

Prepaid Health Care Advisory Council Meeting

State of Hawaii
Department of Labor and Industrial Relations
830 Punchbowl Street, Room 210
Honolulu, HI 96813

Also via Microsoft Teams

August 23, 2022
1:35 p.m. to 3:46 p.m.

Council members present

Mr. Paul Marx, Chair
Ms. Bonnie Pang
Mr. Mike Hogan
Mr. Derek Kanehira
Dr. John McDonnell

Council member absent

Ms. Carol Shimomura
Ms. Winona White

DC Staff Present

Royden Koito
Misty Sumida
Lois Iyomasa
Marisa Yagi
Stacey Hiranaka

With a quorum present, Chair Marx called the meeting to order at 1:35 p.m.

APPROVAL OF MINUTES

Chair Marx asked if there were any changes to the circulated minutes of the June 14, 2022 meeting.

Mr. Hogan requested the description “swan dance” catheter be changed to “swan-ganz” catheter on page 5. Mr. Kanehira requested “the” be removed from page 2 from the sentence which referenced the comparison between the 2022 to 2023 documents stating that the sentence did not flow smoothly.

A motion was made by Mr. Hogan to approve the minutes from June 14th as corrected. The motion was seconded by Mr. Kanehira and carried by unanimous vote.

OTHER BUSINESS

Hawaii Medical Service Association (HMSA)

HMSA was represented by Mr. Austin Bunag.

Preferred Provider Plan

HMSA informed the Department of changes and clarifications being made to the prevalent plan effective January 1, 2023.

Chair Marx asked Mr. Bunag if there were any additional comments that he would like to inform the Council of regarding the plan. Mr. Bunag responded no additional comments at that time.

Preferred Provider Plan - A

HMSA informed the Department of changes made to the plan effective January 1, 2023 and requested continued approval of the plan under Section 393-7(a).

Mr. Bunag stated the changes made to the plan were consistent with the preferred provider plan. Mr. Kanehira questioned the benefit for in vitro fertilization (IVF). He understood the benefit was one visit per PPO or HMO, however if the benefit was exhausted the member was entitled to one additional visit provided the member had a different employer with a different plan. Mr. Bunag confirmed and explained the changes were made based on the review of the Affordable Care Act (ACA) and ensured the member was afforded the IVF benefit if they moved to a new group. He stated the requirement for pre-existing conditions would not negatively affect the member. Mr. Hogan questioned the application process if a member had dual coverage. Mr. Bunag stated the benefit would be exhausted on both plans if the member chose to apply this benefit. Mr. Kanehira questioned if the benefit had a waiting period. Mr. Bunag stated the benefit would be effective upon the member's enrollment date.

Mr. Kanehira highlighted the combined formatting of the description in the disease management and preventive services programs section of the additional notes section in the DCD Review sheet and asked if the reference to the prenatal program that helps expected couples could be bulletized to reduce the redundancy of the covered programs. Mr. Bunag stated he would work with the contracts team to provide better clarity.

Mr. Kanehira questioned if screening mammogram and diagnostic mammogram were different based on the benefit locations. Mr. Bunag confirmed.

Ms. Pang questioned why chemotherapy infusions and injections were subject to the deductible. Mr. Bunag stated the deductible only applied to the non-par deductible.

A motion was made by Mr. Hogan to recommend continued approval subject to the Department receiving the requested changes to the plan from HMSA for the Department to review and approve. This same motion would hold true for all succeeding plans.

Discussion amongst the Council members regarding their concerns around the submitted plans and the request of HMSA to comply with the prevalent plan aligned with the section 393-7(a)

