State of Rhode Island Office of the Health Insurance Commissioner Health Insurance Advisory Council Meeting Minutes January 19, 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, Daniel Moynihan, Hub Brennan, Teresa Paiva Weed, Lawrence Wilson, Sandra Victorino, Laurie-Marie Pisciotta, Vivian Weisman, David Katseff

State of Rhode Island Office of the Health Insurance Commissioner Staff

Cory King Maria Casale Marea Tumber John Garrett

Not in Attendance

N/A

Minutes

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

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

2. Commissioner's Welcome and Priorities

Commissioner Tigue introduced himself, thanked everyone in attendance for their time, and gave a brief summary of his career prior to joining OHIC. Commissioner Tigue worked at OHIC previously in his career, and in that time, he focused on the early development and implementation of the Affordability Standards, and he oversaw OHIC's rate review process. More recently, Tigue served as assistant secretary for health and Medicaid director for Rhode Island. For the last year Commissioner Tigue had been working for a consulting firm in Boston that focused exclusively on publicly financed health care.

Commissioner Tigue explained that he doesn't want to make any radical changes to the direction OHIC is heading in - his goal is to accelerate and expand upon the successes OHIC has achieved recently in transforming the health care system. As he begins his tenure, Commissioner Tigue has six major priorities for OHIC:

- Continuing to ensure that Rhode Islanders receive adequate coverage for COVID-19 testing, treatment, and vaccinations.
- Leveraging the regulatory structure within OHIC to accelerate delivery system reform.
- o Continued implementation of the Affordability Standards.
- Continuing to increase behavioral health care access and ensure parity between behavioral and physical health care services.
- o Advancing the statewide expansion of telehealth services.

Continuing on the success of the RI Cost Trends Project.

Al Charbonneau requested a standing 'Affordability' topic to be placed on each month's HIAC agenda. There are concerns about the upcoming merger, questions about costs related to the expansion of telemedicine, and other affordability concerns. Commissioner Tigue responded that he would be enthusiastically supportive of a reoccurring affordability agenda item if that is the consensus of the group.

3. Gubernational Transition Activities Update

Commissioner Tigue shared a brief update on the current status of Governor Raimondo's transition into President Biden's cabinet and the transition of incoming Governor McKee. The timing at this point is still uncertain, but we do know that Governor Raimondo will be remaining in office until she is confirmed by the Senate. In terms of how this transition impacts our office, OHIC will continue to follow through its core statutory work. The OHIC team is also working closely with incoming Governor McKee to fully support their transition efforts and inform them of the important work that OHIC is carrying out.

4. RIREACH Consumer Update

Shamus Durac gave an update about recent trends and highlights from the RIREACH consumer helpline. RIPIN is still in the process of calculating all of their year-end reporting data on their services from 2020. So far, they know that 40-50% of all cases in each month of 2020 were related to COVID-19, Shamus hopes to have more data about those calls soon. RIPIN saved Rhode Islanders approximately \$900,000 over the last year, and about \$3.9 million over the last three years. In terms of highlights from the last month: calls have begun to become more frequent again after the slow-down from the holidays. Aside from a few complicated cases the Open Enrollment period overall has been very successful this year and is continuing to run smoother with each year. The call center is continuing to receive COVID-19 related cases, many of which revolved around people getting charged for testing, which RIPIN has been able to resolve with OHIC's assistance. There has also been an increase in calls asking about vaccine distribution.

Steve Boyle asked if RIPIN has noticed any particular industry that is experiencing loss of coverage recently? Shamus replied that in the beginning hospitality was a large chunk of the loss of coverage, but at this point it is more varied between sectors.

Teresa Paiva Weed asked if RIPIN has heard anything about obstacles for people trying to access Open Enrollment through mobile devices? The Hospital Association has been getting feedback in regard to individuals without insurance having challenges on their phone when trying to enroll in insurance. Shamus replied that he had not heard about that, but he will follow-up with his team to see if anyone has dealt with this issue and he would be happy to connect with Teresa after the meeting to discuss further.

Steve Boyle asked if he is seeing an uptick in employers not offering insurance, or if it just the traditional layoffs that is causing the surge in loss of insurance? Shamus replied that that is difficult for them to determine at this point – overall, they haven't seen enough in any specific sector to answer that.

5. State Flexibility Cycle II Grant Overview

Marea Tumber gave an overview about the federal grant OHIC is currently applying for, the State Flexibility Grant. This grant will help OHIC to enhance its ability to effectively regulate health

insurance markets, and in particular it will provide the office with resources to protect consumers. The grant seeks proposals for innovative measures to ensure guaranteed availability of coverage and non-discrimination of coverage. OHIC is aiming to build upon the success of its recent accomplishments in the Cycle I Grant completed in 2020.

The applications for this grant are due February 3 with the funding notifications coming out in April of this year. OHIC is proposing three projects for this grant – the first is to upgrade our website to make it much more consumer-centered and ensure that it is educational, accessible and ADA compliant. The second is to enhance OHIC's utilization review data portal to better identify discriminatory practices. And lastly is to hire both a staff person and expert consultant assistance to improve access to behavioral health services and ensure behavioral health and substance use disorder parity.

Teresa Paiva Weed asked what is the enhancements to the utilization review data portal will be? Commissioner Tigue explained that a couple years ago OHIC took on the statutory duties originally held by the Department of Health related to utilization review agencies. The portal for that process if out of date, so this goal is to upgrade it and make it more efficient and modern.

Lawrence Wilson asked for clarification on what kinds of discriminatory practices this is referring to. Marea Tumber replied that the intent is mainly to identify differences on the behavioral health side.

6. Legislative Update

Marea Tumber gave an update on the three bills OHIC is currently involved with, all three have passed through the Senate Health and Human Services Committee this past week. The first, S0003, requires the premium rate for a health coverage plan to not vary based on gender. This bill aligns the Individual and the Small Group markets with the current ACA policy which prohibits varying premium rates based on gender.

The next bill, S0005A, guarantees ACA Consumer Protections for Rhode Islanders. The bill adds essential health benefits (maternity, hospitalization, emergency care, prescription drugs, etc) adds preventive services with no cost sharing, adds an open enrollment period for obtaining health insurance, and mandates no exclusions for preexisting conditions. This bill came from recommendations from the Market Stability Group in 2019, and essentially maintains all of the protections we are used to under the ACA – it does not exceed the ACA or require any additional funding. Steve Boyle asked what the difference is with the Open Enrollment section in this bill? Marea responded that currently, in Rhode Island law, there is no mention of Open Enrollment. Al Charbonneau asked if we extended this to Large Group – Marea Tumber is going to check on that and follow up.

The last bill, S0004A, is the telemedicine legislation. This bill codifies many of the emergency telemedicine provisions that were put in place due to the pandemic into state law. The bill includes Medicaid and commercial, and it continues telephonic visits when appropriate for care. Additionally, the bill mandates prior authorizations and cost-sharing to be in line with in-person care, and reimbursements with in-network primary care and behavioral health providers to be in line with in-person care.

Teresa Paiva Weed asked if there is going to be an amendment to the telemedicine legislation? Marea responded that she believes there will be an amendment, but she has not seen it yet.

7. Other Business

Laurie-Marie highlighted that the Mental Health Association of Rhode Island recently released a mental wellness resource guidebook in English and in Spanish and is available at mhari.org/resources/.

8. Public Comment

There was no public comment.

9. Adjournment-- The meeting was adjourned at 5:16pm