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Transcript of Advisory Committee Meeting

Date: June 20, 2023

Case: Health Benefit Exchange Advisory Committee Meeting

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<p>1 COMMONWEALTH OF VIRGINIA 2 STATE CORPORATION COMMISSION 3 4 5 6 VIRGINIA HEALTH BENEFIT EXCHANGE 7 ADVISORY COMMITTEE MEETING 8 9 10 11 12 Conducted Remotely 13 June 20, 2023 14 2:06 p.m. EST 15 16 17 18 19 20 21 22 23 Job No.: 482041 24 Pages: 1-66 25 Transcribed by: Ruth A. Levy</p>	<p>1 PROCEEDINGS 2 CHAIR CORLETTE: And welcome, 3 everybody, to our second Advisory Committee 4 meeting for the Virginia Health Benefit 5 Exchange. We are, what, a little over five 6 months from November 1 and launch dates so we 7 have a lot to talk about; a lot of exciting 8 news I think that we're going to be hearing 9 about from our Exchange friends and a lot to 10 talk about. 11 So let us dive right in. We can 12 start with the role call, so thank you for 13 showing the screen. Let's see. We'll start 14 with Secretary Littel, do we have secretary 15 Littel or somebody from his office? 16 MR. WILLIAMS: This is James 17 Williams, his deputy. 18 CHAIR CORLETTE: Hey, James. Thanks 19 for joining us. 20 MR. WILLIAMS: Thanks for having me. 21 CHAIR CORLETTE: Director Roberts? 22 MS. ROBERTS: Hi. Yes, I'm present. 23 CHAIR CORLETTE: Hi. Thank you. 24 MS. ROBERTS: Of course. 25 CHAIR CORLETTE: Commissioner Avula,</p>
<p>1 APPEARANCES: 2 Voting Members: 3 Sabrina Corlette, Chair 4 Ikeita Cantu Hinojosa, Vice Chair 5 Keven Patchett, Acting Director 6 Julie Green Bataille 7 Lee Biedrycki 8 Scott Castro 9 Doug Gray 10 Starla Kiser 11 Louis Rossiter 12 Elizabeth Cunningham 13 14 Ex-officio Members: 15 James Williams, Deputy Secretary of Health 16 and Human Resources 17 Cheryl Roberts, Acting Director of DMAS 18 Sarah Hatton, DMAS 19 Danny Avula, Commissioner of DSS 20 Mary Ashby Brown, Bureau of Insurance 21 22 23 Also present: 24 Holly Mortlock, Chief Government Relations 25 Officer/HBE Liaison to Advisory Committee</p>	<p>1 from DSS? 2 MR. AVULA: Danny is fine, thanks. 3 CHAIR CORLETTE: Danny, thank you so 4 much. Commissioner White? I think -- 5 actually, I think Commissioner White was not 6 able to join us. Do we have somebody from 7 the Bureau? 8 MS. MORTLOCK: Yes, I think Mary 9 Ashby Brown will be joining us from the 10 Bureau. 11 THE COURT: Okay. Great. And 12 Dr. Shelton? Okay. I see Ikeita. Ikeita, 13 say hello. 14 MS. HINOJOSA: Hello, I'm here. 15 CHAIR CORLETTE: I can see some 16 people's faces, but not everybody, so we'll 17 just go down the list. Julie Bataille? 18 MS. BATAILLE: Hi, everyone. Good 19 afternoon. 20 CHAIR CORLETTE: Lee Biedrycki? 21 MR. BIEDRYCKI: Hi. Good afternoon. 22 CHAIR CORLETTE: Hi, Lee. Scott 23 Castro? 24 MR. CASTRO: Present. Good 25 afternoon, y'all.</p>

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<p>5</p> <p>1 CHAIR CORLETTE: Elizabeth 2 Cunningham? No Liz today? Okay. 3 Doug Gray? I thought I saw Doug. 4 MR. GRAY: I'm here. 5 CHAIR CORLETTE: Hey Doug. Do we 6 have Starla Kiser? 7 MS. KISER: I'm here. 8 CHAIR CORLETTE: Hey, Starla. And 9 Louis Rossiter? 10 MR. ROSSITER: I'm here. 11 CHAIR CORLETTE: Great. Sounds like 12 we've got a quorum. Thank you all for 13 joining us. 14 Well, I will just quickly run 15 through the agenda, but I think the star of 16 the show is going to be Keven and team, so 17 I'll just be real brief here. We're going to 18 start with updates from SCC and the Virginia 19 Exchange staff and all of the incredible work 20 that they have done and are doing to build a 21 state based Exchange that is, I think, going 22 to be a real value to Virginians. And so we 23 have a lot to hear from them. 24 We'll then turn it over to Ikeita, 25 who will give us an update from the strategic</p>	<p>7</p> <p>1 I'm going to do things a little bit 2 differently today in that I'm going to talk a 3 little less than usual and let some of my 4 team members speak about areas of their 5 expertise. I'm going to have to pick up Toni 6 Janoski's statement for her because she had a 7 much better place to be in the Outer Banks 8 today than with us. So we hope she's 9 enjoying some well-deserved R & R. 10 I really could not be more excited 11 about the HBE team and the work that we've 12 done, especially in the last few months. One 13 of the biggest lifts that we've been focused 14 on during this stage of our implementation is 15 our security compliance. And the work that 16 Amy Mears and the rest of the HBE team has 17 done to assemble and coordinate and review 18 and revise and re-revise and address feedback 19 from CMS, from the IRS, in getting what 20 amounts to close to 900 pages of security 21 documentation over the threshold has been -- 22 it's really been incredible. 23 At the same time, we've been all 24 hands on implementation activities and Susan 25 McCleary's going to talk a little bit more</p>
<p>6</p> <p>1 priorities subcommittee. We have then sort 2 of an open forum part of the agenda for open 3 discussion from the Committee. And then 4 we're going to talk about the balance of 5 2023, our meeting schedule. And I don't 6 think -- Holly said we do not have any 7 requests for public comment; is that right? 8 MS. MORTLOCK: That's correct. 9 CHAIR CORLETTE: So we may be able 10 to wrap up a little bit early today. But 11 that is the agenda. And so let us start with 12 Keven and the team for the Exchange update. 13 MR. PATCHETT: Well, thank you, 14 Sabrina. I'm very happy to be here. And you 15 are right, these really are exciting times. 16 When I look back over where we've come since 17 first awarding a contract for our platform 18 back in September, it's astonishing how much 19 work the HBE team has accomplished. It's a 20 little breathtaking how much we still have to 21 do in the next five months. 22 But we are growing in confidence and 23 enthusiasm, as we've seen what we can do and 24 how we've built this team and what's in front 25 of us.</p>	<p>8</p> <p>1 about some of the key things we're doing now 2 and some of the key things that are coming on 3 the horizon. 4 One of the things I wanted to talk 5 about today is our stakeholders. So we've 6 said this before that we are committed to 7 building an Exchange that is for Virginia by 8 Virginians. And in order to make that 9 happen, we need participation and engagement 10 from all of our stakeholders. And I have to 11 tip my hat to Holly, who's really been 12 leading our stakeholder engagement efforts 13 over the past months. The responses and 14 participation has been wonderful. 15 One of the things that we like to 16 say is we visit various organizations, speak 17 at their conferences; we want to listen. I 18 can't always promise that every decision we 19 make is going to make everyone happy, but I 20 can promise that we will always listen. 21 So many of our stakeholders, from 22 our insurance agents to our carriers to our 23 navigators and assisters, our consumers, our 24 providers know so much more than we do about 25 the issues that are going to face the</p>

