



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

Remote Meeting

Thursday, November 19, 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 on behalf of Acting Commissioner Deidre Gifford; 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); Gregory Messner on behalf of Secretary Melissa McCaw, Office of Policy and Management Secretary (OPM); Michael Gilbert on behalf of Commissioner Deidre Gifford, Department of Social Services (DSS); Victoria Veltri; Matthew Brokman

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. Swearing-In New Board Member

Susan Rich-Bye, Director of Legal and Governmental Affairs, administered the oath to new appointed Board Member, Matthew Brokman.

D. Review and Approval of Minutes

Vice-Chair Paul Philpott requested a motion to approve the October 15, 2020 Board of Directors Regular Meeting Minutes. Motion was made by Cecelia Woods and seconded by Victoria Veltri. Roll call vote was ordered. Matthew Brokman abstained. **Motion passed.**

D. CEO Report

James Michel, Chief Executive Officer, provided the CEO Report. Mr. Michel discussed the successes and challenges that Access Health CT (AHCT) addressed in 2020. Mr. Michel stressed that the COVID-19 global pandemic still impacts everyone's lives which includes, but is not limited to unemployment, remote schooling, illness or the loss of a family member. Mr. Michel emphasized that it is the right time to show support, compassion and empathy for those who are affected the most. Mr. Michel pointed out that AHCT works even harder to help families and businesses in need to obtain quality and affordable healthcare coverage and added that since this year marks the tenth anniversary of the passage of the Affordable Care Act (ACA), AHCT focuses on achieving its core mission to increase the number of insured residents in the state and help address health disparities.

Mr. Michel stressed that since the pandemic began, AHCT has been a valuable resource to the residents of Connecticut in dealing with this unprecedented situation. Mr. Michel expressed words of appreciation to AHCT's partners including the Department of Labor (DOL), Department of Social Services (DSS), Connecticut Insurance Department (CID), Governor Ned Lamont and two participating carriers, ConnectiCare and Anthem. Mr. Michel officially welcomed Mr. Matthew Brokman as the newest Board members, appointed by the Speaker of the State House of Representatives, Joe Aresimowicz.

Mr. Michel informed the Board that he visited a few of the in-person enrollment locations throughout the state where Connecticut residents can enroll free of charge in affordable and quality healthcare coverage. Mr. Michel stressed that all of them adhere to the strict COVID-19 protocols and all customers are seen by appointment-only. Mr. Michel noted that AHCT also offers virtual assistance and enrollment help is offered in both English and Spanish.

Mr. Michel added that AHCT kicked-off virtual educational sessions called Healthy Chats and pointed out that the organization will join a coalition of states and other national organizations in a new initiative called *Get Covered 2021* to promote enrollment in healthcare coverage.

Mr. Michel reviewed actions taken by AHCT to assist its own employees during these challenging times, including but not limited to, inviting professionals to discuss professional assistance that

is available to them. Mr. Michel stated that AHCT is very proud about the progress that the organization has made this year and will continue to meet any challenges in the future.

E. COVID-19 Update and Open Enrollment 8 Update

Robert Blundo, Director of Technical Operations and Analytics and Andrea Ravitz, Director of Marketing, provided the COVID-19 and Open Enrollment 8 Update. Mr. Blundo presented the status update of the Public Health Emergency (PHE). He pointed out that the PHE coverage extension end date currently remains January 31, 2021 and stated that over 111,000 individuals with HUSKY coverage are extended through January. Mr. Blundo added that verification extensions continue for enrollees for the duration of the PHE. Qualified Health Plan (QHP) customers, in particular, will be a target of a campaign to remind them to submit verification documents. Planning is underway to prepare for 2021 updates on income reporting guidance and future efforts to decommission extension changes.

Mr. Blundo provided statistical data on the mid-November status of the OE and future actions that AHCT will be taking to automatically renew 75,000 enrollees into a 2021 policy, which is scheduled to be completed by November 25. Additional communication will be established with 11,000 enrollees who are not set to be automatically renewed. AHCT will advise them to manually enroll to ensure that they do not lose medical insurance coverage. Mr. Blundo summarized transitions between HUSKY and QHP populations. Mr. Blundo provided comparison data between OE7 and OE8 two weeks since the beginning of the OE. According to the 2021 shopping trends, the most popular plans for 2021 are silver plans with over 55 percent of enrollees choosing them. Mr. Blundo elaborated that nearly 50 percent of 2020 enrollees are expected to have no increase or lower monthly net premium in 2021. Mr. Blundo pointed out that two weeks into OE, among those customers who chose to fill out an enrollment experience survey, seventy percent were satisfied with the service received. Mr. Blundo emphasized that AHCT will be reaching out to the remaining thirty percent to determine what the organization should do to improve their enrollment experience.

