

Arkansas Health Benefits Planning Exchange

Steering Committee Meeting	June 14, 2011	AR Health Benefits Exchange Planning Conference Room	2:00PM – 4:00PM
-----------------------------------	---------------	--	-----------------

<p>Steering Committee Members Present: Joni Jones David Boling Fred Bean Ed Choate Representative Barry Hyde Michael Crump for Marilyn Singleton Dr. John Wayne Ray Scott Kenny Whitlock Dawn Zekis for John Selig Elisabeth Burak Patty Barker Dr. Andrew Kumpuris Deborah Bell</p>	<p><u>Staff:</u> Cindy Crone Bruce Donaldson</p> <p><u>Consultants:</u> Jerry Wilson - Meeting Facilitator Jim Glick – First Data for Government Solutions</p> <p><u>Visitors:</u> Carol Roddy Tricia Larson Bryan Meldrum Jennifer Thompson</p>	<p>Members Absent: Frank Scott Jon Woods David Deere</p>
---	--	--

Meeting Summary:

Participants introduced themselves and their affiliations.

The Meeting Summary from 5/31/11 was approved with one correction: Bryan Meldrum (not John Ryan) was guest.

Ed Choate reported that the self-chartered industry **Health Care Reform Advisory Group** met recently. This group began meeting before AID's Health Benefits Exchange Planning Workgroups were launched. It is comprised of leaders from various sectors including insurance carriers, health professional associations, and business. The group addressed whether or not they need to continue meeting, and the consensus was to continue as long as they add value. Two primary concerns discussed in their last meeting were presented: 1) Composition of AID Health Benefits Exchange Planning workgroups and the Steering Committee is not geographically representative of the State--there are too many people from Central Arkansas; and 2) We have a lot of people doing a lot of work planning the Arkansas Health Benefits Exchange, but we lack State authority for an Arkansas Exchange.

AID staff acknowledged that the workgroup and Steering Committee meetings are heavily represented by those living in Central Arkansas. The planning timeframe is short and AID staff is limited. To date, there has been poor attendance by those from outside Central Arkansas—even for monthly Workgroup meetings. What are needed is workgroup participants who will show up. Traveling to bi-weekly Steering Committee meetings would require a huge time commitment by participants. Staff is limited in being able to travel to regional meetings—already workgroup meetings consume a full week each month. Although broad geographical participation has been solicited through the 60-plus listening sessions in 15+ communities across the State, this is not the same as on-going workgroups. AID staff agreed to investigate distance meeting technology including conference calling or video technology.

Regarding legislative authority, the legislature does not meet again until January '13 and the Governor has stated he will not do an executive order. What put us in this position and how can we get a better chance of having a State-run Exchange instead of working hard and coming against deadlines that cannot be overcome? Are members of the Arkansas General Assembly getting 1500 emails primarily from the Anti-Obamacare constituents and not hearing from the people who are in favor? How do we solicit the pro voices? Are there people who really don't understand what an Exchange is? Current dialogue seems to be more political ideology than a discussion that an Exchange is a marketplace that will help people get access to health care. Are opponents against a State Exchange because they are not in favor of the Affordable Care Act and don't care if the Exchange is federally run? If people don't grasp the issue, how do we get past where we are today? Is there a non-paid, well respected person we can solicit to speak to the constituents in AR about how the Exchange is something that's good? If the spokesperson is paid, will they get discounted instantly because people will feel they are just talking because they were hired? What message do we need to create that will be understandable? Are there regional voices that need to be heard? Can companies contribute money if needed, i.e. for television commercials, radio spots, etc.? Should we do the grass roots effort? This important discussion will be continued.

Cindy Crone reported there is no update from CCIIO. We requested that CMS convene a meeting with Medicaid & Exchange Directors so we can get consistent information from the umbrella agency; we haven't yet received a response. When questioned

about a work plan by our background research and study contractor, Cindy reported that First Data has drafted a timeline for the 90 day background research project, however it has not been finalized. Neither has First Data's contract been finalized, as we are awaiting legislative review and final OSP approval.

