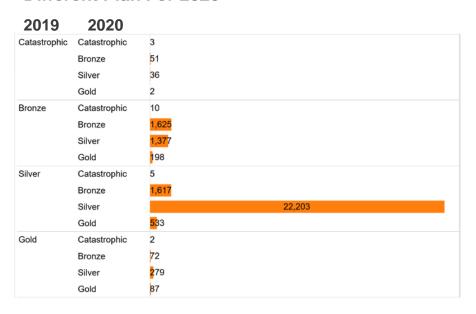
Financial Assistance (F.A.) Level



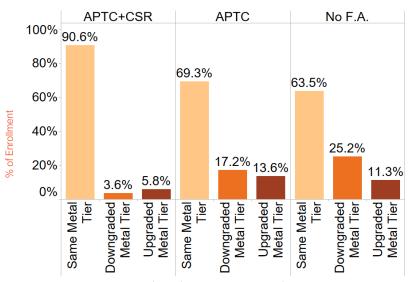


Metal Migration by Customers Who Change Plans

2019 Customers Who Renewed and Selected a Different Plan For 2020



% of 2019 Customers Who Renewed and Selected a Different Plan For 2020



Metal Tier Change Between 2019 and 2020



Marketing Update

OE7 Wrap-Up & Next steps

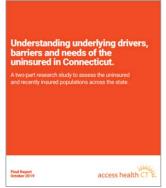


Looking Back at 2019

Research

- Audience Segmentation (July)
- Focus groups (August)
- Uninsured (October)
- Year-round strategy:
 - ✓ Choose.Use.BeWell
 - ✓ Who is Access Health CT?
 - ✓ OE7 Campaign
- Content & user experience









Choose.Use.BeWell: "Offseason" Campaign

Explaining the Campaign Concept



Mass media ad



Website



Print



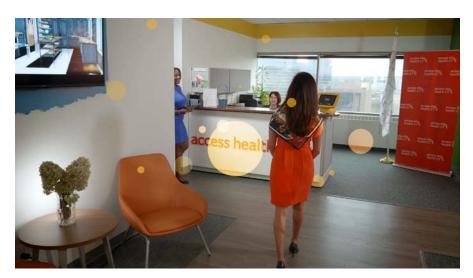




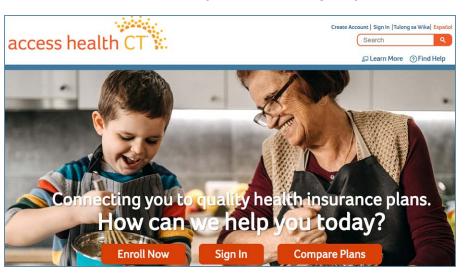


Year-Round Strategy: Our Brand

Public Service Announcement



Website (Brand descriptor)



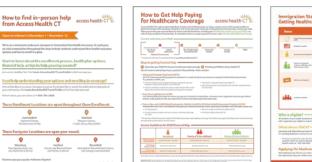


OE7 Campaign Assets

Print















Educational Collateral









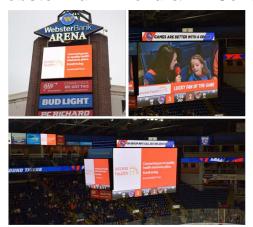






OE7 Campaign Assets

Webster Bank Arena & XL Center





Metro North





Billboards



Cinema



OE7 Campaign Assets

TV/Digital ads





Direct Mail







Email, Social Media, Video & Online Banners









OE7 Campaign: Community Outreach

OUTREACH TOUR







HEALTHY CHATS







COMMUNITY CONFERENCE







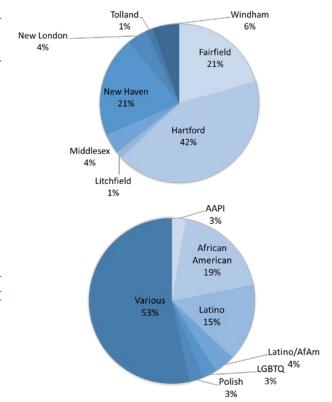
ENROLLMENT FAIRS & CENTERS







OE7 Campaign: Community Outreach







events

Business

Ø

Home







Upcoming Efforts:

Focus Areas

- Year-round branding
- Support mission
- Long-term tactics from research studies
- Web interaction, content and Search Engine Optimization

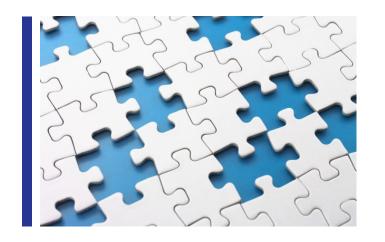




February 20, 2020

PRESENTED BY
Julie Andrews, FSA, MAAA
Senior Consultant

February 20, 2020 Board of Directors Meeting



Scope of Presentation

AHCT retained Wakely Consulting Group (Wakely) to perform the adverse selection analysis. This presentation provides a high level summary of the analysis, results and recommendations. The full report can be found in Appendix A.