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<p style="text-align: right;">9</p> <p>1 Exchange. If this is truly going to be a 2 Virginia Exchange, we need our stakeholders' 3 participation. And so far, the response has 4 been truly amazing. 5 I will say, especially with our 6 agent and broker community, who, at the 7 beginning of this, may have been somewhat 8 skeptical, but watching them move from 9 skeptical to engaged to interested to 10 enthusiastic over the past months has been so 11 rewarding. And it's really attributable to 12 the participation in the process. 13 So we started, I guess back in 14 January, monthly town halls. And each month, 15 Holly and her team held a town hall meeting 16 for carriers, a monthly town hall meeting for 17 our agents and brokers, and a monthly town 18 hall meeting for our navigators and 19 assisters. Those have included everything 20 from, you know, high level updates of our 21 status to live demonstration of various 22 components of our platform to Q&A sessions. 23 And several things have grown out of 24 that. We have our weekly e-mail updates that 25 we send, our building of frequently asked</p>	<p style="text-align: right;">11</p> <p>1 And they really have been wonderful 2 partners in supporting the things that we've 3 been doing, so thank you very much to both of 4 you and your organizations; we really 5 appreciate it. 6 I wanted to just share a little bit 7 about where the Exchange is going 8 organizationally. It's interesting, talking 9 about stakeholder engagement. And let me 10 just step back for a quick second. The 11 stakeholders that I listed that we've talked 12 about here are really just the beginning. 13 One of the things that's going to happen over 14 the next year is we're going to continue to 15 grow our stakeholder engagement efforts. 16 Anyone who wants to participate, who wants to 17 be heard, we want to be here to listen. 18 And to make that happen, one of the 19 things that we recognized that we needed to 20 do was make some organizational changes in 21 the Exchange. And this is an interesting 22 example of our efforts in sort of listening 23 and seeking advice from others who have gone 24 before us. 25 Early on, I would say over a year</p>
<p style="text-align: right;">10</p> <p>1 questions, databases that are accessible to 2 our stakeholders. We're also having some of 3 our smaller stakeholder groups -- well, 4 really large and small stakeholder groups who 5 are asking us to come and talk to their 6 organizations separately. And so where we 7 have the resources to do so, we're 8 participating in that. 9 And it lets us hear questions and 10 engage in dialogue at a level that is really 11 transforming the way we think about the 12 Exchange and the way that we are developing 13 our Exchange solutions going forward. And 14 again, I couldn't be happier with how well 15 that's going. 16 I will also tip my hat to director 17 Roberts and Danny -- was going to say 18 Commissioner Avula -- but Danny. DMAS and 19 DSS have been fantastic partners, and we ask 20 a lot of them on a fairly regular basis. I 21 said before that one of the things that was 22 the key to our transition was to structure it 23 in a way to have the least amount of impact 24 to our fellow agencies, our sister agencies, 25 but that doesn't mean zero impact.</p>	<p style="text-align: right;">12</p> <p>1 ago this time, I was speaking with the 2 director of another exchange who gave me two 3 pieces of advice: One was the importance of 4 early stakeholder engagement, which proved to 5 be invaluable. The other was don't worry so 6 much about your organizational structure, 7 which proved to not be the best piece of 8 advice. 9 We are worrying about our 10 organizational structure and thinking about 11 how to build an Exchange that can carry us 12 through the next five months of transition 13 but also be ready to pick up operations. So 14 we've realigned some of our priorities here 15 and consolidated sort of tasks and work 16 streams in the groups that make the most 17 sense. 18 And as you look at this chart here, 19 it's also indicative of really where our 20 priorities are; you know, that we have 21 separate sections for our stakeholder 22 engagement, our marketing and outreach, for 23 the consumer experience; as well as the 24 operational and functional things that we 25 need to do to run an Exchange, everything</p>

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<p>13</p> <p>1 from finance and compliance to security and 2 IT operations. 3 I think this time last year we may 4 have been an Exchange of seven employees, six 5 or seven. I believe today we may be at 23 or 6 24. And we expect to be over 40 strong by 7 this time next year. 8 I will admit it's a little faster 9 growth than I thought we could do, but the 10 need was there. And in order to provide the 11 kind of experience that we want for 12 consumers, for stakeholders, for partner 13 agencies, we knew that we needed to be a more 14 robust organization and that we couldn't 15 quite do it on the shoestring. 16 And we have been, I will say, 17 incredibly fortunate to have gathered, in my 18 experience, some of the most qualified, 19 competent, and committed employees that I've 20 had an opportunity to work with over the 21 course of my career, whether in private 22 practice or in public service; the team is 23 nothing short of amazing in their commitment. 24 Their engagement, their expertise, and the 25 pace at which we learn and adapt is</p>	<p>15</p> <p>1 CHAIR CORLETTE: Susan, you might be 2 trying to talk, but we can't hear you. 3 MS. McCLEARY: How about now? 4 CHAIR CORLETTE: Oh, there we go, 5 yes. Thank you. 6 MS. McCLEARY: Thank Amy Mears, the 7 miracle worker who brought me the Jabra 8 thing, because apparently my device isn't -- 9 the microphone's not working. Anyway, okay. 10 Let's go right to, again, the first 11 two items we're going to be talking about a 12 little bit more on the next two slides. The 13 plans -- go back, please. Can we go back 14 one? Sorry. 15 We will be loading the plans into 16 the platform over time, starting next month. 17 The agent and assister training and 18 certification officially goes online in 19 August, although registration for the agents 20 will start sooner than that in July. 21 The consumer data migration is 22 actually supposed to start on the 15th of 23 September, run through the 29th of September. 24 There will be a Q&A period after that. And 25 then we also, between the end of September</p>
<p>14</p> <p>1 remarkable. 2 So with that, I am going to take a 3 step back and pass it off to Susan McCleary 4 who is my deputy director of Exchange 5 operations, and she can tell us a little bit 6 about where we're headed and what some of our 7 key implementation activities are right now. 8 MS. McCLEARY: Thank you, Keven. 9 Good afternoon, everyone. I'm going to skip 10 the first two because (inaudible) on each of 11 them coming up. And then I'll jump right 12 into the third item, (inaudible) activities. 13 CHAIR CORLETTE: Susan, I'm sorry; 14 but I don't know if it's just me, but your 15 voice is very faint. Are others having the 16 same issue? 17 MS. MORTLOCK: It sounds kind of 18 muffled. 19 COURT REPORTER: I was about to 20 speak up. 21 MS. McCLEARY: Is that any better? 22 CHAIR CORLETTE: Not really. 23 MS. McCLEARY: Okay. Let me take 24 the keyboard -- how about now? 25 (Technical difficulties.)</p>	<p>16</p> <p>1 and mid December, we have two catch data 2 migrations from the Federal Exchange, just to 3 catch anyone who comes onboard later. 4 Auto reenrollment begins after the 5 Q&A of the data transition. And then the 6 soft launch for the consumer assistance 7 center and the platform is scheduled, right 8 now, for October 10th. At that point, the 9 data will have been migrated, the initial big 10 data load will have migrated and validated, 11 and agents would be able to see their 12 migrated consumers. 13 And then our go live November 1st, 14 immovable target. And we're very confident 15 that we're going to meet that. 16 So we're in the process now of going 17 through operational readiness reviews with 18 CMS. We had our very first session with them 19 on June 1st, and we will have our last 20 session prior to testing the account 21 transfers on June 30th, which is the end of 22 next week. 23 We have 11 test cases that they have 24 provided us that don't involve account 25 transfers that we will have completed with</p>

