

State of Rhode Island Office of the Health Insurance Commissioner
Health Insurance Advisory Council
Meeting Minutes
May 18, 2020, 4:30 P.M. to 5:30 P.M.
Virtual Zoom Meeting

Attendance**Members**

Co-Chair Commissioner Marie Ganim, Co-Chair Stephen Boyle, Shamus Durac, David Feeney, David Katseff, Laurie-Marie Pisciotta, Al Charbonneau, Lisa Tomasso, Vivian Weisman, Daniel Moynihan. Hub Brennan, Deb O'Brien

State of Rhode Island Office of the Health Insurance Commissioner Staff

Cory King

John Garrett

Alyssa Metivier

Maria Casale

Cheryl DelPico

Courtney Miner

Emily Maranjian

Not in Attendance

Teresa Paiva Weed, Karl Brother

Minutes**1. Welcome, Introductions, and Review of February Meeting Minutes**

Steven Boyle called the meeting to order. After introductions, Commissioner Ganim asked for a motion to accept the February meeting minutes. The minutes were approved as submitted.

2. RIREACH Consumer Update

Shamus gave an update on RIPIN/RIREACH. RIPIN has been operating as close to normal as possible since they began working remote in the second week of March. The call-centers are still operating as normal, and luckily, RIPIN had already installed some systems allowing staff to work remote so the transition has been smooth. RIPIN is also closer to being fully staffed than they have been in a while.

The call-centers have seen a slight decrease in the total number of calls coming in since the crisis began. They are working to track all of the cases coming in that are COVID-19 related – whether it is questions about testing, treatment, or payment/insurance coverage. At least 20% of RIPIN's cases are COVID-19 related. Since the last HIAC, RIPIN has saved Rhode Islanders \$195,000. We are still working with our partners and still answering calls live.

David Feeney asked: In regard to telemedicine, are people calling because they can't get telemedicine with their own physician? Shamus answered that it is a number of different things: people not being able to see a provider, questions about providers who are unwilling/unable to provide telemedicine, and questions about telemedicine co-pays.

David Katseff asked if RIPIN is getting many calls from people who have lost their insurance coverage due to losing their jobs during this crisis? Shamus responded that they are seeing a lot of those types of calls. RIPIN has been successful with getting most of them covered/connected to the resources they need.

3. Overview of OHIC's COVID-19 Related Activities: Instructions, Bulletins, and Governor's Executive Orders

Commissioner Ganim gave an overview of the actions OHIC and the Governor have been taking to limit the spread of the disease and expand health insurance coverage during this public health crisis. Listed below are the major actions from OHIC and the Governor relevant to health insurance:

- OHIC & Medicaid Program Instructions During the COVID-19 State of Emergency – *March 13th*
- **Bulletin:** Emergency Telemedicine Measures to Address and Stop the Spread of COVID-19 – *March 20th*
- **Bulletin:** Affordability Standards Regulatory Flexibilities to Address Provider Financial and Operational Stability During the COVID-19 State of Emergency – *April 10th*
- **Bulletin:** Temporary Emergency Measures Regarding Benefit Determination Review and Network Plans and Health Care Accessibility and Quality Assurance – *April 27th*
- **Bulletin:** OHIC & Medicaid Program Guidance for Preventive Care Visits During the COVID-19 State of Emergency – *May 7th*
- **Executive Order:** Fourth Supplemental Executive Declaration – Expanding Access to Telemedicine Services – *March 18th*
- **Executive Order:** Twenty-Sixth Supplemental Executive Declaration – Promoting Better Coordination of Health Care Coverage – *April 27th*

There has been a lot of cooperation from both the insurers and the business community to ensure everyone has access to the services they need. On April 27, the Governor issued an Executive Order that arose from both the provider and patient community relative to obstacles to receiving care.

Cory King gave a brief overview of the new benefits that will remain in effect until the State of Emergency related to COVID-19 is lifted:

- No-cost access to expanded telemedicine services
- Free COVID-19 screening and testing
- Access to no-cost COVID-19 treatment
- Early refills for necessary prescriptions and medical supplies

John Garret gave an overview of the bulletin OHIC issued on April 27th which provides instructions to health care entities under OHIC's jurisdiction on how to implement the Governor's April 27th

executive order. The bulletin is meant to provide temporary relief for carriers from certain statutory requirements.

Furthermore, the bulletin requires carriers to suspend prior authorization (PA) for the following in-network services:

- In-patient hospitalization
- Long term care facilities
- In-patient rehabilitation
- Skilled Nursing Facilities
- Telemedicine
- COVID-19 related diagnostic and treatment

Al Charbonneau asked if it will be easy for OHIC to end these temporary regulations when this is over? Commissioner Ganim responded that when it comes to telemedicine, we are not sure if people want to stop the expanded regulations. When it comes to the other regulations, we think it will be a smooth transition when the state begins to open up again. Al asked specifically about in-patient utilization: that is a problem here in the state in regard to employer's cost. Commissioner responded that that was just for the crisis during the surge.

Al asked if we have a sense of how Telemedicine will be used going forward? Commissioner Ganim said that we are discussing that with the insurance carriers now. We have heard from providers that it is being utilized frequently, and from patients that they love it. There has been a lot of advocacy going on for it to continue.

