

WV Health Benefit Exchange Stakeholder Meeting Summary

Group: Providers		
Location: OIC 4 th Floor Main Conference Room, Charleston, WV	Date: 7/24/12	Time: 1:00 p.m. – 3:00 p.m.
Objectives: See agenda		
Facilitator/Lead: Matt West	Handouts: Draft Blueprint for Approval of Affordable State-based and State Partnership Insurance Exchanges ACA Timeline diagram	
Attendees: Kathy Beck, Jane Cline, Diana Hypes, Kira Miskimmin, Jeremiah Samples, Phil Shimer, Matt West		
Next Meeting Date: Tues., Aug. 28 th , 2012 1:00 p.m. – 3:00 p.m.		

Discussion Points

1. **What's New OIC newsletter** – A copy of the July *What's New OIC* newsletter was emailed to each stakeholder. 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

We are prepared to release the RFP when the state declares the model to be used. The RFP would need modified if the state were to choose a partnership model.

b. Plan Management

We continue to work with NAIC and SERFF on IT upgrades required for plan management. We have talked with HHS about using other standard tools, such as SBS or NIPR, for plan management functions. NAIC will be meeting with issuers in early August to discuss plan management.

We are working with HHS on determining what is required of states in a partnership model.

There is some uncertainty about requirements and process for evaluating network adequacy and discriminatory practices.

c. Federal Updates

There are still several rules that HHS has not finalized yet. We continue to wait on the release of rules on market reform, eligibility, QHP, cost of IT, backfilling categories in EHB benchmarks, meaningful thresholds, and others.

HHS has given more flexibility on the timeline for Level 1 and Level 2 Establishment grants. The final application deadline was previously June 2012, but has been moved to October 2014. States can now apply for more funding at a later date, which allows more time to explore and assess other options. It will also extend the timeframe by which a state has to use the Level 2 grant funds.

HHS will be coming out with another quality rule soon, but it does not need to be fully implemented until 2016.

Q: Can riders be included in benchmarks for EHB?

A: Originally they were not. They are now included. This does not substantially affect the EHB benchmark plan work done in West Virginia. Some other states are affected.

d. Other

Jeremiah gave brief summaries of the several research projects, including:

- Baseline Research Project – A contract will soon be awarded to a vendor who will research feasibility of establishing and operating an exchange; the project will include economic modeling and actuarial analysis.
- Marshall University – health insurance literacy
- WV School of Osteopathic Medicine – WVSOM is developing criteria for the quality assessment of providers and services in the Exchange.
- WVU School of Public Health – WVU is developing evaluation metrics and a plan for assessing the impact of the Exchange on the economy, health, and consumers.
- WV Oral Health Program – The OHP is researching the state’s current dental insurance usage and needs as well as formulating recommendations for stand-alone dental plans on the Exchange.
- CHIP – The OIC has entered into an MOU with CHIP to research special considerations that will need to be made for case-mixed families and how the current CHIP population will be affected by the Exchange.
- Regional Exchange Research – The National Academy for State Health Policy (NASHP) will be researching the possibilities of forming regional exchanges in the future, including potential to leverage IT systems, share administrative costs, or combine risk pools.

Some of these groups will begin to give their reports next month. Please let the OIC or CESD know if you have any preference on which group you would most like to hear from.

3. **State-based and State Partnership Insurance Exchange Blueprint**

Jeremiah reviewed the ACA timeline and Table 1 of the Blueprint handout, Roadmap for Completing the Exchange Application, which shows what responsibilities exist for states in partnership scenarios. In the Plan Management Partnership Exchange, HHS requires that states be able to perform all tasks related to plan management. We need to find out how HHS would compensate for any employees working for the state.

In the Consumer Assistance Partnership Exchange, states will have some responsibility to assist with the navigators, but we don’t know yet what those responsibilities will be. HHS will still operate the grant process, do the training for navigators, require navigators to use their web portal, etc. We need to find out what the state’s role is. Faith-based organizations, local health departments, DHHR county offices, and FRNs were discussed as organizations that may provide some type of consumer assistance.

Jeremiah asked that everyone start thinking of questions they would like to have answered regarding the Consumer Assistance (e.g., What funding would be available?).

Next Meeting

The next meeting will be held Tuesday, August 28, 2012. 1:00 p.m. – 3:00 p.m.

Action Register

What/Task	Who	When
1. Prepare notes from meeting along with request for comments about Consumer Assistance.	CESD	8/5/12
2. Review the Draft Blueprint handout and provide questions to Jeremiah that you would like to have answered by HHS.	Consumers	
3. Send out timeline handout to everyone.	CESD	With notes

Session Plus/Delta

A Plus/Delta was not done for this meeting.