



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

Remote Meeting

Thursday, June 16, 2022

Meeting Minutes

Members Present:

Charles H. Klippel (Chair); Cecelia Woods; Grant Ritter; Theodore Doolittle; Office of the Healthcare Advocate (OHA); Paul Lombardo on behalf of Commissioner Andrew Mais, Connecticut Insurance Department (CID); Commissioner Deidre Gifford, Department of Social Services; Commissioner Manisha Juthani, Department of Public Health (DPH); Victoria Veltri; Thomas McNeill; Claudio Gualtieri, on behalf of Secretary Jeffrey Beckham, Office of Policy and Management; Steven Hernandez; Matthew Brokman

Other Participants:

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

Chair Charles Klippel requested a motion to approve the May 19, 2022, Regular Meeting Minutes. Motion was made by Cecelia Woods 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 informed the Board that Victoria Veltri, one of Access Health CT's original Board members, will be stepping down from the Board effective July 1, 2022, due to accepting a new role which prevents her from continuing to serve on the Board. Mr. Michel praised Ms. Veltri's contributions to the Exchange since its inception. Mr. Michel emphasized that the success of the Exchange would not have been possible without Ms. Veltri's dedicated and engaged service to AHCT. Mr. Michel noted that AHCT is working with the Governor's Office to fill the upcoming Board vacancy. Mr. Michel expressed his appreciation to Ms. Veltri for her many years of providing expertise and, Ms. Veltri expressed her words of appreciation to the entire Board as well as the Exchange's staff. Other Board members joined in thanking Ms. Veltri for her exceptional input to AHCT over the years.

Mr. Michel continued with the summary of the meeting's agenda. Mr. Michel announced that AHCT has received a \$20,000 grant to support Broker Academy efforts. Mr. Michel noted that AHCT identified approximately 11,000 customers who will become eligible for the Covered Connecticut Program starting on July 1 adding that they will be enrolled automatically in the program. Mr. Michel emphasized that AHCT has been fiercely advocating with members of Congress for an extension of the enhanced subsidies under the American Rescue Plan Act (ARPA). Mr. Michel pointed out that the focus has been on ARPA's impact to Connecticut residents.

E. Health Equity, Outreach and Consumer Experience (HEOC) Advisory Committee Membership Changes (Votes)

Susan Rich-Bye, Director of Legal and Governmental Affairs, presented the Health Equity, Outreach and Consumer Experience Advisory Committee Membership Changes. Ms. Rich-Bye stated that the Consumer Experience and Outreach Advisory Committee's focus has been expanded and the Committee has been renamed to the Health Equity, Outreach and Consumer Experience Advisory Committee.

Ms. Rich-Bye noted that in addition to those efforts, the Broker, Agents and Navigators Advisory Committee has been dissolved. Ms. Rich-Bye stated that AHCT would like to recommend that the Board adjust the membership of the Committee by officially removing members who either have resigned or did not respond to inquiries about whether they want to continue serving. Ms. Rich-Bye added that AHCT would like to recommend that the Board add three new members to the Committee as well.

Ms. Rich-Bye noted that Tammy Hendricks, Director of Health Equity and Outreach, will be the staff lead for this Committee. Ms. Rich-Bye enumerated members who will remain on the Committee: Theodore Doolittle (Chair); Cecelia Woods, Deb Polun, Sheldon Toubman, Kevin Galvin and Gerard O'Sullivan, who is a Subject Matter Expert (SME). Ms. Rich-Bye added that AHCT is proposing to add three members at this time: Karen Siegel, Giselle Carlotta-McDonald and Leslie Greer. Ms. Rich-Bye provided brief descriptions of the three candidates.

Chair Charles Klippel requested a motion to appoint Karen Siegel, Giselle Carlotta-McDonald and Leslie Greer to the Health Equity, Outreach and Consumer Experience Advisory Committee. Motion was made by Theodore Doolittle and was seconded by Cecelia Woods. Roll call vote was ordered. **Motion passed unanimously.**

Chair Charles Klippel requested a motion to remove Alta Lash, Anita Cotto, Arline Murphy, Erica Michalowski, Susan Kelley, Cheryl Forbes, Victoria Veltri and Tanya Barrett from the Health Equity, Outreach and Consumer Experience Advisory Committee. Motion was made by Theodore Doolittle and was seconded by Deidre Gifford.

