



STATE OF CONNECTICUT  
**LIEUTENANT GOVERNOR NANCY WYMAN**

**Connecticut Health Insurance Exchange  
Board of Directors Regular Meeting**

Legislative Office Building  
300 Capitol Avenue, Room 2C, Hartford, CT

Thursday, June 21, 2012  
Meeting Minutes

**Members Present:**

Lieutenant Governor Nancy Wyman (Chair); Jeannette DeJesus (Vice-Chair), Office of Health Reform & Innovation; Secretary Benjamin Barnes, Office of Policy and Management (OPM); Vicki Veltri, Office of the Healthcare Advocate; Deputy Commissioner Anne Melissa Dowling, CT Insurance Department (CID); Commissioner Roderick L. Bremby, Department of Social Services (DSS); Mickey Herbert; Grant Ritter; Robert Scalettar; Cee Cee Woods; Patrick Holland, Wakely Consulting Group

**Members by Telephone:**

Mary Fox

**Other Participants:**

Kevin Counihan, Health Insurance Exchange (HIX); Tia Cintron, HIX; Jason Madrak, HIX; Virginia Lamb, HIX; Julie Lyons, HIX; Paul Hencoski, KPMG; Roger Albritton, KPMG; Chris Knopf, Mintz & Hoke; Kathy Morelli, Mintz & Hoke; Andrew Wood, Mintz & Hoke; Raul Lorenzo, Bauza Associates

**Members Absent:**

Commissioner Jewel Mullen, Department of Public Health (DPH); Robert Tessier; Michael Devine

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**The meeting of the Health Insurance Exchange Board of Directors was called to order at 9:00 a.m.**

**I. Call to Order and Introductions**

Lt. Governor Wyman opened the meeting at 9:00 a.m. Lt. Governor Wyman made a motion to amend the meeting's agenda in order to move Public Comment to the first item. Motion was seconded. **Motion passed unanimously.**

**II. Public comment**

Lynne Ide provided a public comment.

**III. Introduction of Chief Executive Officer**

Lt. Governor Wyman introduced Kevin Counihan who will be the new CEO of the Exchange as of July 3, 2012.

#### **IV. Review and Approval of Minutes**

Lt. Governor Wyman made a motion to approve of the minutes from the May 17, 2012 meeting. Motion was seconded. **Motion passed unanimously.**

#### **V. Exchange Update**

Tia Cintron introduced Jason Madrak as the Director of Consumer Marketing & Communications. Mr. Madrak provided a presentation on the six major steps in the cycle of a complete marketing and communications campaign. The six steps include research, creative development, concept testing, campaign launch, performance measurement, and analysis of results. Mr. Madrak provided a timeline of the deliverables of each phase. Initial consumer outreach research is in the process of being wrapped up and a full detailed report will be provided. Vicki Veltri asked a question with regard to segmentation research—whether there was an inclination as to its results and how is that being partnered with the Thomson Reuters study, further inquiring if both are being used with the marketing plan. Mr. Madrak noted that the Thomson Reuters data is excellent in giving factual data down to zip code level, stating that Mintz & Hoke will speak further to this matter.

#### **VI. Mintz & Hoke Update**

Mr. Madrak introduced the Mintz & Hoke team. Chris Knopf provided a brief overview of the presentation agenda which included information on market exploration, stakeholder discussions, and the bridging campaign. Kathy Morelli provided an update on the recent stakeholder discussions, which sought to understand or to have stakeholders project their constituents' current perceptions of health insurance industry, focus on their concerns and areas of apprehension and desired message delivery.

Andrew Wood and Raul Lorenzo provided an overview of the consumer research conducted to date. A series of focus groups and interviews have been conducted in May and June with focus on the uninsured consumers between 139-400% of the FPL who are between the ages of 25 and 64 years of age, who live in Fairfield, New Haven, New London, and Hartford counties. Upcoming focus will concentrate on consumers living below 139% and above 400% FPL living in the remaining counties, as well as consumers living with illness and those representing diverse cultural groups. The final report will be issued upon completion of preliminary research in mid-July. Discussion took place regarding outreach efforts to the northeast and northwest parts of state, which may be difficult to reach.

