

State of Rhode Island Office of the Health Insurance Commissioner  
Health Insurance Advisory Council  
Meeting Minutes  
November 15, 2016, 4:30 P.M. to 6:00 P.M.  
State of Rhode Island Department of Labor and Training  
1511 Pontiac Avenue, Building 73-1  
Cranston, RI 02920-4407

**Attendance**

**Members**

Co-Chair Commissioner Kathleen Hittner, Co-Chair Stephen Boyle, Mike Souza, Al Charbonneau, Karl Brother

**Issuers**

Richard Glucksman, Blue Cross & Blue Shield of RI  
Lauren Conway, UnitedHealthcare

**State of Rhode Island Office of the Health Insurance Commissioner Staff**

Linda Johnson, Cory King

**Not in Attendance**

Gregory Allen, Bill Schmiedeknecht, Vivian Weisman, Karina Gibbs, Howard Dulude, David Feeney, Hub Brennan

**Minutes**

**1. Welcome and Review of October Meeting Minutes**

Commissioner Hittner and Stephen Boyle called the meeting to order and welcomed all Health Insurance Advisory Council (HIAC) members and others in attendance.

Changes to the October meeting minutes were submitted by Dr. Gus Manocchia of Blue Cross & Blue Shield of Rhode Island. The minutes, as amended, were accepted unanimously.

**2. RIREACH Consumer Update**

No RIREACH representative was present to provide an update.

**3. Market Reforms and Consumer Protection Grant**

Linda Johnson announced that OHIC has been awarded a grant by CMS in the amount of \$1,090,263.35. Linda briefly outlined the four major tasks under the grant:

1. Review potential discriminatory practices in plan design – including discrimination against patients with particular diseases, as well as other forms of discrimination. This will include reviewing prescription drug formulary practices.
2. Develop tools to identify discrimination in preventive coverage on an ongoing basis.
3. Revamp the external appeals process – this task will involve aligning state and federal rules to better serve consumers, and require close coordination with other state agencies.
4. Restart the market conduct examination for mental health parity, which had previously been suspended due to state budgetary constraints.

Linda reported that the grant may allow OHIC to hire 1-2 additional staff. Commissioner Hittner noted that the “federal government really went out of their way for us.” Only 22 states received the grant, and the Commissioner said the feds were “very happy with the work we have done.” Linda added that the work done by OHIC under this grant could potentially yield tools that can be used in other states.

#### **4. Revised OHIC strategic plan discussion**

Cory King gave a brief presentation on OHIC’s strategic plan for 2017, beginning with a review of core goals accomplished in 2016:

- Goal 1: Institutionalize and codify the form and rate review process.
- Goal 2: Develop and enforce regulatory standards for payment reform.
- Goal 3: Develop and enforce regulatory standards for delivery system transformation.
- Goal 4: Reduce medical expense growth rates.
- Goal 5: Work on a process to make co-pays, coinsurance, and deductibles more transparent and less onerous for consumers.
- Goal 6: Guard the solvency of insurers.
- Goal 7: Support continued development and investment in health information technology and informatics.
- Goal 8: Work collaboratively with other state agencies.

Cory noted that some of these (Goal 4, Goals 6-8) are ongoing efforts. He highlighted success in the area of Goal 8, cross-agency coordination and collaboration. Thanks to the SIM project and other efforts, OHIC has an excellent working relationship with EOHHS, the Department of Health, and HealthSource RI. This has made it easier to avoid duplication of effort and helped efficiency across all agencies.

Another goal achieved was Goal 1, the institutionalization of several OHIC processes in a comprehensive Policy and Procedures Manual. This institutionalization of procedures was helpful to the Office in securing funding.

Goal 5, Cory noted, had seen some limited progress through the work of the Administrative Simplification Workgroup. A discussion regarding the Workgroup followed.

The Workgroup is called for in state statute and outlined in Regulation 2. Recent sessions of the Administrative Simplification Workgroup have yielded limited results. Proposed modifications to Regulation 2 would have left convening of the Workgroup to the discretion of the Commissioner rather than requiring the Workgroup to convene every year. Cory noted that OHIC received comments from providers on proposed amendments to Regulation 2 asking that the Administrative Simplification Workgroup continue to meet annually.

Mike Souza added that he felt the Workgroup should continue to meet, saying it was preferable to the alternative of “go[ing] to battle at the State House.” But there was a general consensus among OHIC staff and recent Workgroup participants that some change was needed to improve the Workgroup’s effectiveness.

New and updated goals for 2018 are:

- Goal 1: Improve and update the form and rate review process
- Goal 2: Improve and enhance OHIC’s market conduct function
- Goal 3: Oversee and enforce multi-year targets on payment reform
- Goal 4: Oversee and enforce multi-year targets on delivery system reform

Karl Brother asked if the 2018 strategic plan goals were “realistic,” given the recent reduction in staff. Commissioner Hittner replied that they were, that the grant OHIC won would allow the office to fill some vacancies. She stressed the need to move quickly, and added that the state has been very helpful, that OHIC has “been treated extremely well by the Governor’s staff and the Office of Management and Budget.”

## **5. HIAC Membership Renewal Discussion**

With a string of recent resignations from the Council, Commissioner Hittner felt it was time to take a look at Council makeup and recruit diverse new members. Mark Gray, Health Policy Analyst at DataSpark, gave a brief report on membership, Council makeup and attendance, including a summary of the statutory and regulatory requirements for Committee membership.

The Council has traditionally been made up of representatives that fit into one of three loose categories: Providers, Consumer Representatives, and Employers. Of these, Consumers and Employers could use more representation. Providers are generally well represented, but there is also a desire to see more diverse specialties and different types of providers on the Council. DataSpark’s report offered some suggestions on potential new members in the Employer and Consumer categories.

The Commissioner asked the Council for their recommendations regarding new members. Al Charbonneau recommended the AARP as a Consumer group; in the Employer category, Steve Boyle recommended approaching the Smaller Business Association of New England (SBANE) and Karl Brother suggested the Hospitality Association, or similar industry-based groups.

## **6. Public Comment**

There was no public comment.

**Next Meeting**

The next meeting of the Health Insurance Advisory Council will be Tuesday, December 20, 2016 from 4:30 P.M. to 6:00 P.M. at the State of Rhode Island Department of Labor and Training, 1511 Pontiac Avenue, Building 73-1, Cranston, RI 02920-4407.