

State of Rhode Island Office of the Health Insurance Commissioner
Health Insurance Advisory Council
Meeting Minutes
February 16, 2021, 4:30 P.M. to 5:30 P.M.
Virtual Zoom Meeting

Attendance

Members

Co-Chair Commissioner Patrick Tigue, Co-Chair Stephen Boyle, Shamus Durac, David Feeney, Al Charbonneau, Hub Brennan, Teresa Paiva Weed, Lawrence Wilson, Sandra Victorino, Vivian Weisman

State of Rhode Island Office of the Health Insurance Commissioner Staff

Cory King

Maria Casale

Marea Tumber

John Garrett

Not in Attendance

David Katseff, Laurie-Marie Pisciotta, Daniel Moynihan

Minutes

1. Welcome, Introductions, and Review of January Meeting Minutes

Steve Boyle called the meeting to order. After introductions, Steve asked for a motion to accept the January meeting minutes. The minutes were approved as submitted.

2. Health Insurance Advisory Council Membership Discussion

Commissioner Tigue explained that with him starting his tenure last month as Commissioner of OHIC it was a natural time for the co-chairs to review the guidelines around HIAC membership. Steve Boyle and Commissioner Tigue's goal was to have an open discussion with all current HIAC members about the possibility of adding new members and giving the opportunity for current members to step down if they chose to. Both Commissioner Tigue and Steve are very open to adding new members, but they wanted to take the time to collect feedback from current members about HIAC membership guidelines which have not been updated in many years.

Steve Boyle commented that it is a good opportunity to look at our current membership to see where we stand going forward. One of our goals with this initiative is to make our council more diverse and ensure it properly represents the voices of the Rhode Island communities. We are not asking anyone to leave, we just wanted to create an opportunity to discuss membership because we know with councils like these some members feel obligated to stay. If any members interact with other Rhode Islands at work or in other councils that they think would make a great fit on the HIAC please let us know.

Commissioner Tigue expressed his appreciation for all of the time HIAC members have given to the council and asked for the members help in proactively trying to make the council more diverse.

The HIAC charter calls for membership to be diverse, and include representatives from community consumer organizations, small businesses, and hospital, medical, and other health provider

organizations. There is a minimum of six members, a maximum of eighteen, and formal membership should last no longer than two three-year terms.

Steve Boyle commented that one of the improvements we could make going forward with HIAC meetings is distributing the PowerPoint slides early to members for meetings that have more substantive material to read.

Larry Wilson commented that he appreciates the desire for greater diversity within the council. However, the council may not be set up as well as it could be in terms of being accommodating for new people since there are many barriers of understanding with this subject matter. When he was asked to be on the Cost Trends Steering Committee it was a very difficult transition process – even just the acronyms used presented several obstacles. An orientation packet that introduces people to the organizations, terms, and programs that we frequently discuss would be very useful for new people. Commissioner Tigie commented that that is incredibly useful feedback, and we will work on creating an on-boarding packet.

Sandra Victorino commented that as a newer member she is looking for new ways to support in a more robust way as a bilingual bicultural provider, and what are the best spaces for her to comment on? Commenting can often be intimidating and when to give information can be hard to determine as a new member.

Al Charbonneau commented that we should send out to all members the number of spaces on the council we have available and also a list of when the council members have joined.

Larry Wilson commented that he wants to support what Sandra said as well – particularly in the Cost Trends Steering Committee, for several months he was almost afraid to comment for fear he did not know enough. Over time you do start to find your own position and confidence to comment.

Commissioner Tigie commented that these comments have resonated with him and he wants to ensure we are able to properly support the council so we can continue to get the good feedback from this group that we always get. What separates this council from many others is that through the years these members have always been engaged in the core substantive work of OHIC's duties.

3. Affordability Update

Commissioner Tigie explained that this item came from Al Charbonneau's helpful suggestion of creating a standing 'affordability' topic for each HIAC meeting. This agenda item will support several activities and it will be on the agenda most months in the foreseeable future. The activities include:

- Reviewing the continued implementations of the Affordability Standards
- Engaging in the development of the next generation of Affordability Standards
- Having an open discussion about ad hoc issues affecting affordability raised by HIAC members

Teresa Paiva Weed commented that the Cost Growth Target should be included in the affordability section in addition to the Affordability Standards. It is important for this group to be driving policy discussions, and if we could use this particular item to update and coordinate Cost Growth Target conversations it could be very beneficial.

Al Charbonneau commented that what got him thinking about this topic was that when we talk about cost, we often speak in tongues – we speak in terms that are difficult to understand for the average consumer. When a consumer looks at buying health insurance, they want to know that the primary drivers are for the prices of insurance being so high.

Steve Boyle echoed Al's comments – when he ran the Cranston Chamber of Commerce and he discussed the accomplishments of the cost growth target and other cost-saving initiatives they would still ask why are their premiums so high and getting higher?

4. **RIREACH Consumer Update**

Shamus Durac gave an update about recent trends and highlights from the RIREACH consumer helpline. Over the past month and a half RIPIN has seen continuing issues relating back to COVID-19, mainly around testing. There have been a handful of people asking about the new Open Enrollment. HealthSource RI has done a good job at advertising Open Enrollment this past year so we have not seen many concerns or questions about Open Enrollment. Since January 1, RIPIN has saved Rhode Islanders just over \$150,000.

5. **Legislative Update**

Commissioner Tigie commented that OHIC is monitoring all of the introductions of bills and we are commenting on a select number of those as they are being heard. The telemedicine bill that we brought up at our last council meeting has been amended and passed through the Senate Health and Human Services committee and it reflects many of the concerns and comments that were in the consensus report that OHIC put together this past year. That bill is scheduled for the Senate floor next week.

Al Charbonneau asked if OHIC shares these position letters with HIAC members or the public? Commissioner Tigie responded that if there is an interest, we can make those letters available to all HIAC members. Al also commented that the Rhode Island Business Group on Health will be putting on a webinar on telemedicine soon.

Hub Brennan commented that there was some discussion in terms of reimbursement for audio and video telemedicine – many elderly Rhode Islanders do not have access to video telemedicine services and only have telephone as an option. Some people coming through the doors do not even have access to or know how to use email services. We need to make sure we do not inadvertently discriminate against any populations when we create telemedicine legislation.

Teresa Paiva Weed commented that the new Sub A 2 about OHIC's role in regard to approving services, and asked if we could comment on that? Commissioner Tigie responded that it requires permanent, on-going reimbursement parity for behavioral health services and primary care services. There was also a provision that gives EOHHS and OHIC the authority to enforce the parity regulations under the current executive order – until it advised by a series of entities to revise these regulations.

Al Charbonneau commented that the Rhode Island Business Group on Health is pro telemedicine, they just have concerns about expanding telemedicine in a fee for service environment.

Vivian Weisman commented that she seconds what Hub mentioned about the obstacles technology can present to several populations. Needing a video requirement can be very intimidating for many consumers.

6. **Other Business**

Steve Boyle commented that Providence is doing the vaccinations and he was just informed that there are 100 spots available this Wednesday for anyone 75 and older.

7. **Public Comment**

There was no public comment.

8. **Adjournment** – the meeting was adjourned at 5:25pm