

WV Health Benefit Exchange Stakeholder Meeting Summary

Group: Producers

Location: OIC 4th Floor Main Conference Room, Charleston, WV

Date: 6/12/12

Time: 1:00 p.m. – 2:15 p.m.

Objectives: See agenda

Facilitator/Lead: Carl Hadsell

Handouts: Financial Sustainability Overview PowerPoint presentation, Navigator-Agent Questions Log, Exchange Decision Making list

Attendees: Bob Aman, Tom Bias, Scott Bradley, Lisa Calderwood, Bill Crouch, Joseph Deacon, Greg Elam, Brett Hamilton, Diana Hypes, Scott Kephart, Gray Marion, Louise Moore, Jeremiah Samples, Phil Shimer, Elizabeth Webb, Jeff Wiseman

Next Meeting Date: Tues., July 10th, 2012 1:00 p.m. – 3:00 p.m.

Discussion Points

1. **What's New OIC newsletter** – The newsletter is a great resource for all types of information and activities regarding exchanges. Please send any materials and/or submissions you may have to the *What's New* newsletter to Debi McCoy at Deborah.McCoy@wvinsurance.gov.

2. Exchange Updates

a. IT

The core IT RFP has been reviewed by the State Office of Technology and HHS, and their changes have been made. It is now being reviewed by State Purchasing and BMS. Their reviews will hopefully be done by the end of June. The RFP is currently scheduled to be awarded in late summer.

Regarding eligibility, OIC is still working with DHHR, CHIP and Medicaid on details of eligibility determinations. Eligibility is the largest line item in the budget, and therefore, an important topic especially for sustainability modeling. To date, HHS says it is still deliberating on the topic. Several ways to cross check eligibility are being worked on now.

b. Plan Management

An internal workgroup at the OIC is working to outline the business processes of 11 core areas of plan management. The resulting work plan is anticipated to be finalized by end of June. SERFF moving along aggressively, 45-48 states plan to use it. The OIC is working with SERFF on state-specific system enhancements for plan management functions. We need to make sure our plan management process/flow meets federal guidelines.

c. Federal Updates

The exchange and FFE (federally facilitated exchange) blueprint documents have been released. These are important documents. The OIC still needs to find out more from HHS and continues to work with them. The Federal government is working on certification process. There is a partnership model that states can opt for regarding split responsibilities for an Exchange model.

d. Other Updates

- Early Innovators – Jeremiah talked with early innovators (e.g., states like Oregon, Maryland, and Massachusetts) and they presented what they're doing regarding IT. When asked, based on their presentation, what the sustainability cost would be, they could not provide an answer. They have no long-term sustainability cost has been developed due to the short timeframe they've been given to work on IT development. Some early innovators will not likely meet the deadline for IT DDI. Maryland and Massachusetts are in the third phase are planning to make systems available to others to lower their own costs.
- Essential Health Benefits – HHS to release rules by end of month addressing definitions of meaningful coverage for each category. The rule also provides a template for reporting, along with

“backfilling” options to meet all 10 categories requirements. There are discrepancies between federal and state data that are causing some uncertainty about what the largest small group plans are. By end of third quarter 2012, WV governor must select which benchmark the state will use.

- Community Care – The OIC and DHHR are looking at the community care initiative model in North Carolina and researching how a similar effort may be pursued in West Virginia. There are a number of care coordination models, but we need to ask the right questions. What should the state do? What can OIC contribute? If any of the stakeholders have questions, comments, or suggestions, please let OIC know.
- Evaluation Strategy – OIC has an MOU with WVU to do an evaluation strategy for the exchange. Tom Bias from WVU Emerging School of Public Health and Paula Fitzgerald from the WVU School of Business and Economics are working together on the project. The evaluation project is looking at how services are provided, the business and economic impact, and health impact. . They will have six months to develop the evaluation plan and will be getting information from stakeholders during that time on what they would like to see in the evaluation. After the evaluation plan has been developed, the OIC or Exchange will determine who will be doing the actual evaluation. Findings to date will be presented at either the July or August meeting.
- Provider Quality – OIC is working with Arnie Hassen from the WV Osteopathic School of Medicine to study provider quality issues to provide consumers with more information. They held their first meeting which was productive. More carriers are encouraged to participate in future conference calls.
- Update on CHIP – MOU between OIC and CHIP. Need to understand possible shift in children’s coverage to ensure no child “falls through the crack” as to insurance coverage.
- Health Insurance Literacy Effort – Marshall University working on this initiative. The study focuses on consumers’ understanding insurance (terminology, types) and why health insurance is important regardless of age.
- U.S. Supreme Court Decision on Health Care –The WV legislation addresses some options regarding what happens if changes at federal level occur. OIC has been doing contingency planning and will work with the Governor’s office and the legislature as required once a decision is rendered by the U.S. Supreme Court.

