



**State of Rhode Island Office of the Health Insurance Commissioner
Health Insurance Advisory Council
Meeting Minutes**

March 19, 2013, 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

William Martin (Co-Chair), Christopher Koller (Co-Chair), Karl Brother, Howard Delude, Karen Fifer Ferry, Herb Gray, Linda Lulli, Pat Mattingly, Tim Melia, Peter Quattromani, Ed Quinlan, Schmiedeknecht, Vivian Weisman

Issuers

Lauren Conway, Gus Manocchia, Craig O'Connor, Patrick Ross

State of Rhode Island Office of the Health Insurance Commissioner Staff

Herb Olson, Linda Johnson, Kim Paull, Patrick Tighe, Maria Casale

Not in Attendance

Stephen Boyle, Hub Brennan, Al Kurose, Wendy Mackie, David Mathias, Phil Papoojian

Minutes

1. Introduction and Welcome

Mr. Martin and Commissioner Koller called the meeting to order and welcomed all Health Insurance Advisory Council (HIAC) members and others in attendance.

2. Review of Minutes

The minutes from the February 19, 2013 HIAC meeting were reviewed and approved with no changes.

3. Office Updates

Commissioner Koller updated the council on OHIC's current work on the 2013 form and rate review processes with the State of Rhode Island Health Benefits Exchange (RIHBE) and the issuers (for forms and rates effective in 2014). Preliminary form filings were due on March 1, 2013. Form and rate filings are due on April 15, 2013. Given the changes to these processes this

year, OHIC is determining how to best explain this expanded and somewhat different set of processes and outcomes to the public for education and comment.

Commissioner Koller also noted that in the individual market, in addition to Blue Cross Blue Shield of Rhode Island (BCBSRI), Neighborhood Health Plan of Rhode Island (NHPRI) has indicated its intention to participate through the preliminary form filing. NHPRI has also indicated its intent to participate in the small group market.

Finally, Commissioner Koller informed HIAC that the Rhode Island Chronic Care Sustainability Initiative (RI-CSI) will be doubling in size this year—with an additional 20 sites coming on board. This growth signifies that the RI-CSI project is a success and also implies that promoting the Affordability Standards is having positive results in the state's health care system. There will be a public announcement of this expansion on or around April 5, 2013.

4. New Business

Next, the council proceeded to take up three pieces of new business.

- **Small and Large Group Approved Rate Factors Monitoring Data (2012) Review:** Commissioner Koller reviewed a memo analyzing complete 2012 data for the small and large group approved rate factors quarterly monitoring and assessment process from BCBSRI, Tufts Health Plan (Tufts), and United Healthcare (United). This memo summarizes for the Health Insurance Advisory Council (HIAC) the data received at two levels of analysis: the market level and by issuer.

As discussed with HIAC previously, when OHIC established approved expected overall premium trends for 2012, it indicated that issuers would not be at risk for demographic shifts that largely explain why Tufts' small group and large group actual overall average premium trends and United's small group actual overall premium trend exceed their respective approved expected overall average premium trends. However, when OHIC established its approved expected overall average premium trends for 2013, it made clear that issuers are at now risk for demographic shifts and so OHIC expects to see more consistency in the actual versus approved expected overall average premium trends as 2013 data are submitted by the issuers. HIAC will be updated on a regular basis as the data are received and analyzed.

- **2013 Form Review Process Update:** Commissioner Koller then made a presentation and facilitated a discussion around this the 2013 form review process. Although there are additional requirements in this year's form review process because of the Affordable Care Act (ACA), there are also additional resources available to complete this work. The additional forms review work generated by the ACA will not be nearly as significant in the coming years.

In previous years, OHIC had one analyst to complete the form review process and it was primarily focused on compliance with state requirements. The main review tool consisted of a brief checklist. This year OHIC has four analysts and it is primarily focused on compliance with ACA and state requirements. The main review tool consists of an extensive checklist covering:

- 10 required categories of essential health benefits (EHBs)
- Limits on annual dollar caps and prohibitions of lifetime dollar caps on EHBs
- Prohibition of pre-existing condition exclusions
- Prohibition of retroactive cancellations for mistakes

All plan forms, both those for plans to be offered on and off of RIHBE must be reviewed by OHIC. Additionally RIHBE may impose additional certification criteria in order for the plans to qualify to be offered by it.

- **Primary Care Provider Designation Law Discussion:** OHIC's Principal Policy Associate Patrick Tigue led a discussion around the state's new primary care provider (PCP) designation law. The law defines PCP as the physician, practice, or other medical provider considered by the insured to be his or her usual source of medical care. It holds the potential to support a wide range of important policy goals including producing a reliable way of attributing individuals to PCPs to make population-based analysis more feasible and helping to educate Rhode Islanders about the importance of having a PCP.

The law requires issuers to collect information on a subscriber's and dependent's PCP at the time of enrollment and annually thereafter from all commercially insured subscribers and any dependents residing in Rhode Island. They must also record the name of the PCP in the electronic enrollment and eligibility record of each subscriber and dependent and may use this information as appropriate for purposes including but not limited to benefit plan design and adjudication, provider reporting, provider and patient communications, and provider payment. Finally, issuers must report to OHIC: (1) the issuer's efforts in the previous 12 months at collecting the information required, (2) an assessment, using response rates, utilization data, or other reasonable assessment mechanism, of the information's comprehensiveness and accuracy, and (3) the issuer's plans for improving collection methods, if appropriate, in the coming year.

To date, OHIC has approved PCP designation law implementation plans that were developed by each issuer—at OHIC's request—to ensure that issuers will meet the law's requirements. To monitor compliance with these plans, OHIC has also initiated quarterly meetings with the issuers to collectively discuss their implementation progress to date. As implementation moves forward in 2013, OHIC welcomes input from stakeholders on the considerations it should take into account as it works with issuers to implement the law.

5. Other Business

The council decided to defer the collection of questions for next month's question and answer session with Steven Costantino, Secretary of the State of Rhode Island Executive Office of Health and Human Services to a post-meeting e-mail process.

Public comments were then solicited by the council. Public comments were then solicited by the council. None were offered.

6. Next Meeting

Mr. Martin closed by noting that the council's next meeting will take place on April 16, 2013 from 4:30 P.M. to 6:00 P.M. at the State of Rhode Island Department of Labor and Training, located at 1511 Pontiac Avenue, Building 73-1 in Cranston. He thanked everyone for their attendance and the meeting was then adjourned by Mr. Martin and Commissioner Koller.