

**Medicaid & Exchange Advisory Board
Meeting Minutes
October 22, 2012**

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Board Members Present: Bram Kleppner, Catherine Hamilton, Christina Colombe (phone), Clifton Long, Dale Hackett, Donna Sutton Fay, Gladys Mooney, Julie Tessler, Kay Van Woert, Peter Cobb (for Larry Goetschius), Laura Pelosi (phone), Wendy Davis (for Harry Chen), Madeleine Mongan, Michael Roche, Michael Sirotkin, Paul Bakeman, Gretchen Begnoche (for Randy Cook), Sheila Reed, Tim Ford, Trinkia Kerr, Floyd Nease, Joan Lavoie, Cathy Davis, Julie Lineberger, Shannon Wilson, Lisa Maynes, Ellen Gershun, Susan Barrett.

Board Members Absent: Sharon Henault, Harry Chen, Larry Goetschius, Randy Cook and Elizabeth Cote.

Other Interested Parties Present: Kari Miner, Katina Cummings, Jeanne Kennedy, Dave Sharpe, Susan Gretkowski, Betty Morse, George Richardson, Virginia Renfrew, Jane A. Van Buren, Tim Clain, Lucie Garand, Michele Blanchard, Cherie Bergeron, James Kokoszyna and Anthony Otis.

Staff Present: DFR: Margot Thistle; GMMB: Melissa Morales (phone); DAIL: Marybeth McCaffrey; DVHA: Mark Larson, Lindsey Tucker, Nicole Weidman, Emily Yahr, Paul Hochanadel, Clark Eaton, Bill Clark, Peter McNichol and Rob Larkin.

HANDOUTS

- Agenda
- Medicaid & Exchange Advisory Board (MEAB) September 10 Meeting Minutes
- MEAB Member Survey

CONVENE

Kay Van Woert and Bram Kleppner chaired the meeting.

Welcome and Introductions

Board Business

Following introductions, the board moved to approve the minutes from the September 10, 2012 Medicaid and Exchange Advisory Board (MEAB) meeting.

Report Out on Member Surveys and Small Group Synthesis

Bram Kleppner thanked board members for their input at last month's meeting regarding ways to improve process, procedures and communications for board operations. Board member Donna Sutton Fay reported on the results of the prior meeting survey that asked for input and suggestions to improve board operations and communication. She reported that a small sub-group met in September to discuss member suggestions followed by a meeting between Chairs Bram Kleppner and Kay Van Woert and DVHA representatives Mark Larson and Lindsay Tucker on October 12. The MEAB will "experiment" with these logistical and procedural changes (attached to these minutes) and review how they are working after a few meetings

Board Discussion and Changes to Operations Manual

Several of the recommendations were counter to provisions in the operation manual. Bram led a discussion on three possible board Operations Manual changes. First, the manual calls only for

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DVHA to provide online and email documents, but some members prefer hard copies. DVHA has agreed to provide handouts and documents according to each member's preference.

A second change centered on voting procedures and whether abstentions on votes need to be explained; this was initially included in the board's Operations Manual but members were finding it ungainly and not useful. After discussion, Dale Hackett made a motion, and accepted a second with a "friendly amendment" from Madeleine Mongeon that MEAB votes of yea, nay, or abstain be by simple hand count UNLESS any member requests that individual votes be recorded for the record. Facilitators will ask if the board wants to have the vote "captured" before any formal vote. This motion passed with 18 yeas, 6 nays and 1 abstention.

A third possible change, to allow MEAB member alternates to vote, appears not to be allowable under current statute. Following general discussion, a motion was made by Julie Tessler and seconded by Joan Lavoie to continue operating under the current rule that alternates are not allowed to vote. This motion passed with 17 yeas, 6 nays and 2 abstentions.

The co-chairs discussed and distributed the brief MEAB Member Survey that focuses specifically on meeting time preferences and communications. These were collected at the end of the meeting.

To meet the wishes of the board on limiting the number of communications, DVHA will strive to send approximately three to four communications per month: 1) time sensitive follow up information requested by members but not available at the meeting, 2) meeting minutes for review, 3) requests for agenda items for the next meeting and 4) meeting reminder and agenda with supporting handouts and presentations. Other necessary board information will try to be packaged with each of these communications. Information will also be posted on-line on the DVHA website.

Exchange Small Business Discussion – Lindsey Tucker

Lindsey Tucker, Deputy Commissioner, Health Benefit Exchange, provided an update on Exchange activities surrounding small businesses, beginning with a brief overview to be sure everyone understands what the Exchange's responsibilities are for small businesses. Under the Affordable Care Act (ACA), Vermont has elected to run only one Exchange that will include both individuals and small businesses. Through Vermont legislation, small business will be defined as 50 and fewer employees in 2014-15, and 100 and fewer employees starting in 2016. In Vermont, there will be no outside market and everyone will be coming through the Exchange.

Lindsey talked the group through a presentation of consultant findings through employer interviews over the past summer. Fifty in-depth interviews were conducted with VT small employers (2-50 employees). Small business employers were presented with four different choice models to help determine what would be most liked and acceptable to small businesses in Vermont. The strongest interest was expressed for the model offering a full range of plan and tier options for employees. The second most favored choice was the model with an Employer selecting the issuer and the employee then picking plans from different tier options.

Lindsey also covered transition issues where the Exchange must ensure typical broker produced services are available, including: comparison shopping, a trusted advisor role, enrollment assistance, and service/advocacy. General questions followed, focusing on costs, tax implications,

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out-of-state employees, not reporting income/inappropriate tax avoidance, and other small employer concerns during the transition.

