WV Health Benefit Exchange Stakeholder Meeting Summary

Group: Carriers		
Location: Offices of the Insurance Commissioner, 1124 Smith Street, Main Conference Room	**Date:** 10/9/12	**Time**: 10:00 a.m. – 12:00 p.m.
Objectives: See agenda		
Facilitator/Lead: Carl Hadsell	**Handouts**	
Attendees: Todd White, Phil Wright, Bob Roset, Dave Mathieu, Barbara Hudson, Kim Elkins, Angela Miller, Jeff Wiseman, Lisa Calderwood, Jeff Wiseman, Fred Holiday, Sherri Davis, Phil Shimer, Diana Hypes, Debi McCoy, Mary Jane Pickens, Dena Wildman, Bill Crouch, Kathy Beck, Danielle Ewing (phone), Bridget Garrison (phone), Callie (phone), Fred Earley, Pat Clark		
Next Meeting Date: Tuesday November 13, 2012 10:00 a.m. – 12:00 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**

- IT
  - IT RFP. The IT RFP for the build of the Exchange is on hold at State Purchasing and could be released if a decision to proceed with a state-based exchange is made.
  - Plan Management. Going through the Blueprint for certification, will be on hold until final decision is made. The way the certification criteria has been outlined by HHS, completing the required documentation will be helpful regardless of model selected. The Plan Management part is the same for Partnership and SBE(State Based Exchange). Depending on the decision, the OIC will submit only applicable documents.
  - Federal Updates,
    - No rules yet on EHB. Governor Tomblin sent another letter to HHS Secretary Sebelius regarding lack of rules and guidance for essential health benefits (EHB).
    - No update on release date of market reform rule. Looking at rating factors with CCRC. We're getting concerned about knowing what benefits will be required for QHPs and non-QHPs and also how regional rating will be calculated. We need to make progress to the extent possible without final rules. We'll share analysis of what market looks like after CCRC completes a draft. It has been difficult to get answers from HHS.

  Q: Phil Wright asked if carriers could see the second letter from Governor Tomblin.

  A: Jeremiah said it's on bewv.com and that he can recirculate via email if needed. The last letter had Medicaid focus, and the second letter focuses on EHB.

  - There was some information recently released on the multi-state plans (MSPs). It was just released late last week, so by our next meeting we will have had time to analyze and will be ready to share comments.

  Q: Phil Wright asked – does EHB apply to MSP (Multi State Plans)?

  A: Jeremiah Samples – yes. State network adequacy requirements also apply.

  - Consumer assistance guidance was scheduled to be released by the end of September, but has not yet been released. We have had calls with HHS that have allowed some information, but mostly it's a reiteration of the final rule and Blueprint language. We have been given different information verbally than other states, so verbal information has limited value for planning at this point. We need to be cautious until we see guidance in writing.

Carl asked what Jeremiah wanted carriers to do with the MSP information. He would like their feedback as soon as possible.

- Provider Quality Initiative. Arnie Hassan from the WVSOM has made recommendations to the work group. We've requested a meeting with HHS to get understanding of their expectations and make the workgroup's efforts match federal requirements. Arnie's recommendations are to use CAHPS as data input and to develop a tool that will make information easily digestible to consumers. We're trying to streamlining efforts as much as possible.

- Health Insurance Literacy Study. The project team at Marshall University is in the interviewing process. A report will be available to share in coming months. OIC and carriers will be seeing an influx of questions from the public. Hopefully this project will help us all understand how to answer questions in a way that is most helpful for consumers.

- Baseline Research Project. CCRC has requested data releases from carriers and state agencies. By early November, we'd like to have all data available to plug into model. A number of issuers are probably receiving these requests from multiple states. If you're experiencing a burden trying to meet this request, talk to us so we can resolve any issues and try to ease the issue.
  - Fred Earley expressed concern about willingness to share this information and that he was surprised by the large volume of data requested.
  - Phil Wright asked what CCRC is going to do with the data.
  - Jeremiah said that there is a number of issues the data will help address: should the state merge markets? When should the exchange bring in large group market? Regulation of non-QHP market simultaneously? Annual and lifetime limits? Look at small groups to address stop-loss issues? Potential enrollees? Premium stabilization piece to evaluate what the federal models will do, etc. The OIC will protect proprietary information.
  - We hope to have all data submitted by November 9th.
  - Jeremiah said he'd be willing to meet one on one with carriers to discuss their concerns.

<u>Q</u>: Fred Earley asked if we still need this data if we do FFE.

<u>A</u>: Jeremiah said yes.

- <u>Regional Exchange Study.</u> NASHP moving forward with project and will be looking at pooling risks, jobsheds with surrounding states and sharing administrative or IT costs in a regional exchange. NASHP will interview several states, including all surrounding states, Delaware, Massachusetts, North Carolina, and Maryland. The OIC will continue to provide updates. The OIC anticipates that NASHP will be ready to present on this in January.

