



*DC Health Benefit
Exchange Authority*

Meeting Minutes

December 12, 2012

5:30pm – 8:30pm

899 North Capitol St., NE

Washington, DC 20002

Members Present:

Dr. Mohammad Akhter (Chair), Dr. Henry Aaron, Kate Sullivan Hare, Dr. Leighton Ku, Dr. Saul Levin, Diane Lewis, Kevin Lucia, William White, Wayne Turnage, Khalid Pitts¹

Members Absent:

David Berns

Opening and General Updates:

- The meeting was called to order by Dr. Akhter and attendance was taken by roll-call.
- Dr. Akhter welcomed everyone in attendance and gave a brief overview of the agenda items.

I. Approval of Minutes

- The Board reviewed the prepared minutes from the November 28, 2012 Executive Board Meeting.
- Motion was made and seconded to approve the minutes. The minutes were unanimously approved by the Board.

II. Executive Director's Report

- Sandra Robinson gave updates on the major activities of HBX:
 1. Financial
 - a) FY13 Budget has been loaded and HBX has received its EIN number.
 - b) MOU is being established to transfer funds from DHCF.
 - c) Working to complete FY14 budget; due in a week.
 2. Human Resources
 - a) Completed position descriptions for key positions, which will be posted through DCHR and on HBX website.
 3. Facilities
 - a) DGS confirmed that HBX will be temporarily moving to suite 707 North of 441 4th St., NW.

¹ Present via teleconference

- b) Working with telecommunications to maintain the same numbers.
- 4. Procurement
 - a) Working with OCP to post a number of procurements within the next 30 days and to establish a purchase card for our agency.
 - b) Procurements will also be posted on our website.
- 5. Stakeholder Engagement
 - a) Stakeholder engagement will be winding down for the holidays. A new schedule of meetings will be established moving into January.
- 6. Additional Information
 - a) Reminder – The next Board Meeting will take place Jan. 10, 2013 in the Chambers at 441 4th St., NW. All future meetings will be held at that location and will be moving to a monthly format, unless otherwise needed beforehand.

III. Board Working Committee Summary Reports

- *Kate Sullivan-Hare - Marketing and Consumer Outreach*
 - 1. Strategic Communications Plan
 - a) The Committee felt that additional work on the plan was not necessary since most of the activities had already occurred or are no longer necessary. The consultant, The Crider Group, was given the opportunity to close-out their work and present a final copy of the Plan.
 - b) Residual activities from the plan that focus on citizen awareness about the Exchange and the HBX will continue to take place through 2013 but additional communications and marketing efforts will be supported through another procurement.
 - 2. Motion made and seconded to approve the Strategic Communications Plan to become the operational structure for HBX. The Plan was unanimously approved by the Board.
- *Dr. Leighton Ku - IT Infrastructure and Eligibility*
 - 1. No update at this time.
- *Diane Lewis - Business and Operations*
 - 1. Recommendations received from HRIC of additional Advisory Committees were reviewed and revised.
 - 2. Motion made and seconded to approve the Resolution for additional Advisory Committees.
 - a) Questions were addressed from Board Members:
 - (1) Will there be the ability to add more committees in the future?
 - (a) Yes.

- (2) Suggestion made to include a producer, an agent, and a plan management consultant as required members of the Plan Management Committee.
- (3) Motion made and seconded to make an amendment on Plan Management Committee to include a plan management consultant outside of the four major plans on the exchange with health benefit design expertise.
 - (a) The Amendment was unanimously approved.
- 3. Additional Advisory Committees were unanimously approved.
- 4. The Executive Director search has been completed. Mila Kofman was recommended as the Executive Director of the HBX.
 - a) Motion made and seconded to approve the Recommendation of the Executive Director.
 - b) Recommendation was unanimously approved via roll-call vote.
 - (1) Kevin Lucia recused himself from voting to ensure no conflict would arise given that he has previously worked with Ms. Kofman.
- Kevin Lucia - *Insurance Market*:
 - 1. No update at this time.

IV. PPACA Regulatory Update

- Brendan Rose, *DISB*
 - 1. High level overview of recently released guidance from HHS and CCIIO with regards to both the Essential Health Benefits as well as Market Reform Proposed Rules.
 - a) EHB Summary
 - (1) This rule outlines health insurance standards related to the coverage of EHB and the determination of actuarial value (AV).
 - (2) Rule answers questions raised by Commissioner in District's EHB submission and provides clarity on other outstanding issues.
 - (3) Topics discussed included:
 - (a) Benefit Selection
 - (b) Prescription Drug Benefits
 - (c) Discriminatory Benefit Design
 - (d) Cost Sharing Requirements
 - (e) Small Group Market Deductibles
 - b) Market Reforms Summary
 - (1) Published to implement several key provisions of ACA to prevent discrimination against people with pre-existing conditions and protect consumers from abuses

- (2) Provides guidance on rating, rate review, catastrophic plans, and employer contribution methods in the small group market among others
 - (3) Focused primarily on ACA carrier requirements
 - (4) Topics discussed included:
 - (a) Employer Contribution Methods
 - (b) Catastrophic Plans
2. Floor open to Public Comments
- a) Claire McAndrew, Families USA
 - (1) Feels it was a smart decision to take more time to focus on these issues.
 - (2) Agrees with Dr. Levin, not a lot of network providers especially in the area of mental health.

V. Information Technology Update

- Bonnie Norton, *Health Care Reform & Innovation Administration*
 - Marina Havan, *CIO, Department of Human Services*
1. Overview of DC Access System (DCAS)
 - a) DCAS Background and Vision
 - b) DCAS Funding
 - c) Current IT Environment
 - d) DCAS Description
 - e) DCAS Implementation Timeline and Milestones
 - f) Status of DCAS Implementation
 - g) DCAS Governance
 - h) Next Steps
 2. IT System Integration Vendor has been selected, but still in process.
 - a) DCAS will be replacing the mainframe eligibility system that DHS is currently using.
 3. Floor opened to questions from the Board.
 - a) Are any other states implementing the same “one-stop-shop” method?
 - (1) Yes - Maryland, Pennsylvania, Connecticut, Rhode Island and a number of other states.
 - b) How are the other states doing?
 - (1) 6 states have received conditional approval, but Ms. Havan is not sure which of them are using a similar method as HBX, but they have to meet the same conditions.
 - c) How far is HBX from receiving conditional approval?

- (1) The review of our blueprint by CCIIO has gone very well and they anticipate granting conditional approval in the next week or two.
- d) What are the implications if the timelines are not met?
 - (1) It is likely that it would impact full certification and DC would have to default to the federally facilitated exchange.
 - (2) If there is a default to the federal system, is Medicaid prepared to do an overlap with their system so that Medicaid can still make eligibility determinations?
 - (a) A large overhaul would have to be done of the current mainframe system, which does not do real-time, online eligibility. The federal system would have to begin making eligibility determinations.

VI. Adjournment

- The meeting adjourned at 7:40pm.

VII. Next Steps

- Next Board Meeting is Thursday, January 10, 2013 in the Chambers on the first floor south lobby at 441 4th St., NW at 5:30 pm.