The Delaware Health Care Commission (DHCC) Meeting
November 4, 2021
9:00 a.m. to 11:00 a.m.

Meeting Attendance and Minutes

Commission Members Present: Theodore W. Becker (Mayor of Lewes), Cabinet Secretary Rick Geisenberger (DOF), Dr. Roger Harrison (Nemours), Richard Heffron, Melissa Jones, Dr. Jan Lee (DHIN), Dr. Richard Margolis (DSCYF), Nick Moriello (Highmark), and Insurance Commissioner Trinidad Navarro (DOI)

Meeting Facilitator: Dr. Nancy Fan (Chair)

Commission Members Absent: Cabinet Secretary Molly Magarik (DHSS)

Health Care Commission Staff: Elisabeth Massa (Executive Director), Eschalla Clarke (Social Services Senior Administrator), Latoya Wright (Manager Statistics and Research), and Tynietta R. Congo-Wright (Administrative Specialist III)

CALL TO ORDER

Dr. Fan called the meeting to order at approximately 9:01 a.m. via WebEx. It was determined a quorum was present. Dr. Fan asked public attendees to virtually sign-in by placing their name and affiliation in the chat box or by sending their name and contact information to the DHCC Resource Account (dhcc@delaware.gov).

BOARD BUSINESS

ACTION ITEM: Approve October 7, 2021 meeting minutes

Dr. Fan asked the commissioners to review the draft October 7, 2021 meeting minutes. There were no comments or changes. Ted Becker made a motion to approve. The motion to approve was unanimously accepted by all commissioners present. The approved minutes are available on the DHCC website.

ACTION ITEM: DHSA Repurpose of Funds Request and Contract Proposal

Dr. Fan asked the commissioners to review the Delaware Health Sciences Alliance (DHSA) repurpose of funds request and the DHSA contract proposal for 2022. The documents were sent to the commissioners in their advance meeting materials. The repurpose of funds requests is for the current
DHSA contract and no additional funds are being requested. DHSA requests approval to repurpose funds allocated for in person events to proposed activities for virtual/hybrid events and DIMER branded care packages given the current COVID climate and inability to bring all together in person for an event. Dr. Fan asked for a motion to approve. Rich Heffron made a motion to approve. Dr. Lee seconded. The motion to approve was unanimously accepted by all commissioners.

Dr. Fan asked the commissioners to review the DHSA contract proposal for Calendar Year 2022 which would start March 1, 2022. The new contract has a slight increase in fees for services and would continue activities focused on DIMER engagement and awareness and the DIMER annual report. Dr. Fan asked for a motion to approve. Ted Becker made a motion to approve. Rich Heffron seconded. The motion to approve was unanimously accepted by all commissioners.

_from the WebEx Chat Box:
from Pamela Gardner to everyone: 9:08 AM
Thank you all for your continued support of DHSA and our work with DIMER

Strategic Retreat Summary and Next Steps

The DHCC Retreat was held on Friday, October 29 from 12 p.m. – 4 p.m. The theme for this year’s Retreat was, “Moving Toward Thought Leadership.” Dr. Fan shared a short summary of the Retreat where critical issues were discussed and a lot of content was covered. The Commission looked at what can be improved on, what could be done differently, and what the focus should be in 2022. The full minutes from the meeting will be reviewed and approved at the December 2nd DHCC meeting.

POLICY DEVELOPMENT

Reinsurance Program

Dr. Fan introduced the Steven Costantino, DHSS Director of Health Care Reform, to kick-off the Reinsurance Program presentation. The State’s Reinsurance Program is a program that was implemented in January 2020 and is administered by the DHCC. Mr. Costantino shared Delaware is now in the second year of the program and it has had a really positive impact on the Marketplace. He provided a short historical overview of the program, including providing context for the development of the program (there was much instability across the Marketplace with premium increases and a decline in enrollment). The program essentially insures the insurer. Mr. Costantino shared a visual how the program is funded and works. In summary, the program takes high-cost claims that fall in the defined payment parameters (for Plan Year 2020, costs that were captured between $65K and $215, the state and federal government will pay 75% so essentially, we are taking the cost away from the insurer. As a result, premiums are lowered and the tax credits that fall up to 400% of poverty, the individuals are subsidized via tax credits. Since those go down, we are saving the federal government money. For plan year 202, the federal savings was $21.7 million. The federal government in turn sends that money back to Delaware to which Delaware makes a payment to the insurer. Premiums have been lowered by an estimated 18%.
Secretary Geisenberger asked Mr. Costantino to clarify how the funding works specifically the amount of pass-through funding and payout to the insurer. Mr. Costantino shared additional financing details about the program which includes the DHCC receiving additional funding from the assessment insurers pay to the Department of Insurance.

