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**Medicaid & Exchange Advisory Board**  
**Meeting Minutes**  
June 3, 2013

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Page 1

**Board Members Present:** Bram Kleppner, Michael Sirotkin, Laura Pelosi, Sheila Reed, Trinkia Kerr, Christina Colombe (phone), Wendy Davis, Clifton Long, Catherine Hamilton (phone), Donna Sutton Fay, Tim Ford, Kay Van Woert, Larry Goetschius, Joan Lavoie, Shannon Wilson, Ellen Gershun, Cathy Davis, Sharon Henault, Julie Lineberger, Vaughn Collins, Paul Bakeman, Madeleine Mongan, Gladys Mooney, Julie Tessler, Susan Barrett and Dale Hackett.

**Board Members Absent:** Randy Cook and Lisa Maynes.

**Other Interested Parties Present:** Lucy Garrand (Phone), Gretchen Begnoche, Betty Morse, Stephani Pigeon, Virginia Renfrew, Saul Skrouki, Cherie Bergeron, Kelly Barnier and Kristen Bigelow-Talbert.

**Staff Present:** DVHA: Mark Larson, Lindsey Tucker, Paul Hochanadel, Sean Sheehan, Emily Yahr, Nancy Lynch, Erin Carmichael, Hera Bosley and Clark Eaton.

**HANDOUTS**

- Agenda
- Medicaid & Exchange Advisory Board (MEAB) May 6 Meeting Minutes
- Broker Program/Broker Proposal Presentation (6/3/13)\*
- Application Process Presentation (6/3/13)\*
- Outreach and Education/Navigator Update slides (6/3/13)

\*presented at meeting, sent out after the meeting

**CONVENE**

Bram Kleppner and Kay Van Woert chaired the meeting.

**Welcome and Introductions**

**Board Business**

Following introductions, Bram Kleppner asked for adoption of the May 6, 2013 meeting minutes. The board voted to approve the May minutes, with 26 yeas, 0 nays and 2 abstentions.

**DVHA Updates – Mark Larson, Commissioner**

Mark Larson, Commissioner, Department of Vermont Health Access (DVHA), provided the most current updates on a number of DVHA activities and topics.

*DVHA Budget/Legislative Update:* The state legislative session has adjourned. The legislature did approve the key elements of DVHA's budget proposal, including: 1) the premium assistance and cost sharing subsidy plans for individuals who will participate in the Exchange, 2) the increased provider reimbursement recommendation (approximately 3%), and 3) a financing plan for the Vermont Health Connect Exchange. The increased provider reimbursement recommendation was approved to begin on November 1, 2013, instead of on October 1, 2013, as originally proposed. Larry Geotschius noted that the projected 3% increase in provider reimbursement rates is really close to a 2%, as it impacts only eight months of SFY 2014. The strategy, across Departments, is for the increase to go into existing rate methodologies, except for a very few exceptions. The projected increase is based on SFY '12 dollar figures. It was suggested that DVHA's provider reimbursement increase be added to the July MEAB meeting

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**Medicaid & Exchange Advisory Board**  
**Meeting Minutes**  
June 3, 2013

---

Page 2

agenda for a more detailed briefing and discussion. For the budget in general, Mark asked members not to lose sight of what Vermont has accomplished and will be continuing to support as the state moves forward with broad health care reform.

*Dual Eligibles Project Update:* The next Dual Eligible Stakeholders Workgroup meeting is scheduled for June 26, 2013. There is no significant news to report since the May MEAB meeting. DVHA is in the process of negotiating a Memorandum of Understanding (MOU) with CMS for a demonstration project that would allow the state to manage Medicare federal funding for beneficiaries (approximately 22,000 Vermonters) who have “dual Medicaid and Medicare eligibility.” DVHA is still striving to have a signed MOU in place by July 2013, and a proposed implementation date for the Dual Eligibles program of September 2014. This should provide time for adequate synchronization with the procurement and integration of a new eligibility system that will be important to the operation of the Dual Eligibles program.

