



**DC Health Benefit  
Exchange Authority**

**Health Benefit Exchange Authority Executive Board Meeting  
MINUTES**

**Date:** March 24, 2021  
**Time:** 5:30 PM  
**Location:** Via WebEx/By Video or Conference Call Only  
**Call- in Number:** 1-650-479-3208; access code: 731 476 505  
**Join by Video:** [Join meeting](#)

**Members Present:** Henry Aaron, Diane Lewis, Leighton Ku, Gabriela Mossi, Ramon Richards, Tamara Watkins, Karima Woods

**Members Absent:** LaQuandra Nesbitt, Khalid Pitts, Wayne Turnage, Laura Zeilinger

**I. Welcome, Opening Remarks and Roll Call, *Diane Lewis, Chair***

A roll call confirmed a quorum with five (5) voting members present (Dr. Aaron, Ms. Lewis, Dr. Ku, Mr. Richards, and Ms. Watkins).

**II. Approval of Agenda, *Diane Lewis, Chair***

Ms. Lewis proposed to start with the Social Justice & Health Disparities Working Group report to accommodate members' schedules. It was moved and seconded to approve the amended agenda. The motion carried unanimously, with Dr. Aaron, Ms. Lewis, Dr. Ku, Mr. Richards, and Ms. Watkins voting yes.

**III. Approval of Minutes, *Diane Lewis, Chair***

It was moved and seconded to approve the minutes of the February 10, 2021 Board meeting. The motion carried unanimously, with Dr. Aaron, Ms. Lewis, Dr. Ku, Mr. Richards, and Ms. Watkins voting yes.

**IV. Social Justice & Health Disparities Working Group Report, *Diane Lewis, Chair***

Ms Lewis reminded members that the Board established the Social Justice & Health Disparities Working Group and its charge last September as an outcome of the *East of the River* report HBX sent to Health Committee Chairman Vince Gray.

The working group regularly meets now every two weeks on Thursday afternoons. Over the last month, the working group focused on two areas:

First, we explored insurance plan design, including a discussion with and presentation by Dr. Mark Fendrick, Professor and Director of the Value-Based Insurance Design Center at University of Michigan. The working group will continue to explore how or whether value-based insurance design or other types of insurance design changes could address our group's social justice goals.

Second, we explored the collection and use of racial and ethnic data. We heard from Dr. Cara James of Grantmakers in Health and Michelle Jester of America's Health Insurance Plans on how plans collect racial and ethnic data. We learned that commercial health plans overall collect this data at a significantly lower rate than Medicare or Medicaid plans. The working group will continue to consider how and when our local plans collect racial and ethnic data, and how it is or can be used for health equity initiatives.

The working group's next meeting is tomorrow, when Aetna, United HealthGroup, and Kaiser Permanente will present on their health equity initiatives.

As a reminder, as part of these efforts we are focusing on steps that can be addressed under HBX's authority and that are relevant to the individual and small group markets covered through DC Health Link. We continue to work towards the goal of presenting recommendations to the Board for consideration.

Ms. Kofman noted that an expert presented on noted biases and discrepancies in treatment of people of color.

**V. Executive Director Report, *Mila Kofman, Executive Director***

**AMERICAN RESCUE PLAN – President Biden signed the American Rescue Plan Act on March 10, 2021.** It is a fundamental shift in how we view private health insurance affordability for all income earners and the biggest expansion of the Affordable Care Act (ACA) since 2010. District residents covered through DC Health Link will save approximately \$36 million in premiums for individual and family health insurance.

**Three key provisions:** The American Rescue Plan:

1. Reduces premiums for health insurance through DC Health Link:
  - a. Lowers maximum premium for people with income under 400% FPL. With the current APTC customer pool, 87% of the total premium would be paid for by federal tax credits for all of 2021 and 2022;
    - Documented immigrants who do not qualify for Medicaid coverage will be able to get a plan for just a few dollars a month depending on their income level.
  - b. Extends protection to people with income above 400% FPL so no one would pay more than 8.5% of income for health insurance. A person with an annual income of \$51,040 or higher (\$104,800+ for a family of four) would not pay more than 8.5% of their income for premiums (using a silver plan baseline).
  - c. Applies for all of 2021 and 2022. HBX and other state-based marketplaces are working to make this permanent.
2. Provides health insurance for as little as \$2/month to people who lost their jobs,
  - a. Even if the person is no longer receiving unemployment insurance, as long as the person received unemployment insurance in 2021, the person will still qualify for private health insurance for as little as \$2/month through DC Health Link.
  - b. Cost sharing reductions will mean no deductible and significantly reduced copays and coinsurance.
  - c. Program duration is for 2021.
3. Pays for 100% of COBRA and DC COBRA for laid-off workers.
  - a. Free COBRA for laid off workers and dependents from April 1 to September 30, 2021.

