



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

Remote Meeting

Thursday, June 18, 2020

Draft Meeting Minutes

Members Present:

Paul Philpott (Interim Vice-Chair); Cecelia Woods, Thomas McNeill, Grant Ritter; Victoria Veltri; Theodore Doolittle; Office of the Healthcare Advocate (OHA); Heather Aaron, Department of Public Health Commissioner Designee; Paul Lombardo on behalf of Commissioner Andrew Mais, Connecticut Insurance Department (CID); Yvonne Addo on behalf of Commissioner Miriam Delphin-Rittmon, Department of Mental and Health Addiction Services (DHMAS); Commissioner Deidre Gifford, Department of Social Services (DSS); Anne Foley on behalf of Secretary Melissa McCaw, Office of Policy and Management Secretary (OPM); Steven Hernandez

Other Participants:

Access Health CT (AHCT) Staff: James Michel; Robert Blundo; Susan Rich-Bye; Andrea Ravitz; John Carbone; Anthony Crowe; Glenn Jurgen; Daryl Jones; Daniel Maloney; Marcin Olechowski

A. Call to Order and Introductions

The Regular Meeting of the Connecticut Health Insurance Exchange Board of Directors was called to order at 9:00 a.m.

Vice-Chair Paul Philpott called the meeting to order at 9:00 a.m. Attendance roll call was taken.

B. Public Comment

No public comment.

C. Review and Approval of Minutes

Vice-Chair Paul Philpott requested a motion to approve the May 21, 2020 Board of Directors Regular Meeting Minutes. Motion was made by Cecelia Woods and seconded by Grant Ritter. Roll call vote was taken. **Motion passed unanimously.**

D. CEO Report

Vice-Chair Paul Philpott introduced James Michel, Chief Executive Officer, to provide a CEO Update. Mr. Michel introduced Daniel Maloney, Information Technology Director. Mr. Michel noted that despite very challenging times due to COVID-19, the organization is not complacent. Mr. Michel also provided the Board with information as to how Access Health CT (AHCT) is responding to racism and health as well as societal disparities. Mr. Michel informed the Board about a message that was sent to all the AHCT employees concerning recent developments across the country and Connecticut. Mr. Michel stressed that AHCT remains committed to dismantling racism and hatred and the organization stands firm in opposition to systems that devalue black lives. Mr. Michel noted that AHCT's foundation rests on respect, diversity, tolerance, inclusion, and six core values that are authenticity, integrity, excellence, ownership, one team and passion. Mr. Michel stressed that a lot of work remains to be done to eliminate health disparities in Connecticut.

Mr. Michel added that Access Health CT (AHCT) continues to be an important resource for Connecticut residents. Mr. Michel pointed out that from March 18 through April 17, AHCT opened a new Special Enrollment Period (SEP) to support a growing number of the uninsured Connecticut residents.

Thomas McNeill joined at 9:08 a.m.

AHCT immediately implemented a targeted communication and marketing strategy to raise awareness around qualifying life events, such as losing coverage due to a job loss. Mr. Michel emphasized that AHCT continues to be a valuable partner for many in these unprecedented times. Mr. Michel enumerated efforts that the organization is implementing to support its employee workforce, including a plan to bring some employees back to the office with their health and safety as the main concern. Mr. Michel noted that given the current uncertainty surrounding COVID-19, the earliest that employees, in a limited capacity of twenty-five percent, may be able to return to work would be the day after Labor Day. Some employees will be required to work from home for the foreseeable future. Mr. Michel expressed words of his deepest appreciation to everyone who contributes to AHCT's work in these challenging times.

