



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

Remote Meeting

Wednesday, March 18, 2026

Meeting Minutes

Members Present: Grant Ritter (Chair); Sean King; Tu Nguyen; Jon Wirkkula; Matthew Brokman; Mark Schaefer; Tricia Dave (Subject Matter Expert)

Other Participants:

Access Health CT (AHCT) Staff: Susan Rich-Bye; Kelly Cote; Holly Zwick; Glenn Jurgen; Marcin Olechowski

Wakely: Ksenia Whittal

A. Call to Order and B. Introductions

Chair Grant Ritter called the meeting to order at 10:30 a.m.

Roll call for attendance was taken.

B. Public Comment

No public comment was submitted.

Matthew Brokman joined the meeting at 10:31 a.m.

C. Vote

Chair Ritter requested a motion to approve January 7, 2026 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.**

Mark Schaefer joined the meeting at 10:33 a.m.

D. Updated Timelines

Kelly Cote, Plan Management Manager, briefly reviewed the updated timelines now that draft guidance and the Actuarial Value Calculator (AVC) has been released by the Centers for Medicare and Medicaid Services (CMS). Every standard plan offered on the Exchange will require plan changes for 2027 due to the 2027 AVC. She shared words of appreciation to Wakely and the issuers for exceptional collaboration throughout the process and to the Committee for patience and understanding.

E. Wakely Consulting – Standard Health Plans

Ksenia Whittal, Senior Consulting Actuary from Wakely Consulting reviewed the proposed regulatory changes, AVC changes, 2027 calculator results, and the proposed 2027 Standard Health Plans.

2026 standard plan designs met AV requirements under the 2026 AVC but fall outside allowable ranges under the 2027 AVC, necessitating updates to plan designs.

Various revisions across metal tiers were presented. This included increases to plan deductibles, copays, and out-of-pocket maximums to meet required AV ranges, with multiple design options presented for Committee's input.

The Committee discussed ongoing efforts to refine 2027 plan designs to ensure compliance with AV ranges and MHP, noting that some options remain noncompliant due to differing issuer assumptions and require further adjustments.

A potential new low-cost Bronze plan option was discussed to help to bridge the gap between Catastrophic and expanded Bronze Plans, particularly for healthy individuals no longer eligible for catastrophic coverage. This option could allow enrollees to access lower premiums, pair with an HSA, and still apply premium tax credits, addressing affordability concerns associated with increasingly richer and higher-premium bronze plans.

Members of the Committee discussed the relationship between increased cost-sharing and reduced plan-paid costs, noting that higher deductibles and out-of-pocket maximums generally lower premiums.

The Committee expressed interest in better understanding enrollment patterns by subsidy status and plan selection. The Committee also reviewed trade-offs in plan design such as higher deductibles versus higher copays; emphasized maintaining pre-deductible services and raised questions about specific benefits such as home health care. Preliminary preferences and potential modifications, particularly for Gold and Silver plans were identified, with additional analysis and data requested for the next meeting.

F. Next Steps

The Plan Management Team will regroup with Wakely and the issuers to align on updates needed for compliance, with the goal of presenting additional plan options at the next meeting.

I. 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 11:31 a.m.