Mickey Herbert expressed concern with regard to carrier outreach, which he states is an area he believes needs substantial work. Lt. Governor Wyman noted that this form of outreach will need to be discussed. Lt. Governor Wyman inquired whether churches have been approached in major cities since a lot of uninsured are members. Mr. Lorenzo indicated that Bauza Associates collaborated with Mintz & Hoke in reaching out to minority populations and church communities. Ms. Cintron noted that due to the criticality of carrier participation, the Exchange has reached out over the last couple of months to carriers.

Mr. Knopf discussed the next steps of consumer outreach. Ms. Morelli provided a brief update on the bridging communications program which is an interim communications plan focused specifically on stakeholders who have existing familiarity with Exchange development.

#### **VII. Advisory Committee Updates**

Tia Cintron introduced Julie Lyons, Director of Policy and Plan Management. Ms. Lyons is working closely with the Health Plan (HP) Benefits and Qualifications and SHOP advisory committees. Ms. Lyons provided a brief update on the current work of the two committees. The Exchange team has been providing information to the committees in order for them to form recommendations to the Board.

Deputy Commissioner Anne Melissa Dowling, co-chair of the HP committee expressed thanks to staff and consultants for their support and the data provided to the committee. Ms. Dowling provided an update on the committee's work to date. The committee has gone over the ACA requirements as they pertain to the Benchmark plans. There are 10 categories of care and services that must be included as part of the EHB. All 10 categories are covered in the Benchmark plans with the exception of prescription drugs, habilitative services and pediatric dental coverage. Ms. Dowling indicated that if the State selects as its EHB a Benchmark plan that is missing one of these 10 categories, the Exchange will have to supplement the missing category from another Benchmark plan and if it is not covered, the State will have to fund that expense. Ms. Dowling stated that it was determined by the committee that the federal plan would be eliminated since it does not cover all the state mandates and the cost would have been borne by the CT taxpayers, further noting that another plan has been eliminated due to the lifetime cap on rehabilitative services for those with chronic illnesses. Ms. Dowling further stated that concerns have been raised as to whether the plans will be in compliance with federal mental health parity. Ms. Dowling expressed hope that the committee would meet a couple of more times before the July meeting, in which a recommendation will be made to the Board.

Grant Ritter, co-chair of the SHOP advisory committee, thanked staff and provided a brief overview of the committee's recent meeting. Mr. Ritter indicated that primary discussion in the committee's last meeting was around the two purchasing model options to be provided to small businesses. Mr. Ritter reviewed the two options. Mr. Ritter noted that there is a fifth carrier potential through CT Medical Society which has received a large grant from the federal government with the stipulation that it sells its coverage through the Exchange. Mr. Ritter stated that the Exchange would need to create a right environment if the carriers are to participate. The committee voted to discuss the four options of design for small business. The committee also voted to continue to discuss options which included the single carrier, multiple levels and the multiple carrier one level. Mr. Ritter stated he believed it is too early to limit options.

Lieutenant Governor Wyman recommended that the work of the advisory committees be treated as a single agenda item in a future meeting before a decision can be made by the Board, further requesting that information be provided to the Board in advance of the meeting.

Mr. Madrak provided a brief summary of the activities of the Brokers, Agents and Navigators Committee, as well as the Consumer Experience and Outreach committee.

