



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

Remote Meeting

Wednesday, June 18, 2025  
**Meeting Minutes**

### **Members Present:**

Charles Klippel (Chair); Paul Philpott (Vice-Chair); Grant Ritter; Thomas McNeill; Dina Berlyn; Sean King – Designee for Kathleen Holt - Office of the Healthcare Advocate (OHA); Claudio Gualtieri on behalf of Jeffrey Beckham, Secretary – Office of Policy and Management (OPM); Carleen Zambetti on behalf of Commissioner Nancy Navarretta, Department of Mental and Health Addiction Services (DHMAS); Eleanor Manfredi on behalf of Commissioner Andrew Mais, Connecticut Insurance Department (CID); Commissioner Andrea Barton Reeves, Department of Social Services (DSS); Deidre Gifford; Steven Hernandez; Matthew Brokman

**Other Participants:** Kunal Khanna (New Fields Technologies)

**Access Health CT (AHCT) Staff:** James Michel; Jeanna Walsh; Holly Zwick; Rebekah McLear; Susan Rich-Bye; Caroline Ruwet; John Carbone; Glenn Jurgen; Marquese Davis; 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 was submitted.

### **C. Votes**

Chair Charles Klippel requested a motion to approve the April 17, 2025 Regular Meeting Minutes. Motion was made by Steven Hernandez and was seconded by Grant Ritter. Roll call vote was taken. Andrea Barton Reeves and Sean King abstained. **Motion passed.**

Susan Rich-Bye, Director of Legal and Governmental Affairs, explained the reason for the proposed amendment to the Board Agenda. The agenda may be amended as this is a regular meeting.

Access Health CT (AHCT) has been notified by the Connecticut Department of Social Services (DSS) that an approval has been given for actuarial work needed to be performed for the Covered CT Program.

Chair Charles Klippel requested a motion to add an agenda item for discussion and a vote to add \$450,000 to the Fiscal Year (FY) 26 Operating Budget for actuarial work needed to be performed by Wakely for the Dept. of Social Services for the Covered CT Program. Motion was made by Deidre Gifford and was seconded by Thomas McNeill. Roll call vote was ordered. **Motion passed unanimously.**

Ms. Rich-Bye explained that DSS requires services of an independent actuary that is familiar with the marketplace population to perform an analysis and develop methodology to assess utilization for the Covered CT Program for the setting of a payment rate for the risk associated with zero cost-share coverage.

DSS requested to use Wakely Consulting for actuarial services. AHCT will enter into a Statement of Work (SOW) with Wakely, and the full cost of this engagement will be paid by DSS. Ms. Rich-Bye explained budget adjustments for the AHCT operating budget.

Chair Charles Klippel requested a motion to add \$450,000 to the FY 26 Operating Budget for actuarial work needed to be performed by Wakely for the Dept. of Social Services for the Covered CT program that will be paid 100% by DSS. Motion was made by Grant Ritter and was seconded by Claudio Gualtieri. Roll call vote was ordered. **Motion passed unanimously.**

### **D. CEO Report**

James Michel, Chief Executive Officer (CEO), presented the CEO Report.

Mr. Michel briefly provided an outline to the Board regarding the “One Big Beautiful Bill Act,” also known as the Reconciliation Bill. Mr. Michel pointed out that this bill is now with

the Senate for its consideration; if this bill passes it will have a significant impact on AHCT's customers.

Mr. Michel discussed working with industry colleagues across the country to provide information to members of the Connecticut federal delegation about the impact and changes that could be expected if it becomes the law. Mr. Michel stressed that, if enacted, this legislation would shorten the annual Open Enrollment (OE) Period by a month; require additional paperwork making it harder to sign up and qualify for financial help; and, increase cost of health care to consumers through reduced plan coverage and financial help.

It is also anticipated that the enhanced subsidies that were introduced in 2021 as part of the American Rescue Plan Act (ARPA) and extended through the Inflation Reduction Act (IRA) will expire at the end of this plan year.

