

Connecticut Health Insurance Exchange Board of Directors Regular Meeting

Remote Meeting

Thursday, November 18, 2021 Meeting Minutes

Members Present:

Charles Klippel (Chair); Paul Philpott (Vice-Chair); Claudio Gualtieri on behalf of Melissa McCaw, Secretary, Office of Policy and Management (OPM); Grant Ritter; Sean King on behalf of Theodore Doolittle, Office of the Healthcare Advocate (OHA); Cecelia Woods; Thomas McNeill; Paul Lombardo, on behalf of Andrew Mais, Commissioner, Connecticut Insurance Department; Yvonne Addo on behalf of Nancy Navarretta, Acting Commissioner, Department of Mental and Health Addiction Services (DHMAS); Victoria Veltri; Manisha Juthani, Commissioner, Department of Public Health (DPH); Matthew Brokman; Deidre Gifford, Commissioner, Department of Social Services (DSS)

Other Participants:

Access Health CT (AHCT) Staff: James Michel; Anthony Crowe; Susan Rich-Bye; Robert Blundo; Caroline Lee Ruwet; Daryl Jones; John Carbone; Glenn Jurgen; Daniel Maloney; Tammy Hendricks; 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.

Chair Charles Klippel called the meeting to order at 9:00 a.m. Attendance roll call was taken.

B. Public Comment

No public comment.

C. Votes

Chair Charles Klippel requested a motion to approve the October 21, 2021 Regular Meeting Minutes. Motion was made by Victoria Veltri and seconded by Paul Philpott. Roll call vote was ordered. **Motion passed unanimously.**

Chair Charles Klippel requested a motion to permanently appoint the Commissioner of the Department of Mental and Health Addiction Services to be an ex-officio member of the Audit Committee and to permanently appoint the Commissioner of the Connecticut Insurance Department to be an ex-officio member of the Strategy Committee. Motion was made by Victoria Veltri and seconded by Thomas McNeill. Roll call vote was ordered. **Motion passed unanimously.**

D. CEO Report

James Michel, Chief Executive Officer, presented the CEO Report. Mr. Michel stated that the Council for Affordable Health Coverage and the Health Benefits Institute conducted a joint survey to assess the online customer experience for all public exchanges and this month released its report stating that Access Health CT was ranked number one. Mr. Michel emphasized that this is particularly meaningful right now since AHCT completed many enhancements to the website in preparation for Open Enrollment (OE). Mr. Michel added that recognition from these two, independent organizations is also compelling. Mr. Michel stressed that these organizations are focused on addressing the rising cost of healthcare in our country – and the ways that Americans can make informed financial choices that best meet their needs. Mr. Michel thanked the Board for helping to guide AHCT to fulfill its mission.

Mr. Michel thanked Robert Blundo, and his team, along with the many others at AHCT that work every day to make it easier for Connecticut residents to choose a health insurance plan that is best for them and their families.

Mr. Michel presented a brief overview of the strategic initiatives that were discussed at the recent Strategy Committee meeting. Mr. Michel stated that it was a robust presentation, met with enthusiasm and appreciation for the deeper context adding that AHCT continues to work on the framework for the Subsidiary and is working through its Future Growth and Success Plan. Mr. Michel noted that these two strategic initiatives are closely linked as AHCT looks toward the future. Mr. Michel stated that AHCT is making more plans to address health disparities.

Chairman Charles Klippel and Victoria Veltri congratulated AHCT for the achievement of being number one in online customer experience for all public exchanges.

E. Procurement Policies (Vote)

Susan Rich-Bye, Director of Legal and Governmental Affairs, presented the proposed revisions to the existing procurement policies.