Claudio Gualtieri commented that that there is a real depth of community engagement and experience on this Committee. Mr. Gualtieri urged AHCT to also seek members for the Committee from other areas, such as the American Association of Retired Persons (AARP). Mr. Michel noted that AHCT has been engaged with AARP and it will be expanded to include a representative on the HEOC Advisory Committee as well. Roll call vote was ordered. **Motion passed unanimously.**

F. Broker Academy Updates

Tammy Hendricks, Director of Health Equity and Outreach, presented the Broker Academy Updates. Ms. Hendricks announced that AHCT successfully launched the first Broker Academy class on June 1. Ms. Hendricks stated that it was an enormous effort to initiate this important undertaking. Ms. Hendricks stated that the three day in-person classes were held at Capital, Gateway, and Housatonic Community Colleges.

Ms. Hendricks provided demographic statistics on students who have enrolled in classes. Ms. Hendricks added that 70 of the 71 students attending passed their class test with the average score being 86.9 points. Ms. Hendricks emphasized that students were excited and thankful to start a new career thanks to the Broker Academy and noted that the goal is to have all of the students be state licensed by the end of July with the aim of starting the mentorship program in August.

Ms. Hendricks indicated that a few special guests made digital appearances, including Governor Ned Lamont, Connecticut Insurance Department Commissioner Andrew Mais, Theodore Doolittle from the Office of Healthcare Advocate, and representatives of both participating carriers. Other special guests appeared in person during classes. Ms. Hendricks expressed her words of appreciation to all the individuals and entities who made the Broker Academy under the AHCT auspices possible.

Ms. Hendricks added that AHCT received a grant from the Connecticut Health Foundation to promote the program and pointed out that another grant was received from the Fairfield County Community Foundation. Theodore Doolittle thanked AHCT for including information in the training segment information about the Office of the Healthcare Advocate (OHA). Mr. Doolittle noted that it is important for the brokers to understand that they should know that OHA offers free expert assistance and representation. Chair

Charles Klippel expressed his words of appreciation to AHCT for launching this successful program.

G. Covered Connecticut Phase II Update

Caroline Lee Ruwet presented the Covered Connecticut Phase II Update. Ms. Lee stated that Victoria Veltri has been instrumental to the success of AHCT over the years as well as being a key figure in starting the Covered Connecticut Program that provides much needed financial assistance in paying premiums and cost-sharing for Connecticut residents.

Ms. Ruwet noted that starting July 1, AHCT will be launching new digital content with a Knowledge-Base article which provides crucial information about the program, including the eligibility criteria. Ms. Ruwet added that a one-pager with important information to the potential enrollees will be made available. Ms. Ruwet stated that a press release as well as a press conference will also take place to promote the program.

Ms. Ruwet indicated that other outreach efforts will also be utilized. Ms. Ruwet added that additional training for Certified Applications Counselors (CACs) is being prepared to make sure that all of them are ready for the upcoming Open Enrollment (OE) as well as the Covered Connecticut Program. Commissioner Deidre Gifford inquired about the carriers' participation on outreach events along with AHCT. Ms. Hendricks added that both carriers are always invited to the AHCT outreach events and other events AHCT participates in are shared with the carriers.

Robert Blundo, Director of Technical Operation and Analytics provided a technology update on the Covered Connecticut launch. Mr. Blundo provided a timeline of technological updates that will be available to customers who are eligible for the program. Mr. Blundo emphasized that on June 30, 2022, approximately 11,000 existing Qualified Health Plan (QHP) enrollees who meet the Covered Connecticut eligibility requirements will have new benefits applied automatically beginning on July 1, 2022.

Mr. Blundo thanked the internal AHCT teams as well as external partners, such as DSS and participating carriers and others who were instrumental in preparing this important initiative. Commissioner Deidre Gifford let the Board know about the status of the Covered Connecticut Program from DSS's perspective. Dr. Gifford emphasized that it has been a joint effort between DSS, Office of Health Strategy (OHS) and AHCT in addition to the carriers. Dr. Gifford added that funding to pay for the out-of-pocket costs and premium costs that are not covered by the plans, ARPA or the regular ACA subsidies, hopefully will be covered by a Medicaid Demonstration. Dr. Gifford went on to say that DSS submitted a Medicaid 1115 Demonstration to the Centers for Medicare and Medicaid Services (CMS) with the hope that it gets approved. Dr. Gifford elaborated that if this application is approved, then hopefully it will be covered as a Medicaid benefit and will fill any potential gaps in coverage that the plans, ARPA or regular subsidies may not fully cover. Dr. Gifford added that CMS is actively reviewing the application and emphasized that as soon as the application is approved, the federal share of the out-of-pocket costs

would be fifty percent or more. Mr. Blundo, responding to Ms. Wood's inquiry, provided information on the Covered Connecticut Program eligibility thresholds.