E. AHCT COVID-19 Response Update

Robert Blundo, Director of Technical Operations and Analytics and Andrea Ravitz, Director of Marketing, presented the AHCT COVID-19 Response Update. Mr. Blundo provided information on system and operational initiatives that the organization worked on in May to help consumers

during the pandemic. Mr. Blundo noted that one of the most important aspects was to make sure that consumers maintain their medical coverage at a time when it is needed the most. Mr. Blundo provided statistical data on Extended Customer Verification Deadlines and COVID-19 Provisional Enrollments along with the number of Qualified Health Plans (QHP) and HUSKY enrollments. As a result, QHP enrollment is 5.6 percent higher when compared with the exact time a year prior. HUSKY enrollment has increased by 3.6 percent. Mr. Blundo explained that most of it is a result of retention, but a substantial effort has been placed on acquisition too. In addition, Mr. Blundo noted that 6,300 verifications are currently on hold for QHP enrollees and stressed that AHCT is utilizing all methods of communication to reach those consumers. Mr. Blundo explained how AHCT is actively supporting HUSKY Coverage extensions along with system enhancements to support Families First Coronavirus Response Act (FFCRA) and Coronavirus Aid, Relief, and Economic Security (CARES) Act changes.

Ms. Ravitz provided information on community outreach and advertising and media campaigns. Ms. Ravitz stated that community outreach is crucially important, especially during a time when many individuals are losing their jobs, and because of that, they are also losing employer-based healthcare coverage. Ms. Ravitz enumerated those efforts, which include, but are not limited to the partnership with the Department of Labor (DOL), participating in DOL webinars with over 1000 attendees among others. Ms. Ravitz also mentioned advertising and media campaign efforts with the focus on minority communities. Ms. Ravitz added that the marketing efforts include advertising on 16 cable networks as well as utilizing newspapers, social media channels among many others. Ms. Ravitz stated that other initiatives, such as food drives and census events are all part of these efforts and stressed that AHCT is acting proactively in reaching the most affected populations.

Ms. Ravitz outlined future efforts of the outreach and marketing campaign which will also present some challenges due to the uncertainty as to whether AHCT will be able to host in-person help sessions because of the ongoing COVID-19 crisis. Ms. Ravitz added that AHCT is currently reviewing proposals for the Navigator program for Fiscal Year (FY) 2021. Theodore Doolittle expressed his words of appreciation for all the efforts that are being done to promote AHCT activities in this time of crisis. Mr. Doolittle added that the Office of the Healthcare Advocate (OHA) created materials that guide individuals who have lost their insurance through the choices that are available to them on the OHA's website. Mr. Doolittle added that if people need additional help, they can contact OHA and a case manager will be able to assist them. Victoria Veltri expressed her words of appreciation for all of the efforts that are currently underway to provide much needed assistance to all of those individuals who need healthcare coverage.

F. Legal Update

Susan Rich-Bye, Director of Legal and Governmental Affairs, provided a Legal Update. Ms. Rich-Bye indicated that the proposed Internal Revenue Service (IRS) rule was issued on June 8th and

it issued a short proposal for fees that are paid for Direct Primary Care Arrangement and Health Sharing Ministries. Ms. Rich-Bye added that public comments to this proposed rule are due by August 10, 2020 and added that this proposed rule stems from a June 2019 Executive Order from President Trump which directed the Department of Treasury to propose new regulations to treat expenses for Primary Care Arrangements and Health Sharing Ministries as tax-advantaged medical expenses. Ms. Rich-Bye described in detail what the implementation of these rules means, including but not limited to coverage that does not cover prescriptions and hospitalizations. Ms. Rich-Bye noted that therefore, in nature, it is not comprehensive coverage. Ms. Rich-Bye added that they are not considered to be a health insurance. Ms. Rich-Bye stated that they are not regulated by the Department of Insurance therefore no guarantee exists that medical claims will be satisfied. Ms. Rich-Bye stressed that these types of arrangements do not have the same consumer protections that the health insurance products have and added that users of these services can be exposed to significant financial liabilities.

Ms. Rich-Bye reviewed the Congressional relief packages, which include the Health and Economic Recovery Omnibus Emergency Solutions Act (HEROES Act) which has \$3 trillion dollars in funding, and various programs. A proposed special enrollment period for the FFM would run for eight weeks with the coverage being retroactive to April 1. The Act includes \$25 million for marketplace outreach and enrollment activities. Ms. Rich-Bye stressed that AHCT was very proactive in providing access to healthcare coverage to the uninsured by instituting a Special Enrollment Period (SEP) in March. Ms. Rich-Bye summarized the Risk Corridor program, COBRA subsidies, and the National Testing Strategy that are part of the HEROES Act. Ms. Rich-Bye noted that once the U.S. Preventative Services Taskforce or the Advisory Committee on Immunization Practices recommends COVID-19 testing and a vaccine, they must be covered by medical insurance with \$0 cost-sharing within 15 days after the vaccine is licensed by the Federal Drug Administration (FDA). It would also provide for retroactive coverage for COVID-19 testing prior to the enactment of the Families First Coronavirus Response Act (FFCRA). Ms. Rich-Bye added that it would also provide revenue relief for medical providers who suffered financial losses due to the treatment of the COVID-19 patients and delay of other medical treatments and procedures.