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<p>17</p> <p>1 them at the end of June. Of those 11, we've 2 sent six over as recorded demos. They're 3 simple and they were at CMS's request to be 4 recorded. GetInsured has done four complex 5 test cases via live demo and walk-through. 6 And again, the last one of the 11 is 7 scheduled for the 30th. 8 On the week of July 3rd, there are 9 four more demonstrations for us to do, along 10 with our partners at DSS and DMAS. And those 11 are going to be all end-to-end account 12 transfers, with two of them going from us to 13 DMAS and then two going from DMAS to us. 14 And I would just echo what Keven 15 said. I think the folks we've been dealing 16 with on the technical side have just been 17 phenomenal. We've been doing -- for a while, 18 we had daily stand-ups. We're doing dry runs 19 and walk-throughs to preview the account 20 transfer tests so that everyone is confident 21 that we're going to be a hundred percent 22 ready for CMS that first week of July. 23 Next slide, please. So the carrier 24 onboarding has been going really well. We 25 started that a few months ago. There are 18</p>	<p>19</p> <p>1 of an update. So it will be a little bit of 2 a review as well, but since this is so 3 important, I wanted to just catch up on this 4 with you. 5 So in May, CMS had asked the 6 Exchange to work with Virginia Medicaid and 7 provide them with a coordinated unwinding 8 plan that just reflects the activities that 9 we are conducting between the Exchange and 10 DMAS on unwinding. This plan is iterative 11 and will be updated with lessons learned as 12 the landscape changes. But we wanted to also 13 thank our friends at DMAS for helping us to 14 provide some responses for that. And this 15 will also serve as the basis for some ongoing 16 coordination and updates as we learn more 17 throughout the unwinding. 18 Also, just an update on our 19 marketing and advertising plan. So we do 20 have an unwinding marketing campaign that is 21 under way and will run through October 31st. 22 This applies all of our research strategies 23 to best find individuals based on a wide 24 variety of demographic and geographic 25 information, especially in areas of the</p>
<p>18</p> <p>1 total carriers, 12 health and six dental. 2 There are weekly meetings with them, 3 one-on-one. We're doing a course of the 4 monthly town halls, but we have been testing 5 with them, validating that data can transfer. 6 And all of that is well on track, and the 7 carriers have been extremely responsive and 8 available. So thank you also for that. And 9 we expect that all to stay right on schedule. 10 And with that, I think it goes back 11 to either Keven or Holly. 12 MS. MORTLOCK: That's me, Susan. 13 Hey, everyone. I'm going to try to do the 14 camera and the slide deck all at the same 15 time, but hopefully this will work. If not, 16 you may see me go off screen, but that's just 17 to make sure you can see the slides. 18 So on top of mind for everyone, of 19 course, this year, one of the things that we 20 think about every day and I'm sure that you 21 all are thinking about every day and working 22 on, maybe even more so than some of us on the 23 call, even more so than the Exchange, of 24 course, is the continuous coverage unwinding. 25 And so we wanted to just share a bit</p>	<p>20</p> <p>1 Commonwealth that have a high concentration 2 of Medicaid enrollees. 3 And some of these channels that we 4 are using include statewide radio and 5 streaming audio advertisements, Google search 6 ads, digital display ads, and connected TV. 7 So if you see, there may be some of these -- 8 you may see some of these in your travels, 9 but these are all directed at making sure 10 that individuals are looking to provide -- 11 they're updating their information 12 appropriately and also going to 13 healthcare.gov to get access to coverage as 14 they need it. 15 And we also have Sarah Hatton with 16 us from Virginia Medicaid. And so Sarah, I'd 17 like to turn it over to you to share a little 18 bit of an update from the Medicaid 19 perspective. 20 MS. HATTON: Thank you. So I'm 21 going to provide a quick update as far as 22 where we are in the unwinding process. We 23 actually just had our fourth month of our ex 24 parte automatic renewals run this past 25 weekend. And we have a large number of paper</p>

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<p style="text-align: right;">21</p> <p>1 renewal packets going out today. 2 Everyone may remember that some of 3 these older, backlogged redetermines are less 4 likely to be able to successfully complete 5 that automated process. So we do see a lower 6 success rate where that's concerned. 7 So this past weekend we had about a 8 27 percent success rate in those packets 9 going through, and that is what we expected. 10 And about 84,000 renewal packets will be 11 mailed to households today; hopefully they've 12 already gone out today. So that's a pretty 13 big lift for our local agencies and Cover 14 Virginia that are supporting this effort, but 15 so far I can say that everyone is staying on 16 task and working through the renewals as 17 quickly as possible. 18 As of including this weekend's ex 19 parte runs, we've seen we're at almost 20 400,000 redeterminations have been completed. 21 That's 399,000 and we've seen about 53,000 22 individuals lose coverage. 23 And one of the things that is 24 important to keep in mind with the coverage 25 loss is that not all of these losses are --</p>	<p style="text-align: right;">23</p> <p>1 MS. MORTLOCK: Thank you so much, 2 Sarah. 3 CHAIR CORLETTE: Is it okay to jump 4 in or do you want to finish and then circle 5 back? 6 MS. MORTLOCK: Oh yes, please. Go 7 ahead Sabrina. 8 CHAIR CORLETTE: Yes. Thank you. I 9 know people are working incredibly hard at 10 DMAS and DSS and really appreciate all your 11 hard work. 12 Just a couple of questions. One, 13 for the 53,000 that have lost Medicaid, do 14 you have a sense of -- you said some have 15 left the state, some are deceased, some 16 requested termination. Do you have that 17 broken down at all, so like of the 53,000, 18 like what is "some?" Is it 5 percent? 19 MS. HATTON: I do. And if you give 20 me a second, Sabrina, I will pull that data 21 up and I will put it in the chat for you so 22 you can see what some of those numbers look 23 like. I should have had that ready to share 24 with you, but that has been -- and it's also 25 interesting to see that based on populations,</p>
<p style="text-align: right;">22</p> <p>1 can be tied directly to the redetermination. 2 Some of these are individuals that have left 3 the State of Virginia; some of these are 4 individuals that have become deceased. And 5 we have a good number of individuals that are 6 calling and requesting that their coverage be 7 closed. 8 We actually had Cover Virginia go in 9 and listen to the recordings of some of these 10 calls where individuals were requesting 11 closure to better understand what kind of 12 information they were given. And it varied 13 from they didn't realize they were still 14 enrolled in Medicaid; they had successfully 15 regained employment and had access to 16 employer's sponsored insurance; and, then 17 some individuals, of course, just did not 18 give a reason why they were seeing that. 19 As expected, we are seeing the 20 largest loss of coverage in our expansion 21 population, a little over 15,000 individuals 22 in that group, so our 19- to 64-year-old 23 group, have lost coverage so far. And that's 24 all I have for now, Holly. Happy to answer 25 any questions.</p>	<p style="text-align: right;">24</p> <p>1 as well. 2 So for example, our ABD populations, 3 it's almost 80 percent of that group coverage 4 closures have occurred because of a deceased 5 status or they've left the State of Virginia. 6 So we're not seeing, you know, as many 7 closures there for procedural reasons. But 8 I'll put a little breakout in the chat for 9 you in just a sec. 10 CHAIR CORLETTE: Okay. And do you 11 have a sense -- and maybe this is more a 12 question for our Exchange folks -- of how 13 many are coming over to the Exchange? 14 MS. HATTON: I'm watching Holly's 15 face to see if she's going to jump in. 16 Everyone that we closed for a nonprocedural 17 reason, DSS does automatically refer those to 18 the Exchange, but we don't have a feedback 19 loop where we get that information as far as 20 how many were sent. But I mean, I can break 21 out procedural and nonprocedurals. If it's 22 nonprocedural, they get a referral over; we 23 just don't know what happens after that point 24 in time. 25 MR. AVULA: I would add, that would</p>

