



Health Plan Benefits and Qualifications Advisory Committee Meeting & Consumer Experience and Outreach Advisory Committee Special Meeting

Location: Holiday Inn
100 East River Drive
East Hartford, CT
Date: Wednesday, February 17, 2016
Time: 9:00 a.m.

Members Present

Mary Ellen Breault; Paul Lombardo; Kathy Walsh; Kevin Galvin; Robert Tessier; Elizabeth Krause; Anita Cotto

Members Absent

Bonnie B. Roswig; Joseph Treadwell; Marcia Petrillo; Margherita Giuliano; Maria Diaz; Mark Espinosa; Robert McLean; Stephen A. Frayne; Alta Lash; Cee Cee Woods; Cheryl Forbes; Deb Polun; Gerard O'Sullivan; Erica Michalowski; Susan Kelley; Shawn Lang; Sheldon Toubman; Tanya Barrett

Members On Phone

Robert Scalettar; Arlene Murphy; Kimberly Martone, Victoria Veltri

Other Participants

AHCT: Ron Choquette; Shan Jeffreys; Susan Rich-Bye; Ann Lopes; James Michel; Richard Levesque
Wakely Consulting: Brittany Phillips; Julie Andrews
OHA: Demian Fontanella

I. Call to Order and Introductions

The meeting was called to order.

II. Public Comment

There was no public comment.

III. 2017 Individual Market Standardized Plan Designs – Discussion and Vote

Shan Jeffreys, Director of Marketplace Strategies, provided an overview of the proposed standardized plans for Plan Year 2017. 2016 AHCT plan enrollment by metal level was reviewed. Susan Rich-Bye, Director of Legal Affairs and Policy, provided a summary of the regulations and guidance. The recently issued Connecticut Insurance Department's (CID) Bulletin HC-109 reduces the copay maximums for laboratory and routine radiology services, which must be incorporated into most of the AHCT 2017 standardized plans to comply with this guidance.

Victoria Veltri stated that the number of plan choices needs to be reduced. Mr. Jeffreys replied that it does need to be done sooner rather than later and there would be a clearer definition within a month adding that additional information is required to proceed with that discussion. Ann Lopes provided a brief summary of the plans currently offered. Ms. Lopes noted that there are consumers currently enrolled in these plans and we will need to think about the impact of eliminated the plans. Mr. Jeffreys added that many of these consumers are un-subsidized enrollees and it would be a drastic impact for the auto renewal process. Access Health CT needs to have enough time to navigate through the issues. Susan Rich-Bye suggested having this question in the annual consumer survey. Robert Scalettar, M.D. added that this could be potentially disruptive. Ms. Veltri stated that this topic requires more discussion.

Julie Andrews, Wakely Consulting, began the presentation of the proposed 2017 standardized plan designs walking through the approach and recommended changes to the plans as well as a summary of the Actuarial Value (AV) calculator. Two options were provided for the proposed Platinum plan. Option 1 reduces the maximum co-pay for laboratory services. Option 2 raises the deductible to \$300 and reduces the maximum co-pay for laboratory services. Ms. Andrews stated that raising the deductible would be an approximate 1% positive premium impact but it depends on a multitude of variables. Paul Lombardo added that anytime a plan can be kept the same, it is positive. Kevin Galvin made a motion for Option 1. Robert Tessier seconded. ***Motion passed unanimously.*** Arlene Murphy recommended not voting on each plan separately as discussions may impact upper tier decisions. Mr. Galvin withdrew the motion.

Ms. Andrews summarized the two options for the proposed Gold Plan. Option 1 increases the deductible from \$1,000 to \$1,350 and Option 2 increases the deductible from \$1,000 to \$1,500. Ms. Andrews stated that Option 2 keeps the premium at relatively the same place. Ms. Murphy asked what is attributed to the deductible increase. Ms. Andrews replied that is a combination of lowering the lab services from \$25 to the \$10 regulatory maximum as well as the AV pressure, 6% trend and the cost of health care. Mr. Lombardo added that reinsurance has had a significant impact on Connecticut rate changes. Further, with the conclusion of the transitional reinsurance program after plan year 2016, the impact would be approximately \$30 to \$40 per member, per month. Brittany Phillips added that the AV

will be trended at 6.5% until new data becomes available. Going with Option 2 will allow for less of a change next year. Ms. Rich-Bye stated that the goal is to make the minimum amount of changes.

Ms. Andrews summarized the proposed Silver Plan. There are a lot of changes. Ms. Murphy expressed concern over the large increases to deductible and premium. The plan is more expensive, covers less and some consumers may not enroll and incur the penalty. Ms. Andrews stated that the change to the co-pay maximum did put pressure on the deductible adding that there is a definite balance between cost sharing and the AV. Mr. Galvin expressed concerns surrounding Option 2 which increases the primary care and emergency room co-pays. The Committees' consensus was to choose Option 3.

Ms. Andrews described the proposed 73% Silver cost sharing reduction variant and she stated that Option 3 is the best option. If the plan has a \$35 primary care co-pay, there needs to be a \$35 AV cost sharing reduction. Ms. Veltri reminded the committee that it is important that this plan remain attractive to consumers. Ms. Murphy agreed and recommended an advisory committee meeting to adequately discuss topic. Ms. Susan Rich-Bye added that there will be a Husky A population transitioning later this year. Ms. Andrews agreed with Mr. Tessier that Option 3 is the best value for consumers and the members of the committee agreed.

Ms. Andrews continued with the proposed 87% Silver AV cost sharing reduction variant options. Mr. Lombardo pointed out that Option 1 has the least amount of changes. The members of the committee agreed.

Ms. Andrews continued with the proposed Silver 94% AV cost sharing reduction variant. The only change from the current plan is the statutory laboratory services reduction. Mr. Lombardo added that with Option 1, there will be more room to change the deductible next year. The members of the Committee agreed.

Ms. Andrews moved to the proposed Bronze HSA Plan. Mr. Lombardo recommended Option 1 to allow room to change the deductible next year. The members of the Committee agreed on Option 1. Following further discussion on the Bronze non-HSA Plan, Option 1 was selected.

Kevin Galvin made a motion to accept the following: Platinum – Option 1; Gold - Option 2; Silver - Option 3; Silver 73% CSR variant- Option 3; Silver 87% CSR variant - Option 1; Silver 94% CSR variant - Option 1; Bronze non-HSA Plan Option 1; and, Bronze Plan HSA Option 1. Robert Tessier seconded. ***Motion passed unanimously.***

Kevin Galvin made a motion to accept the Stand Alone Dental Plans. Robert Tessier seconded. ***Motion passed unanimously.***

IV. Adjournment

Kevin Galvin made a motion to adjourn the meeting and Robert Tessier seconded the motion. Meeting adjourned at 11:11 a.m.