Mr. Michel pointed out that AHCT is ready to go live with the new BusinessPlus platform on July 1. This platform simplifies the health benefits management process for Connecticut business owners. It will also provide access to additional coverage options like Individual Coverage Health Reimbursement Arrangements, also known as ICHRAs.

AHCT provided demonstrations of the platform to the carriers as well as members of the Connecticut state legislature and the broker community and it has received a lot of positive feedback.

Mr. Michel expressed his words of appreciation and gratitude to Paul Lombardo, who will be retiring at the end of this month.

Paul Lombardo represented the Connecticut Insurance Department Commissioner on the Exchange's Board of Directors. He also served as a member of the Strategy Committee and was a Subject Matter Expert (SME) on the SHOP and Health Plan Benefits and Qualifications Advisory Committees. His calm and strategic thought process is greatly appreciated. AHCT wishes him a long and prosperous retirement and thanks him for his service. Chair Charles Klippel, on behalf of the entire Board, joined in thanking and congratulating Paul Lombardo.

## **E. Impact of the One Big Beautiful Bill Act**

Susan Rich-Bye, Director of Legal and Governmental Affairs, provided information on the Reconciliation Bill that is currently considered by the United States Senate. The most consequential parts of the proposal that would affect consumers include the following:

- Shortening the OE Period to November 1 – December 15 (with no state flexibility)

- Eliminating marketplace eligibility for Deferred Action for Childhood Arrivals (DACA) Recipients
- Eliminating eligibility for financial assistance – Advanced Premium Tax Credits (APTC) and Cost-Sharing Reductions (CSR) – for many non-citizen groups
- Eliminating eligibility for financial assistance for Green Card Holders with income below 100% of the Federal Poverty Limit who do not yet meet the 5-year bar for Medicaid
- Eliminating eligibility for financial assistance for consumers who are not eligible for Medicaid for work requirement

Brief discussion ensued around the potential impact to AHCT if those changes become law. Mr. Michel noted that it would have a significant impact on the organization as well as on consumers

The Exchange is preparing a strategy to mitigate any potential negative impact to the organization, AHCT's consumers and other stakeholders. He stated that a variety of institutions would be negatively impacted by the enactment of those proposals, including the hospitals.

This proposal would also negatively affect the autorenewal process, verification requirements as well as the Qualified Health Plan designs which would increase enrollee costs and changes to the premium adjustment percentage. .

Additional provisions include changes that would diminish or remove consumer financial protections. They include the following:

- Removing the IRS repayment caps for APTC for lower income consumers
- Allowing carriers to require payment of any past-due premium before effectuation for new plan year
- Changing premium payment thresholds
- Prohibiting use of APTC for gender-affirming care

This proposed Reconciliation Bill could also reduce the advanced premium tax credit amounts by appropriating federal funding for the Cost Sharing Reduction (CSR) payments. In addition, it would prohibit use of federal funds for CSR payments for plans that would cover elective abortion services.

The one consumer-friendly aspect of the bill involves changes to the Individual Coverage Health Reimbursement Arrangements (ICHRA). It proposes a new name for the program – Custom Health Option and Individual Care Expense (CHOICE) arrangements. Those proposed changes would include the following:

- Allow employees to use a cafeteria plan to pay premiums for on-Exchange plan
- Create federal tax credits for small business using a CHOICE arrangement
  - \$100 per employee per month for first year
  - \$50 per employee per month for second year

#### **F. Individual Coverage Health Reimbursement Arrangement (ICHRA) Demo**

John Carbone, Director of Small Business, Product Development and Broker Support provided information on the BusinessPlus Platform. ICHRA is an integral part of this platform; a summary of the status of the program was provided. Mr. Carbone expressed his words of appreciation to all involved in the process and thanked the Board for its continued support.

Kunal Khanna from New Fields Technologies presented the ICHRA program demonstration. Brief discussion ensued around the upcoming ICHRA platform trainings, possible changes in the payment structure for the brokers and outreach for the program. AHCT is targeting small non-profits who may see the most benefit from using ICHRA.

