



**Connecticut Health Insurance Exchange
Health Plan Benefits and Qualifications Advisory Committee
(HPBQ AC) Special Meeting**

Remote Meeting

Wednesday, January 29, 2025

Meeting Minutes

Members Present: Grant Ritter (Chair); Sean King; Tu Nguyen; Matthew Brokman; Mark Schaefer; Brandon Riff; Paul Lombardo (Subject Matter Expert – Connecticut Insurance Department)

Other Participants: Access Health CT (AHCT) Staff: James Michel; Susan Rich-Bye; Kelly Cote; Jaclyn Olgin; Glenn Jurgen; Holly Zwick; Jeanna Walsh; Marcin Olechowski

Wakely Consulting: Julie Andrews

A. Call to Order and B. Introductions

Chair Grant Ritter called the meeting to order at 2:00 p.m.

Roll call for attendance was taken.

B. Public Comment

No public comment was submitted.

Mark Schaefer and Brandon Riff joined at 2:03 p.m.

C. Vote

Chair Ritter requested a motion to approve the January 15, 2025 Health Plan Benefits and Qualifications Advisory Committee Special Meeting Minutes. Motion was made by Sean King and was seconded by Tu Nguyen. Roll call vote was ordered. **Motion passed unanimously.**

D. Follow Up

Kelly Cote, Plan Management Manager, briefly presented the follow-up from a prior meeting.

E. Wakely Consulting

Julie Andrews, Senior Actuary from Wakely Consulting, indicated that the final Notice of Benefit and Payment Parameters (NBPP) was issued. The only outstanding regulations is the HSA rules for 2026.

Further analysis of the current 2025 QHP Standard Plans with the 2026 Actuarial Value (AV) Calculator was completed by the Issuers. Results indicate that the 87% and 94% Silver CSR plans will also require plan design modifications for plan year 2026.

As a follow up to our previous meeting, Ms. Andrews reviewed recent studies on the impact of cost-sharing changes, which provided no real consensus. KFF completed an analysis, and reported when higher copays were implemented data indicates individuals with chronic conditions saw no impact to utilization but for someone without chronic illness, they may decide to put off certain types of care.

Another study pointed out that drug utilization appears to be most sensitive. The conversation touched upon the issue of not having enough pertinent studies to come to definitive conclusions as there are many other drivers beyond cost share amounts that impact utilization.

Sean commented that the research may indicate that small incremental copay changes are not likely to deter a large group of members from getting the care that they need. Julie confirmed the sentiment and shared that there is no real consensus on whether the copay changes eliminate waste or if they are a barrier to care impacting health outcomes. Some Value Based Insurance Design (VBID) programs have been pulled back and replaced with standardized cost sharing programs because results are not demonstrating the anticipated health outcomes.

Mark Schaefer noted that conclusions cannot be made that higher cost is not a barrier to obtaining medicines or medical services. Mr. Schaefer expressed his opinion that the Committee be evidence-informed when designing plans and asked about the 5-year history of plan design modifications. He encouraged the Committee to review utilization patterns and how they are impacted by benefit changes from year to year.

Brief discussion followed about the data from the All-Payer Claims Database (APCD) as well as potentially using a research consultant to undertake an evaluation of the impact of the cost-sharing aspects. James Michel, Chief Executive Officer, indicated that performing a study will be taken under advisement.

Three options were presented for the Gold Plan. The Gold plan does not have required changes for AV; however, adjustments may potentially be required to meet Mental Health Parity (MHP) requirements but we are awaiting testing results from the issuers. The discussion moved to the Silver plans.

Ms. Andrews presented the 2026 Silver Plan AV options. All of those options passed the MHP and AV requirements

Matthew Brokman joined at 2:30 p.m.

A suggestion was made by Sean King to look at the impact of changing the cost share amounts for Preferred Brand drugs and Specialty Drugs rather than generics only. Additional conversation regarding increasing deductibles and out-of-pocket costs, and the impact it has to those consumers that might require more care.

Further discussion followed regarding various options, and the Committee requested that Wakely create another option with cost share amounts between Option 1 and Option 3.

Ms. Andrews briefly mentioned the 73 percent AV Silver plan; but no discussion followed as the design is based on the finalization of the standard Silver plan.

Plan changes to the 87 and 94 percent Silver CSR plans will be required; two options were presented for each. Once feedback is received from all carriers, these plans will be presented.

Bronze non-HSA plan options were presented with Issuers meeting AV and MHP requirements for all options. The Committee decided not to consider Option 2 and keep Option 1 and 3 under for further consideration.

The Bronze HSA plan does not need any adjustments and is compliant. Brief discussion was related to the differences between the HSA and non-HSA plans, demographics that are choosing one or the other as well as the services that are or are not covered before the deductible in those plans.

Chair Grant Ritter requested a motion to recommend that the Board of Directors approve the Standard HSA Bronze Plan presented by Wakely Consulting on behalf of Exchange Staff as the Standard HSA Bronze Plan for Plan Year 2026. Motion was made by Sean King and was seconded by Mark Schaefer. Roll call vote was ordered. **Motion passed unanimously.**

James Michel, CEO, noted that AHCT is monitoring the developing situation in Washington, DC regarding any developments that may affect Connecticut and AHCT consumers. AHCT is in constant communication with stakeholders on various levels.

F. Next Steps

Kelly Cote, Plan Management Manager reviewed next steps.

G. Adjournment

Chair Grant Ritter requested a motion to adjourn. Motion was made by Mark Schaefer and was seconded by Sean King. Roll call vote was ordered. **Motion passed unanimously.** Meeting adjourned at 3:00 p.m.