

**Medicaid & Exchange Advisory Board**  
**Meeting Minutes**  
January 22, 2018

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**Board Members Present:** Kay Van Woert, Joan Lavoie, Gladys Konstantin, Dale Hackett (phone), Lisa Maynes, Rebecca Heintz, Michelle Fay, Julie Tessler, Devon Green, Jessa Barnard (phone), Paul Bakeman (phone), Nate Waite, and Mike Fisher (phone).

**Board Members Absent:** Sharon Winn, Vaughn Collins, Georgia Maheras, Amy Vaughan, Laura Pelosi and Sharon Henault.

**Other Interested Parties Present:** Kirsten Murphy (Vermont Developmental Disabilities Council), Lucie Garand (Downs Rachlin Martin, phone), Brendan Hogan (Optum, phone)

**Staff Present:** Department of Vermont Health Access (DVHA): Commissioner Cory Gustafson, Deputy Commissioner Michael Costa, Etiane George, Patricia Elias and Molly Waldstein

**HANDOUTS**

- Agenda
- Global Commitment Register (handout)
- December Meeting minutes (handout)
- Reimbursement Unit Update (presentation)

\*all are posted to the VHC website

**CONVENE**

Mike Fisher and Julie Tessler chaired the meeting.

**Welcome/Introductions/Approval of Minutes**

Board members and meeting attendees introduced themselves around the room. A quorum was present. Members requested somewhat more detail in meeting minutes moving forward. Notes will be made in the meeting minutes to indicate when a MEAB member asks a question during a presentation and further research is required before an answer can be given. Meeting minutes for November and December meetings were approved without changes.

**Department of Vermont Health Access Commissioner's Report—Cory Gustafson**

Cory Gustafson, Commissioner of the Department of Vermont Health Access (DVHA), updated the group on recent developments within his department. The discussion included:

- Goals for the MEAB
  - More opportunity for members to comment
  - Learning more about what's going to happen, and less about things that have already happened
  - Present goals from each DVHA unit moving forward
  - Identify broader goal for the advisory board
- Enrollment
  - Down 938 people from last quarter
  - Most changes were in Vermont Premium Assistance
  - Child population increased
- HAEEU

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- Self-service applications up over 50% in Nov-Dec. First time we have reached that number of people enrolling by themselves online.
- Tier II dropped call rate was at 2% for the last week.
- 1095 Tax forms are mailing ahead of last year's schedule and going smoothly.
- Medicaid eligibility
  - Up over 80% in Medicaid passive renewals for the past 3 months. This means less work for members and less administrative effort for DVHA.
- Recent VOX article on substance abuse disorder highlights Vermont
- Budget address is tomorrow
  - Coordination of DVHA units to benefit members (and possibly providers)—Blueprint & VCCI
  - A member observed that utilization is down, and that may result in some relief from budgetary pressures.
  - Several members expressed an interest in learning more about IEPs, and how those relate to prior authorizations and value-based payments.
  - Several members expressed concerns about future budgetary impacts of uncompensated care.

**MEAB Introductions—Molly Waldstein**

Molly Waldstein, MEAB Staff Liaison, introduced several new DVHA staff members to the MEAB support team—including Etiane George, VHC Customer Service Center Director, and Stacy Woolaver, Administrative Assistant. Stacy will take over the role of Amy Simons relative to the MEAB moving forward. All MEAB members are invited to reach out to Stacy, Etiane and Molly for any future staff support needs.

Molly also introduced a new MEAB member, Devon Green, to the group. Devon will represent the Vermont Association of Hospitals and Health Systems on the board.

**Exchange Marketplace CSR—Adaline Strumolo**

Addie Strumolo, Health Care Director, discussed current developments with the federal CSR program. The discussion included:

- Payments from federal government to QHP issuers ceased in October 2017.
  - This resulted in a deficiency for 2017, which carried over into 2018, as rates for 2018 plans had already been finalized by October 2017.
  - Impacts will be felt in 2019.
- A current proposal involves loading the cost of the CSR benefits into the rates for the silver plans.
- The “Silver Load” proposal involves developing off-exchange plans available for people who cannot benefit from CSR plans, and which also excludes them from bearing the financial burden of paying for CSR plans. These are referred to as “reflective” silver plans. However, this would require new legislation in order to implement, as well as approval by the Green Mountain Care Board.