Ms. Rich-Bye stated that there are two AHCT procurement policies with proposed revisions for the procurement of goods and services. Ms. Rich-Bye explained why those policies need to be amended stating that in the Fiscal Year (FY) 16 and FY17 Annual Audit Report from the Auditors of Public Accounts of the State of Connecticut, there was a recommendation that the Exchange's procurement policies were broad and lacked criteria for determining appropriate reasons for awarding sole source contracts. Ms. Rich-Bye noted that it relates to both of the policies for procurement of real and personal property, and also for personal services. Ms. Rich-Bye added that the policies provide that contracts shall be awarded by the Exchange in such a manner, including the basis for sole-source procurement as the Chief Executive Officer determines to be appropriate and in the best interest of the Exchange.

For any contract for personal services, requiring an expenditure of over 75,000 dollars during a 12-month period or for a particular project, wherever possible the policy provides that the contract be awarded on the basis of the competitive process which includes the solicitation of proposals, from at least three qualified parties.

Ms. Rich-Bye noted that AHCT has been following certain requirements for any sole source procurements, however, the language has not been part of AHCT's procurement policies. Ms. Rich-Bye stated that based on the recommendation of the State Auditors, AHCT is proposing to make revisions to those policies by outlining the four categories that the Exchange would permit a sole source award of a contract: (1) there be an immediate need of an emergency situation for services that are needed in three weeks or less and the services are required due to an emergency that exists that will adversely affect the Exchange's operations; (2) specialized skills and services for which there is only one documented accepted service such as transactions involving vendors that have unique services; or skills due to the existence of patents or certain proprietary rights; (3) because of unusual conditions and contingencies that could not be reasonably foreseen or because of unusual trade or market conditions and, (4) a scenario in which AHCT is in receipt of less than three proposals. Ms. Rich-Bye added that there are also two very minor wording revisions listed in the proposed revisions. Ms. Rich-Bye asked that the Board approve posting of these proposed revisions in the *Connecticut Law Journal* for 30 days of public comment, prior to final review and adoption by the Board of Directors.

Chair Charles Klippel requested a motion to approve posting of the proposed revisions to the Procurement Policies in the Connecticut Law Journal for 30 days of public comment. Motion was made by Victoria Veltri and seconded by Paul Philpott. Roll call vote was ordered. **Motion passed unanimously.**

F. Open Enrollment 9 Update

Robert Blundo, Director of Technical Operations and Analytics presented the Open Enrollment 9 Update. Mr. Blundo provided key metrics for the beginning of this year's Open Enrollment period. Mr. Blundo noted that as of November 16, over 10,000 enrollees purchased a 2022 policy while over 96,000 are still yet to be renewed.

Claudio Gualtieri left at 9:27 a.m.

Mr. Blundo stated that AHCT had over 82,000 website visitors since November 1, which is a 9 percent higher volume of new customers when compared to last year.

Mr. Blundo also provided statistical data on call center calls and chats and in-person assistance. Mr. Blundo added that 64,000 households are scheduled to be automatically renewed into a 2022 policy; the step should be completed by November 23.

Commissioner Deidre Gifford arrived at 9:30 a.m.

Mr. Blundo emphasized that those individuals who have not chosen to be automatically renewed would have to pick a plan themselves. At that point, AHCT will turn its efforts toward retaining them as customers in an effort to continue their insurance coverage in 2022. Mr. Blundo provided detailed information on the OE9 results as of November 16, 2022 as compared to the same time frame with OE8. Mr. Blundo stated that the eligibility for the Premium Tax Credits (PTCs) increased by approximately 10 percent as compared to last year and the percentage of enrollees changing plans is about 7 percent higher.

Mr. Blundo stated that nearly 10 percent of 2022 enrollees are selecting CICI plans, which is a new participating carrier on the Exchange. Mr. Blundo emphasized that seventy-six percent of those who participated in the end of enrollment survey indicated that they are either satisfied or very satisfied with their online enrolling experience.

