

Connecticut Health Insurance Exchange Board of Directors Regular Meeting

Remote Meeting

Thursday, September 17, 2020

Meeting Minutes

Members Present:

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

Other Participants:

Access Health CT (AHCT) Staff: James Michel; Anthony Crowe; Susan Rich-Bye; Robert Blundo; Andrea Ravitz; Daniel Maloney; Daryl Jones; John Carbone; Glenn Jurgen; 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 June 18, 2020 Board of Directors Regular Meeting Minutes. Motion was made by Cecelia Woods and seconded by Anne Foley. Roll call vote was taken. **Motion passed unanimously.**

D. CEO Report

Mr. Michel provided the CEO report and began by thanking Ms. Anne Foley for her contributions to the AHCT Board of Directors and the Finance Committee where she served as chairwoman. Mr. Michel informed the Board that Ms. Foley is retiring and consequently will not serve on the Board anymore. Mr. Michel expressed his deep appreciation for Ms. Foley's dedication to serving the people of Connecticut. Ms. Foley expressed her gratitude for being able to serve on the Board.

Mr. Michel added that Access Health CT (AHCT) continues to be an important resource for Connecticut residents. He outlined AHCT's efforts in assisting the State of Connecticut in combating the COVID-19 health crisis, which included, but was not limited to, creating a Special Open Enrollment Period (SEP) for those who missed out on enrolling in affordable healthcare coverage earlier. Mr. Michel thanked Governor Lamont, the Connecticut Department of Labor, the Connecticut Department of Social Services, the Connecticut Insurance Department, the AHCT call center, AHCT's printing and technology vendors along with participating carriers, Anthem and ConnectiCare for their exceptional work in these unprecedented times.

Mr. Michel also provided the Board with information on how AHCT is responding to racism and health as well as societal disparities. Mr. Michel emphasized that it is part of the core mission of the Exchange. Mr. Michel explained to the Board how the organization responds to various challenges that are associated with working remotely. Mr. Michel praised the work of all of AHCT's employees who are always very dedicated to achieving organization's goals and customer satisfaction. Mr. Michel noted that the Senior Leadership Team (SLT) meets weekly with the entire company to keep everyone updated on issues affecting the Exchange. In addition, the SLT meets every morning to discuss matters affecting the organization. Mr. Michel stressed that the leadership is always concerned about the well-being of its employees during the pandemic.

E. Connecticut Insurance Department Presentation: 2021 Rate Review

Paul Lombardo, Connecticut Insurance Department (CID) Director of the Life and Health Division, presented the 2021 Rate Review. Mr. Lombardo reviewed the factors that impacted the rates for the upcoming plan year.

Commissioner Deidre Gifford arrived at 9:11 a.m.

Mr. Lombardo noted that there were 10 companies with 14 rate filings, 4 filings in the individual market, and 10 of them on the small group market. AHCT has two carriers participating in both the individual and small group markets. Combined, the small business and individual markets have about 214,600 people enrolled in Connecticut. Mr. Lombardo outlined items that contributed to the 2021 rate increases, which include an annual trend, otherwise known as a

medical inflation which has risen 8.8 percent as an average and experience adjustments. Mr. Lombardo added that two participating carriers had requested up to 2.5 percent increases due to the projected impact of COVID-19 in 2021 including pent-up demand and the potential of a vaccine. Mr. Lombardo pointed out that as the small group market continues to shrink, the overall risk of the fully insured small group market continues to deteriorate.

Mr. Lombardo noted that in its deliberations, the Connecticut Insurance Department (CID) zeroed out the utilization aspect given that starting in March, many of the previously scheduled elective procedures were postponed, emergency services decreased and were limited. In June and July, utilization of those elements began increasing again. Mr. Lombardo informed the Board that the Anthem Health Plans increase on-Exchange for the individual market was approved at the level of 1.9 percent while ConnectiCare Benefits Inc. was decreased by 0.1 percent. Mr. Lombardo added that for on-Exchange small group, Anthem was approved for a 2.6 percent increase while ConnectiCare Benefits Inc. was approved for a 4.1 percent decrease. Mr. Lombardo also spoke about rates for carriers offering plans off-Exchange.

Paul Philpott inquired about the continued declining fully-insured population and whether it has something to do with the current pandemic. Mr. Lombardo pointed out that this trend will continue, and the major reason lately would be the impact of COVID-19. Mr. Philpott followed-up with a question pertaining to potential deterioration of the block that would impact rates. Mr. Lombardo noted that it is a continued concern.