3. **NAIC SERFF Presentation. (Slides are being sent with these notes and available on OIC website)**

   a. Jeremiah thanked the SERFF team for attending and their hard work.

   b. Bridget Garrison and Courtney Mayorka will be giving presentation on the plan management functions in SERFF including timeline, mechanics of how SERFF will work, and communications efforts.

   c. Recapped the components of an exchange as outlined by HHS - Eligibility, Enrollment, Plan Management (PM), Consumer Assistance, and Financial Management. SERFF falls within PM but there are other pieces within PM that are outside the scope of SERFF. Plan Management is comprised of: QHP certifications, issuer account management, QHP oversight, QHP recertification and decertification.

   d. Stakeholders as identified by SERFF: state agencies, CCIIO, consumers, data providers, industry. It has been challenging to engage and coordinate all groups.

   e. SERFF started the project in November of last year when they first started hearing from states and carriers that they wanted SERFF to play a key role in product review and approval especially. They wanted to minimize regulatory burden by building off existing system and leverage the form approval system to approve QHPs.

   f. Project Objectives.

   g. Ongoing collaboration with CCIIO. In a Partnership, SERFF will be used for QHP certification. Building out the functionally for SBEs for states that have requested SERFF's help. Recently started conversations with CMS about using SERFF for FFEs also. We've been very collaborative in development to ensure consistency in interfaces. SERFF making an effort to acknowledge existing regulatory processes. Intending to maintain existing work flow. Working on joint development process and schedule.

h. Project information. Five forums so far, the 6th is November 27th. Distributed communication via HIX bulletin. If you're not receiving this info, contact Bridget who will share her contact information at the end. Over the summer, the team engaged 12-15 states in workflow interviews. Also hold subgroup calls to gain insight from carriers. Early this summer released draft data dictionary and information about data collection for QHPs. Have been sharing documentation for web services reference implementation. Will stage services of SERFF released.

i. Project information website. SERFF.com/HIX. On this site there's a crosswalk for activities if a state chose to leverage SERFF for plan management.

j. Project Timeline.

   i. September & October 2012 – ongoing development of Exchange systems. Outreach to states and insurers. Beta testing with SBEs. Continued collaboration with CCIIO. Work on standard data templates.

   ii. Nov 2012. PM forum in DC. Soon announcing training activities for states and insurers.

   iii. Dec – training activities continue. States begin to work with SERFF to configure requirements. Anticipated release date for SERFF 6.0 is December 20. Will be looking at user manual and online help tool.

   iv. Jeremiah asked if issuers were concerned about the resources available to meet these deadlines.

   v. 2013 Quarter 1 – additional releases of functionality for plan submission and review. States begin accepting plan submissions. Continued training and outreach activities.

   vi. 2013 Quarter 2 – additional states begin accepting plan submissions. Year one plans under review. Certification process begins.

   vii. 2013 Quarter 3 – Review and certification wraps up for year one plans. Plan preview period beings.

   viii. Exchanges Operational.

Q: Jeremiah asked - what is the last date that information can be passed from the state to the feds for certification.

A: Bridget said that's not finalized yet. Danielle said she's heard June 21 and June 30.

k. SERFF Workflow.

   i. Filings and Plans.

   ii. Plan Submission Process

   iii. QHP Submission Data

   iv. Demonstration

   v. Review Process

Q: Phil Wright asked what the cost is for SERFF and who pays for it?

A: Jeremiah and Bridget answered. Jeremiah said it was $3,000 for first phase, $60,000 for second phase of the changes to the contract. Bridget shared that issuers will continue to pay fees for filing like existing process. Billing structure is the same for filings and plans.

Q: Jeremiah asked if there was going to be an increased number of transactions.

l. Implementation

   i. Multiple released to support plan management.

      1. SERFF v5.16, v5.17, v6.0.

      2. Additional released panned in 2013.

        3. Working with NCQA and URAQ to include quality and accreditation information.
    ii. Training.
        1. Web-based training will be offered for insurers.
        2. Sessions will be announced closer to the release date.
        3. Updates will also be made to the SERFF user manual.
        4. The SERFF Help Desk will be prepared to support questions once in production.
    iii. Questions?
        1. http://www.serff.com/hix.htm

Q: Fred Earley asked if carriers could have this presentation electronically.

A: Bridget said yes, she'll email to Jeremiah who will circulate and also post on bewv.com.

Carl asked if there were any other questions, comments, or suggested topics for the next meeting.

Commenting on an action from the last meeting, Jeremiah shared that we have asked HHS for an example of the agreement that will exist between the state and HHS. No response yet.

Next Meeting

The next meeting will be held Tues., November 13, 2012   10:00 a.m. – 12:00 p.m.

Action Register

What/Task	Who	When
1. Prepare notes from meeting	OIC	10/15/12
2. Review multi-state plan (MSP) information and provide OIC feedback.	Carriers	10/30/12
3. Share Plan Management slides electronically (on website)	SERFF team	10/12/12

Follow-up Questions

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

Session Plus/Delta

A Plus/Delta was not done for this meeting.