February 20, 2020 Board of Directors Meeting



Purpose of Study

Access Health Connecticut (AHCT) is required by legislation to:

- Report annually on the impact of adverse selection on the exchange
- Provide recommendations to address any negative impact reported
- Provide recommendations to ensure sustainability of the exchange

Disclosures: Wakely relied on data provided by others to complete this study. Data was reviewed for reasonability and appropriateness. The Study and results are intended to fulfill the legislative reporting requirements; any other use of this information may not be appropriate



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Defining, Identifying, & Measuring Adverse Selection

- Defined as one segment of the market attracting enrollees with higher health risk than another segment of the market
- Identified by higher risk scores in one segment of the market than another
- Measured by the difference in risk scores between market segments
- Measured by the difference in loss ratios between market segments (before and after risk adjustment transfer payments)



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Areas of Potential Adverse Selection



Nature of adverse selection:

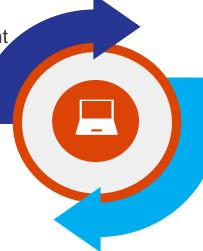
- •Impossible to completely remove adverse selection in any insurance market where there is a choice of coverage
- •Impact of adverse selection can be created, managed or mitigated through regulation and policies



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Analysis based on demographics, plan enrollment, claims experience, federal risk scores and risk adjustment transfer payments

Quantitative Analysis



Qualitative Analysis

Subjective comments based on survey responses from carriers and other market data available to Wakely



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Conclusions: Individual Market Grandfathered vs. Non-Grandfathered

- Individual grandfathered policies initially appeared to experience favorable selection
- Portion of enrollees in grandfathered plans is minimal and continues to decline
- With fewer than 100 policies at Mid-2019, they have no impact on the market



Access Health CT 2019 Adverse Selection Study February 20, 2020 Board of Directors Meeting

Conclusions:

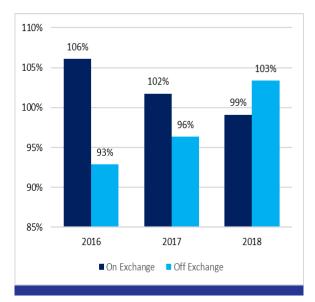
Small Group Market Grandfathered vs. Non-Grandfathered

Since there was no small group grandfathered plan enrollment as of June 2015, no analysis of adverse selection was performed.

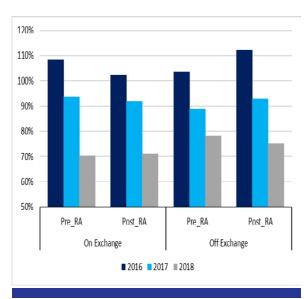


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Individual Market On vs. Off Exchange: The on vs. off exchange relationships are more variable in 2018 vs. 2017.



Risk Transfer Amounts as % of Statewide Premium (non-catastrophic metal tiers)



Loss Ratios* Pre & Post Risk Adjustment (non-catastrophic metal tiers)

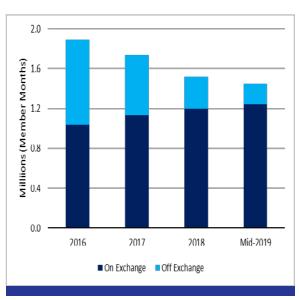


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Individual Market On vs. Off Exchange: The variation in risk on vs. off exchange has narrowed from 2017 to 2018.



Risk Transfer Amounts as % of Statewide Premium (non-catastrophic metal tiers)



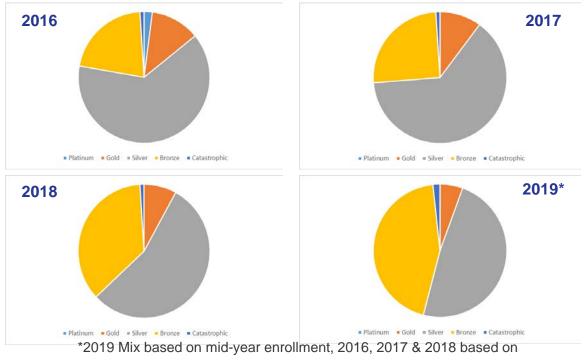
Enrollment Exposure by Year (Member Months)*



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On Exchange Metal Enrollment Mix

• The mix of enrollment by metal has shifted on and off exchange





exposures.