F. AHCT COVID-19 Response Update

Anthony Crowe, Chief Operating Officer, presented the AHCT COVID-19 Response Update. Mr. Crowe noted that AHCT focuses on keeping as many Connecticut residents insured as possible at the time of the pandemic. Mr. Crowe reviewed the initiatives that are aimed at helping customers in enrolling and maintaining coverage, including a verification deadline extension that is currently benefitting almost 6,000 customers. Mr. Crowe stressed that AHCT wants to ensure that no one loses much needed coverage while aiding in the submission of required documents. Mr. Crowe added that AHCT also supports HUSKY coverage extensions through various means. AHCT is also continuously updating and enhancing systems, which include incorporation of the Public Health Emergency within the eligibility rules engine. Mr. Crowe described new features that were implemented and noted that currently, the total Qualified Health Plan (QHP) enrollment stands at 100,696 which is a 4.2 percent increase when compared to the same time last year. HUSKY enrollment stands at 792,514, which is 9.3 percent higher when compared to the same period in 2019.

G. Open Enrollment 8 Readiness Update

Robert Blundo, Director of Technical Operations and Analytics, presented the Open Enrollment 8 Readiness Update. Mr. Blundo noted that the upcoming Open Enrollment (OE) will obviously look somewhat different from prior ones due to the pandemic, however, as in previous years, the main focus will be in the areas of enhanced content delivery, acquisition, win-back and retention efforts. Other areas include continuous improvements in customer experience and adapting customer support.

Mr. Blundo noted that for this OE period to be successful, the OE Readiness Workgroup has been assembled to make sure that the customer experience is exceptional. Mr. Blundo outlined the timeframe for all major events occurring before, during and after the OE period, which will run from November 1, 2020 to December 15, 2020. Mr. Blundo went on to describe OE challenges as well as the mitigating factors that may be implemented, which include changes in customer plan selections, consumer confusion due to changes in the law or misinformation as well as the continuation of the Public Health Emergency due to the coronavirus pandemic. Mr. Blundo went on to describe the new features for the 2021 OE period that include a fully optimized experience for mobile users, a brand new homepage experience, new customer service capabilities as well as new shopping and decision support tool features along with the overall improved customer experience. Mr. Doolittle expressed his appreciation for the entire Access Health CT staff for introducing these innovations, and inquired whether progress exists on incorporating information that would include all possible out of pocket costs for the consumer for a plan that he/she will end up selecting. Mr. Blundo noted that progress exists and explained in detail how the implementation of this feature is being developed and pointed out that introduction of this feature may take place in approximately one and a half years.

Discussion ensued around incorporating potential plan utilization into the plan selection process. Mr. Michel added that a comprehensive system of updates to the Board will be developed, with one of the first ones being an Information Technology (IT) Update which will detail all of the IT projects. Mr. Philpott echoed Mr. Doolittle's appreciation and noted that challenges facing the Exchange are also significant.

H. Marketing and Community Outreach Update

Andrea Ravitz, Director of Marketing and Communications, provided the Marketing and Community Outreach Update. Ms. Ravitz indicated that communication and engagement in a lot of communities plays a crucial role in providing information about AHCT's services to the public at this unprecedented time. Ms. Ravitz pointed out that AHCT developed partnerships with many organizations, such as places of worship, supermarkets, Census events and others to be able to better inform the public about health insurance options that are available especially for those impacted by the pandemic. Ms. Ravitz stressed the importance of the strong partnership that

AHCT has developed with the Connecticut Department of Labor following furloughs and layoffs. Ms. Ravitz emphasized the significance of AHCT's mission to the public. Ms. Ravitz pointed out that a survey was conducted, and a large number of respondents indicated that they would still like to use in-person assistance during the OE period. Currently, AHCT is putting together a plan with locations for in-person assistance where all of the safety measures and protocols would be in place. Ms. Ravitz informed the Board that two organizations have been chosen to be a part of the Navigator Program to assist during not only during the OE period, but also serve as a long-term partnership adding that community outreach efforts will include, as in prior years, a community summit, webinars and healthy chats among others.

Commissioner Deidre Gifford left at 10:12 a.m.