Mr. Herbert, co-chair of the Brokers, Agents and Navigators Committee, provided an update on the committee's work to date. The Committee examined Navigators roles and their definition in a number of states. Mr. Herbert noted that the committee does not want to re-invent wheel. Seven areas to be explored were identified, including defining the role of navigator and the separate role of brokers and agents. Training and certification was discussed at the meeting as well as licensing and necessity to recruit navigator participants and how to fund them since there are no Exchange dollars to award grants to navigators to perform their role. Members also discussed materials and outreach, as well as reporting and special navigator consideration for SHOP. Primarily, the committee has spent time discussing the role of *navigator* versus brokers and agents. Members focused also on the differences of navigator responsibilities

as specified in ACA. Mr. Herbert concluded that the next step is for the Exchange staff and consultants to incorporate the feedback from the meeting and present to the committee with recommendations.

Vickie Veltri, co-chair of the Consumer Experience and Outreach Advisory Committee provided an update on the committee's work. Ms. Veltri stated that many of the same issues were discussed in the QHP meeting. Ms. Veltri noted that the committee's initial trepidation of what benefits were to be covered fell away quickly. The committee had concerns on weighing in on a plan without additional information with regard to benefits limitations, including therapies, home health services and skilled nursing. The committee requested additional information with regard to the utilization of benefits if readily available in the various plans. Members discussed the importance of a good benefit package while also addressing the issues of affordability. The committee agreed to dig down into the issues which contribute to healthcare cost and premiums after the EHB is selected. Ms. Veltri noted that there is an interest to meet jointly with the QHP committee. Ms. Veltri stated that Mintz & Hoke presented to the committee an update on the consumer research and outreach efforts. The discussion of outreach to various parts of the state was discussed. Committee members also had questions for KPMG with regard to the work around consumer assistance call center models, to which a list of questions had been compiled and submitted to the vendor.

#### **VIII. Standing Committee Membership**

Tia Cintron introduced Virginia Lamb, General Counsel who discussed present committee membership. A review of the present standing committee membership of the Audit, Finance, and Human Resources committees revealed that the Board is short on membership, which needs to be addressed as soon as possible in order to meet the requirements of the Exchange Bylaws. The bylaws require that there be a minimum of 5 people on each committee. Ms. Lamb walked the Board through the current membership by committee. Lt. Governor Wyman suggested Mickey Herbert and Bob Scalettar volunteer to be on the Finance Committee; both members agreed.

The Audit Committee needs one more volunteer who is an appointed voting or ex-officio voting member. Mary Fox agreed to participate on the Audit committee. Lt. Governor Wyman also volunteered to serve as an appointed member. Lt. Governor Wyman stated that she would find one other ex-officio member to serve on the Audit committee.

Lt. Governor Wyman made a motion to add Mickey Herbert and Bob Scalettar onto the Finance Committee. Vicki Veltri seconded the motion. Bob Scalettar seconded the motion. **Motion passed.**

Ms. Lamb continued that even though the audit committee is not fully populated, one of its activities is compliance. Ms. Lamb is currently working on a compliance program with FOIA, as well as contracting. Ms. Lamb announced that contracts will be made available to Board Members and the public.

#### **IX. Level II Grant Overview / KPMG Update**

Mr. Scalettar thanked Tia Cintron for her contributions to the Exchange. Mr. Scalettar requested information regarding the Gate Review as well as the status of the Level 1 Supplement Grant and any information with respect to the upcoming Supreme Court ruling. Ms. Cintron announced that the Gate Review went very smoothly; a formal evaluation from the review is expected in another week or so. With regard to the Level 1, Ms. Cintron stated that a supplemental request was submitted to the Feds on April 30. It was requested that the State remove the APCD funding component because it had not originally been incorporated into the original Level 1 grant, thus, this has been moved to the Level 2 application. The application was resubmitted and recently a request was received for more detail. The application will be resubmitted on June 21, 2012. Jeannette DeJesus requested that her office (Office of Health Reform &

Innovation) be included in conversations with HHS or CCIIO when APCD is discussed. Commissioner Bremby stated that he had forwarded to Ms. Cintron an article regarding what will happen following the Supreme Court decision.

