

WV Health Benefit Exchange Stakeholder Meeting Notes

Group: Providers		
Location: OIC 4 th Floor Main Conference Room, Charleston, WV	Date: 4/24/12	Time: 1:00 p.m. – 1:45 p.m.
Objectives: See agenda		
Facilitator/Lead: Carl Hadsell		Handouts: Exchange Decision Making
Attendees: Terri Barrett, Bill Crouch, Jill McDaniel, Chad Robinson, Deloris Lowe, Arnie Hassen, Diana Hypes, Pam King, Tim Rieder, Lisa Calderwood, Deborah McCoy,, Jeremiah Samples, Phil Shimer		
Next Meeting Date: May 22, 2012 1:00 – 2:00 p.m.		

Discussion Points

A. “What’s New” Materials and Submissions

1. Is everyone getting this publication from OIC? Please share documents and information you think of value for others. The OIC will continue to include links or articles going forward in the “What’s New”.

B. Exchange Updates

1. IT Procurement RFP is at state Office of Technology for review. Because IT RFP has touchpoints with Medicaid, it must also be reviewed by CMS. APD that much accompany the RFP is still under development by Medicaid.
2. Enhancement to SERFF for each state. West Virginia amending current contract with SERFF to make necessary upgrades for future Plan Management functions.
3. Plan Management Group – should have finalized work of laying out the business processes by end of June.
4. RFQ for Agents and Navigators plan development at state purchasing. No timeline set.
5. Received three bids for Actuarial/Economic Modeling research procurement. Under review. Will have awarded contract by end of June.
6. **I-Tech 10** Procurement provides pre-approved vendors for specialized staffing needs based on criteria approved by the WVOOT. This process allowed for the Project-based Support agency liaison to start beginning week of April 30th. This person will work with other agencies to track issues and risks, gather information and create evaluation and decision logs. (Debi to share roles and responsibilities). Essential Health Benefits – the OIC cannot make determination; Governor’s office makes final decision. OIC evaluating what effects the benchmark choice could have on the market and consumers.
- 7.
8. Children Health MOU with CHIP research.
 Ideas for what should be included in the CHIP research were requested of those present. The following were offered:
 - How to enroll children into the HBE (Health Benefit Exchange) if the parents are already insured elsewhere. That is, will a child independently be eligible to enroll in CHIP if CHIP benefits are better than the parents may have elsewhere? A: Yes.
 - What is the plan for insurance regarding “developmental screening for children” – How will this work?
 - Medical home for children – in the planning?

C. Quality Initiative

1. Arnie Hassen updated on Quality Initiative. Response from solicitation for volunteers – has consumer and agent representatives. Looking for a carrier representative. Has one so far. Will work on putting together face to face meeting for discussion. General opinion is current process being used (HEDIS) will probably be used for Quality reporting. Final decision and process that will be presented to Exchange Board will represent all groups.

D. Discuss Selected Prioritize Topics

1. Will discuss list in more detail at next meeting. Goal is to go through more detailed policies; need further analysis of rules. Highlighted discussion on some of topics below:

Issuance of Navigator grants

How do the providers fit into this?

What does this mean to a provider?

Who can be in a role of navigator?

Could a provider get a navigator grant?

Define navigator compare to communities' assister.

Two types of navigators: community based nonprofit and agents/brokers commission?

Case management portal

Are we going to have too many case management systems in WV?

How will all of this work together?

Concept of navigators as case managers/coordinators?

We must know the difference between managing health insurance plans vs. managing health care delivery system.

Other

#13 Consumer information = standard basic plan

#34 Dental Policies – rates and forms process; not subject to same rules.

#5 Link to navigators

Not on List

Selection of the Essential Health Benefits (EHB). Not an Exchange activity - the OIC can do analysis; ultimately Governor's choice.

Action Register

What/Task	Who	When
1. Prepare notes from meeting	CESD	5/2/12
2. Roles & Responsibilities - Project Support Agency Liaison (Attachment 1)	OIC	5/2/12

Follow-up Questions

Question
1. Q: A:
2. Q: A:

Session Plus/Delta

A Plus/Delta was not done for this meeting.

Roles & Responsibilities

Project Support Agency Liaison

1. Track issues and risks that come up in dealing with other agencies.
2. Tracking and elevation of decision log dealing with other state agencies (decisions that need to be made by Board or decisions and rationale for decision that need to be made prior to Board; also decisions that may need to be made by multitude of agencies).
3. Track federal rules/ laws related to WV constituent state agencies with touch points on exchange.
4. Track questions and answer (questions that come up as rules, policies, IT, etc. are studied).
5. Develop outline and help strategize on eligibility issues with CHIP, DHHR and Medicaid.
6. Attend MEGAA meeting on eligibility.
7. Become familiar with AccessWV and develop strategy on possible transition of program.
8. Become familiar with BCF infrastructure assist in developing strategies for BCF worker role in Exchange.
9. Assist on kiosk project with current team members to secure project scope with DHHR.
10. Develop outline of issues that exist with WVHIN and develop strategy to engage.
11. Familiarize with BHHF research and work with Jeff Wiseman to see that BHHF follows through.
12. Work with team to develop strategies for Medicaid Issue list (beyond eligibility).
13. Work with team to develop strategies for CHIP Issue list (beyond eligibility).
14. Work with team to develop list of issues for PEIA.
15. Work with team to develop list of issues with HCA (beyond HIN).
16. Familiarize with APCD issues and develop strategy to move that project forward.