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- For those eligible for subsidies, it is expected that the increase in APTC, which would be the result of a premium increase, would in effect neutralize any impacts that premium increase would have on the consumer.
- For the silver loading strategy to be effective, people who are not eligible for subsidies currently enrolled in silver plans would need to migrate to the off-exchange silver plans at a lower premium cost.
- The increase in APTC that accompanies this strategy is greater than the loss of CSR subsidies, so many consumers will pay less for their health insurance.

**2017 Reimbursement Unit Changes—Michael Costa**

Michael Costa, DVHA Deputy Commissioner, gave an update on developments within the Reimbursement Unit. He was joined by Patricia Elias, DVHA Rate Setting Manager and Kara Suter of Burns and Associates. The discussion included:

- Purpose of the reimbursement unit is to curate our fee schedules to pay for the things our members need. They also work closely with the Payment Reform team to think about innovative developments over the next five years.
- Reimbursement unit is comprised of Patricia plus six staff members, supported by Burns and Associates.
- Primarily responsible for payment systems and setting rates.
- The “Professional Services” category of reimbursements refers to the services of doctors and other clinicians not associated with a hospital.
- Many reimbursement rate updates are based on changes in Medicare fee schedules. A re-base represents a deeper analysis of the fee schedule in question. The goal is to develop a predictable, regular cadence of updates and re-bases.
- Recent accomplishments include: investing in Vermont’s health centers; restoring primary care parity with Medicare; resolving DHMC reimbursement litigation.
- There was considerable discussion on the subject of Disproportionate Share Hospital (DSH) payments.
- Some changes to fees schedules are made in response to policy on the federal level. Stakeholder engagement is encouraged in this process.

The full presentation can be viewed online at:

[http://info.healthconnect.vermont.gov/sites/hcexchange/files/Advisory\\_Board/MEAB%20Reimbursement%20Unit%20Changes%20MKC%20%28002%29.pdf](http://info.healthconnect.vermont.gov/sites/hcexchange/files/Advisory_Board/MEAB%20Reimbursement%20Unit%20Changes%20MKC%20%28002%29.pdf)

**Working Group Discussion—Kay Van Woert**

Kay Van Woert, MEAB member, led a discussion about starting a new MEAB working group. She brought forward a request from the EPSDT working group to discuss issues around barriers to access to providers for people of all ages. There was discussion about the details of such a work group, staff support, and the MEAB Operations Manual, which may or may not have been adopted in June 2015. The Commissioner observed that the request for DVHA staff support was challenging considering the on-going budget discussions at the state level, and the need to

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contain administrative spending. Mike Fisher, MEAB co-chair, put forth a formal request to establish the MEAB workgroup. Julie Tessler, MEAB co-chair, suggested that it would be preferable for the MEAB to develop a proposal for the work group before making the formal request. There was general agreement regarding the delay, and so the issuance of a formal request was postponed. A meeting to discuss the issue further was requested after the MEAB meeting February 26 from 12:00-1:30 pm.

**Public Comment**

Kirsten Murphy brought up the subject of public meeting law relative to MEAB work groups. Kirsten also pointed out that there could be good coordination between advisory groups from DVHA, DAIL and other agencies moving forward.

**Adjournment**

The meeting was adjourned at 12:11 PM.

**Topics for Regular Update:**

- Vermont Health Connect Quarterly Update
- Commissioner Updates (Current Topics Discussion)
- GC Waiver (as Necessary)
- Quarterly Advocate Report (Legal Aid)

**Future Meeting Topics:**

- Program Integrity Unit report
- SFY19 Budget discussion

**Next Meeting**

**February 26, 2018**

**Time: 10:00AM – 12:00PM**

**Site: DVHA, State Office Complex, Waterbury, VT**

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

[http://info.healthconnect.vermont.gov/advisory\\_board/meeting\\_materials](http://info.healthconnect.vermont.gov/advisory_board/meeting_materials)