Dr. Ku asked who will implement the COBRA provisions. Ms. Kofman said that discussions on that topic are ongoing. When ARRA was enacted, the employer paid the premium, but got the credit and it was netted out of quarterly employer withholding taxes. Also, the federal government developed a model notice at the time to get the word out.

**HBX IMPLEMENTATION UPDATE:**

- ✓ We issued a press release to help inform residents of these benefits.
- ✓ We developed FAQs and a briefing document, which we sent to the Mayor's team and Councilmembers.
- ✓ We posted the FAQs and a statement about the American Rescue Plan on DCHealthLink.com. We also translated these FAQs into Spanish, Korean, Amharic, French and Mandarin. We will post the translations by March 26 once we complete our review. Note that our website already provides a Google-based translation.
- ✓ We sent information about the new benefits and how to obtain them to our existing full-pay customers, existing customers with premium reductions (APTC) and residents who are not enrolled, as well as our DC Health Link brokers.
- ✓ We are also working with all our health plans on a strategy to implement the COBRA subsidy for our SHOP customers. We had discussions with the U.S. DOL and other SBMs with SHOP.

- ✓ On the individual side, we are working with KaiserPermanente and CareFirst BlueCross Blue Shield on implementation, outreach, and issues like not resetting accumulators when customers change plans.
- ✓ We developed new scripts and material for the contact center. We plan to share the scripts with health plans to use with their call centers.
- ✓ We trained the contact center staff on the American Rescue Plan.
- ✓ We are scheduling a technical system training for Assisters.
- ✓ We will meet with business partners.
- ✓ We provided information to brokers and will hold training sessions if necessary.
- ✓ We met with the Hispanic Leadership Advisory Council and provided an overview of the new law.
- ✓ Radio, print, and digital advertising will start at the end of April/early May.
- ✓ We are planning community virtual townhall events and other outreach for end of April and May.

#### DCHEALTHLINK.COM SYSTEM READINESS:

- ✓ DC Health Link is on track to have these new benefits available starting April 1 for new customers and for existing customers who currently do not get premium reductions.
  - New customers and existing full-pay customers will have to provide income information to get the monthly premium reductions.
  - Existing customers can go into their DC Health Link account and click on a new premium reductions option to provide income information.
- ✓ We will also have a cost calculator/prescreening tool for customers to see if they are likely to get monthly premium reductions.
- ✓ Importantly, because the American Rescue Plan makes premium reductions effective January 2021, existing customers can apply the amount of reduction to the rest of the year if they were covered through DC Health Link in early 2021 (customers can do this now manually in their account; we will deploy a new automated tool in April).
- ✓ In early/mid-April, DC Health Link will automatically run eligibility for existing APTC customers who currently receive premium reductions and automatically lower their monthly premiums.
- ✓ To make it as easy as possible for residents, starting April 1 we will open DCHealthLink.com to open enrollment status. This opening means that there will be American Rescue Plan Open Enrollment so District residents can benefit quickly from the new American Rescue Plan premium reductions.

**HEALTHCARE.GOV IMPLEMENTATION:** Healthcare.gov will implement expanded APTC on April 1 for new customers. Also, existing customers will be able to reapply (it is not automatic as it is with us). The federal government will add new functionality later this summer for people who qualify for almost free coverage because of unemployment insurance benefits.

We have reached out to DOES to collaborate on outreach to residents who qualify for unemployment insurance. We will be working closely with DISB, DHCF, and DHS and all our governmental and non-governmental partners on general outreach.

## **IT UPDATES – already deployed**

The IT Committee met on March 1 and HBX staff briefed the committee on the implementation strategy.

**HBX Premium Reductions Application:** We deployed our new application on March 2. This deployment allows our existing full-pay customers to go into their account, add income information to get premium reductions, and apply premium reductions to their premiums instantly. Previously, customers who applied for APTC and CSRs had to complete their application in CURAM.

**QuickCheck:** We deployed a new QuickCheck feature on DC Health Link to enable customers to determine, based on just the ages and income of each member of a resident’s household, whether they are likely eligible for Medicaid or private insurance. The resident is then automatically routed to either the Medicaid application (CURAM) or to our application based on these results. Customers who want to apply directly for Medicaid, can do that without QuickCheck.

### **Immediate Future deployments:**

- APTC Expansion under the American Rescue Plan – April 1 (for new and current full-pay customers)
- Nearly free health insurance for residents who had unemployment insurance (UI) – April 1
- Automatic redeterminations for current APTC customers – early/mid-April
- Open Enrollment status – April 1. Note that COVID-19 SEP is still in effect and residents can have immediate start dates for coverage.
- Working with DCAS to update CURAM for customers who go through CURAM to get expanded APTC and UI.
- Updating general information for consumers on DCHealthLink.com – April 1.
- Updating plan match with expanded APTC – April 1.

Dr. Ku asked if we had any “guesstimates” about the number of people who would update their income information to obtain reductions. Ms. Kofman said no, but that we are planning robust outreach to encourage our customers to do so.