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<p style="text-align: right;">25</p> <p>1 be great to have that feedback loop just 2 because I know certainly our administration 3 and the state board and a lot of our 4 stakeholders are really interested in that 5 specific question. So to the degree we could 6 get that data on a somewhat regular basis 7 would be really helpful. 8 MR. PATCHETT: Yeah, so keep in mind 9 that right now, those folks are going to the 10 Federal Exchange and will continue to do that 11 until November. So we're -- there's a little 12 bit of a delay between when we get the 13 information that we get back from CMS on 14 those folks, but as soon as we have that 15 information, we will absolutely share it. 16 CHAIR CORLETTE: And I see Ikeita 17 and I think Lou have their hands raised. 18 MS. HINOJOSA: Thank you so much for 19 your presentation; that was very helpful. 20 This is a topic that we are all very, very 21 passionate about, so this is really helpful 22 to get the update. 23 And this may already be a part of 24 the information that you're sharing in terms 25 of the breakout, but do you know the breakout</p>	<p style="text-align: right;">27</p> <p>1 redetermination. So that's about 25 percent 2 of the population. 3 That is on par with where we were 4 pre PHE and still on par with the coverage 5 losses that we expected. Unfortunately, we 6 had hoped that a lot of the additional layers 7 of outreach and the push that we're doing in 8 Virginia, which is pretty robust to reach out 9 to individuals, we hoped we would see a 10 decline in that type of closure. But so far, 11 we have not. 12 But what will be interesting to see 13 in the next month or so -- and it's too soon 14 for to us really be able to report back on 15 this -- is what the churn data looks like, 16 where we have those folks that lose coverage 17 for those reasons and pop back in within one 18 to six months, you know, and often that's 19 because they present to the pharmacy or their 20 physician's office and are unable to get 21 services. 22 So we'll be able to, probably at the 23 next meeting, give a little bit more 24 information on what that looks like. 25 CHAIR CORLETTE: And Keven, how</p>
<p style="text-align: right;">26</p> <p>1 of people who are Medicaid eligible who have 2 lost their coverage for procedural reasons; 3 like, for example, they just simply didn't 4 return the renewal form, you know, those 5 kinds of reasons? 6 MS. HATTON: Right. So we only -- 7 and this has been a learning experience to 8 hear other states talk about it; I didn't 9 realize how differently we all define 10 procedural and nonprocedural. 11 So for us in Virginia we always 12 define procedural as failure to complete the 13 redetermination. So when I mentioned that, 14 that is absolutely what I'm talking about. 15 Now what we wouldn't know is if they didn't 16 complete the redetermination, we don't know 17 if they're eligible or not, because of 18 course, we don't have their information to 19 make that determination. 20 But we are -- we have seen to date a 21 little over 13,000 -- so this would be April, 22 May -- April and May data; we don't have the 23 June data updated yet. So April and May we 24 saw a little over 13,000 individuals lose 25 coverage for failure to complete their</p>	<p style="text-align: right;">28</p> <p>1 frequently are you getting data from 2 healthcare.gov about what they're seeing? 3 MR. PATCHETT: Well, so we get a 4 monthly report. I'm waiting to see if the 5 level of detail is going to change. And 6 Holly, I don't know if you -- I haven't 7 looked at the most recent one; I don't know, 8 Holly, if you had a chance to. But I think 9 we're going to wind up having to do a little 10 bit of an extrapolation. 11 I know that there has been talk from 12 CMS about what some of that reporting is 13 going to look like I think beyond our usual 14 monthly reporting, you may anticipate more, 15 but I think that's still in the works. 16 MS. MORTLOCK: Keven, I would agree 17 with that. We definitely have been in 18 conversations with CMS about that. I think 19 that they are expecting that their level 20 of -- the detail that they're able to provide 21 will increase over time, and so we are still 22 working with them on that. 23 But that is something that we're 24 very excited to see and hoping that that will 25 be very useful for us in terms of targeting</p>

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<p style="text-align: right;">29</p> <p>1 our strategy to help people get covered. 2 MR. PATCHETT: And we're excited to 3 transition so that we can -- hate to be in 4 control of that -- but truly have access and 5 be able to share that in a way that we think 6 is going to be both faster and more robust. 7 CHAIR CORLETTE: Yeah, absolutely 8 one of the big advantages of running your own 9 system. 10 I think Lou is the next one with a 11 hand up. 12 MR. ROSSITER: Sarah, can you 13 comment on the work of the carriers to get 14 the redetermination going at all? Are 15 Virginia legacy foundations of any 16 assistance? They have pockets full of money 17 that could help, and I think they'd be 18 willing to help get your marketing materials 19 out. 20 MS. HATTON: We were actually 21 nationally recognized by CMS for our outreach 22 plan that we've put together in Virginia. So 23 we feel like it's pretty strong. We have -- 24 so our plans are reaching out to members 25 prior to the renewal due date to tell them</p>	<p style="text-align: right;">31</p> <p>1 we expected in the beginning. And I think 2 also that, you know, bad addresses is truly a 3 problem. And even though, you know, we push 4 for a full year to get individuals to update 5 their contact information, from what I'm 6 hearing from Commissioner Avula's team, the 7 local agencies are really getting flooded 8 with returned mail. 9 So I think we have a lot of folks 10 that, you know, may not realize that they 11 need to complete their redetermination. One 12 of the things that we have done that I think 13 is really helpful is we previously were 14 not -- we didn't have the renewal date for 15 individuals exposed to providers. So when a 16 provider went in to check eligibility, they 17 couldn't see when an individual's renewal 18 date was due. 19 So that was something that we acted 20 on pretty quickly in the past few months to 21 implement so we can get some assistance on 22 that front as well. And we're hoping that 23 we'll see some positive outcome from doing 24 that. 25 CHAIR CORLETTE: Great. Any other</p>
<p style="text-align: right;">30</p> <p>1 it's coming. They're reaching out to members 2 who don't complete their redetermination to 3 offer them assistance in doing so. They're 4 reaching out to those who are no longer 5 eligible due to income resources, one of 6 those reasons, to help them with any 7 transitions to either coverage. 8 And then we have an extra layer of 9 outreach occurring to folks who are enrolled 10 in -- who are in a nursing facility, hospice, 11 personal care, that type of care. We have an 12 additional layer of outreach going to those 13 populations to also offer them additional 14 assistance. 15 But I agree, we are pushing a lot. 16 We have some ads that are getting ready to 17 start running with VirginiaNavigator? No. 18 I'm so sorry. Virginia Seniors Network, I 19 think it is. So we have some additional ads 20 that are going to be coming out. And we're 21 still pushing with the social media. 22 But I think that a lot of what we're 23 seeing is what we're hearing across the state 24 as well, is that we're not getting the number 25 of calls that we expected and the chaos that</p>	<p style="text-align: right;">32</p> <p>1 questions for Sarah while we have her? 2 MS. MORTLOCK: Thank you, Sarah. 3 It's great. Really, I know you guys are 4 working overtime on this stuff. So I really 5 appreciate all your effort. 6 CHAIR CORLETTE: I'll turn it back 7 to you, Holly. 8 MS. MORTLOCK: Thank you, Sabrina. 9 And thank you, Sarah. 10 So for our marketing and 11 communications, so as you have heard from 12 Keven and from Susan, we are moving very 13 quickly through our operational readiness 14 reviews. And August will be here before we 15 can blink; that's what it feels like at the 16 Exchange. 17 And so we are very closely 18 approaching the time frame in which we need 19 to start thinking about our brand launch and 20 our open enrollment outreach campaigns. Of 21 course, it's different from our unwinding 22 efforts. 23 So we are working with CMS in close 24 coordination on our plans to appropriately 25 inform Virginians of the transition and to</p>