Oliver Wyman consultant, Ryan Schultz, next shared information on enrollment, trends in the Marketplace, mechanics of the payment parameters for Calendar Year 2022, summary of Affordable Care Act plans, and the projected growth in the Marketplace due to additional American Rescue Plan Act (ARPA) funding.

Next, John-Pierre Cardenas with JP Consulting, shared a deep dive on the claims data and an analysis of Reinsurance Program enrollees. The DHCC has been collecting data on claims to help glean drivers of the Reinsurance program.

The commissioners asked a number of questions and shared some comments. Dr. Lee asked for clarification about the on-exchange verses off-exchange in relation to enrollee plans. Nick Moriello shared information about open enrollment and how consumers do not always realize they may qualify for governmental assistance. Commissioner Navarro also emphasized open enrollment and encouraged consumers to explore plans and look at what options are available. The commissioners then discussed the various policy opportunities Mr. Cardenas presented that focused on lower out-of-pocket costs, care coordination, and issuer payment.

The Reinsurance Program presentation is available on the [DHCC website](https://www.healthinsurance.org/health-insurance-marketplaces/delaware/).

From the WebEx Chat Box:

from Steven Costantino to everyone: 9:27 AM
https://www.healthinsurance.org/health-insurance-marketplaces/delaware/

from Steven Costantino to everyone: 9:27 AM

nice history

Quality Benchmarks

The next presentation was an overview of the Benchmark Quality measures and the proposed goals for calendar years 2022 - 2024. Elisabeth Massa provided context for the presentation. In 2018 Governor Carney approved the Executive Order 25 which required DHCC to set health care quality benchmarks. The initial cycle covered calendar years 2019-2021 and the EO requires that the benchmarks be reviewed every three years. The proposed quality measures for the calendar year 2022 - 2024 cycle were presented at the DHCC meeting on April 1, 2021 and subsequently approved. The presentation reviewed the proposed benchmark values for calendar years 2022 - 2024.

Laurie Klanchar and Jordan Bublik, consultants with Mercer that support the Quality Benchmarks program, provided a deeper dive into the measures and proposed goals. Ms. Klanchar reviewed the six legacy measures the DHCC is keeping in the 2022 - 2024 cycle (statin therapy for patients with
cardiovascular disease, persistence of beta blocker treatment after a heart attack, emergency department utilization, adult obesity, opioid related overdose deaths, use of opioids at high dosages).

She shared if goals were met and the proposed new goals for each measure.

Secretary Geisenberger asked about the Medicaid goal for the persistence of beta blocker treatment after a heart attack – he thought the goal seemed aggressive given our progress to date. What are the strategies for meeting the goals? Ms. Klanchar shared the submission of the benchmark data is voluntary by the plans and it is hoped they are taking steps to improve measures. Steven Costantino asked if Medicaid included the long-term care population because Medicare pays for some of the medical. Ms. Klanchar said she would have to check the HEDIS specs and get back to him with an answer. Nick Moriello asked for clarification on the EDU methodology and noticed an error on the slide which indicated the goal was not met, when in fact it was met. Ms. Klanchar confirmed this was a typo on the slide. Rich Heffron commented you really need to have underlying data on EDU visits – how many people go there because they do not have a doctor. Dr. Lee commented on the data includes a discharge diagnosis captured in claims. For the obesity measure, Dr. Lee asked about the data source. If it is claims data, you do not capture it. The only real accurate way to capture if getting it from clinical data sources. Jordan Bublik shared the data source is self-reported BRFSS data that is submitted to the CDC. Dr. Harrison echoed comments made earlier about strategies moving towards meeting the benchmarks. Dr. Lee shared health plans and providers can’t impact some of these measures, like obesity, without the commitment of the individual. If the state wants to tackle, the state should look at policies around how to address the environmental factors that lead to obesity. Steven Costantino shared the intent of the quality benchmarks was to have transparency around spending and knowledge of where Delaware is and be able to have the discussion of where we are. Dr. Harrison shared that viewing these measures through a DEI (Diversity, Equity, and Inclusion) lens, there is stark racial/ethnic differences reported. Mr. Moriello commented the obesity measure was a worthy measure to include, but perhaps instead of setting goals, the DHCC collects data and does a drill down on the data by race/ethnicity for example.