Ms. Rich-Bye mentioned relief initiatives introduced by Senate Democrats that, among the most important elements, would increase Advanced Premium Tax Credits (APTC) eligibility from 400 percent to 800 percent of the Federal Poverty Level (FPL), making subsidies more generous by reducing the amount individuals are required to contribute and temporarily suspend premium tax credit reconciliation for 2020 and 2021. Ms. Rich-Bye summarized the CARES Act, which among other elements, requires health plans, including self-funded plans, to cover COVID-19 testing. This would include anti-body testing with no cost-sharing and provides for expedited coverage for testing and vaccines. Congress provided \$1 billion in funding for testing for uninsured individuals.

G. SHOP Update

John Carbone, Director of SHOP and Product Development, provided the Small Business Health Options update. Mr. Carbone noted that SHOP continues to work with brokers and small business partners across Connecticut to support business continuity and reopening efforts. Mr. Carbone stressed that SHOP wants to be the trusted advisor for small businesses' healthcare coverage needs.

Mr. Carbone noted that SHOP undertook informational efforts for brokers and small groups focused on the Payroll Protection Program and other available options available under the law and noted that about 78 percent of respondents asked for documentation in order to apply for them. Mr. Carbone added that SHOP is also reaching out to those who are not in the current book of business with this information. Mr. Carbone praised both insurance carriers for their help in keeping the clients insured.

Mr. Carbone added that SHOP promotes its business model using various techniques. They include, but are not limited to, distributing promotional small business kits to support building brand awareness as businesses reopen. Promotional materials will also be distributed to employees as well. Mr. Carbone stated that those initiatives will continue at least through the month of August and pointed out that partnerships with brokers, local chambers and associations are an important element of the outreach and promotional effort. Mr. Carbone emphasized that SHOP continues the dialogue with small business owners through the "Walk Main Street Tour" checking in with small businesses as they begin to re-open.

Mr. Carbone stated that SHOP has received four proposals for the new SHOP, Stand-Alone Dental Plans and Ancillary Products platform and pointed out that formal evaluations will begin in July with in-person presentations by respondents targeted for September 30. Mr. Carbone indicated that initiatives will begin on July 1 in terms of planning for the 2020/2021 Campaign. Mr. Carbone pointed out that SHOP is pursuing more virtual connectivity with small business owners and brokers due to the ongoing pandemic.

H. Audit Status Update

Daryl Jones, Director of Finance, provided the Audit Status Update. Mr. Jones summarized three audits and indicated that the first audit is the FY2020 Financial and Programmatic Audit which is being performed by Blum Shapiro. Mr. Jones stated that this audit commenced at the beginning of this month and is expected to be completed by the end of October 2020. Mr. Jones stated that the State of Connecticut Audit for FY 2016 and 2017 began at the beginning of June and no scheduled completion exists at this time.

Mr. Jones noted that the State-Based Marketplace Annual Reporting Tool for 2019 is an ACA requirement for all state-based exchanges. It requires Exchanges to report on eligibility and enrollment, a financial and programmatic audit as well as program integrity. Mr. Jones indicated that this audit will be completed by August 1, 2020.

Mr. Jones stressed that AHCT staff is fully engaged and in full support of these audits adding that AHCT does not expect any issues to arise from these audits.

I. Future Agenda Items

Mr. Michel enumerated future agenda items. They include the FY 2020 Audit, Open Enrollment 8 Preparedness and State-Based Marketplace Annual Reporting Tool.

J. Adjournment

Vice-Chair Paul Philpott requested a motion to adjourn. Motion was made by Anne Foley and seconded by Victoria Veltri. Roll call vote was taken. **Motion passed unanimously.** Meeting adjourned at 9:53 a.m.