

WV Health Benefits Exchange Stakeholder Meeting Summary

Group: Carriers		
Location: OIC 4 th Floor Main Conference Room, Charleston, WV	Date: 5/9/12	Time: 10:30 a.m. – 12:00 noon
Objectives: See agenda		
Facilitator/Lead: Carl Hadsell	Handouts: Premium Stabilization Programs Overview PowerPoint presentation	
Attendees: Sherri Davis, Danielle Ewing, Andrea Fegley, Paula Fitzgerald (WVU), Betty Hoover, Diana Hypes, Pam King, Debi McCoy, Kelly Newhouse, Amy Norwood, Robert Roset, Jeremiah Samples, Phil Shimer, Todd White, Jeff Wiseman, Phil Wright, Luke Moore		
Next Meeting Date: Tuesday, June 12, 2012; 10:00 am – 12:00 noon		

Discussion Points

A. What's New Newsletter – Please send any materials and/or submissions you may have to the *What's New* newsletter to Debi McCoy at Deborah.McCoy@wvinsurance.gov.

B. Exchange Updates by Jeremiah

Jeremiah started the meeting by noting the HBE is work on many fronts, it is a marathon, not a sprint. The OIC will continue to address what they can and provide updates as they can.. Jeremiah then provided some updates:

- IT Focus** – HHS has released several rules and guidelines regarding IT. A large IT infrastructure RFP is in the latter stages of development and is being reviewed by State Purchasing and Office of Technology, concurrently. CMS/DHHS will need to review the procurement and have committed to a 30 day review process. Seven to eight percent of the IT budget will have a Medicaid cost allocation included (this is *without* the eligibility option). Considering RAPIDS (current system within WVDHHR) enhancements. Jeremiah reminded those present that WV's HBE will need to be self-sustaining. He noted that eligibility is the highest cost within the IT system.

A question was asked if the state uses the Federal Exchange, then the state will receive no subsidiaries. Debi will get an FAQ from the federal level that has more answers regarding this topic.

- Plan Management** – Still working with SERFF on IT needs and will be the primary tool to use for plans coming through for approval for the marketplace. Jeremiah attended a meeting in Kansas. He stated that the SERFF developments are further along on the timelines than they originally thought they would be, so they are ahead of schedule. By December of this year, their system should be ready for carriers to submit plans. It will be vital for the Federal and state exchanges to align as to plan management. Jeremiah discussed how the goal will be to align plans. He furthered discussed his goal to look for ways to streamline processes and be efficient as to lower costs of operations.

Network adequacy cannot be received through SERFF in data format (direct digital input), but attachments such as pdf and Word files can be used.

- Federal Updates** – Trying to figure out how to link in to the “hub” where an exchange can verify information about eligibility. This will be a Federal based information system that has Social Security, IRS, Homeland Security, etc. information brought together). Every state needs to have their technology “speak the same language” to do this. There was much discussion on concern that the Federal government will never be able to make this work. There will need to be common protocol and most likely “edge” servers which are a way to interface between state and Federal systems. Some issues included: deductibles not being able to be calculated, premium stabilization, and

eligibility issues. Jeremiah asked that anyone who had issues with the Federal system to email them to him so he would have specific questions to ask the Federal staff.

As told to Nevada, the operational costs in 2014 will not be covered by the Federal government but they have not indicated what the cost to each state will be to use the Federal system. This is a new risk – that is established grants in 2012 will not cover operational grants.

4. **Other** – OIC is working with Behavioral Health/DHHR on mental health issues.

Research projects in progress:

- We are looking at evaluation of the HBE through work by WVU Health Sciences. There are three major components: 1) evaluation of actual service delivery model including operating efficiency, 2) evaluating the population's health, which looks to see if the health of uninsured citizens is improving as they gain insurance through the system, and 3) the impact on the economy. That is, how it is affecting small businesses, does it change what employers are paying for health benefits or not offering at all – putting it back into the business, etc.
- OIC is working with Marshall University on health insurance literacy and the Osteopathic School of Medicine on provider quality issues. A meeting on the quality is scheduled for May 29th.
- The RFQ on agent navigators is still being reviewed by WV State Purchasing.
- The dental health assessment, now in progress, is due by the end of June.

Jeremiah will get information to everyone on upcoming conferences that they can attend. He will also continue to try to get more information from HHS.

C. WVHBE Premium Stabilization Programs Overview

Jeremiah reviewed the PowerPoint handout on premium stabilization programs. This is available on the OIC HBE website. Not all items in the presentation were covered. All members of this stakeholders group are asked to review and submit additional questions or follow up issues regarding the presentation. Questions/Discussions centered on the reinsurance issue and if there would be enough money in the reinsurance fund if it was started by the Federal government.

Jeremiah asked those present about the possibility to work with OIC in doing simulations. This will take some work, but may be helpful to advance a better understanding how it will all work. Also, to discuss at the next meeting: what other states are doing on simulations.

There was a general request to better understand what the needs are on the plans that will be on HBE. Carriers know about fixing the language, but not sure of the other requirements. In general, need to get more answers as to what things will look like and what will be required.

E. Next Meeting

Those present agreed to schedule the meeting for two hours, with goal to be done in 90 minutes. Therefore, the next meeting will be held Tuesday, June 12 at 10:00 am and go until noon.

Send in your chosen topics from the Exchange Decision Making form so they can be discussed at the next meeting.

Action Register

What/Task	Who	When
1. Prepare notes from meeting	CESD	5/18/12
2. Those carriers who have experience with Medicare Advantage please provide OIC issues experienced using it.	Carriers	ASAP
3. Provide Participants with options to attend exchange based conferences.	OIC	ASAP and in future as occur
4. OIC make available presentations from conferences.	OIC	Completed
5. Carriers are requested to review the presentation on Premium Stabilization Programs	Carriers	ASAP
6. Carriers are to consider if they are willing to participate in simulations with OIC	Carriers	By June meeting
7. Those carriers who have not selected priority topics from the list, please provide CESD with choices.	Carriers	ASAP
8. OIC to look at what other states are doing as to simulations.	OIC	By June meeting
9. Schedule the future meetings for 10 am-noon.	CESD	Starting in June

Follow-up Questions

Question
<p>1. Q12: Will individuals who are enrolled in coverage through a Federally-facilitated Exchange have access to premium tax credits, as well as the advance payments of tax credits that will be authorized by Exchanges</p> <p>A12: Yes. The proposed regulations issued by the Treasury Department, and the related proposed regulations issued by the Department of Health and Human Services, are clear on this point and supported by the statute. Individuals enrolled in coverage through either a State-based Exchange or a Federally-facilitated Exchange may be eligible for tax credits, including advance payments. Additionally, neither the Congressional Budget Office score nor the Joint Committee on Taxation technical explanation discussed limiting the credit to those enrolled through a State-based Exchange.</p> <p>It is located in http://cciio.cms.gov/resources/files/Files2/11282011/exchange_q_and_a.pdf.pdf (pg. 8)</p>
<p>2. Q:</p> <p>A:</p>
<p>3. Q:</p> <p>A:</p>

Session Plus/Delta

General discussion of this reflected the meeting going well. There was some frustration of not knowing many answers. This makes it difficult to plan. Jeremiah does believe that if no planning is in place, it might be more of a challenge when decisions are made.