

Standing Advisory Board Meeting

Draft Minutes

Date: June 9, 2023 **Time:** 12:00 p.m.

Location: via Zoom video conference

Members Present: Rebecca Barson, Dave Chandra, Chris Gardiner, Claire McAndrew, Dania

Palanker, Robert Metz

Members Absent: Dock Winston, Margarita Dilone

I. Welcome, Opening Remarks, Roll Call, Chris Gardiner, Chair

A roll call confirmed a quorum with six voting members present (Ms. Barson, Mr. Chandra, Mr. Gardiner, Ms. McAndrew, Mr. Metz)

II. Approval of the Draft Agenda, Chris Gardiner, Chair

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

III. Approval of the Draft Minutes, Chris Gardiner, Chair

It was moved and seconded to adopt the draft minutes of the November 10, 2022 SAB meeting. The motion passed unanimously by voice vote.

IV. Executive Director Report, Mila Kofman, Executive Director

Mila Kofman: I will focus my update for you today on two areas: one is HealthCare4ChildCare, and the other one is a very quick update on the data breach we had on March 6.



Starting with HC4CC, this is an exciting new program that the city is funding to make sure that health coverage is affordable to early child development workers for employers licensed by the Office of the State Superintendent of Education. We launched this initiative on January 1 of this year, and it provides free health insurance. We pay for the silver level Standard Plan and there are three options on the individual side. Kaiser Permanente offers one option and then there are two options from CareFirst. HC4CC pays 100% of premium for these silver plans for DC residents and their dependents. On the SHOP side, the discount applied to group coverage is equivalent to the lowest cost standard silver plan. That is a Kaiser plan. They can have free coverage if they choose that plan and discounted if they choose another plan.

We have exciting data to share with you on success to date. Through May we've enrolled 97 employers (this is 144 OSSE licensed facilities) in SHOP, and those plans cover 866 employees and dependents. 47 of the 97, about half, did not offer health insurance coverage to their workers before enrolling in this program. And then looking at the other half of the employers who've signed up, about half of them have increased take up rate of health insurance by their workers. To give you the context, there are about 386 OSSE-licensed early child development centers and homes that qualify for this free or lower cost health insurance premium. We've enrolled 144 of the qualified licensed facilities.

On the individual side, there are about 800 workers who live in DC who have Medicaid coverage. We want to make sure they keep their Medicaid coverage because it doesn't Medicaid doesn't have any out-of-pocket costs. But for the 800 who are not enrolled in Medicaid, who are eligible for free, silver level coverage, we have enrolled 104 of those people in individual market coverage, we've enrolled 169 and SHOP coverage. And we also found 39 workers who we helped enroll in Medicaid coverage because they qualify. We're very pleased with the level of enrollment.

To help us reach those folks who haven't enrolled yet, both employers and residents who qualify for potential coverage we have established a grant program for HC4CC outreach. We made a request for applications and our Board approved grant funding. We're taking the same approach as we did back in 2013, when we were first starting to implement the Affordable Care Act. To reach a large population back then, there were many questions and unknowns. Our assister program that we grant funded was instrumental in helping us reach DC residents and employers. We're taking the same approach with healthcare4childcare, trusted voices in the community to help reach employers and residents to get them into coverage. This program is being looked at by other states.

A very quick update on the DC Health Link data breach. You can find more information on our website. On March 6, we learned of a data breach. We immediately engaged law enforcement. We immediately got help from a leading cybersecurity incident response firm called Mandiant. Within 2 days of discovering the breach, we were able to identify the source of the breach and shut it down immediately. Working with law enforcement, we identified what was stolen by a threat actor(s). Two of our enrollment reports were stolen. Those enrollment reports contained information for 56,415 current and past customers. Within three days of learning of the breach, we were able to secure identity theft, and credit monitoring protection for three years for all three major credit bureaus with Experian. By March 9, we were able to get the identity theft and credit monitoring protection in place and we notified the 56,415 customers. On March 10, we started general notification to other customers whose information was stored in the same manner that

these two stolen reports were stored on one of our servers. But there is no evidence that other customers' information was stolen. Out of an abundance of caution, we notified and we made the same credit monitoring and identity theft protection available to those customers. We did a public update on March 8 and another one on March 10, and then another one on March 14. As we were proceeding with this investigation, and learning more, we were able to update our customers in a very public way.

