



**Standing Advisory Board Meeting
Minutes**

Date: Tuesday, October 29, 2019
Time: 1:30 PM
Location: 1225 “Eye” Street NW, 4th Floor, Board Conference Room or by Conference Call
Call- in Number: 1-650-479-3208 access code: 734 944 142

Members Present: Dave Chandrasekaran, Jill DeGraff, Billy MacCartee, Claire McAndrew, Dania Palanker; and Chris Gardiner joined the meeting late

Members Absent: Kevin Dougherty

I. Welcome, Opening Remarks and Roll Call, Claire McAndrew for Chris Gardiner, Chair

Vice Chair McAndrew chaired the meeting noting that Chris Gardiner had been detained and would be unable to chair. She called the meeting to order at 1:35 p.m. A roll call of members confirmed that there was a quorum of the Standing Advisory Board (SAB) with five members present.

II. Approval of Draft Agenda, Claire McAndrew for Chris Gardiner, Chair

It was moved and seconded to approve the draft agenda. The motion passed unanimously by voice vote.

III. Executive Director Report, Mila Kofman, Executive Director

WINDOW SHOPPING: This year, we have implemented window shopping which allows people to preview 2020 health plan options on DCHealthLink.com and use Plan Match to compare pricing and other features. This feature is something the federal marketplace has done and several other states and we prioritized it because it has been popular. It went live on October 17th and we have been using social media to promote it.

OPEN ENROLLMENT DATES: Thanks to work done by the SAB, we are pleased to remind everyone that our three-month open enrollment period starts Friday, November 1, 2019 and goes through January 31, 2020.

SATURDAY, NOVEMBER 2 COMMUNITY DAY & HEALTH FAIR: Once again, we are collaborating with Mayor Bowser to host an open enrollment event on Saturday, November 2 from 10 -2 at the Woodridge Library in NE. The library is in Ward 5 near the Home Depot off Rhode Island Avenue. Flyers for this event are in your folders, were distributed via email, and are posted on the HBX website as well. We encourage you to join us and to share the invitation with family, friends, neighbors, and organizations you work with to help spread the word.

KEY MESSAGING:

STANDARD PLANS: We are promoting our standard plans as smart choices. These plans have the same benefits and same out-of-pocket costs (deductibles, copays, coinsurance) and make it easy for residents to compare plans based on quality and networks. These plans are also designed to add value. They cover these outpatient services pre-deductible:

- Primary care visits
- Specialist visits
- Mental health and substance use disorder outpatient services
- Generic prescriptions drugs
- Urgent care

We are focusing on paid media to promote this messaging. We have also re-tooled our search engine results display to highlight the standard plans.

PUBLIC CHARGE: Even though there is a current nationwide injunction on the Department of Homeland Security Public Charge rule, we are highly concerned about the negative consequences it will have on people enrolling in health coverage through DC Health Link. We will have immigration attorneys at our one touch open enrollment events at Carlos Rosario and interpreters for them as well. We are coordinating the legal assistance via grants the Mayor issued to immigration organizations. The chilling effect of this rule, along with the proposed one from Department of State and the Trump proclamation requiring immigrants to prove insurance coverage or wealth prior to entering the country are all contributing to this chilling effect.

INDIVIDUAL RESPONSIBILITY REQUIREMENT: As a reminder, the DC Individual Responsibility Requirement is law. That means when people file insurance in 2019, if they do not have health insurance and do not qualify for an exemption, they will face a penalty on their DC income taxes. In our local law, we protected anyone at Medicaid eligibility levels from paying the penalty and the same is true for the Alliance program. Last year, through your work, we initiated a time-limited special enrollment period for people who learned of the District individual responsibility requirement when filing their 2018 taxes. Here is a head's up that we will be coming back to you later in November or early December to consider another time-limited SEP for tax filing season this year as well.

HEALTH REIMBURSEMENT ARRANGEMENT (HRA) TOOLS:

This is important information for individual market customers and small business owners. We are building two new online tools to help DC Health Link Customers investigate whether new HRAs created by the Trump Administration might be a good option for them.

