

The Hilltop Institute



analysis to advance the health of vulnerable populations

Maryland Health Benefit Exchange Memorandum of Understanding Report of Activities and Accomplishments April 1, 2014, through April 30, 2015

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**Maryland Health Benefit Exchange
Report of Activities and Accomplishments
April 1, 2014, through April 30, 2015**

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Introduction

The Hilltop Institute at UMBC

The Hilltop Institute at the University of Maryland, Baltimore County (UMBC) is a nonpartisan health research organization—with an expertise in Medicaid and in improving publicly financed health care systems—dedicated to advancing the health and wellbeing of vulnerable populations. Hilltop conducts research, analysis, and evaluations on behalf of government agencies, foundations, and nonprofit organizations at the national, state, and local levels. Hilltop is committed to addressing complex issues through informed, objective, and innovative research and analysis.

Background: Hilltop’s Work for Maryland on Health Reform

In March 2010, Maryland Governor Martin O’Malley signed an Executive Order that created the Health Care Reform Coordinating Council (HCRCC) to make recommendations regarding Maryland’s implementation of the federal health care reform legislation. The HCRCC contracted with Hilltop to provide research, analysis, staff support, and technical assistance.

As part of its work for the HCRCC, Hilltop developed a financial model—the *Hilltop Health Care Reform Simulation Model*—to estimate the fiscal impact of health care reform on Maryland through the year 2020. Current and future projections about relative costs and savings are necessarily fluid and dependent on the various choices and decisions the state makes in implementing reform. Other variables include the ways in which various components of the delivery system—from the insurance markets to providers and consumers—respond to the reforms as they evolve. The financial modeling tool was created to be dynamic in order to make projections that can be adapted and updated as data become available, as conditions and factors change over time, and as decisions are made by policymakers, employers, and consumers.

Hilltop also staffed the HCRCC and its six workgroups, and drafted the HCRCC’s interim and final reports. The HCRCC’s final report sets forth a blueprint for implementation of health care reform in Maryland and includes an overview of the Affordable Care Act (ACA). The staffing of the HCRCC was transitioned from Hilltop to Maryland’s Office of Health Care Reform when it was created in May 2011.

Hilltop continued to support Maryland’s health care reform initiative through grant writing. These efforts resulted in a \$6.2 million Early Innovator Grant award from the U.S. Department of Health and Human Services (HHS) to lay the foundation for the Maryland Health Benefit



Exchange (MHBE), and a \$27.2 million Level One Establishment Grant award from HHS to fund the establishment of the Exchange.

The ACA requires states to either establish and operate a health benefit exchange by 2014 or participate in the federal exchange. On April 12, 2011, Governor O'Malley signed the Maryland Health Benefit Exchange Act of 2011, which established Maryland's exchange as an independent unit of the state government. The Act also established a Board of Trustees to oversee the MHBE.

Hilltop was commissioned to develop a series of background papers to assist the Board and advisory committees in planning for the implementation of Maryland's exchange. Hilltop produced four background papers for the MHBE: *Navigators, Market Rules and Adverse Selection, Health Benefit Plan Contracting, and Consumer Complaints, Grievances, and the Appeals Process in Maryland.*

Throughout 2011, Hilltop supported the MHBE in the form of providing staff support, writing reports, conducting financial and policy analyses, and drafting regulations to assist in the development and implementation of the MHBE. Hilltop provided support to the MHBE executive director in distilling and synthesizing information gleaned from deliberations of the MHBE Board and advisory committees, advisory committee reports, legislatively mandated studies, and final recommendations of the Board to draft the *Maryland Exchange Board Report to the General Assembly.*

In 2012, with the establishment of the exchange in Maryland law, the Memorandum of Understanding (MOU) that supported Hilltop's work on health care reform between the Maryland Department of Health and Mental Hygiene (DHMH) and Hilltop transitioned to one between the MHBE and Hilltop.