3. Conference Updates

a. WV Key Questions – Cost, IT Redundancy, Early Innovators

Jeremiah attended an HHS sponsored system-wide Exchange conference, which 43 other states also attended, to get HHS’s vision of the federally funded exchange. The federal exchange effort is ahead of states. They know the guidelines and have vendors in place. Still trying to talk about how to share costs (e.g., IT, call centers) to reduce redundancy and costs across the system.

Jeremiah talked with early innovators (e.g., states like Oregon, Maryland, Massachusetts) and they presented what they’re doing regarding IT. When asked, based on their presentation, what the cost would be, they could not provide an answer. They have no long-term sustainability cost figures due to the short timeframe they’ve been given to work on IT development. Some early innovators will not likely meet the deadline for IT. Maryland and Massachusetts are in the third phase will make systems available to others to lower their own costs. There appears a lack of attention by states as to what the cost of on-going operations of the exchange will be. This is concerning.

b. Agent Questions

At the conference, Jeremiah asked many of the questions that had been asked of him by agents at stakeholder meetings, but there are still a number of questions to be answered regarding cost.

A handout, *Navigator, Agent Questions Log*, was provided by Lisa. There are still unanswered questions, but some were discussed. There remains some confusion of the roles between agent and navigator. Producers do not want to see duplication. Some responses: Payment to producers (commissions) will remain between the agents and carriers not go through the exchange. Currently liability insurance (E&O) not required for navigators under the final rule (WV producers consider this a mistake).

Q: If a holding company (not an insurance one) has an insurance company as part of what it “holds”, can it have another entity that has navigators?

A: Will look into.

Q: What types of entities can be navigators?

A: Most likely consumer-type groups, local people working in the community. They will need to know about Medicaid, CHIP, etc.

Q: Will the carriers be asked to bid to get into the exchange?

A: Expect larger carriers to want to be part of the exchange since there is a potential for new customers in the insurance market.

Q: What does the chamber say about "employee dumping"?

A: May be some, mixed information in this area.

4. Sustainability Presentation

Jeremiah reviewed the Financial Sustainability Overview PowerPoint presentation. (See handout.) The purpose of the presentation is to highlight the key approaches, limitations, and assumptions utilized in developing the WV Health Benefit Exchange sustainability scenarios and to analyze strategies that can be implemented to improve the financial sustainability model currently being developed by the state. He asked that everyone review the presentation and send back any questions, comments, and feedback you have. OIC would like to get as much input as possible from all stakeholders.

5. Priority Topics Discussion

Carl distributed the Exchange Decision Making list for everyone to review. If you have any topics from the list that you would like to be discussed at future meetings, please let us know.

Next Meeting

The next meeting will be held Tues., July 10, 2012 1:00 p.m. – 3:00 p.m.

Action Register

What/Task	Who	When
1. Prepare notes from meeting	CESD	6/19/12
2. Send out a notice to all stakeholders of who is involved in the Health Insurance Literacy project and that one of these individuals may contact them.	OIC draft CESD sends	
3. Review the sustainability presentation by OIC and provide feedback as to suggested changes in assumptions, logical, various components used in the sustainability model.	Producers	
4. Send out presentations given at conference along with OIC notes taken there.	OIC (Jeff) send to CESD for distribution	

Follow-up Questions

Question
1. Q: If a holding company (not an insurance one) has an insurance company as part of what it "holds", can it have another entity that has navigators? A:
2. Q: A:

Session Plus/Delta

A Plus/Delta was not done for this meeting.