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<p style="text-align: right;">33</p> <p>1 ensure a successful launch. And so a couple 2 things on the website side. So we have 3 developed a home page design and that has 4 been approved. We are also now working on 5 secondary page designs and Spanish 6 translations; they're also underway. We will 7 also have the ability to translate into many, 8 many other languages, just as on 9 healthcare.gov. 10 For social media, we have our 11 Facebook, Instagram, and YouTube channels 12 that have been created in anticipation of 13 this launch. And we're also working on 14 educational materials, a one-pager and many 15 other posters, flyers, and infographics. So 16 that's just a small slice of what our 17 campaign will look like. But I wanted to 18 share those little bits of information with 19 you. 20 And then for our brand launch and 21 open enrollment, we will have a number of 22 different video advertising strategies. So I 23 was really surprised to get into the details 24 of all of -- of what all of these options 25 really look like when we were working with</p>	<p style="text-align: right;">35</p> <p>1 that serve as billboards to spread the word 2 about the marketplace. So those are just a 3 few of the different kinds of advertisements 4 that we will have but wanted to give you a 5 flavor for what this brand launch will look 6 like later in the fall. And of course, there 7 would be more to come on that and we can 8 share more contact and details with you after 9 our go live. 10 CHAIR CORLETTE: Remind me, so for 11 folks who are currently enrolled and that 12 cohort that would be sort of automatically 13 reenrolled for 2024 without -- are they going 14 to have to take a particular action to make 15 sure they stay enrolled and is there a plan 16 for communication to that population? 17 MS. HATTON: No. 18 CHAIR CORLETTE: Okay. So they can 19 be -- 20 MS. HATTON: So they will get 21 notices. 22 CHAIR CORLETTE: Okay. They'll get 23 notices, but they won't get passively -- they 24 don't have to do anything to get reenrolled? 25 MS. HATTON: That's absolutely</p>
<p style="text-align: right;">34</p> <p>1 our marketing vendor. 2 So just a few of the different kinds 3 of ads that we will be able to display: So 4 we will have programmatic display and video, 5 which are static or animated banners; and 6 video ads on websites across the internet; 7 news and entertainment; Connected TV, I 8 think, is going to be a big focus where we'll 9 have video ads on streaming platforms, 10 YouTube, Prime Video, Sling TV, Hulu, 11 Discovery+; that's probably not all inclusive 12 but just some examples there. 13 We will also have direct out of 14 home, so ads that appear on digital displays 15 around the state, so like at gas pumps and 16 bus stations; site direct on partner sites 17 for niche or distinct audiences; streaming 18 audio on music streaming platforms; Google 19 search; text ads that respond to relevant 20 search terms; high impact display that are 21 interactive and encourage with multiple touch 22 points and links; of course, social media, 23 Facebook, Instagram, Twitter, and TikTok. 24 And we would even have some moving 25 billboards, so digital or wrapped truck ads</p>	<p style="text-align: right;">36</p> <p>1 right, yes. They don't have to do anything; 2 they will be automatically reenrolled. They 3 will get notices from the Marketplace and 4 notices from us. And that will tell them 5 that, if they choose to log in and make a 6 change to their plan, they can do that. But 7 otherwise, they will stay enrolled in their 8 current coverage for plan year '24. 9 MS. MORTLOCK: I think, Sabrina, you 10 may be frozen. 11 CHAIR CORLETTE: No, for some reason 12 somebody keeps muting me. I don't know why; 13 maybe I'm being annoying. But for some 14 reason I keep getting a popup saying you have 15 been muted. Can you hear me? 16 MS. HATTON: Yes. I can hear you 17 just fine. 18 CHAIR CORLETTE: I see Lou and then 19 Julie, but I don't know, Lou, if that's a 20 legacy from before or if you... 21 MR. ROSSITER: That's a legacy. 22 CHAIR CORLETTE: Okay. And Julie, I 23 guess you have your hand up. 24 MS. BATAILLE: Yes. Thanks, 25 Sabrina.</p>

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<p style="text-align: right;">37</p> <p>1 Holly, just a quick question for 2 you. This all looks great, and I'm really 3 excited to see the plan coming together. I'm 4 curious if you can talk about the 5 intersection of the open enrollment marketing 6 with the marketing that you described 7 happening on unwinding; is your plan to 8 continue those simultaneously? 9 MS. MORTLOCK: No. So those will be 10 different. And that's because -- so from our 11 perspective, that will be different. But we 12 are working very closely with CMS on that 13 messaging. So there's still some details 14 that need to be fleshed out, but we are 15 working on a communications plan with CMS to 16 make sure that people get to the right place 17 at the right time. 18 We also have a coordinated strategy 19 in terms of account transfers and how people 20 will get to the right place. So that is very 21 well fleshed out; I'll be happy to give you 22 some more detail about that. But they 23 will -- it is very well thought out. It is 24 very staged. And that is in coordination 25 with CMS.</p>	<p style="text-align: right;">39</p> <p>1 sure you've updated your account information 2 with Medicaid. If you've lost coverage, go 3 to the federal marketplace. 4 As we transition, our marketing 5 shifts to open enrollment but it will not be 6 exclusively open enrollment. There's still 7 going to be elements of the unwinding 8 messaging that is -- that then shifts because 9 now we're not just amplifying we are the 10 marketplace, where folks will go. 11 So I guess in a sense you could say 12 they go on simultaneously, but that's -- 13 MS. BATAILLE: That's what I was 14 getting at. Thank you. Yeah. Yeah. And 15 any sense of what the timeline is for the 16 website to go live? 17 MS. MORTLOCK: Yes. So that will 18 be -- so we will -- we need to wait until 19 after CMS has communicated with our -- with 20 consumers. And so that will be -- for 21 consumers, that will be sort of mid October 22 is when the website will go live. 23 So they need to get their 24 announcement letter from CMS about the 25 transition and then we can have a website go</p>
<p style="text-align: right;">38</p> <p>1 So I know that we -- at one point we 2 will stop, like, the specific advertisements 3 on the unwinding, but we will still have 4 resources available on our website to make 5 sure people get directed to the right place 6 at the right time. 7 That will be to focus open 8 enrollment and we will be able to tailor some 9 of those messages that encompass are you in 10 need of coverage? And that will allow people 11 to, you know, say yes or no. And then we'll 12 be able to help direct them to the right 13 place, whether they're calling the call 14 center or coming to our website. 15 MS. BATAILLE: Great. I heard an 16 unwinding radio ad this morning. I think it 17 was healthcare.gov and not yours, but I was 18 excited to hear it nonetheless. 19 MR. PATCHETT: And just to add a 20 little bit to Holly's response, one of the 21 things that we're working closely with CMS is 22 this phased approach to our unwinding 23 messages. Right now we're in phase 1, which 24 is really us amplifying the messaging of CMS 25 and of DMAS, as Holly said, you know, go make</p>	<p style="text-align: right;">40</p> <p>1 live. But we can't -- it will be live right 2 at the time that CMS sends that letter. So 3 to make sure -- 4 MS. BATAILLE: Oh, got it. 5 MS. MORTLOCK: -- they have a place 6 to go to, but we can't have it in advance of 7 that. 8 MS. BATAILLE: Okay. Thank you. 9 MS. MORTLOCK: Yeah, but there will 10 be some soft launching for agents and 11 assisters as well. 12 MS. BATAILLE: Great. 13 MS. MORTLOCK: So I'll move on to 14 just federal and state policy monitoring for 15 you-all. So we are always monitoring state 16 and federal developments in terms of 17 unwinding activities and policy developments 18 that have impacts for the Exchange on the 19 federal side. We are watching the proposed 20 rule for DACA access to qualified health 21 plans and advanced premium tax credits. 22 So, many of you probably know that 23 the new rule was proposed on April 26th, 24 allowing DACA recipients to purchase plans 25 and receive income-based subsidies on the</p>