were brought to the floor. Chair Marx commented that while formatting and language adjustments were important, this was not germane in the approval of the plan regarding the benefit to the members. Ms. Pang suggested to continue the discussion around the preferred provider plan as this plan was designated as the prevalent plan. Chair Marx agreed and questioned the DCD review form related to the 90% benefit coverage as opposed to a \$14 copay as stated in the plan document. He questioned how the Council was to decide the equivalency as related to the prevalent plan. There were historical ranges of benefits that were accepted and if those ranges of those plans were not exceeded, the plan had been accepted as compliant under section 393-7(a). Chair Marx stated the Council hadn't discussed with the Contractors a dollar amount in comparison with the benefit equivalency. He gave the example where a dollar amount was a better benefit as opposed to a copay percentage in certain situations. Also, without knowing the cost of the service, how could a proper determination (percentage versus dollar figure) be appropriate. Ms. Pang questioned how the Council knows what was actuarially equivalent to the prevalent plan. Mr. Bunag stated the plan designs predated him and currently HMSA was in maintenance mode by making changes based on compliance to various statutes. He noticed from past council meetings the Council would have discussions about the benefits line by line as compared to the equivalency of the prevalent plan. Chair Marx questioned the necessity of the various plans. Mr. Bunag stated the various plans being offered was to fulfill the employer markets and HMSA was working on reassessing the portfolio with the goal of consolidation. Mr. Hogan mentioned the possibility of the Council obtaining a third-party actuarial service for matters of this nature with the possibility of incorporating this into the Council's best practice. Dr. McDonnell mentioned during his time on the Council, the Council was careful to shy away from the discussion regarding money values because it wasn't the role of the Council. Dr. McDonnell and Ms. Pang agreed that the role of the Council was to ensure the changes that were accepted did not deteriorate the coverage and the intent was to preserve the coverage to ensure the member had adequate coverage. Ms. Pang's understood the role of the Council was to act as a consumer oversight group. Chair Marx concluded that the plan could be approved based on the submission from HMSA and HMSA attesting to the plans being submitted in earnest, and in conjunction with the department's review with no comments or questions, that all plans align with past practice with no fluctuation in historical range that had been acceptable.

Chair Marx said there was no disrespect for the work being done and he recognized that everybody involved was working hard to make the best situation for the Prepaid Health Care Act which ultimately protected the members.

Dr. McDonnell addressed the previous motion made by Mr. Hogan stating the motion on the floor had yet to be voted on or withdrawn. Mr. Hogan withdrew his motion to approve the Preferred Provider Plan A. The motion was withdrawn and seconded by Mr. Kanehira and carried by unanimous vote.

Preferred Provider Plan

The Council deviated from the order of the agenda to continue the review of the Preferred Provider Plan. Chair Marx discussed the option to make one motion for all plans or if the Council would prefer to make individual motions per plan. Mr. Bunag explained the changes were made to the non-par benefits and various language changes based on the Consolidated Appropriations Act. Some plans complied but required additional amendments for language consistency across all plans.

Chair Marx recommended to the Council that the HMSA plans continue to be approved under Section 393-7(a) based on the information provided to the Council (including Section 63 of the DCD Review Sheet) provided by DCD and the Contractor; HMSA's assertion that the changes made were identical in all plans except as noted by the Contractor; and any clarifications provided in the Council meeting. Any concerns that were raised by the Council and were not noted in the review of the plan would be addressed in a second motion. Chair Marx also recommended that the above be applied across all plans. Mr. Hogan added that the plans would be accepted subject to the Contractor submitting to DCD the changes that were requested to be made by the Council. The Council agreed to the recommendation by the Chair that each plan being recommended for approval includes the aforementioned as a motion for approval.

Preferred Provider Plan - A

A motion was made by Mr. Hogan to recommend continued approval of the plan under Section 393-7(a) provided:

1. The format in the Disease management and Preventive Services Programs Section bulletizes the reference to the prenatal program that helps expecting couples.

The motion was seconded by Mr. Kanehira and carried by unanimous vote.

Preferred Provider Plan - 2010

HMSA informed the Department of changes made to the plan effective January 1, 2023 and requested continued approval of the plan under Section 393-7(a).

A motion was made by Mr. Hogan to recommend continued approval of the plan under Section 393-7(a) provided:

1. The format in the Disease management and Preventive Services Programs Section bulletizes the reference to the prenatal program that helps expecting couples.

The motion was seconded by Ms. Pang and carried by unanimous vote.

CompMed

HMSA informed the Department of changes made to the plan effective January 1, 2023 and requested continued approval of the plan under Section 393-7(a).

A motion was made by Ms. Pang to recommend continued approval of the plan under Section 393-7(a) provided:

1. The format in the Disease management and Preventive Services Programs Section bulletizes the reference to the prenatal program that helps expecting couples.

The motion was seconded by Mr. Kanehira and carried by unanimous vote.

CompMed Choice

HMSA informed the Department of changes made to the plan effective January 1, 2023 and requested continued approval of the plan under Section 393-7(a).

A motion was made by Mr. Kanehira to recommend continued approval of the plan under Section 393-7(a) provided:

1. The format in the Disease management and Preventive Services Programs Section bulletizes the reference to the prenatal program that helps expecting couples.

The motion was seconded by Ms. Pang and carried by unanimous vote.

Health Plan Hawaii Plus

HMSA informed the Department of changes made to the plan effective January 1, 2023 and requested continued approval of the plan under Section 393-7(a).