Andrea Ravitz, Director of Marketing, provided the Pre-Open Enrollment outreach efforts. Ms. Ravitz emphasized that it is crucially important to have an AHCT presence in communities around the state. Ms. Ravitz pointed out that coordination with a strategic partner, such as the Connecticut Department of Labor (DOL), is crucial considering the numerous layoffs around the state. Ms. Ravitz told the Board that AHCT is visible with its messaging at Food Share, flu clinics, testing sites, supermarkets, faith-based organizations and many others.

Ms. Ravitz elaborated that AHCT conducts Healthy Chats where members of the public can obtain information about health insurance options. AHCT also held a Community Summit with over 240 participants. Community partners are extremely important to the successful delivery of the organization's message. Ms. Ravitz went on to describe all the possible options that customers

have in enrolling in affordable, quality health insurance. Ms. Ravitz also enumerated the six enrollment centers where in-person help is available. Ms. Ravitz summarized correspondence that is sent to certain households that need to take action pertaining to the continuation of their health insurance coverage.

Ms. Ravitz described various platforms where AHCT has a presence which include, digital, social, and print among others. Messaging is also presented at gas stations as well as at public transport. Cecelia Woods commended AHCT for organizing the Community Summit. Theodore Doolittle inquired about the breakdown between calls and the live chats. Mr. Doolittle also asked about trends between live chats and calls over the last few years. Mr. Blundo noted that there are two different forms of live chats, one form is a secure chat with individuals who already have their accounts with AHCT, and an unsecured chat for people who have generic questions about services being offered. Mr. Blundo noted that AHCT has a dedicated team who is assigned to those chat functionalities. Mr. Blundo explained that the chat volumes are increasing every year. Thomas McNeill asked about any possible unexpected feedback received from the multi-platform outreach. Ms. Ravitz stated that it is too soon to tell. Certain messaging evolves every year, but one element remains consistent involves raising awareness and encourages residents to take action. Mr. Michel stressed that messaging is very targeted. Victoria Veltri inquired about tracking individuals who have tested positive for COVID-19 and then enrolled through AHCT. Ms. Ravitz noted that AHCT does not track these individuals, however, during one of the Focus Groups that was conducted in August, there were individuals who have lost their employment and thus medical coverage due to the pandemic. Ms. Ravitz added that this Focus Group was able to provide AHCT with some important information.

F. Finance Update

Daryl Jones, Director of Finance, presented the Fiscal Year 2020 Year End Budget Report. Mr. Jones indicated that at the beginning of Fiscal Year (FY) 2020, AHCT had a budget of \$53,634,612 and at the end of the FY 2020, AHCT ended up utilizing \$52,046,546. Mr. Jones indicated that it resulted in a variance of \$1,588,065 with the main reason being the Department of Social Services (DSS) shared cost which resulted in \$1,527,401. Mr. Jones itemized FY2020 Budget vs. Actuals. Mr. Jones announced that AHCT had vacancy savings in salaries and fringe benefits as well as contractual and maintenance savings. The maintenance savings were redirected to IT enhancements. Mr. Jones noted that the AHCT Operating Budget was \$60,664 under budget and related that revenues came in slightly above projections due to higher interest rates for most part of the Fiscal Year. Mr. Jones went on to describe the projects funded from the operating budget and carry-forward projects from FY2020 to FY2021. Mr. Jones elaborated that projects were initiated and funded in FY 2020 but were not completed by the end of the Fiscal Year and are still ongoing in FY 2021. Mr. Jones pointed out that the \$3.196 million carry-forward to FY 2020 remains on budget and all of the projects are expected to be completed by end of FY 2021.

Mr. Jones described the three strategic initiatives that AHCT is focusing on which include IT Investment, Cybersecurity and Health Disparities. Mr. Jones stressed that all of them are designed to support the organization's 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 a health plan and provider that give them the best value.