Mr. Blundo added that over 45 percent of 2021 enrollees are expected to have no increase or lower monthly net premiums in 2022. Paul Philpott inquired about the increased number of enrollees who qualified for Financial Assistance (FA) during OE9, an increase of 11 percent from OE8. Mr. Blundo stated that it equals roughly 10,000 more individuals who qualify at least for some FA. Matthew Brokman inquired about the enrollment goal for OE9. Mr. Blundo stated that the aim is to have a 5 percent increase in enrollment over OE8. Mr. Brokman followed-up with a question about the Exchange's enrollment goal for enticing those individuals who are currently purchasing medical coverage off-Exchange or are uninsured. Mr. Blundo stated that the goal is 5,000, who are mostly uninsured or currently off-Exchange. Chair Charles Klippel expressed his

interest in seeing the trends in the percentage of renewals and the plans those enrollees are switching to as well as the SHOP enrollment trends.

G. Marketing Update

Caroline Lee Ruwet, Director of Marketing, provided the Marketing Update. Ms. Lee Ruwet stated that the Marketing Team is concentrating on the marketing of the Covered Connecticut Program. She outlined various efforts that are part of this ongoing effort which began in June. Ms. Lee Ruwet noted that some of these initiatives, such as website and organic social media which started in June, are ongoing while others have specific dates for initiation and completion. Ms. Lee Ruwet noted that these intensification efforts are based on data and proper timing.

Ms. Lee Ruwet provided an overview of all those initiatives which include, among many others, press conferences, a mass-media advertising campaign and multi-cultural advertorials. Ms. Lee Ruwet elaborated on timing and duration of these elements.

Ms. Lee Ruwet discussed the multi-faceted OE Advertising Campaign. She remarked that the multi-platformed campaign includes numerous elements, such as digital search, social, print, radio which also includes streaming, direct mail, text messaging, emails, blogs as well as various out-of-home items, such as billboards. Matthew Brokman inquired whether AHCT partners with its participating carriers pertaining to the marketing strategy. Mr. Michel added that historically, AHCT has always worked very closely with the carriers. ACHT works to coordinate marketing and outreach efforts to make sure that there is no overlapping or waste of resources.

Brief discussion ensued around marketing and outreach efforts and coordinating those actions with the carriers as well as the State of Connecticut, particularly in promoting the Covered Connecticut program. Mr. Philpott inquired about the main premise of the Covered Connecticut Program. Susan Rich-Bye, Director of Legal and Governmental Affairs stated that the program, which is administered by the State of Connecticut with enrollment only available through AHCT, is designed to help certain eligible consumers by covering their monthly premiums, in addition to the federal APTCs and also their cost-sharing

Ms. Lee Ruwet presented two Public Service Announcements (PSAs). Ms. Lee Ruwet briefly outlined the OE Public Relations efforts. Victoria Veltri stated that Covered Connecticut is free for certain income brackets and inquired whether anyone in those focus groups was in those income brackets. Ms. Lee Ruwet stated that focus groups are a good pulse check, but not fully representative of the population. However, an attempt will be made to obtain this information.

H. Outreach Update

Tammy Hendricks, Director of Health Equity and Outreach, presented the Outreach Update. Ms. Hendricks stated that AHCT is working with consumers and community partners to raise awareness of the program trying to reach the hardest to reach customers. Ms. Hendricks noted that the outreach contains information on the Covered Connecticut program utilization. Ms. Hendricks added that Certified Applications Counselors (CACs) and brokers participated in trainings to learn about the program. Ms. Hendricks stated that information about the program was incorporated into the Healthy Chat presentations and meetings with community partners as well.

Ms. Hendricks emphasized that other important topics, such as the American Rescue Plan (ARPA), were included in those presentations and trainings and added that Navigators and AHCT ambassadors also learned about them as well. Ms. Hendricks elaborated that AHCT is working with 1600 community partners. Ms. Hendricks briefly described the outreach tour events which covered 26 towns, concentrating mostly in larger cities with higher uninsured rates with a special focus on vulnerable communities. Ms. Hendricks conveyed that AHCT has over 100 CACs and over 400 brokers statewide to assist consumers in enrolling.