Ms. Ravitz continued and described the advertising and communication efforts that, among many elements, will include focusing on acquisition, win-back and retention of customers. Ms. Ravitz detailed the OE campaign advertising techniques and modes of communication, which also includes a new design of the homepage with an easier method of accessing pertinent information as well as various media campaign efforts.

Cecelia Woods inquired about the changes of the redesigned Navigator Program. Ms. Ravitz stated that one of the biggest changes in the Navigator Program as compared with prior years is that they will not only help to enroll customers but will provide more educational assistance about services that AHCT provides. Ms. Ravitz followed-up with a summarization of the OE activities that are taking place now and in the future. Ms. Ravitz pointed out one of the major differences is that enrollment fairs that will be done strictly online. Mr. Michel stated that one of the biggest challenges this year pertains to those customers who always utilized the in-person assistance. Mr. Michel emphasized that AHCT is working diligently to make sure that these customers continue to have an in-person assistance available to them.

I. Legal Update

Susan Rich-Bye, Director of Legal and Governmental Affairs, provided the Legal Update. Ms. Rich-Bye indicated that oral arguments in the California v. Texas Supreme Court case are scheduled for November 10, 2020 and the decision will come out sometime in 2021. Ms. Rich-Bye stated that all briefs have been filed for this case. Ms. Rich-Bye reviewed the parties to the litigation, including the Texas Attorney General and Governor along with numerous other Republican Attorneys General and Governors, two individuals and the Trump Administration; and the California Attorney General and Governor along with a coalition from the Democratic states, including Connecticut and the United State House of Representatives are defending the ACA. Numerous other stakeholders on both sides have filed briefs as well. Ms. Rich-Bye provided a background of the case and stated that in December of 2018, the lower district court decided that the entire ACA was unconstitutional because the penalty for not having health insurance

was zeroed out. The Appeals Court partially affirmed the lower court ruling that the mandate with \$0 penalty is unconstitutional, however, the Court also remanded the case back to trial court to review provisions of the ACA and determine whether each provision is severable from the mandate. A coalition of 21 Democratic Attorneys General and Governors, including Connecticut and the House of Representatives, appealed to the Supreme Court of the United States and asked for expediated review for the Court to hear the case. The Court denied the request and the case is moving forward with the current schedule.

Ms. Rich-Bye explained the new rule on separate billing for non-Hyde amendment abortion services. Ms. Rich-Bye added that based on the Hyde amendment, federal dollars cannot be used to fund those services except in the case a rape, incest, or if the life of the mother is in danger. The ACA has a provision which states that for the plans that cover those services, the carriers must provide a separate bill for this coverage. Ms. Rich-Bye explained that previously, the carriers were able to print one bill, but that line item had to be specifically stated for those services so that no APTCs or CSRs could be used for that purpose. The new rule requires carriers to create a completely separate bill for the non-Hyde amendment abortion services, but they can be inserted into one envelope if the bill is sent in the mail. For electronic bills, the carrier must send two separate electronic bills. The new billing rule was supposed to go into effect in October. Planned Parenthood of Maryland and four marketplace enrollees filed a lawsuit against Health and Human Services (HHS) in District Court in Maryland. Ms. Rich-Bye stated that Federal District Court in Maryland vacated and enjoined separate-billing rule for abortion services and approved a class action lawsuit. The Court found that separate-billing rule for non-Hyde abortion services and 6-month implementation period violated the Administrative Procedures Act.

Ms. Rich-Bye went on to describe coverage for COVID-19 testing as it relates the Families First Coronavirus Response Act (FFCRA) and the Coronavirus Aid, Relief, and Economic Security (CARES) Act.

J. Future Agenda Items

Mr. Michel briefly summarized Future Agenda Items. They include:

- Consumer Impact Study
- OE8 Update
- Health Disparities Study
- Subsidiary
- Mid-Year CEO Report
- Audits
- Information Technology Development Update/Report

K. Executive Session

Vice Chair Paul Philpott requested a motion to go into the Executive Session to discuss pending claims/litigation pursuant to C.G.S. § 1-200(6)(B). Motion was made by Theodore Doolittle and seconded by Grant Ritter. Roll call vote was taken. **Motion passed unanimously.**

L. Adjournment

Vice-Chair Paul Philpott requested a motion to adjourn. Motion was made by Anne Foley and seconded by Thomas McNeill. Roll call vote was taken. **Motion passed unanimously**. Meeting adjourned at 10:42 a.m.