*Global Commitment Update:* DVHA is in the process of requesting an extension to its Global Commitment (GC) to Health Section 1115(a) Demonstration Waiver. The current Waiver runs out at the end of this calendar year, and the extension is for the period 1/1/2014-12/31/2018. DVHA anticipates that a CMS public comment period will begin soon. The deadline for the GC waiver extension is the end of this year and progress updates will be provided at future meetings.

*Administrative Rule Progress:* Mark provided an update on the new administrative rule being developed for the Exchange. The proposed rule has been submitted to the Interagency Committee on Administrative Rules (ICAR). It also will go to the Legislative Committee on Administrative Rules (LCAR) for review. DCF-Economic Services Division and Vermont Health Connect will host an informal question and answer session concerning the proposed Health Benefits Eligibility and Enrollment Rule on June 5 at DVHA, 312 Hurricane Lane, Williston VT. This informal question and answer session is not a substitute for the public hearing or the public comment period, but it should be of assistance for consideration of filing comments. The public hearing will be held on June 14, 2013 at 10:00 am in the AHS Secretary's Conference Room, 208 Hurricane Lane, Williston, VT. The new rule needs to be ready for implementation no later than October 1, 2013.

Trinka Kerr noted that Vermont Legal Aid is in the process of reviewing the large 320 page proposed rule and will provide the MEAB with a summary of its review in time for the next meeting. The rule will be an agenda item at the July MEAB meeting. Vermont has received emergency rule-making authority for this large endeavor and this should enhance the effectiveness of this effort. Donna Sutton Fay urged small employers to look carefully at the new rule, and stressed that everyone must be vigilant about what is working and what is not working as the rule is finalized.

**Establish Work Groups – Trinka Kerr & Julie Lineberger**

Kay Van Woert prefaced these discussions by recapping the intent of establishing small workgroups. As indicated in the board’s operations manual, these workgroups can expand the work of the board and report back to the full board with recommendations. The work groups also can: 1) have separately scheduled meetings, 2) include outside members to gain expertise, 3)

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**Medicaid & Exchange Advisory Board**  
**Meeting Minutes**  
June 3, 2013

---

Page 3

allow for separate stipends for qualifying consumer members, and 4) be supported administratively by DVHA for meetings.

*Access/Independent Living/Disabilities Work Group:* Trinka Kerr will be chairing this new work group and circulated a draft description/purpose of the work group for discussion, comments and possible adoption. Following discussion, the following description/purpose was unanimously adopted for this work group:

“The Access/Independent Living/Disabilities Work Group will provide a forum for ongoing discussion of barriers to consumer access to covered benefits or access to services that would support community-based and/or independent living. Barriers discussed may occur wholly within DVHA or may arise from providers', non-profit service organizations', other AHS Departments' or from benefits or interface with DVHA. Issues may be referred to this work group by the full MEAB, or identified by the members of the work group in the course of discussions. The work group will prepare recommendations for the Board's consideration and will provide regular updates to the Board on its work plan and progress.”

*Small Employer Work Group:* Julie Lineberger will be chairing this new work group and a draft description/purpose of the work group was circulated for discussion, comments and possible adoption. Following discussion, the following description/purpose was unanimously adopted for this work group:

“The Small Employer Work Group will provide a forum for ongoing discussion of issues or barriers affecting small employers that need attention or resolution as the state and DVHA move toward implementation of the Health Benefit Exchange (HBE). Issues or barriers discussed may occur wholly within DVHA, or might arise from small employers and their employees, the Vermont business community, or from other state sources that could impact HBE policies, procedures and benefits relating to small employers. Issues may be referred to this work group by the full MEAB, or be identified by the members of the work group in the course of discussions. The work group will prepare recommendations for the Board's consideration and will provide regular updates to the Board on its work plan and progress.”