Claire McAndrew: I am excited about HC4CC you presented. I'm sure this was a very difficult issue for you all to deal with. We can't even imagine the amount of time, effort, hours, all that you've all put in to deal with this breach. Thank you so much for that work. For all of us who are so invested in DC Health Link, we were very disheartened to hear about this breach. One of the things that made me most nervous being a District resident was what Congress might do upon hearing about this. So, I did want to know if you've had any inquiries from Congress-particularly from folks who are not always respectful of the autonomy of the District. Have you heard anything like that? Any requests for oversight hearings?

Mila Kofman: I briefed six congressional committees, and all of this was bipartisan. I also testified before joint hearing of the House Oversight Cyber Committee and House Admin Oversight Committee they had they held a joint hearing in April, and we will send around a copy of my testimony. I just want to mention that when we brought in Mandiant, it was not only to help identify the breach, the source of the breach and help us with the response. But also, I've asked external experts to do a whole system review to make sure that we have a very comprehensive response, and also make sure that our system doesn't have other threat actors in it. And I'll also note that there are lawsuits filed. So, I'm somewhat limited in terms of what I can say.

Claire McAndrew: Thank you, is there anything you can say about how you feel about the current status of Congress's interest in this or whether you feel that they are satisfied with the engagement to date and have moved on to other issues?

Mila: We continue to keep them posted on everything. Because we also engaged with law enforcement, there's that aspect. So that's pretty much what I could say.

Claire: I'll make one more comment. I will say the one piece of feedback I heard about the response was that the engagement with beneficiaries was very timely. I did hear that the employers themselves felt that they were hearing from the employees before DC Health Link. I can't even imagine how hard it was to notify everyone so quickly. But one question I had was whether there has been ongoing communication with the small business employers like the actual company versus their employees, that they're looped in. But they also might just have not been receiving the communications properly and things like that.

Mila: Thank you for that feedback, Claire. One of the things we did was we spoke to the three largest chambers, the DC Chamber of Commerce, the Restaurant Association, Metropolitan Washington and the greater Washington Hispanic Chamber of Commerce and asked for their help to communicate with them for community to actually help inform the business community, as well as to emphasize the availability of the three-year identity that their credit monitoring protection that we've made available to everyone.

Purvee: We also had two webinars with DC brokers and asked them to help spread the word. Vast majority of our business customers do use brokers.

Mila: We appreciate the comments Claire you made with regard to speed of notifications. One of the hard decisions we had to make early on was with respect to credit monitoring, and identity theft protection, we could have waited another three to five days to get individualized codes from Experian to assign an individual code to each person we were making this protection available for, but that would have added more delay to us getting the notice out. So we went with a generic code, because our goal was to notify people as soon as possible.

Rebecca: I may be only direct enrollee on call. It was a little confusing who was impacted so I appreciate how timely you moved. Remarkable that you testified before Congress. When do we I was wondering about the cost for this, does this get covered by insurance? Do we expect this to show up in next year's budget?

Mila: Thank you for that question. Costs go up every year with medical inflation and utilization so premiums will go up. We are required by federal law to be financially sustainable. We have reserves we intend to use for data breach.

Rebecca: Is there insurance coverage for things like data privacy? Does that cover any of any of this?

Mila: As a governmental entity, the District has a policy. But I can't really comment beyond that, I can only tell you that, right now, our thinking is that we use our reserves to pay for what we need to pay. So, the costs of this are not passed on in higher assessment on the health carriers which gets passed on to consumers. Our assessments are very low. Initially at 1% of premium, after first couple years, we've always been under 1% of premiums. We are completely committed to maintaining that level of assessment, but health insurance premiums will go up unrelated to costs for data breach.

Dania: I'm very thankful that you guys got this out so fast. I know someone who says they had an employee who was notified, 10 days after the breach, that someone tried to open up a credit card in their name. They've been trying to track it and were wondering where to report this, to you? I realize it may just not really be a feasible for you.

Mila: I think if you can have her email us, we may have Nikki Leon on our team, our Chief Privacy Officer follow up. Help us spread the word to have people enroll in credit monitoring, separate code for adults and kids, credit monitoring works differently for children.