H. Audit Status Update

Susan Rich-Bye, Director of Legal and Governmental Affairs, presented the Audit Status Update. Ms. Rich-Bye stated that for Fiscal Year (FY) 2022, AHCT is launching the Financial and Programmatic Audits that are required under federal and state law. Ms. Rich-Bye stated that an independent auditor, CliftonLarsonAllen (CLA), was tasked to perform those audits. Ms. Rich-Bye remarked that they are performing their preliminary work and have presented the plan to the Audit Committee. Ms. Rich-Bye briefly described the plan to the Board, which includes the timeline for completion of tasks. Ms. Rich-Bye stated that since AHCT received a grant under ARPA called the American Health Benefit State Planning and Establishment Grant, the Exchange will be required to perform a Federal Single Audit for FY2022.

Ms. Rich-Bye provided information on the State-Based Marketplace Annual Reporting Tool (SMART) for 2021. Ms. Rich-Bye added that the Affordable Care Act (ACA) requires all State-Based Marketplaces (SBMs) to keep accurate accounting of all activities, receipts, and expenditures and to monitor and report to the US. Department of Health and Human Services on Exchange-related activities, to complete an annual report and to engage independent auditors to perform the Financial and Programmatic audits.

Ms. Rich-Bye stated that the SMART submission is reviewed by CMS and AHCT will receive notification in a few months regarding any comments from the review. The Audit Committee's role is to make sure that AHCT is compliant with federal and state requirements and provides oversight of AHCT's operations. Ms. Rich-Bye added that SMART has four components: eligibility and enrollment, the financial and programmatic audits, program integrity and the attestation of completion. Ms. Rich-Bye conveyed that AHCT filed its SMART on May 31 and financial and programmatic audits for FY2021 were filed earlier this year. Ms. Rich-Bye added that AHCT is not anticipating any issues or recommendations from CMS.

Theodore Doolittle inquired about the length of service of the current auditors and how often the Exchange needs to procure for new external auditing services. Ms. Rich-Bye stated that CLA is serving the Exchange for its second year and pointed out that under AHCT's enabling legislation and procurement policy, the Exchange is required to do a Request for Proposal (RFP) process for auditing services every three years. Ms. Rich-Bye also stated that under an additional legislative requirement, AHCT may not use the same auditor for more than six consecutive years. Ms. Rich-Bye added that CLA is successor to Blum and Shapiro.

I. ACA Policy/Legal Update

Susan Rich-Bye, Director of Legal and Governmental Affairs, presented the ACA Policy/Legal Update. Ms. Rich-Bye provided discussed the need for an extension of the enhanced ARPA Subsidies. Ms. Rich-Bye emphasized that AHCT has been involved with various groups to advocate for the extension and stated that constant contact is maintained with Connecticut's Congressional Delegation. Ms. Rich-Bye specified that out of 14.5 million enrolled in the marketplaces for 2022, nearly 13 million receive subsidies nationwide and emphasized that 83 percent of AHCT enrollees currently receive subsidies. And 21,000 of those enrollees would be ineligible for Premium Tax Credits (PTCs) if the enhanced ARPA subsidies are not extended.

Ms. Rich-Bye provided information from the Kaiser Family Foundation that it is estimated that around \$1 billion in premium rebates will be issued to eligible individuals across the country in the Fall of 2022. Ms. Rich-Bye explained that the carriers are required to use 80 percent of the premium dollars to pay for medical claims and the remaining 20 percent may be used for administrative costs as well as profits. If the carrier spends less than 80 percent of premium dollars on claim costs, members are entitled to receive rebates.

J. Future Agenda Items

James Michel, Chief Executive Officer. outlined Future Agenda Items. They are as follows:

- Subsidiary
- Strategic Initiatives
- Finance Committee Updates/Revenue Streams
- Mission and Vision
- Guiding Principles

K. Adjournment

Chair Charles Klippel requested a motion to adjourn. Motion was made by Victoria Veltri and was seconded by Theodore Doolittle. Roll call vote was ordered. **Motion passed unanimously.** Meeting adjourned at 10:05 a.m.