Jim Glick – First Data reported that one federal requirement of State Exchanges is that they develop a governance model. First Data will provide a survey to help Arkansas answer those governance questions. The survey will be administered to the Steering Committee and the various workgroups. It will be an anonymous, web-based survey with about 17 questions. The emails should be going out tonight. The surveys will be open from 8:00 AM tomorrow morning to 8:00 AM Monday, June 20th for responses. On Monday we will gather the raw data and review it with Cindy. We will also put together a more polished report. This is basically to provide input from the workgroups and the Steering Committee as to stakeholder thoughts on the governance model. Our plan is to have survey results complete by the end of next week so that you will have time to review before the next Steering Committee meeting and prior to the next workgroup meetings. Data will be reported by groups.

Mr. Wilson, Meeting Facilitator, reviewed the vision statement created at the last meeting. It was suggested that we know what "no wrong door" means but everyone might not understand that phrase. The vision statement was reworded to remove the phrase and the Vision Statement below for AR Health Benefits Exchange Planning was approved..

Vision Statement:

An efficient, easy to use and trusted health insurance marketplace that allows Arkansans to understand, compare and enroll in available insurance coverage plans based on benefits, services, quality and price.

The Exchange will include a secure eligibility and enrollment portal and include interactive web-based services that allow individuals, families and small businesses to quickly compare, enroll and maintain continuous coverage in the best qualified health plan for them. The Exchange will be developed to assure flexibility, accountability and transparency to meet the needs of Arkansas and comply with the Affordable Care Act.

Next, the agenda for the upcoming workgroup meetings was discussed:

- Take the vision statement back to get workgroup's approval and allow feedback.
- **How are the questions working in the workgroups (We made it through the first three- four questions)?** *That is going well.*
- **Please use the form provided for note-taking in order to easily report discussions from the group you serve as liaison for.** *Different ones of us attend different workgroup meetings, so are we to assess what we heard and put on the form provided? Yes. Cindy and Bruce are attending the meetings, also, so are we just giving our perspective or is to be a report of what happened in the workgroup? This form is to be used for you to give feedback to the Steering Committee. We were hoping to streamline the reports and have consistent points of agreement or continuing discussion needs.*
- **Do we also bring back questions to discuss with the Steering Committee that are generated in the workgroup meetings?** *Yes. One of the purposes of the workgroups to feed into the Steering Committee. As the workgroups continue to meet, the questions will expand. In the beginning we didn't have our background research vendor selected so we wanted to get some discussion/education started, thinking soon we will have more data to give the workgroups to act on. New questions are good and no limitation.*
- **We have had three particular groups communicate that they did not feel well represented on the Steering Committee:** hospitals, insurers, and behavioral health providers. Our suggestion was to give the process a chance and see if they believe their voices are being heard. This concern has been shared with the Insurance Commissioner. *The Groups are already large, and It's hard to make decisions with too many people. By original design, there were workgroups only. Based on workgroup feedback, we designed the Steering Committee. The Steering Committee should be serving as liaison—sharing information two ways. Additionally, Steering Committee meetings are open meetings.*
- **When will Steering Committee meet in the future? Knowing this will help us better determine liaison roles/timing.** *Following discussion, it was determined the Steering Committee will meet every other Tuesday (next meeting June 28th) from 3:00 – 5:00 (new time). This results in two conflicts with Consumer Workgroup times which will need to be changed.*