Ms. Hendricks praised community partners, state agencies, such as the Department of Public Health (DPH) and the AHCT team for the in-person assistance events that are successful. Mr. Brokman inquired whether AHCT partners with school districts. Ms. Hendricks stated that AHCT performs outreach events throughout the year with various school districts, but not enrollment, partially due to staffing issues. Paul Philpott fully supported the in-person outreach events and expressed his hope that once the pandemic is over, the in-person assistance will be expanded. Mr. Michel emphasized that it is one of the reasons why AHCT is initiating the Broker Academy, which will be critical by recruiting, developing, and training individuals in urban communities where the uninsured and the mistrust is the highest. Mr. Michel added that it will help AHCT address some of these challenges.

I. Finance Update

Daryl Jones, Director of Finance, presented the Finance Update, which consisted of the Fiscal Year (FY) 2021 Budget Report, FY 2022 Adjusted Budget as well as Operating and Capital Improvements Budget.

Mr. Jones stated that in order to implement the required changes for the American Rescue Plan Act, additional funding was approved for marketing, operations and technology for the remaining of FY 2021 and 1st quarter of FY 2022. Mr. Jones added that \$307,000 of the technology costs are anticipated to be reimbursed through the Centers for Medicare and Medicaid Services (CMS) Grant awarded to AHCT in September of 2021. Mr. Jones added that FY 2021 budget ended in \$1,354,122 under budget. Mr. Jones indicated that the savings were achieved mostly due to the pandemic and due to timing of filling vacancies.

Mr. Jones provided a brief overview of the vaccination initiative projects in cooperation with the DPH. Mr. Jones pointed out that all amounts have been or will be fully reimbursed by DPH. Mr. Jones emphasized that AHCT has been reimbursed 92 percent of the \$4.9 million that was spent from reserves. Mr. Jones told the Board that three carry-forward projects were initiated in FY 2021 and will continue into FY 2022. Mr. Jones added that the \$1.05 million carry-forward to FY 2022 remains on budget and all the projects are expected to be completed by end of FY 2022.

Mr. Jones described the FY 2022 Operating Budget 1st Quarter, which is under budget in the amount of \$1,836,494 and the proposed FY 2022 Quarter 1 Adjusted Budget is increased by \$1,176,543, which is due to timing. Mr. Jones provided information on the CMS Grant Funding in the amount of \$1.1 million by CMS to fund certain modernization initiatives and emphasized that AHCT has been approved to fund six projects with this grant.

Mr. Jones stressed that in order to implement the required changes for the Covered Connecticut Program, \$643,000 in additional funding is needed for marketing, outreach and technology updates. Mr. Jones also commented that in addition to this funding, AHCT has committed internal resources such as Marketing, Legal, Operations, Technical Operations and Analytics as well as Finance in the amount of over 800 hours. Mr. Jones stated that the reserve projection at the end of FY 2022 is \$20,108,559, which equals 7.3 months of operating budget.

Commissioner Deidre Gifford inquired whether the Finance Department discussed the cost allocation methodology for the administrative costs pertaining to the Covered Connecticut Program with DSS. Commissioner Gifford added that for FY 2022 there is no associated Medicaid benefit, and it may not apply. The assumption for the State is that the Section 1115 waiver will get approved for the next FY, and the out-of-pocket cost will be covered by the Medicaid program, not by the State. Commissioner Gifford stated that a discussion with CMS may need to take place to possibly defray some of the administrative costs associated with the development of the Program with the cost-sharing match.

Chair Charles Klippel requested a motion to approve the FY2022 Q1 Budget Report as presented. Motion was made by Thomas McNeill and seconded by Matthew Brokman. Roll call vote was ordered. **Motion passed unanimously**.

Chair Charles Klippel requested a motion to approve an additional expense of \$643,209 for Covered Connecticut Program costs to the FY 2022 Operating Budget. Motion was made by Thomas McNeill and seconded by Victoria Veltri. Roll call vote was ordered. **Motion passed unanimously.**

Chair Charles Klippel requested a motion to approve a transfer of \$643,209 from reserves to fund the Covered Connecticut Program costs. Motion was made by Victoria Veltri and seconded by Thomas McNeill. Roll call vote was ordered. **Motion passed unanimously.**

Mr. Michel explained the reasons to appropriate an additional expense for IT Security Projects and Application Enhancement Systems and added that these projects are financed by the CMS grant, but in order to add those funds to the budget, AHCT needs to have approval from the Board.

