



Health Equity, Outreach and Consumer Experience Advisory Committee Special Meeting

Draft Meeting Minutes

Thursday, October 27, 2022
Hybrid Meeting/Connecticut Historical Society
1 Elizabeth Street, Hartford

Members Present: Theodore Doolittle (Chair); Cecelia Woods; Karen Siegel; Giselle Carlotta-McDonald; Deborah Polun; Sheldon Toubman; Kevin Galvin; Holly Hackett; Gerard O’Sullivan (Subject Matter Expert – SME)

Access Health CT (AHCT): James Michel; Anthony Crowe; Daryl Jones; John Carbone; Susan Rich-Bye; Jynelle Maloney; Tammy Hendricks; Glenn Jurgen; Marcin Olechowski

A. Call to Order and Introductions

Chair Theodore Doolittle called the meeting to order at 10:00 a.m. Roll call for attendance was taken.

B. Public Comment

No public comment.

C. Review and Approval of Minutes

Chair Theodore Doolittle requested a motion to approve the September 22, 2022 Health Equity, Outreach and Consumer Experience Advisory Committee Special Meeting Minutes. Motion was made by Deborah Polun and seconded by Cecelia Woods. Roll call vote was taken. Motion passed unanimously.

D. New Member

Chair Theodore Doolittle welcomed the new member to the Committee, Holly Hackett. Mr. Doolittle noted that Ms. Hackett has been very engaged in the community, particularly in the Medicare for All movement as well as other initiatives. Ms. Hackett briefly introduced herself. AHCT staff and other Committee members welcomed Ms. Hackett to this Advisory Group as well.

E. Mission and Vision of the Committee/Committee Feedback

Tammy Hendricks, Director of Health Equity and Outreach, revisited the Mission and Vision of the Committee. Ms. Hendricks noted that AHCT has a strategic focus on health equity, improving access to health insurance throughout Connecticut, especially in the hard-to-reach communities that have higher uninsured rates. Ms. Hendricks provided a brief overview of the health disparities study that was conducted by AHCT and noted that despite Connecticut's high ranking in life expectancy compared to other states, significant income and health disparities exist, particularly in minority communities.

Ms. Hendricks stressed that community outreach and collaboration with key partners within those communities is crucial to the success of those efforts. Karen Siegel inquired about network adequacy and if this issue is within the scope of this Committee's purview. James Michel, Chief Executive Officer, noted that those issues are discussed by the Health Plan Benefits and Qualifications Advisory Committee, but this Committee's input is also invaluable. Susan Rich-Bye, Director of Legal and Governmental Affairs, noted that the Essential Community Providers (ECPs) discussion at the last Committee meeting is part of the solution. Brief discussion centered about promotion of the preventative care services which would help to alleviate problems with health disparities.

Holly Hackett inquired whether AHCT reaches out to consumers who have disabilities. Ms. Hackett encouraged communication with consumers to be in plain language, which would be easily interpreted. Mr. Michel noted that generational tendencies of not properly caring of their family's health is also an issue that the Health Equity and Outreach Department along with community partners is trying to address. Mr. Michel added that this approach is multifaceted, and it involves numerous factors.

Brief discussion ensued around the advantages of plain language literature to consumers, preventative care services, including annual physical exams and the role that brokers can play in that process. Giselle Carlotta-McDonald sought to clarify the differences between outreach navigators and those who actually connect individuals that have barriers to access to care once they become insured and inquired about the potential outreach roles of navigators during the OE period. Mr. Doolittle noted that the Committee may be interested in prioritizing various areas in the outreach efforts. Ms. Hendricks reiterated that the three areas under consideration, which include improved consumer access to health insurance, expanding community partnerships and outreach efforts, will be further explained.

Ms. Siegel stated that an analysis of primary care and navigation would be helpful from an equity perspective. Ms. Rich-Bye added that consumer outreach efforts are currently focusing on the benefits of the health plans. Mr. Doolittle stressed that the Office of the Healthcare Advocate (OHA) emphasizes the importance of maximizing health plan benefits.

F. Open Enrollment Outreach

Tammy Hendricks, Director of Health Equity and Outreach, presented the Outreach Update. Ms. Hendricks noted that along with the Marketing Team, the Outreach Team is working to enhance AHCT's exposure in the underserved communities. Ms. Hendricks added that education is an important element in the pre-OE initiatives.