- **We should have focal points of discussion for each workgroup month and layer on issues so we can get a process going.** The Steering Committee should set an agenda for each workgroup. It was further discussed that we should give thought to this process as *Workgroup meeting agendas vary because of the diversity of groups. As decisions are made, the questions can change.* No final decision was made.
- **First Data Government Solutions needs the Steering Committee to feed them information at a certain pace, but we don't know at what pace.** *Is there a way we can set a timeline for decision making? There are three major stakeholder involvement efforts going on: community feedback, First Data contract work over 90 days and the workgroups. The Steering Committee is representing all three efforts. They all inform one another, yet are all happening at the same time--this is the "building the plane while flying it" concept. A work plan chart is being constructed by First Data. It should be completed next week and may be of assistance, but not sure if it guides "what, when" and "yes, and". The discussions/decisions are taking First Data to the next step and vice versa—plus the data will help.*
- **Maybe it will help the Steering Committee if First Data defines their role completely.** *First Data has the same objective--to help build an Exchange-- but along the way there are stopping (check) points set up by the Federal government. It would be nice if the planning efforts with the Steering Committee could nicely fit in the boxes, however, because of time constraints that won't happen. Additionally, the information now available is incomplete, as we don't yet have the next required guidance pieces from the Federal government. We are operating off assumptions based on the CCIIO meetings and we hope new rules come along soon. At the Denver CCIIO meeting we were told they will have more information forthcoming in August, but we must have a funding "cooperative agreement" application submitted by September or we will miss a quarter of funding. In addition to federal needs, we are make assumptions based on the information given from the workgroups and Steering Committee. At this point this is the best information available and we need to go ahead and use it.*
- **Do we want each group to work on similar or the same issues?** *They should be allowed to proceed at their own pace; however we might work to stage issues in a particular order. Democracy is a good thing, but the problem is that we have a turn around time beyond impossible.*
- **Our next meeting should focus on governance and whether or not the Exchange should be a regulator or administrator.** *It was expressed that the regulator-administrator decision had already been made by the workgroups: AID is regulator; Exchange is Administrator. It was expressed that the Exchange is a marketing organization not a regulatory organization. Upon further discussion, broadened to how marketplace participants would be selected; some workgroup liaisons determined the issue needed further discussion in their workgroups. **Are there key data we would need to make the regulator/non regulator decision by the next meeting?** The main data we need to understand is what bridges we build and what bridges we burn by choosing different courses. What is viable? We are trying to develop a process for a beginning and for growth.*
- **The Survey Monkey governance survey is coming out and we will look at the results next week. Is there a similar survey that can begin to focus our discussion on the regulator/non-regulator issue --that we could have for the next meeting?** *We can check on that.*
- **The next question was governance.** *Discussion included: If you choose a governance model where it's public and private, does this mean the Insurance Department regulates a private entity? We should define what "regulator" means. Does it mean you set the terms inside/outside the Exchange so that you can't have dumping? There are regulator functions which will have to occur, but not necessarily as part of a Health Benefits Exchange. The Rate Review function is regulatory, but it's a stand alone process and function, not a part of the marketplace Exchange. Rate Review has to feed the Exchange because one of the requirements is to rate the plans and what do we rate the plans on? **Quality, price, benefits.***
- **We need to determine what things the Exchange regulates.** *Some things the law says it has to regulate, i.e. navigator payments; a process for certifying plans as qualified health plans. The Insurance Department could do the certification, but the Exchange must be a process. The defined regulator function comes after we have set the processes, policies and procedures -the Exchange will manage the processes based on a regulatory foundation. This is what you will have to do, XYZ.*
- **If we were to enter the next meeting determining how to gain legal authority to a state operated Exchange would it be beneficial?** *"The Arkansas Legislative Research Bureau has been working on this for three weeks and we've found no solution other than an Executive Order by the Governor or legislation to authorize the Exchange". So these are simply the*

only two solutions. Everyone knows the Governor's position and it reasonable that this issue could be taken up again in January 2013. So, is working on this now a waste of time? The Governor stated that in order for him to consider an Executive Order the majority of those who opposed the Exchange in the 88th General Assembly would need to tell him they've changed their minds concerning authorization of the Exchange. How do we get this to happen? How do the people stand in each district? We should do surveys to identify the mindset of the people. How do we help them better understand? This is a federal law and it's not going away, so do we want the State or Federal government to run it? Is there any way through an educational campaign that we can begin to reduce the pressure on the people voting against it where they can see that their constituents now have a different understanding and support a State Exchange?

- **We will have the governance results next Workgroup meeting, and it would be great if we could select another question for the next workgroup meetings.** *There was no decision.*
- **Is all politics local? If the answer is yes can we shape public opinion enough to drive local politics?** *Yes*
- **Has the issue of the option of an initiated act been discussed?** *No, it was reported this would be very costly.*
- **It will be useful to share who will attend the Community Meetings** so we can have a sense of what's going on. *UAMS is keeping an attendance roster and will report attendance for those who sign in*
- **We need a three way conversation between CMS (CCIIO and Medicaid) and ONC (Health Information Exchanges) to get on the same page as it relates to federal funds being used in a leveraged and collaborative approach instead of keeping everything in silos.** *We don't need to duplicate efforts that will cost us more. At our level we are virtually living together weekly working on the task at hand. More could be happening at the federal level.*