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THE HEALTH CARE OVERSIGHT COMMITTEE QUARTERLY REPORT

Trinka Kerr, Chief Health Care Advocate

July 24, 2014

The Office of the Health Care Advocate submits quarterly reports to the Agency of Administration. The complete report can be viewed at:

www.vtlegalaid.org/our-projects/health-care-advocate-project/

I. Individual Consumer Assistance

A. The call volume to the Office of the Health Care Advocate consumer hotline continues at record levels, and is 42% higher than last year for the quarter.

- All of the increase is due to problems with Vermont Health Connect.
- The HCA received 1,022 calls this quarter, compared to 721 last year:
 - 40% were on DVHA programs
 - 21% were on Medicare
 - 20% were on commercial plans
 - 13% were uninsured.

B. The lack of Change of Circumstance functionality continues to create problems for consumers and is causing problems with access to care.

- Example: Consumer loses job, can't pay premiums to continue coverage through a qualified health plan, loses coverage, does not get moved to Medicaid for several months. Consumer goes without care until she gets onto Medicaid.

C. The VHC invoice and payment system is also creating problems.

- Example: Consumer selects and enrolls in a qualified health plan and pays for several months, but coverage is not activated.

D. VHC is still not sending Notices of Decision to consumers.

- This will create additional problems if the functionality is not operational by November 15, 2014, when open enrollment begins for 2015.

The Office of the Health Care Advocate, previously named the Office of Health Care Ombudsman, is a special project of Vermont Legal Aid.

E. The Medicaid renewal process has created difficulties for thousands of consumers.

- Deferred Medicaid reviews began in April but many Medicaid beneficiaries have not successfully re-enrolled through Vermont Health Connect.
- Example: Medicaid beneficiary re-enrolls in Medicaid through VHC, but does not show as active on Medicaid when he goes to the pharmacy.
- State is halting reviews and reinstating beneficiaries who were terminated.
- Some of these individuals had problems with the VHC enrollment system or its interface with providers.

F. Outcomes

- The HCA saved individual consumers \$127,348.41 this quarter, and \$313,265.50 for State Fiscal Year 2014.
- For other outcomes, see page 8 of the report.

II. Consumer Protection Activities

A. Rate review work

- Carriers filed only four new rate cases with the Green Mountain Care Board this quarter, and no contested hearings were held.
- Two of the new filings were the increases requested for Vermont Health Connect plans, which the HCA's actuary is reviewing in preparation for the hearings on August 12-14, 2014.
- The HCA participated in a GMCB forum in Burlington in May on the rate review process.

B. Other Green Mountain Care Board activities

- The HCA attended multiple meetings with the GMCB and its staff.
- We monitored Certificate of Need applications.
- We filed a Notice of Intervention as an Interested Party in one CON, the Fletcher Allen Health Care, South Burlington Property Acquisition.

C. Vermont Health Care Innovation Project (SIM grant)

- The HCA and Vermont Legal Aid participated in six of the seven work groups as well as the Steering Committee.
- We submitted comments on the criteria for the quality measures to be used in the second year of the Accountable Care Organization Medicaid and Commercial Shared Savings Programs.
- We submitted six sets of comments to DVHA and the Medicaid SSPs on their patient notices and forms.

D. Other activities

- The HCA has prioritized its advocacy for the use of **plain language materials** for health care consumers.
 - We worked extensively with the ACOs to improve the readability of their materials.
 - At the request of the GMCB, we also worked with VITL on its forms and brochure.
- The HCA and Vermont Legal Aid continued to work with the Agency of Human Services on its **Health Benefit Eligibility and Enrollment regulations** for Vermont Health Connect.
 - We submitted 40 pages of comments on the final proposed HBEE rules.
 - We testified at the Legislative Committee on Administrative Rules in opposition to a perceived change in the Choices for Care program, but subsequently withdrew our objection with the promise from AHS to continue to work with us to clarify the rules and procedures.
- The HCA also participated in multiple other systemic activities as consumer representatives, including:
 - The Medicaid and Exchange Advisory Board
 - The Governor’s Consumer Advisory Council
 - The VHC Consumer Experience Work Group
 - The VHC Customer Support Work Group with VHC, Maximus, DVHA and HAEU
 - Submitting multiple sets of comments on VHC notices.

III. Outreach and Education

- The HCA continued to update and add content to its website: www.vtlawhelp.org/health
- We added a new white paper on emerging privacy issues, **Protected Health Information: What Vermonters Should Know**, to our policy page which now has four policy papers, with a new one on the rate review process to be added soon. www.vtlawhelp.org/health-care-policy
- The HCA presented a workshop on Vermont Health Connect at Vermont Family Network’s annual meeting in April.