4. Market Stability Update – Small Business Insurance Group Form and Rate Review Discussion, including Potential Impacts of COVID-19 on Insurance Coverage and Premiums

Cory King gave an update on form and rate review for the upcoming year. We decided to delay the filing date by one month. Health insurers are extremely busy right now, and in addition, we wanted to give them more time to observe the data they are collecting in regard to COVID-19. We are requiring the filings to be submitted by June 18th. OHIC is targeting to have the rates approved by mid-August.

Rate development is a prospective exercise, we are trying to forecast what will happen in the future year I which they are going to be selling products to individuals and businesses and they have to price them so that they cover the expected medical costs of the population. Generally, we use previous data to forecast what is going to happen, but these are unusual times due to COVID-19. Currently, it is too early to tell how much COVID-19 will impact rates next year. The key question is whether COVID-19 will continue to be an issue in 2021.

From a population health perspective, another worry is that with delayed care, will there be disease exasperation taking place? This is concerning both for rates, and for the health of individuals in

Rhode Island. Other factors are whether or not insurers will continue to waive costs for testing and treatment of COVID-19 through 2021.

David Katseff commented: I think there is one bullet point that is missing, and that is even though COVID-19 has caused a greater need for hospitalization etc., I think it has been more than balanced by the lack-of elected procedures, preventive care visits and so forth. The auto-insurance companies have been giving credits out since people are not driving as much. My question is, is anybody doing an analysis on how much the demand for medical attention has been reduced because of COVID-19 and will that be taken into account when we look at the 2021 rates. Cory responded that that is an excellent question. If a health plan spends less than 80% of their premium on medical expenses, they have to make rebates. Nationally, I think many companies are going to find themselves in a rebate situation and that is an active question right now.

Alyssa Metivier gave an overview on what is occurring on the form side of rate review. On April 6th the four major carriers submitted their form filings for 2021. Based on OHIC's initial review, we have not seen any major changes. Due to COVID-19 we have extended the timeframe for responses. Phase two form filings are due on June 18th, this includes plan specific forms. We anticipate having all of these filings reviewed and approved by August.

5. Affordability Standards Adoption Timeline

Commissioner Ganim explained that this year we received a lot of feedback that helped to draft the regulations. Public comment was received until the end of January, and Cory will give an update on where we are now in the process.

The draft regulation is with the office of regulatory reform, once they give us their stamp of approval, we can file the regulation with the secretary of state's office.

Commissioner Ganim commented a reminder that these regulations are what ensures investment in primary care, hospital annual cap, and transitions to alternative payment models. Hopefully we will be able to get those out to everyone soon as soon as they are adopted.

Dave Feeney commented: As far as the opioid stewardship and the funds coming to the state, a lot of those are projected on the increase cost of the medication. Commissioner Ganim agreed and commented that the account is an appropriate place for us to use the funds to help people get the appropriate care at the appropriate time. If that money does not come through, we will have to seek other funds, or we will not be able to do this work.

6. Discussion of OHIC's State Budget Proposal for FY 21

Commissioner Ganim gave an update about the current standings of the state budget. As you all may know, the state has a large hole in the budget due to the impacts of COVID-19. Anything that looks like a new expenditure is unlikely to move forward.

OHIC lost two positions last year. This year, we analyzed where are biggest need is, and we settled on these two positions:

- Consumer Protection Investigator:
To coordinate market analyses, investigations and complaints related to medical, behavioral health, oral health and pharmacy coverage issues.
- Opioid Stewardship/Behavioral Health Senior Policy Analyst:
This position is needed to provide greater attention to OHIC's responsibility to work towards increasing access to behavioral health preventative, treatment and recovery services.

Both of these positions would not be funded by the state. The Consumer Protection Investigator would be funded by insurers, the Opioid Stewardship position would be funded by money coming into the state from the Opioid Stewardship account – these funds would be appropriate to fund this position.

7. Public Comment

Dr. Reznik, a retired dentist in the public asked about the rates of reimbursement for dentists. Commissioner Ganim responded that we are getting questions about reimbursements in dentistry often lately, there is a particular stress on dentists right now due to the virus. While we do not regulate reimbursement, we certainly have relationships with the dental insurers, and this is something we have and will continue to discuss with them. Moreover, we know that you will need more PPE during this period.

Hub Brennan commented that we must keep in mind that the dentistry model is very much based around volume, they have a fee-for-service model. And being closed for a number of weeks has been financially devastating. I think this is about getting back to the allowable volumes they need to return to get back to business as normal.

Al Charbonneau commented that we need to assess how well/not well dentists are being paid, and by what payers so that we can have a more evidenced-based discussion.

Laurie-Marie Pisciotta thanked Commissioner Ganim for OHIC's work during this crisis, and mentioned she wants to stay updated on the status of the new positions OHIC is requesting so that she can discuss them with her conversations with the Governor's team and other groups she is a part of.

Dr. Reznik commented: It seems that dentistry has been a model of high-volume and relatively low reimbursement levels, particularly in RI. Dentists have been low on the totem pole for getting PPE as well. So, I wanted to bring these issues to the light to the community. Dentists may start leaving practices, and if they do that will have detrimental impacts on the public health of the state.

Next Meeting:

- Tuesday, June 16, 2019 from 4:30 – 5:30pm. Virtual Zoom Meeting.