

Prepaid Health Care Advisory Council Meeting

State of Hawaii
Department of Labor and Industrial Relations
830 Punchbowl Street, Room 310
Honolulu, HI 96813

Also via Microsoft Teams

September 28, 2022
1:32 p.m. to 2:49 p.m.

Council members present

Mr. Paul Marx, Chair
Mr. Mike Hogan
Ms. Bonnie Pang
Dr. John McDonnell
Ms. Carol Shimomura

Council members absent

Mr. Derek Kanehira
Ms. Winona White

DC Staff Present

Royden Koito
Lois Iyomasa
Misty Sumida
Marisa Yagi
Stacey Hiranaka
Adam Rosenberg (Deputy Attorney General)

With a quorum present, Chair Marx called the meeting to order at 1:32 p.m.

APPROVAL OF MINUTES

Chair Marx asked if there were any changes to the circulated minutes of the August 23, 2022 meeting.

A motion was made by Mr. Hogan to accept the minutes as circulated. The motion was seconded by Ms. Pang and the minutes were approved as presented.

REVIEW OF PLANS

Kaiser Foundation Health Plan, Inc.

Kaiser was represented by Ms. May Goya. Ms. Goya explained that all plans listed on the agenda were previously approved in prior years. She addressed the four plans listed under the review of

plans section of the agenda stating the plans were submitted as new based on administrative reasons and the requirement to file as new. Ms. Goya addressed the four plans listed under the other business section of the agenda stating the plans would reflect the same changes and language clarifications made at the February 17, 2022 meeting where the 2023 large group plans were reviewed.

KP HI Platinum 0/15 Plan

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

Ms. Goya highlighted the typo regarding the Prostate Specific Antigen (screening) cost share stated at \$10 per day but should be corrected to \$0 and vasectomy primary care visit stated as none but should be corrected to \$15 per visit. She confirmed the typos would be corrected in the amended version sent to the department.

Ms. Pang questioned why there was a limit of two elective pregnancy terminations. Ms. Goya stated the limit had been in place for over 20 years and could not provide any background information on this limitation. She deferred to her colleagues at Kaiser. Ms. Young stated it was legacy information. She explained that pregnancy termination was an unlimited benefit and the limit only applied to elective procedures. The limit was in place to deter members from using this benefit as a form of birth control or pre-birth control methodologies. She mentioned Kaiser offered unlimited birth control benefits.

Ms. Shimomura questioned the differences between inpatient services related to radiology, radiology advanced imaging, and radiotherapeutics. Ms. Goya gave the example of x-ray imaging as related to radiology or basic imaging and MRIs as related to advanced radiology or specialty imaging/complex imaging. Ms. Shimomura questioned if the total care services as related to radiation therapy were inclusive of the MRI. Ms. Goya stated that radiation therapy was something in itself and gave a brief synopsis of the radiation therapy process.

Dr. McDonnell questioned which plan was designated as the HMO prevalent plan. Ms. Goya stated the Kaiser Permanente Group plan was reviewed in February and that plan remained as the prevalent plan. The copayments or cost shares would vary based on the plan design, but the language and clarifications were aligned with the prevalent plan.

Ms. Shimomura questioned the if the cost share for occupational therapy should be \$15 per visit or \$20 per visit. Ms. Goya confirmed that occupational therapy should be \$15 per visit.

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

1. Prostate Specific Antigen (screening) has no cost share; and
2. Vasectomy cost share for the primary care visit is \$15.

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

KP HI Platinum 0/20 Plan

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

Chair Marx questioned why Kaiser decided to change the name of the plan. Mr. Lau stated the name change was created to assist the employer and their employees to easily identify the different plans more distinctively.

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

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

KP HI Platinum 0/20 Rx Ded Plan

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

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

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

KP HI Gold 300/20 – B Plan

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

Ms. Shimomura questioned the discrepancies on the DCD review sheet related to the Contractor portion versus the office-use-only portion. She noticed the office-use-only portion was different from the Contractor portion. Ms. Yagi explained the department failed to notate all discrepancies in the office-use-only portion between the DCD review sheet and the Evidence of Coverage (EOC). All cost shares were correctly reflected in the EOC.

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

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

OTHER BUSINESS

KP Gold I - \$20 Plan

Kaiser informed the Department of changes made to the plan to be effective upon the employer group's contract renewal dates beginning January 1, 2023 and requested continued approval of the plan under Section 393-7(a).

Ms. Shimomura questioned the cost share charges for radiology with respect to the difference between the cost share for general imaging services (basic, \$20 per day) and specialty services (complex, 20% of applicable charges). Ms. Goya confirmed the cost share for radiology outpatient was \$20 per day for general (basic) imaging and advanced (complex) imaging was 20% of applicable charges.

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

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

KP Platinum - \$14 Plan

Kaiser informed the Department of changes made to the plan to be effective upon the employer group's contract renewal dates beginning January 1, 2023 and requested continued approval of the plan under Section 393-7(a).

Ms. Shimomura requested clarification on the physician services inpatient cost share. The DCD review sheet stated \$20 per visit, but the EOC stated 20% of applicable charges because the visit was categorized as a hospital benefit. Ms. Goya confirmed the EOC was correct.

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

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

KP Platinum Added Choice - \$20 Plan

Kaiser informed the Department of changes made to the plan to be effective upon the employer group's contract renewal dates beginning January 1, 2023 and requested continued approval of the plan under Section 393-7(a).

Ms. Shimomura questioned if transplants, other than corneal and kidney, had a \$20 cost share per visit. Ms. Goya confirmed transplants, other than corneal and kidney, had a \$20 cost share per office visit or an 80% cost share per hospital visit based on setting.

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

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

KP Added Choice 80%/20% Out-of-Network Plan

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

Ms. Goya stated the plan was reformatted going from the legacy service agreement and benefit schedule format to a format that mirrored the other HMO plans. Kaiser would continue to reference the Kaiser Permanente Insurance Company (KPIC) for the out of network coverage.

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

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

EXECUTIVE SESSION

The meeting moved into Executive Session where Chair Marx presented two options for future meeting venues: continue via Microsoft Teams or meet in person at the Department of Labor and Industrial Relations conference room 310. Chair Marx stated his concern over the in-person venue was regarding the decrease in sound quality at the meeting if some attendees joined via Microsoft Teams. The Council agreed that the meeting be held via one platform and decided by consensus that they continue meeting via the Microsoft Teams.

Mr. Hogan stated that he was approached by a company regarding the submission of their self-insured healthcare plan. Mr. Hogan stated it was standard protocol and best practice to redirect all communications and submissions to the department but asked if the Council members could be updated by the department on the status of the follow up contact the department made with the company. Mr. Rosenberg stated that two Council members conversing outside a Council meeting was permissible if the discussion was not about deciding how they would vote on the subject. Mr. Rosenberg stated that having more than two members conversing outside the meeting was problematic as related to the Sunshine Law. Ms. Pang clarified that it was permissible when solicited by a company to inform them there was a plan approval process and to direct them to the department. Dr. McDonnell further clarified that he would direct any solicitations to department, to which Mr. Rosenberg agreed.

ADJOURNMENT

Meeting adjourned at 2:49 p.m.