A motion was made by Ms. Pang to recommend continued approval of the plan under Section 393-7(a) provided:

1. The format in the Disease management and Preventive Services Programs Section bulletizes the reference to the prenatal program that helps expecting couples.

The motion was seconded by Mr. Hogan and carried by unanimous vote.

Health Plan Hawaii - A

HMSA informed the Department of changes made to the plan effective January 1, 2023 and requested continued approval of the plan under Section 393-7(a).

A motion was made by Ms. Pang to recommend continued approval of the plan under Section 393-7(a) provided:

1. The format in the Disease management and Preventive Services Programs Section bulletizes the reference to the prenatal program that helps expecting couples.

The motion was seconded by Mr. Kanehira and carried by unanimous vote.

Preferred Provider Plan - B

HMSA informed the Department of changes made to the plan effective January 1, 2023 and requested continued approval of the plan under Section 393-7(b).

A motion was made by Mr. Hogan to recommend continued approval of the plan under Section 393-7(b).

The motion was seconded by Ms. Pang and carried by unanimous vote.

CompMED - B

HMSA informed the Department of changes made to the plan effective January 1, 2023 and requested continued approval of the plan under Section 393-7(b).

A motion was made by Dr. McDonnell to recommend continued approval of the plan under Section 393-7(b).

The motion was seconded by Mr. Hogan and carried by unanimous vote.

Health Plan Hawaii - B

HMSA informed the Department of changes made to the plan effective January 1, 2023 and requested continued approval of the plan under Section 393-7(b).

A motion was made by Ms. Pang to recommend continued approval of the plan under Section 393-7(b).

The motion was seconded by Mr. Hogan and carried by unanimous vote.

HMSA's Small Business Preferred Provider Plan - A

HMSA informed the Department of changes made to the plan effective January 1, 2023 and requested continued approval of the plan under Section 393-7(a).

A motion was made by Mr. Kanehira to recommend continued approval of the plan under Section 393-7(a) provided:

1. The format in the Disease management and Preventive Services Programs Section bulletizes the reference to the prenatal program that helps expecting couples.

The motion was seconded by Mr. Hogan and carried by unanimous vote.

HMSA's Small Business CompMED - A

HMSA informed the Department of changes made to the plan effective January 1, 2023 and requested continued approval of the plan under Section 393-7(a).

A motion was made by Ms. Pang to recommend continued approval of the plan under Section 393-7(a) provided:

1. The format in the Disease management and Preventive Services Programs Section bulletizes the reference to the prenatal program that helps expecting couples.

The motion was seconded by Mr. Kanehira and carried by unanimous vote.

HMSA's Small Business CompMED Choice - A

HMSA informed the Department of changes made to the plan effective January 1, 2023 and requested continued approval of the plan under Section 393-7(a).

A motion was made by Mr. Kanehira to recommend continued approval of the plan under Section 393-7(a) provided:

1. The format in the Disease management and Preventive Services Programs Section bulletizes the reference to the prenatal program that helps expecting couples.

The motion was seconded by Mr. Hogan and carried by unanimous vote.

HMSA's Small Business Health Plan Hawaii - Plus

HMSA informed the Department of changes made to the plan effective January 1, 2023 and requested continued approval of the plan under Section 393-7(a).

A motion was made by Ms. Pang to recommend continued approval of the plan under Section 393-7(a) provided:

1. The format in the Disease management and Preventive Services Programs Section bulletizes the reference to the prenatal program that helps expecting couples.

The motion was seconded by Mr. Kanehira and carried by unanimous vote.

HMSA's Small Business Health Plan Hawaii Platinum - A

HMSA informed the Department of changes made to the plan effective January 1, 2023 and requested continued approval of the plan under Section 393-7(a).

A motion was made by Dr. McDonnell to recommend continued approval of the plan under Section 393-7(a) provided:

1. The format in the Disease management and Preventive Services Programs Section bulletizes the reference to the prenatal program that helps expecting couples.

The motion was seconded by Mr. Hogan and carried by unanimous vote.

HMSA's Small Business Preferred Provider Plan - B

HMSA informed the Department of changes made to the plan effective January 1, 2023 and requested continued approval of the plan under Section 393-7(b).

A motion was made by Mr. Kanehira to recommend continued approval of the plan under Section 393-7(b).

The motion was seconded by Ms. Pang and carried by unanimous vote.

ADJOURNMENT

Meeting adjourned at 3:46p.m. The next meeting was tentatively scheduled for September 21, 2022 with a tentatively scheduled back-up meeting for September 28, 2022.