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<p style="text-align: right;">41</p> <p>1 exchanges and then also to participate in 2 Medicaid or CHIP coverage and/or people who 3 are pregnant, for many states; public 4 comments on the rule are due on June 23rd, 5 which is just this week. 6 And the final rule is planned to 7 take effect on November 1st to coincide with 8 the open enrollment period. We are working 9 with our vendor and with CMS to make sure 10 that, should the rule be finalized, we would 11 be well positioned to implement in Virginia, 12 but we also have included this link for the 13 Federal Register if any of you are interested 14 in the rule itself and providing any public 15 comment on that. So we will send that out 16 with a slide deck after our meeting. 17 And then also for the 2024 final 18 notice of benefit and payment parameters, we 19 had considered how the provisions that were 20 offered can support Virginia's enrollment 21 through the continuous coverage unwinding and 22 beyond. And we've shared broadly with our 23 stakeholder universe, but wanted to highlight 24 for you-all a few of the key provisions. 25 We are intending to follow the FFM</p>	<p style="text-align: right;">43</p> <p>1 work group to really work with our 2 stakeholders to determine the best -- sort of 3 the best way to proceed with standardized 4 plans in Virginia. But I just wanted to make 5 sure everyone was aware of that for this 6 year. And then our plans for further 7 consultation with everyone moving forward. 8 CHAIR CORLETTE: Holly, on that, you 9 know, it seems hard to believe, but I know 10 CMS is already putting pencil to paper to 11 draft its 2025 notice of benefit and payment 12 parameters. You guys have so much on your 13 plates, but some advanced thinking about that 14 might not -- might be, you know, well spent 15 just thinking about the value of those plans 16 and what they bring to the consumers and 17 whether there's lessons learned from the SBMs 18 that have had standardized plans for many 19 years now and sort of figuring out what might 20 work for Virginia. 21 So I feel almost bad mentioning it, 22 because you guys have so much going on, but I 23 just am aware that, particularly -- and Doug 24 will speak for the carriers -- but if there's 25 going to be a shift in policy, I'm sure the</p>
<p style="text-align: right;">42</p> <p>1 as closely as possible for plan year 2024. 2 And a few of the key decisions were the -- so 3 first, the 90-day special enrollment period, 4 that is really to align with the Medicaid 5 reconsideration period in Virginia. So this 6 new SEP extends beyond the unwinding, but 7 aligns us with Medicaid reconsideration 8 period in Virginia, allowing consumers who 9 lose Medicaid or CHIP coverage at 90 days 10 instead of 60 to apply for marketplace 11 coverage. 12 We also are implementing the 13 prohibition in terminating coverage for over 14 26-year-old dependents during the year, 15 again, aligning with the FFM. And for 16 standardized plans this year, we are also 17 following the FFM, which is to require 18 carriers to have a plan for each metal level 19 and removing the requirements on the 20 nonexpanded bronze category and limiting the 21 number of nonstandard plans, for nonstandard 22 plans for product network type, and metal 23 level in each service area. 24 Moving forward from plan year 2024, 25 we will be sure to be convening a stakeholder</p>	<p style="text-align: right;">44</p> <p>1 more notice they have, the better for that. 2 And the more advanced thinking we can do, the 3 better. 4 MS. MORTLOCK: Yeah, absolutely. 5 And we looked at this a number of years ago 6 and some of the outcome of that conversation 7 really was, just the amount of detail and the 8 amount of input, you know, from our 9 stakeholders that will be necessary in 10 determining that right course. 11 And so we have definitely thought 12 about that. And we'll take that into strong 13 consideration as we move past our open 14 enrollment period and thinking into the 15 following years. It's absolutely well taken. 16 CHAIR CORLETTE: I see Doug has his 17 hand up. 18 MR. GRAY: Yes. I was just going to 19 say I'm more concerned about the possible 20 pausing of the reinsurance program than 21 anything else. I mean, that could lead to a 22 15 to 20 percent increase on the opening day. 23 I mean, that's a big deal. So I'm hoping 24 that when the (inaudible) comes out, they at 25 least have some reassuring language for the</p>

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<p style="text-align: right;">45</p> <p>1 Bureau of Insurance. 2 MR. PATCHETT: Yeah, we hope so, 3 too, Doug. 4 MS. MORTLOCK: Okay. So that 5 concludes my portion, and I will turn it back 6 to Keven to talk about our training and 7 certification update. 8 MR. PATCHETT: All right. Thank 9 you, Holly. And Sabrina, we really are 10 already thinking about some of these issues, 11 and one of the things that's really important 12 to us, as I said earlier, is getting our 13 stakeholders involved and engaged in some of 14 these policy decisions early. As much as I 15 think a lot of us have learned and are 16 learning, we know that our stakeholders have 17 a lot more years of experience with these 18 issues and, you know, again, if it's going to 19 be Virginia's exchange, we want Virginia 20 engaged in these decisions. 21 I won't spend a lot of time on 22 training and certification. I will say just 23 a couple of things. We are really working to 24 strike the balance between recognizing how 25 important it is that our agents and</p>	<p style="text-align: right;">47</p> <p>1 be able to register as of July. Training 2 will kick off as soon as we've crossed the -- 3 I can no longer tell whether it's official or 4 unofficial go/no-go from CMS, but whenever 5 they give us that green light, which we 6 anticipate being August 7th. 7 And one of the things I was talking 8 earlier about in our stakeholder engagement, 9 we really do see a sort of ground swell of 10 new agents who are interested in coming in to 11 the marketplace. So we're very pleased about 12 that and focused on making training a good 13 experience for them. 14 CHAIR CORLETTE: I see Ikeita has 15 her hand up. Did you have a question about 16 that? 17 MS. HINOJOSA: Yeah. Actually, 18 Keven mentioned law. And it had actually 19 made me think back to the organizational 20 structure. And sometimes as training and 21 certification and things like that come up, 22 you know, different parts of the Exchange 23 need to get involved. 24 So I don't recall seeing on the org 25 chart in-house legal staff. And I also don't</p>
<p style="text-align: right;">46</p> <p>1 navigators and assisters are trained and 2 familiar with the rules, the technology, the 3 tools, the policies, but without making this 4 an unnecessarily burdensome or daunting 5 process for them. 6 So it was important for us that 7 training remain free; that once it opens in 8 August, that it is accessible 24/7. Folks 9 who need training will be able to access it 10 anytime and will be able to proceed through 11 it at their own pace. For maintaining, the 12 current approach that folks that have an 13 active certification on the FFE will just 14 need to do a renewal training, which should 15 be significantly shorter than those who will 16 be coming to the Exchange to sell for the 17 first time. 18 We're working to develop training 19 that includes not only federal and state law, 20 but, you know, important plan information, 21 information about important initiatives like 22 the unwinding right now. So we're trying to 23 make sure that that training, like I said, is 24 useful and robust but efficient. 25 So the key dates, again, agents will</p>	<p style="text-align: right;">48</p> <p>1 see things like human resources or 2 contracting and procurement. So I was just 3 wondering, on the org chart, is it called 4 something else or are those roles embedded in 5 departments or do you not have them right now 6 but just plan to onboard those roles in the 7 future? Or are they kind of embedded 8 somewhere else? 9 MR. PATCHETT: Yeah. Good catch. 10 Good catch. One of the benefits of us being 11 a division of the SCC means that we leverage 12 the existing SCC HR department, the existing 13 SCC procurement and contracting department, 14 the existing office of general counsel. So 15 on the legal side we have a dedicated 16 attorney from our office of general counsel. 17 Her name is Mary McLaren; she's the dedicated 18 HBE legal counsel. 19 And then support from other 20 attorneys in our office, in the SCC's office 21 of general counsel, folks like Mary Ashby 22 Brown, who I think may be listening in for 23 the Bureau today, and other things. 24 In terms of the interfaces with 25 those departments, those fall under our</p>