*The Early & Periodic Screening, Diagnosis & Treatment (EPSDT) Work Group:* Wendy Davis provided a brief summary of the efforts of the previously established EPSDT work group that last met in February 2013. The group is completing the process of framing the requirements of the EPSDT program for Commissioner Larson and capturing the items/issues that need attention as part of the program. The next meeting should be scheduled shortly.

**Exchange Updates – Lindsey Tucker, Deputy Commissioner**

*Broker Programs/Broker Proposal Presentation:* Mark Larson provided a short presentation on the Exchange's broker programs, followed by a summary of the broker fee proposal for 2014.

Mark reviewed the legal parameters for brokers set forth in Act 171, including the program goals for brokers. Based on employer survey results and multiple stakeholder inputs, a broker fee proposal has been developed for 2014, considering the need for a balance of interests – if fees are too high, employers will not use brokers; if fees are too low, brokers will choose not to provide Vermont Health Connect enrollment assistance. Standard proposed fees, with rationale, were outlined for 2014 Year 1, and for 2015 and beyond. The overall broker fee proposal will be

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**Medicaid & Exchange Advisory Board**  
**Meeting Minutes**  
June 3, 2013

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Page 4

forwarded to the MEAB tomorrow. The public comment period for the broker fee proposal will run from June 4 – June 11, 2013. All public comments may be sent to: [Greg.Paradiso@state.vt.us](mailto:Greg.Paradiso@state.vt.us) by the end of the day on June 11, 2013.

Tim Ford, representing agents, agreed in the spirit of developing an effective broker proposal, but expressed that the proposed broker fee was too low and bears continued discussion. There also needs to be complete transparency moving forward, with efforts to avoid any conflicts of interest.

*Application Process:* Sherry May, Economic Services Division, reviewed the streamlined application processes for individuals and small business. For simplicity, there are three individual applications: 1) for families applying for Medicaid/Dr. Dynasaur/CHIP/ATPC/CSR, and Vermont Premium Subsidy, 2) a “short form” for single adults who do not have coverage from an employer, and 3) a separate application for anyone applying for a Qualified Health Plan and not requesting help with costs. There are two small business applications: 1) an application for employers and 2) an application for employees. So far, there are three appendices to assist with the application process. There also is a paper application that is almost fully developed that will be customized to align with Vermont requirements. Much effort is going into ensuring all of CMS’s guidelines are being met.

The board expressed a desire for interested to participate on a working group to review and contribute to the application development process. DVHA will reach out to board members shortly to meet/participate and assist in this process.

*Premium Processing:* Greg Paradiso, Vermont Health Connect (VHC), presented an overview of premium processing under VHC, including two major changes: 1) VHC is building a new automated premium invoicing and collection process for 2014 health plans, and 2) employer and individual payment of premiums will be made to the exchange (not to insurance carriers). There also will be a number of new features introduced for individuals/employers, including: 1) the ability to pay VHC by check or online, using either a debit or credit card, 2) viewable online payment due date and history, and 3) one consolidated monthly bill either by mail or e-mail. Greg went on to outline the premium collection processes, premium remittances to carriers, and the coordination and reconciliation of tax credits and cost sharing.

Tim Ford asked about how adjustments would be made transitioning into the exchange for plan year versus calendar year calculations. DVHA will send a response to the board on this in the next few days.

*Outreach and Education Update:* Sean Sheehan, Director, Outreach and Education, provided a handout and presented an overview of the exchange’s current Outreach and Education efforts. The VHC launched its social media campaign in May, with both Facebook and Twitter. A YouTube channel with a video with frequently asked questions will be launched in June. Sean also introduced a series of business tools/materials (including facts and fact sheets) that are now available online. An employer “estimator” will be available in late June. Sean reminded the board of a series of forums scheduled throughout the state during June; more will be added over the summer.