Ms. Bublik reviewed the new measures the DHCC will be adding (breast cancer screening, cervical cancer screening, colorectal cancer screening, and percentage of eligible patients who received preventive dental services: ages 1-20). She shared the baseline rate that had been calculated and the proposed goals.

The DHCC is accepting public comment until Tuesday, November 30, 2021. Comments can be sent to, DHCC@delaware.gov. The Quality Benchmarks presentation is available on the DHCC website.

From the WebEx Chat Box:

from Nora Hoban to everyone: 10:43 AM
There is a methodology. You can measure by Ambulatory Sensitive Conditions established by the federal government.

from Roger Harrison he/him to everyone: 10:46 AM
Agree fully!
from Steven Costantino to everyone: 10:48 AM  
https://www.cdc.gov/obesity/data/prevalence-maps.html

from Delaney McGonegal to everyone: 10:56 AM  
The BRFSS does break out overweight and obesity by race.

from Laurie Klanchar to everyone: 11:02 AM  

**UPDATES**

**DIMER**

Dr. Lee, as the DIMER board member representative for the DHCC, shared a short overview of the recent DIMER board meeting that was held on October 13. The board members discussed DIMER student eligibility guidelines, an update on the DIMER Ad-Hoc Subcommittee metrics work, and updated from the affiliated DIMER medical school, and the Delaware Health Sciences Alliance outreach activities.

**Health Care Provider Loan Repayment Program (HCPLRP)**

Dr. Fan provided an update on the new state loan repayment program, HCPLRP. An Advisory Committee was created in 2019 and will meet on November 8 to discuss set up the infrastructure and discuss the program parameters. The Advisory Committee will also discuss adding three at large positions. The Advisory Committee will likely meet monthly as the program develops.

**ADJOURN**

Dr. Fan asked if there was any public comment. Hearing none, the meeting was adjourned. The next DHCC meeting will be held on December 2, 2021 from 9 a.m. – 11 a.m.

**Public Meeting Attendees**  
**November 4, 2021**

A. Richardson  
Anthony Onugu  
Beste Kuru  
Brian Olson  
Bryan Gordan  
Cheryl Heiks  
Christina Crooks Bryan  
David Roose  
Delaney McGonegal  
Ella Edwards  
United Medical  
United Medical  
United Medical  
La Red Health Center  
ChristianaCare  
Delaware Health Care Facilities Association  
Delaware Healthcare Association  
Department of Finance  
Mid-Atlantic Association of Community Health Centers  
Henrietta Johnson Medical Center
Fleur McKendell  Department of Insurance
Frank Pyle  Department of Insurance
Gwendolyn Scott-Jones  Delaware State University
Jillian Small  Highmark
Joann Hasse  League of Women Voters of Delaware
John Dodd  BDC
John-Pierre Cardenas  JP Consulting
Khadjina-iisha Shockley
Laurie Klanchar  Mercer
Jordan Bublik  Mercer
Alyson Ramsaier  Mercer
Lincoln Willis  Willis Group LLC
Lolita Lopez  Westside Family healthcare
Lori Ann Rhoads  Medical Society of Delaware
Louise Blackwell
Maggie Norris Bent  Westside Family Healthcare
Mollie Poland  Nemours
Pat Redmond  Nemours
Nina Figueroa  Department of Human Resources
Nora Hoban  Mid-Atlantic Association of Community Health Centers
Pam Price  Highmark
Pamela Gardner  Delaware Health Sciences Alliance
Ruth Lytle-Barnaby  Planned Parenthood of Delaware
Paula Roy  Roy Associates
Richard Holladay  DHSS
Nick Conte  DHSS
Sarah Noonan Davis  DHSS
Steven Costantino  DHSS
Kathy Collison  DHSS
Tammy Tomczyk  Oliver Wyman
Ryan Schultz  Oliver Wyman
Tim Gibbs  Delaware Academy of Medicine
Tyler Blanchard  Aledade
Victoria Brennan  Office of Controller General
Wayne Smith  Delaware Healthcare Association