#### **G. Audit Status Update**

Susan Rich-Bye, Director of Legal and Governmental Affairs, presented the Audit Status Update. The Audit Committee met one June 12, 2025. Whittlesey, AHCT's independent auditors, presented the audit objectives and impact for the annual independent financial audit and the annual programmatic audit at the meeting of the Committee.

Preliminary work has been performed and the plan for the audits was presented to the Audit Committee. Ms. Rich-Bye briefly described the plan to the Board, which includes the timeline for completion of tasks. The Fiscal Year 2025 Annual Financial and Programmatic Audits will be presented to the Audit Committee and the Board of Directors at the respective meetings in November.

Next, information on the 2024 State-Based Marketplace Annual Reporting Tool (SMART) was presented. Pursuant to the Affordable Care Act (ACA), State-Based Marketplaces (SBMs) are required to keep accurate accounting of all activities, receipts and expenditures; monitor and report to Health and Human Services (HHS) on Exchange-related activities as well as to complete an annual report; and engage an independent auditor to perform annual financial and programmatic audits.

The SMART has four components: eligibility and enrollment, the financial and programmatic audits, program integrity and attestation of completion. AHCT filed its SMART on May 30, 2025. The organization anticipates obtaining a response from CMS

within a few months. No issues were reported when responses to the SMART were prepared and AHCT does not anticipate any recommendations from CMS.

Ms. Rich-Bye noted that the State Auditors are currently working on their audit of FY 22 and FY 23 at this time and AHCT has provided them with all of the requested documents and information.

## **H. 2025 Small Business Update**

John Carbone, Director of Small Business, Product Development and Broker Support, provided information on the Connecticut Small Business Summit and filled in for Tammy Hendricks, Director of Health Equity and Outreach, in informing the Board about the Broker Academy.

The third annual Connecticut Small Business Summit was held in Rocky Hill. Mr. Carbone noted that the Summit has become a powerful forum for small business owners, brokers, carriers, vendors and community partners to come together and share ideas that strengthen the future of small businesses. This year's event was fully subscribed with over 225 attendees, 21 vendors and 19 speakers.

Mr. Carbone also provided the Broker Academy Update. He noted that the focus has been helping students complete their training through the portal, which is a state approved education platform for students to have access to study guides, quizzes, virtual instruction and other necessary support.

AHCT also hosted weekly review sessions by the time they reached the in-person classes so the students were confident and well prepared.

Mr. Carbone pointed out that the in-person sessions were held in New Britain and Danbury, and thanked the Exchange's Community partner, Connecticut Leads Connecticut Latino for Education Advocate and Diversity, a longtime community partner that generously supported and donated the classroom space at no cost.

Over 52 students passed the class certification, which aligns with the results from last year. These sessions also served as a final preparation for the state licensing test. AHCT registered 52 students to take the exam. Fifteen students who already passed the test will be assisting the remaining students who are still in the process of taking and passing it.

Demographic statistics for the students were provided and AHCT is currently in the solicitation process and applications are being currently reviewed.

**I. Future Agenda Items for Reference Only**

James Michel, CEO, reviewed future agenda items –including the evolution of the Big Beautiful Bill, the preparedness of the upcoming Open Enrollment (OE); and, the audits among other items.

Claudio Gualtieri commented that after the Reconciliation bill is enacted – it would be good to look at the adjacent impact regarding protections for people who fall behind on their premiums – at this point, if they have the subsidy. The ACA provides for a 90 day grace period for consumers receiving subsidies. As the subsidies may be decreasing, there may be a cliff pertaining to some protections. Mr. Gualtieri suggested looking at the existing consumer protections; and, seeing if there are any ideas that Connecticut should be considering to back fill the regulatory protection that may go away.

**J. Adjournment**

Chair Charles Klippel requested a motion to adjourn. Motion was made by Paul Philpott and was seconded by Andrea Barton Reeves. Roll call vote was ordered. **Motion passed unanimously.** Meeting adjourned at 10:12 a.m.