In 2012, Hilltop continued to refine and adjust the *Hilltop Health Care Reform Simulation Model* to assist the MHBE with determining the costs and savings of implementing various provisions of the ACA. Hilltop also provided extensive support to the MHBE as it began implementation; continued to analyze the ACA and conduct analyses of various federal requirements and guidance that were issued pursuant to the ACA; and drafted state regulations for the MHBE. Hilltop also partnered with the MHBE to engage stakeholders and conduct a study of continuity of care policy options to mitigate the impact of coverage transitions between qualified health plans (QHPs) and Medicaid. Hilltop's work informed the MHBE Board's policy recommendations to the Maryland General Assembly, which were then incorporated into the Maryland Health Progress Act of 2013.

In 2013, Hilltop continued to conduct policy and financial analyses for the MHBE; provide analytic support to the MHBE Board of Trustees and committees; analyze the ACA and summarize its key provisions and rules; analyze Maryland legislation; and draft regulations for the MHBE.



Memorandum of Understanding

Hilltop's work for the MHBE is supported by an MOU. This report presents the activities and accomplishments under that MOU, covering April 1, 2014, through April 30, 2015. (This time period will be referred to as the contract period.) All deliverables referenced below were transmitted by e-mail unless otherwise specified and are available upon request.



Financial Modeling and Analysis

During the contract period, Hilltop continued work from the previous contract period studying options for creating a supplemental reinsurance program.

Reinsurance Study: The ACA created a three-year transitional reinsurance program to provide payments to insurance carriers offering health insurance in the exchanges that incur unusually high claims costs for some enrollees. During the previous contract period, the MHBE and the Maryland Health Insurance Program (MHIP), Maryland's high-risk pool, requested that Hilltop study options available to Maryland for creating a supplemental reinsurance program to further offset potential risk for carriers and hold down future premium increases. Hilltop obtained claims and eligibility data pertaining to people who purchase coverage through the individual market from the Maryland Health Care Commission (MHCC). Based on analyses of these data, Hilltop examined various options consistent with federal requirements. Hilltop continued this work during the current contract period and produced a report¹ with estimates of potential costs to the state in 2015 and the likely impact on insurance premiums. One of the options was selected by the MHBE Board to be implemented in Maryland.

Reinsurance Cost Study: In addition to the report discussed above, the MHBE requested that Hilltop estimate the state's costs of a supplemental reinsurance program in 2016, using the methods Hilltop developed in estimating the costs of the 2015 supplemental reinsurance program. This analysis examined options for a supplemental reinsurance program using different attachment points that meet federal requirements. For each attachment point, Hilltop provided estimates for the potential costs to the state and the potential impact on insurance premiums. As the 2016 attachment points are different from those of 2015, the formulas presented in the report were developed to estimate costs and potential effects of those options.²

¹ *State of Maryland Options for a Supplemental Reinsurance Program*, report, June 2014.

² *Estimating Costs of a Supplemental Reinsurance Program in 2016 for the State of Maryland*, report, February, 2015.



Regulations Development and Policy Analysis

During the contract period, Hilltop provided extensive analytic and staff support to the MHBE. Hilltop continued to analyze new federal rules and guidance issued pursuant to the ACA to advise the MHBE on the potential impact on Maryland's marketplace. Hilltop assisted the MHBE by developing regulations and conducting policy analysis on a range of issues. Hilltop managed the MHBE regulations and interim procedures promulgation process, including converting all MHBE interim procedures into regulations and securing ultimate approval of regulations from legislative committees and the MHBE Board of Trustees. Hilltop also served as the MHBE's legislative liaison to DHMH's Office of Government Affairs during the 2015 legislative session, representing the agency at meetings and drafting position letters. Finally, Hilltop continued to provide the MHBE and other state agencies with summaries of federal guidance.

Summaries of Federal Guidance: During the contract period, Hilltop conducted in-depth analysis of major health reform guidance issued by federal agencies. Hilltop then provided summaries of these rules. For proposed rules, Hilltop highlighted items for comment; for final rules, Hilltop highlighted key changes to the regulation since the issuance of proposed rules. The rules that Hilltop summarized are listed below.

