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OFFICE OF HEALTH REFORM & INNOVATION  
STATE OF CONNECTICUT

## **Basic Health Plan Work Group**

Meeting  
September 24, 2012  
2:00pm-3:30pm  
Legislative Office Building, Room 1B

Minutes

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**Members Present:** Jeannette DeJesús, Pat Baker, Uma Ganesan (for Roderick Bremby), Margaret Flinter, Anne Foley, Sen. Terry Gerratana, Jennifer Jackson, Sharon Langer, Jane McNichol, Katharine Lewis (for Jewel Mullen), Deb Polun, Rep. Betsy Ritter, Matt Salner, Vicki Veltri, Susan Walkama, Katharine London, Robert Seifert

**Members Absent:** Kevin Counihan, David Henderson, Sen. Anthony Musto, Rep. Peter Tercyak, Joan Feldman, Bobbi Schmidt

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### **Welcome and Introductions**

Jeannette DeJesús opened the meeting by welcoming everyone. Members introduced themselves.

### **Public Comment**

There was no public comment.

### **Approval of Minutes of the July 9 Meeting**

The minutes of the July 9 meeting were approved.

## **Update from Work Plan Subgroup**

Pat Baker provided an update from the Work Plan Subgroup, which met in August. The Subgroup discussed the work plan for the future work of the Work Group, which includes the questions that the Work Group is seeking to answer. The consultants from UMass Medical School presented some preliminary answers at the Subgroup meeting, and would present more detailed answers later in the Work Group meeting.

Ms. Baker said that the Subgroup also discussed the lack of federal guidance on the Basic Health Plan, and the potential impact that this would have on the Work Group's ability to answer questions and make recommendations. She said that Subgroup members agreed that the Work Group should proceed with its work, in the absence of federal guidance or regulations, in order to be prepared to make recommendations at the appropriate time.

## **Update on Actuarial Consultant**

Anne Foley announced that Milliman has been retained as the actuarial consultant for the Basic Health Plan Work Group. The contract with Milliman will be part of their existing agreement with the Office of the State Comptroller. Milliman will provide a preliminary analysis by the end of October, and deliver a final report by mid-November. Ms. Foley distributed a list of questions which would be addressed by Milliman.

## **Discussion of Questions and Work Plan**

Katharine London presented PowerPoint slides containing information which would inform answers for several questions in the work plan.

Ms. London first spoke about issues related to provider access for potential BHP beneficiaries. She cited the BHP section of the Affordable Care Act (ACA), as well as the state Medicaid contract with its Administrative Service Organization (ASO), which both contain general language requiring adequate access to providers. She also referenced statistics which showed a small number of grievances by current Medicaid beneficiaries regarding lack of access to care, as well as a study showing the increase in utilization of federally-qualified health centers.

Ms. London then discussed the benefit structure for a potential BHP. She said that the ACA requires a state BHP to cover the state's Essential Health Benefits (EHB) package, as well as additional features including care coordination and preventive services. She also referenced several benefits that are currently available to state Medicaid beneficiaries. Ms. Foley asked for a complete list of benefits provided to Medicaid beneficiaries in order to compare them with the EHB package. Uma Ganesan agreed to provide this information to the group.

Ms. London presented three hypothetical scenarios of potential BHP beneficiaries, comparing fictional individuals' costs in a state BHP with those individuals' costs in the Exchange. These vignettes compared costs for a single mother with a minor child, a young adult with high medical costs, and a married couple with one spouse receiving employer-sponsored insurance. In each vignette, the individual's costs in a potential BHP are lower than they would be in the Exchange.

Ms. Foley and David Guttchen cautioned that the data used for the vignettes were derived from the Mercer report to the Exchange, which was written before the Exchange decided on an EHB package. Therefore, the Mercer report data might not accurately reflect the cost of mandated benefits.

Ms. London mentioned that several other states, including New York, Massachusetts, and California, are also considering implementing a BHP.

### **Next Steps**

Ms. Baker raised the issue of the lack of federal guidance and regulations on the BHP. Several members offered possible explanations for this. Ms. Baker said that all members of the Work Group should share their opinions on whether to proceed with the work plan in the absence of federal guidance or regulations. Ms. DeJesús asked members for their thoughts on this question. Sharon Langer said that she felt the Work Group should continue its work in order to determine the best way to provide coverage for those who would be eligible for a BHP. Representative Betsy Ritter agreed, saying that the analysis would be helpful in light of economic instability and its effects on people in this income category. Senator Terry Gerratana said that the work would help to determine whether the Exchange could offer affordable coverage for this population. There was a consensus among members that the Work Group should proceed with its work.

Deb Polun suggested that the State write a letter to the federal government formally requesting the issuance of regulations and guidance on the BHP. Several members agreed with the idea of sending such a letter. Ms. DeJesús said that Kevin Counihan, CEO of the Exchange, and Roderick Bremby, Commissioner of the Department of Social Services, should be involved in a decision on whether and how to send a formal request. Jane McNichol and Anne Foley both volunteered to draft such a letter.

Ms. DeJesús said that the Office of Health Reform & Innovation would schedule additional Work Group meetings in November and December.

### **Adjournment**

The meeting was adjourned at 3:30pm.