**HBX INTERNAL SOCIAL JUSTICE WORK:** Leadership team members continue to implement their 12-month strategic plans and have successfully completed many of the short term (three month) actions, while also making significant progress on the six-month goals. We continue to have all-staff trainings, with the most recent one focusing on resilience. Training also includes a guest speaker series organized by the HBX Social Justice Advisory Committee (SJAC). For the first speaker, in honor of Black History Month, HBX hosted a conversation with the President of the NAACP, Derrick Johnson. He was inspirational and shared great insight on the history of the civil rights movement and the importance of generational

activism. His personal path to success and his advice “to be” yourself was reaffirming and important for many. On March 26, in honor of Women’s History Month, Congresswoman Eleanor Holmes Norton will speak to us. I will send the invite to the Board.

In addition, SJAC organized a Soul Food cooking event led by one of our staff members. In addition to being really fun, the event provided an opportunity for on-going discussions about how people experience American life, depending on their race and ethnicity. It also reminded us of institutional racism – two sets of prices for business owners, being paid to give up valuable land – just to name a few. Our discussion with Mr. Johnson and our internal staff events are important, even though these can be difficult conversations. Through these, each of us gains a better understanding of what it is like to be in another’s shoes. And ultimately, these discussions and our on-going activities will help us contribute to a more equitable America. SJAC has also initiated a monthly newsletter.

**UPCOMING COUNCIL HEARING:** The Health Committee will hold HBX’s annual Budget Hearing on April 30. As usual, our Board Chair, Diane Lewis will also testify at the hearing.

As a reminder, the Health Committee held our annual performance oversight hearing on February 12. It went very well, with Chamber partners, Assister organizations, brokers, and individual and small group customers testifying about how great DC HealthLink is and what a great job HBX Board and staff are doing.

### **OTHER FEDERAL UPDATES**

**Update on Public Charge:** On February 22, 2021, the U.S. Supreme Court agreed to hear an appeal of one of the many cases challenging the public charge rule. On March 9, the Court dismissed the case based on a joint request from the Biden Department of Justice and the plaintiffs. The next day (March 10), the U.S. Citizenship and Immigration Service (USCIS) announced it was no longer implementing the prior Administration’s interpretation of the Public Charge statute, as outlined in the August 2019 Rule, and no longer requiring the associated forms for visa applicants. Instead, USCIS is reverting to the 1999 interpretation, which does not treat coverage under Medicaid, public housing, or SNAP as negative factors in the Public Charge determination.

### **COUNCIL AND MAYOR UPDATES**

Mayor Bowser extended the Public Health Emergency until May 20, 2021.

### **PERSONNEL – leadership team**

**Allen Gutierrez** has joined the HBX leadership team as the Director of Business Development. Allen will lead our efforts to expand coverage and retention rates among communities of color. He will also focus on Hispanic, Black, and women-owned businesses that have been

disproportionally impacted by COVID-19 and will serve as our spokesperson with Spanish-speaking media. He was recently Deputy Administrator at the Small Business Administration.

**We also have a new Interim CIO -- Alix Pereira.** Alix previously was Assistant Director of MIPO for EDI. Alix has been deeply involved in our business and IT operations during his six years at HBX, and his experience with the MIPO division will help ensure our IT team continues to grow stronger.

**VI. Finance Committee Report, Henry Aaron, Chair**

The Finance Committee met virtually on March 4. Ms. Lewis and myself were in attendance. The entire meeting consisted of reporting and no votes to approve any expenditures occurred.

**CAFR AUDIT:** A firm new to us, McConnell & Jones, performed the city’s “Comprehensive Annual Financial Report.” The auditors reported that HBX received an unqualified opinion, in other words, a clean audit. We asked if the auditors observed any area for improvement, and the auditors told us that nothing popped out to them. The auditors originally questioned the classification of reserves, but stated that how we are classifying reserves is appropriate. The audit report is posted at [www.hbx.dc.gov](http://www.hbx.dc.gov).

**INVESTMENT UPDATE:** Our last segment of reserves in a Treasury bill matured at the end of February. The money was reinvested into a six-month Treasury Bill, which provides a bit better rate than the money market funds. Some money market funds were invested in the note as well.

**CBEs:** Ms. Kofman told us that two of our CBEs, New Light Technologies and Networking for the Future, hold contracts with HBX that will expire in May with no option years left. Staff is assessing whether we still need these services, as we have used them less over the last several months. If we still need them, staff will look at the DC Supply Schedule to see if better rates are available. Staff is anticipating a maximum 12-month contract if needed.

**REVIEW:** As we do each month, the Finance Committee reviews the monthly budget and spending reports, IT development reports, purchase order reports, and contracts report. We found nothing of concern.

**VII. Public Comment**

No public comment was proffered.

**VIII. Closing Remarks and Adjourn, Diane Lewis, Chair**

Ms. Lewis noted that Ms. Mossi had joined the meeting during the Executive Director’s report.

The meeting was adjourned at 6:24 p.m.