

State of Wisconsin / OFFICE OF THE COMMISSIONER OF INSURANCE

Tony Evers, Governor **Mark V. Afable**, Commissioner

Wisconsin.gov

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Summary of the Public Forum held on May 7 at 10:00 a.m.

Room 227

Attendees:

OCI

Olivia Hwang Sue Ezalarab Julie Walsh Jennifer Stegall Darcy Paskey

External

Lisa Ellinger; WHA

Paige Scobee; Hamilton Consulting Stephanie Maslowski; Dean Health Plan

Kelsey Avery; WAHP

Bobby Peterson; ABC for Health Melissa Duffy; Common Ground

Notes:

- Olivia delivered the attached power point; hard copies were available at the meeting
- Bobby Peterson asked a question related to OCI's mechanism for holding insurers accountable for lowering rates in light of the program.
 - OCI Response: State law and OCI require insurers to submit 2 rates; one reflecting WIHSP being in place and the other reflecting what the insurer would have filed if WIHSP was not in place. Staff also addressed the validity of the claims data filed with OCI by explaining the verification audit process and the use of EDGE Server data for the carriers final, end of year reporting.
- Bobby Peterson also asked whether the OCI has to apply for a waiver every year, how much state funds are supporting the program and what the revenue source is; how the state portion of the program compares to what other states are paying, how the states operation of the program compares to other states, and whether any data would be reported out by the state throughout the year.
 - OCI Response indicated the following:
 - The waiver is approved for a 5 year period.
 - For plan year 2019, the federal government approved approximately 128 million dollars and the state budget includes 72 million dollars (in keeping with the \$200 million program approved by HHS).
 - State funding is general purpose revenue (GPR).

- Other states have contributed more than WI; MN is an example, although part of their initial costs may have been attributed to the basic health plan population.
- Operationally WI's process is similar to Oregon where claims data is collected, attested
 to and audited vs. a MN set up where they have a separate entity outside of the
 insurance dept. managing the data and more directly accessing EDGE data.
- Per state statute, OCI will provide to the insurers on a quarterly basis the amount of claims reported to qualify for WIHSP, on an aggregate basis, and OCI can post to the website. OCI also has operational reports due to HHS quarterly.
- Lisa Ellinger asked why the payment parameters for the 2020 plan year vary from those set for 2019.
 - OCI Response: To maximize the program and ensure it remains a \$200 million program, the parameters needed to shift a bit; based on expected enrollment and claims trends for 2020.

The hearing adjourned at 10:30 a.m. The record was held open, but no additional comments were received.