



**Statement of Diane C. Lewis
Chair
D.C. Health Benefit Exchange Authority Executive Board**

**COUNCIL OF THE DISTRICT OF COLUMBIA
COMMITTEE ON HEALTH
COUNCILMEMBER VINCENT GRAY, CHAIRMAN**

Fiscal Year 2022 Budget Oversight Hearing

Friday, June 4, 2021

Chairman Gray, members of the Committee on Health, my name is Diane Lewis and I am the Chair of the Executive Board of the DC Health Benefit Exchange Authority (HBX). Thank you for the opportunity to appear before you today.

At our Budget Hearing last June, I noted how COVID-19 spotlighted the foresight of the District to enact a state-based marketplace as a result of the Affordable Care Act. When the COVID-19 pandemic struck the District, more than 96% percent of District residents already had health coverage. A year later, the importance of being a state-based marketplace has only heightened.

Acting quickly to meet the needs of District residents and businesses when the pandemic struck, HBX opened our doors in March 2020 with fast, simple online enrollment for any District resident left uninsured during this public health emergency. We've kept our system open and extended coverage flexibilities through a board-enacted COVID-19 Special Enrollment Period that applies in both the individual and SHOP marketplaces. We worked with our health plan partners and the Department of Insurance, Securities and Banking to ensure no cost coverage of COVID-19 testing, diagnosis and treatment. We've done significant outreach to businesses with laid off workers so we can get them covered through DC Health Link. And, again, working closely with DISB, we have ensured that DC Health Link's small businesses and residents will have a year after the end of the public health emergency to pay back past due premiums.

Since enactment of the Biden Administration's COVID Relief law, the American Rescue Plan in March 2021, we've been able to do even more for District residents. That new law is the first major improvement to the Affordable Care Act. While these are temporary provisions now, the Biden Administration has signaled they want to make them permanent and we'll do everything we can to help make that happen. The new law provides:



- NEW lower health insurance premium for more residents for 2021 and 2022: lowers premiums for those who already qualify and expands who is eligible so that no one will pay more than 8.5% of income on health insurance premiums; and
- NEW temporary benefit for laid off workers for 2021: residents who received unemployment compensation in 2021 can obtain health insurance for as little as \$2/month;
- NEW temporary benefit for laid off workers: free COBRA premiums (from April 1 – Sept 30, 2021).

We immediately made changes to the DC Health Link website to implement these new benefits. We were among the first states to do so.

The other important update I'd like to provide to the Committee is the ongoing work of our Social Justice and Health Disparities Working Group. As background, the HBX Executive Board established this working group as an outcome of the East of the River Report that HBX presented to you in September 2020. I chair the working group and am joined by two other HBX Board Members who serve on it as well: DISB Commissioner Karima Woods and Tamara Watkins. Its focus is to examine practices, structures and policies that can be implemented to:

- Expand access to providers and health systems for communities of color in the District;
- Eliminate health outcome disparities for communities of color in the District; and,
- Ensure equitable treatment for patients of color in health care settings and in the delivery of health care services in the District.

This working group was established and has been meeting since the beginning of February on a bi-weekly basis. Through funding donated by the State Health and Value Strategies Program funded by the Robert Wood Johnson Foundation, HBX was able obtain the services of an expert in health equity to staff this working group. Dr. Dora Hughes is an Associate Research Professor at the Milken Institute School of Public Health at George Washington University. The working group is made up of local stakeholders that include all four DC Health Link health plans, brokers, consumer and health care advocates, community health centers, hospitals, and others committed to achieving social justice and eliminating health disparities. The working group also benefits from the participation of staff from DCHF, DC Health, DBH and DISB.

So far, the group has heard from many experts and stakeholders on their efforts to address health equity. We are now turning toward the hard work of pulling recommendations out of what the working group has learned. The goal is for the working group to come forth with recommendations that can be addressed under HBX's authority and are relevant to the individual and small group health insurance markets covered through DC Health Link.

I'll conclude by noting that the Board and staff of HBX take very seriously our commitment to ensuring every District resident gets covered. This worldwide pandemic has only

heightened that commitment. Council passage of our FY 22 budget is a vital component of continuing this mission.

Building DC Health Link and continuing its improvement is not something HBX can accomplish alone. Since day one, we've relied on your strong support Chairman Gray, and that of your Council colleagues, Mayor Bowser, our sister agencies, stakeholders, and consumer advocates. With strong consensus in the District to provide affordable, quality health coverage to all, I remain confident in our ability to continue to succeed.

Again, thank you Mr. Chairman, for the opportunity to testify today.