Medicaid Unwinding update

Purvee: In March of 2020, the federal government waived the need for Medicaid coverage in states to be recertified and that was to make sure people maintained continuous coverage during the pandemic. In DC, Medicaid enrollment increased 20% and right now just over 300,000 District residents are enrolled in Medicaid.

At the end of 2022, Congress passed legislation ending the continuous coverage requirement effective March 31, 2023. The District restarted Medicaid eligibility renewal on April 1, 2023. During that time we've had regular coordination meetings with the Medicaid agency. The

Medicaid agency has started their Medicaid terminations, and the notice for Medicaid terminations include information on how to enroll in private coverage. In early May, the Medicaid agency did their first monthly report on beneficiaries whose Medicaid coverage eligibility was terminated. We've been using that information for outreach purposes. We will be getting monthly reports and can then work with people to make sure they are enrolled in coverage whether it's through us or you know, they may have alternatives, they may go to a spouse's plan, or an employer plan. But if they don't, we want to make sure they know the choices that are available on DC Health Link. At end of March held a training session for our DC Health Link Assisters. They do the on the ground outreach and enrollment to get people one on one assistance to enroll. With lower premiums available, want to ensure people are accessing those. The Medicaid agency is having community meetings on Medicaid unwinding and demonstrating how to use District Direct account.

We are using the federal special enrollment period that runs through July 31, 2024. Anyone who was losing Medicaid can go ahead at any point in time between now and July 31, 2024, go ahead and sign up for coverage. This also provides people some flexibility -- previously you had only 60 days to enroll. This gives people more flexibility, if they don't figure out that they have been terminated. This special enrollment period applies in the small business marketplace as well. If we find people who are still eligible for Medicaid, but were terminated, we will help them get back into Medicaid.

I. Public Comment

Chris: Anyone from the public have a comment?

Nick from the Office of Open Government offered a comment: I'll put in a plug for our parliamentary procedure portal that we've launched with new partnership. You can email us you or come to us anytime with any individual questions or concerns you have about the Open Meetings Act generally. Thank you.

Roberts Rules of Order isn't the only manual out there, can bring any other questions as well.

II. <u>Discussion Item: HealthCare4ChildCare Special Enrollment Period</u>,

Purvee: Before you today is a proposed Special Enrollment Period related to HealthCare4ChildCare. The special enrollment period that will be available to HC4CC-eligible employees and their dependents, allowing them to enroll in coverage or change plans through the SHOP or Individual/Family markets at any time during the year.

Up until now, there has been a lot of flexibility because of the COVID public health emergency. That flexibility ended on May 11, 2023, and the SEP related to that ending in mid-July. So, this special enrollment period is needed because there won't be general flexibility. We are going back to our normal course of business of having open enrollment periods and, otherwise, needing a qualifying life event. We want to ensure that when we find either DC residents that would be enrolling through the individual marketplace for their HC4CC coverage, or businesses have enrolled but maybe their employees haven't enrolled right away, making sure that they have the ability, once they hear about it, to sign up for coverage. The coverage is on the individual and family side is free to the employee and their dependents. Health care for childcare on the small

business aside, provides free health insurance or lower premium health insurance depending on the choices the employers make to offer their employees. The discount is tied to the lowest cost standard silver plan on SHOP side.

Because we're still getting the word out about HC4CC and because it takes time to reach all employers and employees, we want to ensure that anytime we find them, they are able to enroll in this free or low-cost health insurance through the Health Care for childcare program on DC Health.

Rebecca: This is so innovative. Such as difficult population to enroll. You are taking a comprehensive approach to this, even enrolling people back in Medicaid. And with new grant program, getting the word out more, I really support this. This is exactly the right time to be doing this. Thrilled to hear other states are looking at this, it's a hard population to reach.

Mila: OSSE, they deserve all the credit for DC's Pay Equity Act and working with the community and stakeholders and it's not only pay but benefits. It's OSSE that came up with the idea and identified us as the place to get it implemented and develop policy. They are fantastic partners on this.

III. <u>Vote</u>, Chris Gardiner, Chair

Motion to have a SEP for HC4CC as described in posting.

It is moved and seconded to vote to approve the HC4CC Special Enrollment Period.

The motion passed unanimously by voice vote.

IV. Closing Remarks and Adjourn, Chris Gardiner, Chair

The meeting is adjourned at 12:49 p.m.