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**Medicaid & Exchange Advisory Board**  
**Meeting Minutes**  
June 3, 2013

---

Page 5

Four statewide coordinating navigator organizations have been selected. Two are focused on small business (Vermont Businesses for Social Responsibility, Vermont Chamber of Commerce Services, Inc.), and two are focused on individuals (Champlain Valley Office of Economic Opportunity, Vermont Coalition of Clinics for the Uninsured). Beginning in June, navigators will start orientation and training. In-person training will be conducted on July 9-10. Sean also discussed the timeline for Consumer Assistance Training, open to all individuals. Current information can always be viewed on the Vermont Health Connect website, [www.vermonthealthconnect.gov](http://www.vermonthealthconnect.gov).

**Public Comment**

There was no public comment at this meeting.

**Other DVHA Updates – Mark Larson, Commissioner**

*Pediatric Dental:* Mark responded to an e-mail inquiry concerning the pediatric dental benefit. The Affordable Care Act (ACA) requires that pediatric dental be one of the covered services for health plans starting in 2014. There are two different strategies to achieve this goal: 1) pediatric dental could be one of the ten essential health elements, or 2) it could be provided as a stand-alone product, in addition to the other nine health elements (9+1). Delta Dental is requesting that the exchange “require” that the 9+1 strategy be used. For now, DVHA is committed to leaving this choice optional; there is concern that, by requiring the 9+1 option, it could create additional out-of-pocket deductible expenses for beneficiaries.

*Vermont Health COOP:* The ACA provided funding for COOP health plans to form and provide insurance products within the exchange. Insurance licensing is a requirement. The Vermont Health COOP submitted a license request with the state’s Department of Financial Regulation (DFR) and the DFR recently responded with a decision that it did not approve the Vermont Health COOP’s request. Next steps might be an appeal, a request for reconsideration, or the submission of a new request. DVHA has a proposal from the COOP to operate on the exchange, but a first step is that they be licensed.

**MEAB Work Plan/Work Group Discussion – Board Members**

Kay Van Woert summarized the three ongoing work groups (see list below). There will also be an ad-hoc meeting set up with DCF in the next few weeks to review the application process. Work Group leaders, in coordination with DVHA will schedule meetings; interested MEAB members are encouraged to participate. The Board also discussed items to be included on the July meeting agenda and at later meetings. These topics are listed below. Board members are encouraged to review the discussion topics listed in the May 6 minutes, consider topics that came up today, and make any additional suggestions on what should be covered at the July 1 meeting.

**Draft Topics for July 1 Meeting:**

- Commissioner Updates (Duals, GC Waiver)
- Briefing on Provider Rate Increase
- Administrative Rule Update (to include a summary report from Legal Aid)
- SIM Grant Update
- VHAP/Catamount Transition
- Outreach/Education & Navigator Program Update

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**Medicaid & Exchange Advisory Board**  
**Meeting Minutes**  
June 3, 2013

---

Page 6

**Possible Topics for August 5 Meeting:**

- Chronic Care Initiative update
- Integrated Family Services
- Adult Measures Grant update
- Reinvestment in community based services

**Future Meeting Topics:**

- OHSU work/Guiding Principles – presentation and discussion
- Affordability and reinvestment pertaining to provider rates
- Minimizing administrative complexity for businesses that offer insurance
- Medicare supplement policies offered through the exchange

**Issue Tracker List:**

- Inventory of Perverse Incentives
- Diapers
- Medicaid transportation
- The complaint process
- Out-of-State travel
- Specialist or preferred providers
- Mental Health fee schedule changes
- Prior Authorization concerns
- Coordination of Benefits between Medicare and Medicaid
- Habilitative services benefits in the Exchange

**Ongoing Small Group Work**

- EPSDT Work Group
- Access/Independent Living/Disabilities Work Group
- Small Employer Work Group

**Next Meeting**

**July 1, 2013**

**Time: 11:00AM – 3:00PM**

**Site: VSAC Bldg, Winooski, VT**

**Please visit the Advisory Board website for up-to-date information:**

**<http://dvha.vermont.gov/advisory-boards>**