Ms. Hendricks remarked that during the upcoming OE, AHCT is extending in-person enrollment opportunities, which among other events, include over 20 fairs both on weekends and on weekdays. Ms. Hendricks outlined that numerous Navigator locations will also assist in the enrollment efforts.

Ms. Rich-Bye explained the Public Health Emergency (PHE) Unwinding of Medicaid extensions. Ms. Rich-Bye stated that AHCT is partnering closely with the Department of Social Services (DSS) on this change. Currently, there are over 400,000 enrollees benefiting from extended Medicaid coverage. The U.S. Department of Health and Human Services (HHS) announced a 90-day renewal of the PHE on October 13 of 2022. Ms. Rich-Bye stated that the Federal Government promised states 60 days prior notice of the end of the PHE. Ms. Rich-Bye stated that AHCT continues to delay action on open verification requirements for Qualified Health Plan (QHP) customers for the duration of the PHE. Ms. Rich-Bye said that preparation for the eventual end of the PHE is well underway and added that close cooperation pertaining to this issue is taking place with DSS. Coordination efforts with DSS include:

- Reverting eligibility/enrollment requirements to pre-PHE thresholds/configurations
- Planning the unwinding schedule, enrollment volume, and renewal rules
- Communication strategy and coordination with internal/external stakeholders
- Operational readiness for increased customer support

Ms. Rich-Bye also briefly reviewed the Covered Connecticut program and its eligibility requirements and provided information on the collaborative work between AHCT and the Department of Social Services (DSS) as well as the Office of the Healthcare Strategy (OHS) in the past. Ms. Rich-Bye added that over 12,000 people are currently enrolled in the program. Ms. Rich-Bye stated that AHCT has provided outreach on the program as well.

Discussion of the extension of Medicaid coverage and some exceptions. Sheldon Toubman noted that as of August of 2022, 11,500 had already been terminated from Medicaid coverage because of these exceptions and added that every month, a few hundred individuals are losing their benefits. Mr. Toubman provided information on a lawsuit in federal court for a preliminary injunction challenging the legality of the Trump Administration's actions.

Brief discussion ensued around the outreach approach conducted by AHCT to target certain vulnerable populations that could be most affected by ending the PHE.

Holly Hackett discussed communication efforts by DSS. Karen Siegel inquired whether there is information on the utilization of the wrap-around services for Covered Connecticut. Mr. Michel noted that obtaining this information could be problematic due to HIPAA requirements, however, AHCT will reach out to DSS to find out if some data can be shared. Mr. Toubman asked whether this Committee will focus on consumer-access issues, even though AHCT does not control them. Discussion followed regarding the addition of a representative from DSS as an ex-officio subject matter expert on this Committee to answer any questions that other Committee members may have. Mr. Doolittle stated that engaging DSS with this Committee will be under consideration.

G. Broker Academy 2023 Updates

Tammy Hendricks, Director of Health Equity and Outreach, provided a timeline of the Broker Academy development and implementation. Ms. Hendricks added that students who have passed the state exam will be assisting consumers in the hard-to-reach areas of Connecticut during the upcoming OE. Ms. Hendricks noted that a grant-funded student stipend has been provided to them. Ms. Hendricks added that AHCT has chosen five mentor agencies and the internal mentorship implementation team monitors check ins with both students and mentors. Ms. Hendricks briefly outlined next steps in the mentorship program as well as the matching of those student with brokerage firms.

Ms. Hendricks indicated that progress of those brokers who graduated from the Broker Academy will be tracked and AHCT will be able to determine how many individuals they have assisted. Brief discussion ensued around compensation that brokers will be entitled to receive. Cecelia Woods inquired where is the concentration of the brokers and whether they can work across the state. Mr. Michel noted that the highest concentration is in Hartford, and they can work throughout Connecticut. Brief discussion followed about the products that brokers may sell and the regulatory processes that govern them.

H. Future Agenda Items

James Michel, Chief Executive Officer, briefly discussed future agenda items.

I. Adjournment

Chair Theodore Doolittle requested a motion to adjourn. Motion was made by Kevin Galvin and seconded by Karen Siegel. Roll call vote was ordered. Motion passed unanimously. Meeting adjourned at 11:30 a.m.