Chair Charles Klippel requested a motion to approve an additional expense of \$533,334 for IT Security Projects and Application System Enhancement costs to the FY 2022 Operating Budget. Motion was made by Victoria Veltri and seconded by Deidre Gifford. Roll call vote was ordered. **Motion passed unanimously.**

J. Audit Update

Susan Rich-Bye, Director of Legal and Governmental Affairs, presented the Audit Update. Ms. Rich-Bye stated that the Audit Committee met on November 9. Ms. Rich-Bye stated that during that meeting, AHCT auditors, CliftonLarsonAllen, presented the FY 2021 Financial Statements as well as the FY 2021 Programmatic Audit. Ms. Rich-Bye noted that these audits are required under the Affordable Care Act (ACA) and the Financial Statements are required from AHCT as a quasipublic agency. Ms. Rich-Bye stated that the Programmatic Audit examines AHCT's compliance with the ACA as an Exchange for eligibility and enrollment activities among many other items. Ms. Rich-Bye stressed that these audits were clean, and no findings or recommendations were issued.

Chair Charles Klippel requested a motion to approve the Fiscal Year 2021 AHCT Audited Financial Statements as presented. Motion was made by Cecelia Woods and seconded by Victoria Veltri. Roll call vote was ordered. **Motion passed unanimously.**

Chair Charles Klippel requested a motion to approve the Fiscal Year 2021 Programmatic Audit Report as presented. Motion was made by Thomas McNeill and seconded by Paul Philpott. Roll call vote was ordered. Deidre Gifford abstained. **Motion passed.**

Ms. Rich-Bye provided an updated on the 2020 State-Based Marketplace Annual Reporting Tool – SMART. 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.

Ms. Rich-Bye added that the SMART has four components: eligibility and enrollment, the financial and programmatic audit, program integrity and an attestation of completion. Ms. Rich-Bye declared that AHCT filed its SMART for 2020 on June 1. On September 27, CMS issued its summary of observations and action items for AHCT, and it did not identify any action items for the Exchange's SMART filing.

K. ACA Policy/Legal Update

Susan Rich-Bye, Director of Legal and Governmental Affairs, presented the ACA Policy/Legal Update. Ms. Rich-Bye provided a brief update on the Build Back Better legislation that is being debated in Congress. Ms. Rich-Bye provided key elements of the proposal for the healthcare provisions. Ms. Rich-Bye noted that they include: extension of Premium Tax Credit Expansion, subsidy enhancement for individuals receiving unemployment insurance benefits among a few others. Ms. Veltri commented about the positive effects of one of the elements of the proposed legislation which has to do with funding for States to increase affordability. Mr. Michel added that once many facets of this legislation are clarified to the Exchange, AHCT will send this information to the Board.

L. Future Agenda Items

James Michel, Chief Executive Officer outlined the future agenda items. They include the following:

Strategic Initiatives:

-Subsidiary

- Broker Academy
- Mission & Vision and Advisory Committees
- Updates to Operating Policies

Chair Klippel expressed his appreciation about AHCT's dedication to the Covered Connecticut program and to the Board members who are more directly involved with the program.

M. Executive Session

Chair Charles Klippel requested a motion to go to Executive Session to discuss the evaluation of a public officer or employee, a matter exempt from disclosure pursuant to C.G.S. §1- 200(6)(A). Motion was made by Victoria Veltri and seconded by Deidre Gifford. Roll call vote was ordered. Deidre Gifford abstained. **Motion passed.**

N. Adjournment

Vice-Chair Paul Philpott requested a motion to adjourn. Motion was made by Cecelia Woods and seconded by Grant Ritter. Roll call vote was ordered. **Motion passed unanimously.** Meeting adjourned at 11:07 a.m.