Vermont Health Connect Updates – Lindsey Tucker

Consumer Assistance: Lindsey Tucker reminded everyone that, earlier in October, a Request for Information (RFI) was forwarded to board members and other key Vermont constituents who provide educational assistance and outreach to health care consumers to get important feedback as Vermont moves forward with the Exchange. The RFI should take only 15-20 minutes to complete and is due back on October 22, 2012.

Outreach and Education: The Exchange team has finalized its outreach and education plan. The plan will be up on the Exchange website very soon, with implementation continuing.

Informational Website: The Exchange's general information and educational website will also be up by the end of the year. Emily Yahr is currently collecting frequently asked questions to include on the website and will appreciate any input from the group.

Commissioner's Updates -- Mark Larson

CCIIO Review/Update: Mark Larson, the DVHA Commissioner, provided the most current update on DVHA's ongoing status reports/meetings with the federal government on progress toward fielding the Exchange for October, 2013 and having it ready to go operational in January, 2014. One of the key progress elements discussed earlier in October was IT procurement and all seems to be going very well.

Green Mountain Care Board Update: Mark previously reviewed DVHA's benchmark and plan design recommendations to the Green Mountain Care Board (GMCB). In early October, the GMCB approved DVHA's overall proposal.

DVHA Strategic Plan & Budget Update: The DVHA's State Fiscal Year (SFY) 2014 budget development is underway. The initial guidance is to proceed based on level funding from state dollars. Relatively speaking, this is good news compared to approaches taken in recent years. DVHA welcomes board suggestions concerning the budget, either collectively or individually. Input can be made directly to the Commissioner. DVHA is already aware of issues that are being evaluated, including: 1) individuals now in VHAP and Catamount programs who will be transitioning to the Exchange, 2) different significant populations of people who will be transitioning either in or out of categorical coverages, and 3) the effects of cost shifts and provider rates. Last year's SFY '13 budget document is on-line and can provide a good frame of reference for the coming year's effort.

Member Issue Alerts for Commissioner: Bram Kleppner discussed some Medicaid transportation concerns surrounding changes in the Chittenden County Bus program as well as some other instances relating to the denial of transportation services. Mark noted that DVHA had briefed the Bus Pass Program changes to the board last month and is working hard to be sure all concerned groups and users are aware of and understand the changes. Christina Colombe cited a situation that she didn't understand on how and why access to transportation was impacted. DVHA will work one-on-one to address concerns and Mark Larson also asked that any additional concerns on Transportation be forwarded directly to him. Kay Van Woert noted that a small group can be convened, if needed, to discuss transportation issues.

Adult Dental Services in Medicaid – Mark Larson

The GMCB has decided not to include adult dental in its recommended essential health benefit package. Mark noted that the GMCB is still concerned about oral health for Vermonters and is

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going ahead with a study of its own on access to dental health care. DVHA is aware that as Vermont moves to the Exchange, there will be approximately 30,000-40,000 Vermonters who will be gaining eligibility to a limited adult dental plan capped annually at \$495. DVHA will be reviewing access capabilities to meet this need, and will also look at and evaluate a variety of ways to potentially increase adult dental coverage under Medicaid. Reimbursement rates will be evaluated, as well as the possibility of moving some benefit procedures out of the annual cap or simply increasing the \$495 annual cap. These considerations will be part of DVHA's upcoming budget considerations. Kay Van Woert noted that the Medicaid program may have potentially created a dental provider shortage simply because Vermont's general reimbursement rates are so low. Susan Barrett remarked that Federally Qualified Health Centers (FQHC's) play a key role in improving dental access within Vermont.

Board Work Plan

Kay Van Woert recapped actions from this meeting and steps/activities moving forward:

- 1) Schedule the Early, Periodic, Screening, Diagnosis and Treatment (EPSDT) workgroup for the next meeting.
- 3) Update the Operations Manual and attach small group recommendations to these minutes.
- 4) Any Medicaid transportation comments can go directly to Mark Larson.
- 5) Members have ongoing opportunities to sign up for work groups in support of the exchange; you are encouraged to participate if you can.
- 6) Please turn in your surveys on meeting schedules/communications preferences.

Updates for Next Meeting:

- Budget updates
- Navigator program
- IT related to Health Care Reform

Data Requested (when DVHA develops these numbers in the course of their work):

- SFY '13 DVHA Budget and/or trend data as a frame of reference for the SFY' 14 budget development process.
- Savings generated by the Exchange
- Costs of adding dental and vision benefits to the Exchange

Topics to Monitor / MEAB Updates as Work Progresses:

- Access Issues in Current Public Programs
- Independent Living
- Habilitative services coverage
- Fraud and Abuse (Schedule a presentation by the Department of Labor to discuss the potential ramifications of unreported income)

Short Term Ad Hoc Work Organizing Now:

- Provide input to Exchange on Navigator program
- Provide input to Exchange on Outreach

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Public Comment

Dr. George Richardson (retired dentist) commented on the overall negative impact of low reimbursement rates. He also pointed out that dental units at FQHC's are reimbursed in a different way; this positively benefits them in comparison to other typical dental practices.

There was also general concern expressed that the word is not getting out fast enough to providers for a new Exchange system that needs to be in operation in about a year. Bram suggested that outreach and education information be pushed out to providers as soon as possible. Mark Larson indicated an informational website will put up in the very near future.

Katina Cummings asked when DVHA would come to a final decision on the two health plan Employee Choice Models that were presented earlier in the meeting. Mark Larson noted that DVHA will continue to evaluate pros and cons and make a final decision very soon.

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Next Meeting

November 19, 2012
Time: 11:00AM – 3:00PM
Site: DVHA, Williston, VT

Please visit the Advisory Board website for up-to-date information:
<http://dvha.vermont.gov/advisory-boards>