Ms. Cintron introduced Paul Hencoski from KPMG who provided a summary of work done to date by the technical advisor. KPMG has provided work towards submission of the Level 2 grant application as well as preparing for the Gate Review. Mr. Hencoski noted that CCIIO was complimentary of Connecticut's work in the Review. Work has begun with DSS regarding the integrated eligibility part of the project. The Level II grant in the amount of \$108,631,635 is to be submitted to the government in the next week.

Patrick Holland of Wakely Consulting Group presented a comprehensive review regarding the Level 2 budget. Submission deadline is June 29, 2012 but the goal for submission is June 27, 2012. Preliminary reports have been provided to the Finance Committee. Mr. Holland stated that it is anticipated that within 45 days there will be notification of the award. Mr. Holland continued with an overview of the high level application components. Mr. Scalettar inquired as to when the application will be available for the Board and public to review and if any draft version has been vetted through the new CEO. Ms. Cintron replied that it is expected that a final form will be done by Wednesday to be sent to the Board, and a copy will be provided to the new CEO.

**Secretary Barnes Barnes joined the meeting at 10:54 a.m.**

Mr. Holland provided a comprehensive review of the major areas of the L2 budget, which includes Business Operations/Administration and IT System Functionality. Mr. Holland described the budget approach. Discussion ensued around the budgeted areas and what the CCIIO will be considering, particularly the reuse of existing resources. Mr. Holland further addressed the key budget assumptions presented including assumptions with a 2015 sustainability model and IT model. The total cost grant period covers the 2012-2014 and is in the amount of \$108,631,635. Mr. Holland then addressed membership/enrollment estimates, as well as staffing and fringe estimates including staffing levels and salary levels. Discussion materialized around staffing levels. There is intensive use of temporary professional consulting during ramp up periods of 2012 and 2013 and will be eventually absorbed by full time staff of the Exchange. A project management office was funded for to provide integration and coordination cross initiatives/agencies. Other direct non-IT costs include equipment supplies, travel and other administrative costs including the appeals process which is a required exchange function under the ACA.

Vicki Veltri asked if the grant will only cover components which benefit the Exchange and requested the PMO be discussed in further detail. Mr. Holland stated that the PMO is needed to ensure integration with other related parties both internal and external to the Exchange. Commissioner Bremby stated that a PMO was the best practice in IT deployment; reuse of technology is key to CCIIO funding. The Goal is to procure major components not only for Exchange but across enterprise. The PMO will be established in order for the right resources to be integrated. Commissioner Bremby stated that one of the great short term practical benefits is to get to procurement and to meet the deadlines that bring together the resources of the Exchange and their needs but also some of the ability of DSS and BEST to get to appropriate procurement that CCIIO will be happy with.

Mr. Hencoski provided a comprehensive overview of the IT cost estimate of the budget. There is an Exchange-specific IT model developed by KPMG that is based on industry standards. Mr. Hencoski discussed the various degrees of re-use (high, medical and low re-use strategies). Mr. Hencoski discussed the different types of reuse products, including transferable solutions or commercial off-the-shelf, as well

as using existing state assets. Mr. Hencoski stated that there are other states' with similar IT systems. For purposes of budgeting, KPMG has recommended that the State use a medium-level of reuse. The program allocation methodology presented for budgeting purposes included Exchange-only, Exchange and Medicaid, and Medicaid only programs. Mr. Ritter inquired as to whether there was any analysis done of if the State had a BHP. Discussed ensued around the BHP. The State would bear the cost of running the BHP while procurement of tools is an Exchange cost.

Mr. Holland provided a comprehensive overview of the Exchange's self-sustainability model, which is a requirement on the Grant application. For fiscal conservatism, the most narrowest assessment type was modeled.

#### **X. Adjournment**

Lt. Governor Wyman thanked staff and consultants. Lt. Governor Wyman made a motion to adjourn the meeting. **Motion passed unanimously.** The meeting adjourned at 11:55 a.m.

#### **Resources:**

[Agenda](#)

[Minutes from previous meeting](#)

[Marketing Presentation](#)

[Level 2 Grant Presentation](#)