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<p style="text-align: right;">49</p> <p>1 finance and compliance. So Toni Janoski's my 2 deputy director for that section of our 3 division. And so we have, within our 4 certification and compliance, they will 5 interact directly with legal counsel and 6 agents in our plan management and 7 certification. 8 Same thing; we'll have folks that 9 will interface both with the plans as well as 10 legal counsel on those issues and then our 11 administrative folks who work our end of 12 procurement and HR. 13 Does that answer your question? Can 14 you-all still hear me? 15 MS. HINOJOSA: Yep. 16 MR. PATCHETT: All right. Any other 17 questions? 18 CHAIR CORLETTE: All right. Well, I 19 guess Keven, you'll stay on the call so if 20 people have questions that are just not on 21 the tip of their tongues, we'll circle 22 back. 23 MR. PATCHETT: I will. 24 CHAIR CORLETTE: But thank you, 25 Keven, Holly, Sarah, for that really terrific</p>	<p style="text-align: right;">51</p> <p>1 explored their implications for Virginia's 2 insurance marketplace. 3 So the March 2023 presentation 4 looked at enrollment data and presented 5 research from the current landscape of 6 strategic priorities utilized by other 7 state-based marketplaces as well as the 8 federally facilitated marketplace to help our 9 subcommittee glean best practices and lessons 10 learned from Virginia. 11 We revisited the slide deck titled 12 Thinking Ahead, the Importance of Exchange 13 Monitoring that was presented to the Advisory 14 Committee back in June of 2022 by the State 15 Health Access Data Assistance Center, or 16 SHADAC. We also reviewed the Exhibit F 17 document, which is the reporting section of 18 the GetInsured contract with Virginia's 19 Health Benefit Exchange. 20 Our May 2023 presentation covered 21 different data types that CMS collects for 22 state-based health insurance marketplaces. 23 And it dove into the more descriptive data 24 sets, including those on rates, plan 25 attributes, cost sharing, networks, etc. And</p>
<p style="text-align: right;">50</p> <p>1 update. I just am in awe of the incredible 2 work that you-all are doing and so thank you. 3 Thank you for your efforts and thank you for 4 that update. 5 I'm going to turn the gavel over to 6 Ikeita now for an update from the strategic 7 priorities subcommittee. 8 MS. HINOJOSA: Thank you. So we 9 last provided an update on the activities of 10 the strategic priorities subcommittee during 11 our last Virginia Health Benefit Exchange 12 Authority Advisory Committee on March 28th. 13 So just by way of reminder, our 14 mission for the subcommittee is to identify a 15 set of critical outcomes that would help 16 demonstrate to Virginians the value of our 17 transition to a state run Exchange. The 18 subcommittee will further recommend the 19 metrics and data needed to monitor and assess 20 the Exchange's performance on those critical 21 outcomes. 22 So our subcommittee has been 23 productive to date. We met on March 22nd, 24 May 8th, and June 9th. And we received a 25 series of data-related presentations and</p>	<p style="text-align: right;">52</p> <p>1 we saw examples of the types of data CMS is 2 interested in and how it's published. 3 We also explored McKinsey & 4 Company's analysis of data trends in the 5 individual marketplace called Insights into 6 the 2022 Individual Health Insurance Market 7 as an example of an application of CMS data 8 with good visualizations. 9 And that brings us to our June 2023 10 meeting, which featured a presentation from 11 Matt Harrison, who's GetInsured's director of 12 business intelligence. So we learned about 13 GetInsured's various reports and reporting 14 capabilities. We also gained a better 15 understanding of what GetInsured is already 16 contractually doing for Virginia, what 17 GetInsured has done and is doing in other 18 states, and GetInsured's capability to 19 provide various data reports. 20 After the meeting, our very own 21 Virginia Bureau of Insurance Commissioner and 22 subcommittee member Scott White shared the 23 Bureau's 2022 rate presentation with 24 subcommittee members so that we could see 25 reported market data and trends.</p>

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<p style="text-align: right;">53</p> <p>1 So all of these discussions have 2 been very useful in helping us narrow down 3 the types of recommendations we like to make 4 for the strategic priorities categories and 5 prioritize for Virginia as well as our 6 recommendations for how to present such 7 metrics. And based on our activities thus 8 far, our subcommittee has reached several 9 preliminary findings; however, we've had some 10 absences -- it's the summer and all of 11 that -- and so we want to try to achieve some 12 consensus internally as a subcommittee before 13 we make any public announcements. 14 So our next steps are to schedule 15 our subcommittee meeting dates and to take, 16 you know, all of this information that we've 17 learned to date and create a working draft 18 document containing proposed strategic 19 priorities and recommendations for 20 subcommittee members to collectively review 21 and edit. And we'd like to have our 22 recommendations to the full Advisory 23 Committee by our next quarterly meeting in 24 September, if not before. 25 So I just have to say, you know, the</p>	<p style="text-align: right;">55</p> <p>1 this information is collected and reported to 2 the public. At least I hope it will be. 3 Any other subcommittee members want 4 to share thoughts or comments before we shift 5 a bit? 6 MR. ROSSITER: Keven, I wanted to 7 say that, as Ikeita explained, we heard from 8 GetInsured and, as you may know, I'm a huge 9 data geek. And our heads were spinning after 10 we heard all of the data and reports that 11 you're able to get from GetInsured. 12 So we see our role as what is -- 13 what do Virginians need, what does the 14 General Assembly, what do the agency heads 15 who are on this call, what kind of 16 information do they need that's concise and 17 useful to them. Because you are getting a 18 river of data and reports. 19 MR. PATCHETT: Yeah, and I think 20 there are a number of us at the Exchange who 21 also geek out over data, and the opportunity 22 to begin to make data-driven decisions is 23 really exciting. Because there are decisions 24 that we've had to make with less than all the 25 data that we would want. So it is a lot of</p>
<p style="text-align: right;">54</p> <p>1 background research for this initiative, it's 2 been extensive; it's been in depth. So very 3 special thanks to William & Mary professor 4 Lou Rossiter for deploying his expertise in 5 that regard. Our discussions have been 6 really thoughtful and action oriented and 7 very focused on measuring our impact. And 8 you know, every subcommittee member has 9 really brought their own unique perspective 10 and skill set to the conversation. 11 And so for that, I'm deeply 12 grateful. We are getting closer to the 13 finish line. The information is there. We 14 just need to have some additional 15 conversations as a group and pull together 16 our recommendation document. 17 So we look forward to continuing to 18 keep you posted. And thank you for allowing 19 us to share our progress. And with that, I 20 will turn it back over to Sabrina. 21 CHAIR CORLETTE: Thank you. It 22 sounds great. I'm really -- yeah, you guys 23 have been working hard, and I think this is 24 going to be a really high impact document 25 that will probably be the framework for how</p>	<p style="text-align: right;">56</p> <p>1 data and we're going to have to make some 2 important decisions on where to prioritize 3 that review. But like I said, we're excited 4 to begin making truly data-driven decisions. 5 CHAIR CORLETTE: There's a good 6 reason why we called the subcommittee the 7 strategic priorities, right? You guys are 8 going to help home in on what's really 9 important. Well, thank you for that really 10 great work. And Ikeita, thank you for that 11 update. 12 So the next item on the agenda is a 13 fairly open-ended one. It's topics for 14 committee discussion, which is really 15 designed to be an open forum for any Advisory 16 Committee member to bring up agenda items or 17 topics for discussion. Does anybody feel 18 like sharing today? 19 MS. HINOJOSA: Are these meeting 20 dates set for 2024? These are the meeting 21 dates for 2023, but we haven't sent anything 22 out to propose meeting dates for 2024 yet, 23 have we? 24 CHAIR CORLETTE: Correct. Correct. 25 I think one thing we did want to get, we</p>