Access Health CT 2019 Adverse Selection Study February 20, 2020 Board of Directors Meeting

Conclusions: Individual Market On vs. Off Exchange

- Up until 2018, on exchange enrollees have had higher risk scores than off exchange plan enrollees in the individual market
- On exchange enrollees are of higher average age than off exchange plan enrollees in individual market
- Loss Ratios after consideration of risk adjustment transfers indicates that on exchange enrollees are not financially disadvantaged.
- May indicate potential adverse selection. Minimal impact in market due to protection of risk adjustment mechanisms



Access Health CT 2019 Adverse Selection Study February 20, 2020 Board of Directors Meeting

Conclusions: Small Group Market On vs. Off Exchange

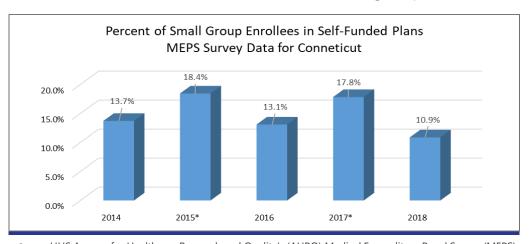
- Similar to last year, small group on exchange enrollment is low and not fully credible by metal tier
- Can not make any conclusions regarding adverse selection
- Low enrollment should be monitored outside context of adverse selection to ensure sustainability of market



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Conclusions: Self-Funding in the Small Group Market

- Connecticut data does not clearly indicate a change in prevalence of self-funded small groups
- Survey results from some carriers indicate an increasing interest
- Lack of credible or comparable data results in no clear conclusion whether there is adverse selection in the small group market





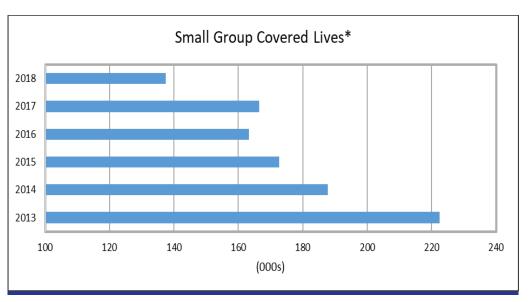
Source: HHS Agency for Healthcare Research and Quality's (AHRQ) Medical Expenditure Panel Survey (MEPS) *Data for these time periods is not fully credible

Access Health CT 2019 Adverse Selection Study

February 20, 2020 Board of Directors Meeting

Conclusions: Self-Funding in the Small Group Market

 After several years of declining enrollment, the small group market grew in 2017 by 2.0% as measured by covered lives, then shrunk significantly in 2018 by 17.5%





Access Health CT 2019 Adverse Selection Study February 20, 2020 Board of Directors Meeting

Other Adverse Selection Considerations The past year has brought changes to the individual and small group market that impact overall market selection not just the Exchange.

- Defunding of Cost Sharing Reduction Advance Payments, 2018 Increase in Silver premiums to fund
 - 2021-Silver Loading Continues
- Regulations
- Judicial Activity
- Change in Plan Offerings



Access Health CT 2019 Adverse Selection Study February 20, 2020 Board of Directors Meeting

Recommendations: On vs. Off Exchange Adverse Selection

- Continue to review special enrollment period (SEP) eligibility requirements
- Monitor overall market enrollment, is the off-exchange market continuing to shrink
- Review impact of shifting metal option enrollment
- Explore mechanisms for stabilizing the individual and small group markets (1332 Waivers)



Access Health CT 2019 Adverse Selection Study February 20, 2020 Board of Directors Meeting

Recommendations: Self-funding in Small Group Adverse **Selection** Similar to last year:

- Closely monitor small group market to ensure healthier small groups do not move to a self-funded basis leading to adverse selection (i.e., healthier groups opting out of the fully insured risk pool to get lower, experience-based cost options)
- Monitor regulatory environment for impact of newly proposed regulations



Appendix A

AHCT Adverse Selection Study Report February 20, 2020



Legal Update



Legal Update

 Proposed Notice of Benefit and Payment Parameters for 2021

Public Charge Update

Texas Litigation Update

Proposed Notice of Benefit and Payment Parameters 2021

Released on January 31, 2020, comments due by March 2, 2020

- Issuer Changes
 - State reporting on state-required benefits outside of EHB requirements
 - Changes to Essential Health Benefits Benchmark plan selection by states
 - Changes to Medical Loss Ratio Calculations
- Exchange Changes
 - Seeking comment on changes to auto-reenrollment process for customers eligible for \$0 premium plans
 - Termination of Coverage, Data Matching and Verification
 - Encouraging Plans to include VBID in benefit design
 - Continue flexibility for Exchanges for display of Quality Rating System data

Public Charge Update

 Supreme Court ruled that NY District Court could not issue nationwide injunction of rule

Public Charge rule goes into effect on February 24, 2020

Public Charge rule still being challenged on merits

Texas Case Update

• Cases now known as California v. Texas and House v. Texas

 Supreme Court announced it will consider whether to hear the appeals at February 21 Conference

 Decision to grant cert and would also need decision to order special session for oral argument to hear case for 2020 term

Future Agenda Items



Adjournment