The Trump Administration has created two new forms of health reimbursement arrangements that enable employers to set up HRAs for their employees to be reimbursed tax-free for health insurance premiums. For employers that do not offer health benefits, this could be a new way they could still contribute toward their employees' health care costs.

We will have a tool on DC Health Link for employees to see if they should use an HRA their employer offers (since in some cases, opting out of the HRA and getting APTC would be cheaper). And, we will have another tool for employers to investigate how offering an HRA would reduce their employees' health coverage costs.

We will email an update after the site goes live.

SHOP UPDATES:

SHOP SPECIAL OFFER: Also on the SHOP side, it is important to remember that we provide a special offer for groups that start their plan year on January 1. These employers are not required to meet the 50% contribution threshold or the two-thirds of employees participation requirements. This gives employers the option of offering benefits at less financial commitment and may make it easier for some to begin to do so. Please help us spread this word as well.

SHOP ONLINE ENHANCEMENT: Since we last met, we also deployed a new feature for our small businesses which lets them auto-pay their monthly health insurance bill. This is a feature many have requested and we are pleased to be able to offer this upgraded service. Of our more than 5000 small business customers nearly 1000 have signed up in the first couple of months.

Ms. DeGraff noted that since the District adopted its Family Medical Leave Act, she as a small employer has been inundated with emails, and it is effective. She wondered if that might be a channel to reach the small business decision makers. Ms. Kofman noted that with respect to the individual responsibility requirement, the Office of Tax and Revenue has a large role and we are working closely with that agency. OTR's blogs have reached tax preparers and others. Ms. Kofman liked the idea of email and working with OTR.. She also noted that the Mayor sends out "blasts" to various groups on a variety of issues.

IV. Discussion Item

a. HBX FY 21 Preliminary Staff Budget Presentation– Mila Kofman, Executive Director

Ms. McAndrew said she has benefitted in the past from these budget briefings and found them quite informative. Ms. Kofman said she appreciated the feedback of the SAB in finalizing the staff-recommended to the Executive Board.

Ms. Kofman walked through the staff-recommended [budget](#).

Ms. DeGraff asked how the budget analyzed as an amount per employee lined up with other agency budgets. Ms. Kofman noted that the Massachusetts Health Connector program has resulted in a reduction of HBX expenses by about \$1.3 million. She also explained personnel costs versus non-personnel costs. She further discussed the cost-allocation arrangement with DHCF (Medicaid agency) and how it is reflected in the budget.

Ms. DeGraff asked if the Contact Center contract was still Maximus. Ms. Kofman said yes, and that recently an RFP had been sent out and Maximus was chosen again. The Contact Center is cost-allocated with DHCF (Medicaid), with the HBX portion being 26%. Ms. Kofman noted that Medicaid cost-allocation must be approved by CMS each year, and if it is not approved, DHCF may need to think about another option. Ms. DeGraff asked about ramifications if DHCF launched its own Contact Center. Ms. Kofman said it would impact the space in that HBX's Contact Center would not need the full space the present Contact Center occupies. DHCF might want part of the space. Ms. DeGraff said she was concerned that budget issues might affect the amount of the assessment, and she did not want to drive carriers from the exchange. Debbie Curtis, HBX staff, noted that the assessment is against all health carriers doing business in the District, not just the carriers on the exchange, so any impact is spread over a large number of carriers.

Mr. Gardiner joined the meeting during the course of the presentation.

Ms. DeGraff asked about the history of rate increases in the exchange, and about quantification of the value of actuarial services provided for rate review. Ms. Kofman said she could provide information.

Mr. Gardiner and Ms. McAndrew both thanked the HBX staff for the excellent work in developing the budget and soliciting input prior to its finalization.

V. Public Comment

No public comment was proffered.

VI. Closing Remarks and Adjourn, *Claire McAndrew for Chris Gardiner, Chair*

The meeting was adjourned at 2:39 p.m.