Mr. Jones continued with the presentation about the FY 2021 Quarter 1 Budget Report. Mr. Jones stated that total AHCT budget for the first quarter of FY 2021 is \$11,498,051 and the actuals at this time are \$10,202,305 with a variance of \$1,295,746 adding that AHCT expects to spend \$55,132,676 for the FY 2021 Budget. Mr. Jones went on to describe the Capital Improvement Plan projects that are financed from the reserves, with AHCT's portion amounting to \$504,000 and the DSS shared cost equaling \$3,096,000. The total amount for the Capital Improvement Plan projects is \$3.6 million. Those two projects are still pending with the DSS allocation equaling 86 percent of the cost.

Mr. Jones itemized revenues, expenses, total operating expenses and AHCT expenditures that are shared with DSS and elaborated that AHCT projected FY 2021 year-end reserve is expected to be \$22.2 million which is equal to approximately 7.6 months of operating funding. Mr. Jones assured the Board that AHCT is tracking COVID-19 related expenses and currently, they are not having an impact on the budget. Mr. Philpott inquired about the expectation of total revenue for the organization. Mr. Michel pointed out that the projected income may be impacted by the assessment trends.

Vice-Chair Paul Philpott requested a motion to approve the Fiscal Year 2021 Quarter 1 Finance Report as presented. Motion was made by Victoria Veltri and seconded by Thomas McNeill. Roll call vote was ordered. **Motion passed unanimously.**

G. Audit Update

Mr. Jones presented the Audit Update which included FY 2020 Audited Financial Statements. Mr. Jones indicated that the Audit Committee approved the FY 2020 Audited Financial Statements as well as the FY 2020 Programmatic Audit Report that were presented by auditors Blum Shapiro. Mr. Jones emphasized that both of these reports were clean audits and no issues were encountered.

Vice-Chair Paul Philpott requested a motion to the Fiscal Year 2020 AHCT Audited Financial Statements as presented. Motion was made by Victoria Veltri and seconded by Thomas McNeill. Roll call vote was ordered. **Motion passed unanimously.**

Paul Lombardo left at 9:58 a.m.

Vice-Chair Paul Philpott requested a motion to approve the Fiscal Year 2020 Programmatic Audit Report as presented. Motion was made by Cecelia Woods and seconded by Thomas McNeill. Roll call vote was ordered. **Motion passed unanimously.**

Susan Rich-Bye, Director of Legal and Governmental Affairs, provided an update on the State-Based Marketplace Annual Reporting Tool (SMART) audit that AHCT submitted to the Centers for Medicare and Medicaid Services (CMS). Ms. Rich-Bye indicated that the Affordable Care Act (ACA) requires exchanges to keep an accurate accounting of all activities and expenditures and to monitor and report to the Department of Health and Human Services (HHS) on Exchange-related activities, complete an annual report and engage an independent auditor to perform an annual independent financial and programmatic audit to ensure compliance with regulations and standards.

H. Legal Update

Ms. Rich-Bye presented the Legal Update. Ms. Rich-Bye provided the Board with a summary of a Supreme Court case *California vs. Texas*. Ms. Rich-Bye noted that there are three issues before the Court -- whether the plaintiffs have a standing to sue; whether the individual mandate continues to be constitutional; and, if the mandate is found to be unconstitutional, is it severable from the law so the law can stand on its own without it. Ms. Rich-Bye observed that most of the justices seemed to have been supportive of severability. Ms. Rich-Bye stated that the justices can decide if the mandate is constitutional or unconstitutional, and, if it is the latter, whether they can sever it and maintain the other provisions of the law. Ms. Rich-Bye stated that that Texas Solicitor General encouraged the justices that if the ACA were deemed to be invalidated, he supports issuing a stay until Congress finds an equitable solution. Ms. Rich-Bye also listed the potential ACA/Market changes under the incoming Biden/Harris Administration that include, but are not limited to, restoring funding for marketing and outreach and limiting access to short-term limited duration/association plans among others.

I. Future Agenda Items

Mr. Michel listed future Agenda items:

- Information Technology Development Update/Report
- 2022 Standard Plan Designs
- OE8 Update
- Health Disparities Study
- Subsidiary
- Mid-Year CEO Report

J. Adjournment

Vice-Chair Paul Philpott requested a motion to adjourn. Motion was made by Victoria Veltri and seconded by Thomas McNeill. Roll call vote was ordered. **Motion passed unanimously.** Meeting adjourned at 10:11 a.m.