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<p style="text-align: right;">57</p> <p>1 had -- I thought it was terrific to do our 2 March 28th meeting to get to meet many of you 3 in person, so I do think that one thing we do 4 want to tee up for discussion -- and just I'm 5 assuming that nobody had anything else to 6 discuss, so we can move on to the 2023 and 7 beyond meeting schedule. 8 So yes, these are the dates through 9 this calendar year; we haven't yet scheduled 10 for 2024. I do think we want to kind of 11 gauge people's desire or willingness to have 12 maybe not all of our meetings in person, but 13 you know, do we want to have at least one a 14 year or two a year? I think there can be a 15 lot of value in having actual, face-to-face 16 conversations. 17 But we can maybe send around a 18 Doodle poll or something after this meeting 19 just to tee up for you-all to think about, 20 you know, your capacity and interest in 21 coming to potentially at least one of these 22 meetings in person every year. 23 But I don't know; Holly, what do you 24 think? I'm thinking maybe we can create just 25 a one- or two-question Doodle poll and ask</p>	<p style="text-align: right;">59</p> <p>1 CHAIR CORLETTE: Yeah, definitely. 2 MR. GRAY: Yeah, I'm curious about 3 what the timing is in September versus where 4 we are on the testing and the launch; you 5 know, are we scheduling our meeting at the 6 right time to get a good report and giving 7 them enough time to be far enough along to 8 give us a good report? 9 You know, I was just trying to think 10 about the timelines they've shown us and kind 11 of overlay it with the date. But I think 12 that might be something worth putting a 13 little bit of thought into so that we don't, 14 you know, pick the worst or the not optimal 15 time by accident. 16 CHAIR CORLETTE: Yeah, that's a good 17 point, Doug. And maybe this is a question 18 for our Exchange staff to think about: Is 19 that date in September a convenient time for 20 all of you as well as in terms of both what 21 you can share with the Advisory Committee at 22 that time but also knowing everything you're 23 going to be doing to prepare for launch? 24 MS. MORTLOCK: Yeah, that's a great 25 question, Sabrina and Doug. Thank you for</p>
<p style="text-align: right;">58</p> <p>1 people about that. 2 MS. MORTLOCK: Yes. We can 3 absolutely do that. I'm happy to. And we 4 very much enjoyed having the group of people 5 that were able to join us in person in March 6 and so we would welcome the opportunity to do 7 that again. We'll leave that to you-all to 8 decide what would work best for you as a 9 group. 10 CHAIR CORLETTE: Great. Thanks. 11 Anybody have preliminary thoughts or comments 12 on the schedule or the in-person meetings? 13 MS. HINOJOSA: If we meet in person, 14 it seems like spring and/or fall would 15 probably work better than summer, due to 16 vacations, and December, due to possible 17 inclement weather. So my vote is for one to 18 two in-person meetings. But spring worked 19 out well, so I liked spring, but I would also 20 be willing to do a fall. Those are just 21 preliminary thoughts. 22 CHAIR CORLETTE: That sounds like 23 good common sense. 24 MS. HINOJOSA: Yeah, stay away from 25 the summer and the winter.</p>	<p style="text-align: right;">60</p> <p>1 the sensitivity to that. You know, I think 2 what I will say is that the dates were all 3 agreed upon by the Committee members, and I 4 know you-all too have very busy schedules. 5 And so it did take awhile to get these dates 6 established, you know, to maximize the 7 participation in the meetings. 8 It is something that we can take 9 back and take a look at, certainly. But I'm 10 happy to follow up offline if that makes 11 sense as well. 12 CHAIR CORLETTE: Okay. Yeah. No, I 13 am -- in some ways it might create more work 14 to try to reschedule, so we can factor that 15 piece in as well. 16 Well, before I make a motion to 17 adjourn, because we do not have any public 18 comments, I just want to make sure that 19 anybody we haven't heard from yet on the 20 Advisory Committee, if there's any comments 21 or questions that you have or if we have 22 heard from you and there's any questions or 23 comments that you might have, I want to make 24 sure we have enough time for people to take 25 themselves off mute or raise their hand.</p>

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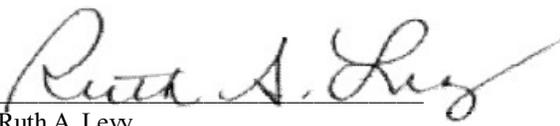
<p style="text-align: right;">61</p> <p>1 MR. GRAY: This is Doug. I just 2 wanted to thank the Exchange staff and the 3 Advisory Committee members for working 4 together so well. I mean, I'm a little 5 nervous because things are going so well. 6 CHAIR CORLETTE: It's like the dress 7 rehearsal, right? 8 MR. GRAY: Well, other than this 9 reinsurance thing hanging over our head, you 10 know, we could be getting started with really 11 good testing being done, thorough testing. I 12 mean, some of you on the Advisory Committee 13 have had the full experience of a bad 14 implementation; some of you more than once. 15 It gives you a lot of thoughts, doesn't it, 16 about what we don't want to do. 17 So I'm pretty excited about how well 18 we're doing. And if we can get the 19 legislature to do another little endorsement 20 of the reinsurance program and its discount, 21 I think we'll be on track to at least having 22 a good offering the first time around. 23 And the plans are ready to work on 24 the more specific issues; there's going to be 25 a bunch of them. And part of the challenge</p>	<p style="text-align: right;">63</p> <p>1 they become possible. 2 So anyway, I just wanted to share 3 those thoughts and thank everybody for their 4 hard work. 5 CHAIR CORLETTE: Hear, hear. 6 Anybody else? 7 MS. CUNNINGHAM: This is Liz 8 Cunningham. 9 CHAIR CORLETTE: Oh Liz, hi. I'm 10 glad you joined us. 11 MS. CUNNINGHAM: I'm so sorry. It's 12 been very busy, as you know, on our end. 13 Getting the word out there has been pretty 14 insane. Being a navigator and now a 15 healthcare outreach manager throughout 16 Southside Virginia, we're seeing a few things 17 going on, but we're working tirelessly to 18 ensure our community members are aware about 19 the Medicaid renewal process and utilizing 20 ranges of communication strategies such as 21 outreach media and also able to connect with 22 such a diverse group of people and provide 23 them with information they need to have a 24 successful renewal for their coverage. 25 So yeah, I also want to thank the</p>
<p style="text-align: right;">62</p> <p>1 with implementation is you get -- you're 2 working on the big part, which is just 3 getting things running smoothly, and then 4 trying to figure out, all right, we have all 5 these other things that we can do and we 6 would like to discuss. 7 And some of them are very 8 substantial; some are, you know, pretty 9 esoteric. For example, CMS has released an 10 adverse tiering review tool to deal with the 11 tier structures and how to analyze them. 12 Pretty obscure, but something that the plans 13 and the Exchange would have to work together 14 on. Is it something that we can do at this 15 point, given that they kind of already filed 16 their offerings? I don't know how that 17 works. 18 But, you know, we're going to have 19 topics like that that come up. And clearly 20 standardization is going to be one of those 21 topics. And I think we can get to these as 22 we go, but, you know, it's hard to focus on 23 the big goal and all the little ones at the 24 same time. And so I think we're going to be 25 helpful as we work through those issues as</p>	<p style="text-align: right;">64</p> <p>1 Committee for their hard work, too, as well. 2 Like Doug said, it's been going so smoothly, 3 I'm kind of nervous because it's really been 4 going smoothly. We haven't had too many 5 people being turned down with Medicaid, and a 6 lot of people are doing their renewals. And 7 so it's been really smooth so far. So just 8 very appreciative of the Committee for sure. 9 CHAIR CORLETTE: Thank you, Liz. 10 That's really so affirming to hear and great 11 to hear and a testament to the good work of 12 the agencies. I know that is not the case in 13 some other states. Some other states, it 14 sounds like the people are having a really 15 challenging time. 16 MS. CUNNINGHAM: Right. 17 CHAIR CORLETTE: So it's great to 18 hear that it's going relatively well here in 19 Virginia. And so thank you for sharing that. 20 MS. CUNNINGHAM: Sure. Thank you. 21 CHAIR CORLETTE: And thank you for 22 everything you're doing. I'm sure one reason 23 it's going as well as it is is all the 24 outreach and education work that you've been 25 doing. So thank you.</p>

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1 MS. CUNNINGHAM: Thank you.
2 CHAIR CORLETTE: All right. Last
3 call for comments, questions, words of
4 wisdom. Okay. With that -- Doug, did you
5 have something? Okay. Just waving.
6 I'm going to make a motion to
7 adjourn.
8 MR. GRAY: Second.
9 CHAIR CORLETTE: All right. I hear
10 a second. So moved. We are adjourned.
11 Thank you all so much.
12 (Meeting adjourned at 3:24 p.m.)
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1 CERTIFICATION OF TRANSCRIPT
2
3 I, Ruth A. Levy, do hereby certify that the
4 foregoing transcript, to the best of my ability,
5 knowledge, and belief, is a true and correct
6 record of the State Corporation Commission meeting
7 herein; that said proceedings were reduced to
8 typewriting under my supervision; and that I am
9 neither counsel for, related to, nor employed by
10 any of the parties to this case and have no
11 interest, financial or otherwise, in its outcome.
12 Given under my hand, this 29th day of June,
13 2023.
14
15 
16
17 Ruth A. Levy
18 Planet Depos, LLC
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