

Testimony Before US House Commerce Committee

Wednesday September 23rd, 2020

Madam Chairman,

Thank you for the opportunity to testify, I will testify regarding Idaho's experience with Health Insurance, the ACA and the COVID-19 pandemic.

Idaho's perspective and experience may be unique from what you have previously heard, and I hope it will be helpful as you consider broad public policy and its implications on the unique demographics of each individual state.

Idaho prides itself on being creative and collaborative in finding solutions. It is that collaboration and our regulatory approach which led to the creation of our state-based exchange – one of the most successful exchanges in the country. It is that collaboration which has provided consumers with 5 competing carriers participating in the individual health insurance market. And it is that collaboration which proved to be critical for improved outcomes during this pandemic.

At the onset of the pandemic and Idaho's emergency declaration, the Department of Insurance began meeting weekly, virtually with our carriers. We began collaborating to find solutions to the barriers and dilemmas caused by the pandemic, which included everything from testing, treatment, telemedicine, provider support, enrollment, and pharmaceutical guidelines. The results were rather remarkable.

Without mandating, requiring or threatening, all 5 carriers:

- Waived Co-payments, deductibles and co-insurance on testing AND the physician visit associated with testing
- Waived Co-payments, deductibles and co-insurance on treatment related to COVID-19
- Expanded their telehealth network dramatically to allow for easier access to telehealth visits
 - Allowed nearly any provider to see their patients remotely
 - Paid providers as if the patient were seen in person
- Our telehealth usage increased 120-fold from February to April. And over 250-fold from April 2019 to April 2020!
 - We went from 233 tele-visits in February (which was high compared to previous months and the year before) to 28,503 tele-visits in the month of April alone.
 - This was especially helpful for our citizens who needed to see their mental health provider.
 - 97 mental health tele-visits in February to 11,333 in April
- Allowed early refill of prescriptions and the ability to obtain a 90-day supply
 - And without signature logs or in-person contact
- Waived coverage eligibility requirements
 - Allowing employees to maintain health coverage while working fewer hours
 - Allowing coverage more quickly upon return to work
 - Allowing furloughed employees to stay covered on the group plan
- Extended premium grace periods and reinstatement periods

All our 5 carriers also provided millions of dollars in timely assistance to providers and consumers as non-COVID-19 claims decreased.

(Targeted provider loan programs, processing claims quicker, suspending prior authorization restrictions while extending prior authorizations previously given. \$1.4 million in total cash advances from one carrier to select provider groups; 3 of our carriers advanced \$5.5 million to providers of one hospital system (not a loan or need to be repaid); another offered \$10 million in interest-free cash advances.)

Several of the 5 carriers recently provided millions of dollars in refunds/credits to their consumers.

(One recently issued an ongoing 15% statement credit. A second provided a 50% credit for June's dental premium. Another offered 9% credit to small employers, 10% to mid-size employers, 4% to large-size employers, and a 23% dental credit to large and midsize employers, totaling \$11 million dollars.)

The carriers in Idaho contributed greatly to the community efforts.

(With their Medical Directors serving on the Governors testing task force. CEO's serving on the Governor's economic recovery advisory committee. Donating thousands of dollars to the Idaho Foodbank, the COVID-19 relief fund, and the coalition on aging. Donating thousands of dollars to Idaho Primary Care Association to support the public and to distribute PPE. Committing to donate every penny (not otherwise obligated) of the risk corridor recovery funds to mental health in rural communities. Donating \$500,000 to United Way. One carrier offered \$2 million in grants to Community Health Excellence program. Designating \$4.25 million to support testing and contact tracing.)

From my perspective our carriers really stepped up at a time when all their employees were newly working remotely and there was huge uncertainty regarding the impacts of COVID-19.

Since then, carriers have filed their individual market 2021 premium rates, and although not final, three of our carriers requested a rate reduction with two of the least expensive requesting a small increase. Overall, the net increase is 1%. (Small Group is similar with a 6% net increase)

Lastly, just a quick note on Medicaid. During the pandemic, the number of Idahoans who have APTC continues to drop while Medicaid and Medicaid expansion enrollment continues to outstrip projections. Even with the expanded FMAP match those numbers are concerning to our state budget at a time when the economy is precarious. The unknown is whether Idahoans will shift back to private coverage as the economy improves.

Madam Chairman, all these collaboration efforts did not happen by accident. They required communication, understanding and commitment to our state and its citizens. I am honored to be part of that process.

Thanks for allowing me to tell Idaho's story.