- February 24, 2014 Final Rule on the 90-Day Waiting Period Limitation³
- March 10, 2014 Final Rule on Information Reporting for Large Employers⁴
- March 10, 2014 Final Rule on Information Reporting of Minimum Essential Coverage⁵
- March 21, 2014 Exchange and Insurance Market Standards for 2015 and Beyond, Proposed Rule⁶
- May 16, 2014 Rule on Exchange and Insurance Market Standards for 2015 and Beyond⁷
- June 25, 2014 Clarification of the Final Rule on the 90-Day Waiting Period Limitation⁸
- June 26, 2014 Proposed Rule on Eligibility Redeterminations⁹

³ *Overview of the February 24, 2014 Final Rule on the 90-Day Waiting Period Limitation*, April 25, 2014.

⁴ *Overview of the March 10, 2014 Final Rule on Information Reporting for Large Employers*, April 25, 2014.

⁵ *Overview of the March 10, 2014 Final Rule on Information Reporting of Minimum Essential Coverage*, April 25, 2014.

⁶ *Overview of the March 21, 2014 Exchange and Insurance Market Standards for 2015 and Beyond, Proposed Rule*, April 18, 2014.

⁷ *Overview of the May 16, 2014 Rule on Exchange and Insurance Market Standards for 2015 and Beyond*, May 28, 2014.

⁸ *Overview of the February 24, 2014 Final Rule on the 90-Day Waiting Period Limitation*, July 16, 2014.

⁹ *Overview of the June 26, 2014 Proposed Rule on Eligibility Redeterminations*, July 16, 2014.



- June 30, 2014 Final Rule on Tax Credits for Employee Health Insurance Expenses of Small Employers¹⁰
- November 21, 2014 Proposed Notice of Benefit and Payment Parameters for 2016¹¹
- December 19, 2014 Draft 2016 Letter to FFM Issuers¹²
- February 20, 2015 Final Letter to FFM Issuers¹³
- February 27, 2014 Final Notice of Benefit and Payment Parameters for 2016¹⁴

Drafting Public Comment Letters: At the request of the MHBE, Hilltop coordinated the agency's response to two proposed rules: HHS's proposed rule on *Exchange and Insurance Standards for 2015 and Beyond* and the Office of Personnel Management's (OPM) proposed rule on *Establishment of the Multi-State Plan Program for the Affordable Insurance Exchanges*. Hilltop worked with MHBE staff to discuss the issues, synthesize the comments, and draft comment letters on behalf of the MHBE.^{15, 16}

Regulations Development: Hilltop continued to manage the regulation promulgation process, specifically the conversion of interim procedures to regulations, on behalf of the MHBE for all MHBE regulations adopted during 2014 and the first quarter of 2015. This process included gaining staff input; submitting proposed regulations to the Joint Committee on Administrative, Executive and Legislative Review, and Senate Finance and House Health and Government Operations Committees; submitting proposed regulations to the Maryland Register; and submitting a Notice of Final Action adopting the regulations to the Maryland Register. During the contract period, Hilltop finalized the development of the regulations and submitted a Notice of Final Action to the Division of State Documents for publication in the Maryland Register.¹⁷ The regulations were posted in the Code of Maryland Regulations (COMAR) under Title 14 – Independent Agencies, Subtitle 35 – Maryland Health Benefit Exchange.

¹⁰ *Overview of the June 30, 2014 Final Rule on Tax Credits for Employee Health Insurance Expenses of Small Employers*, July 16, 2014.

¹¹ *Overview of the November 21, 2014 Proposed Notice of Benefit and Payment Parameters for 2015*, December 8, 2014.

¹² *Overview of the December 19, 2014 Draft 2016 Letter to FFM Issuers*, January 28, 2015.

¹³ *Overview of the February 20, 2015 Final Letter to FFM Issuers*, April 2, 2015.

¹⁴ *Overview of the February 27, 2015 Final Notice on Benefit and Payment Parameters*, March 6, 2015.

¹⁵ *Comments on Patient Protection and Affordable Care Act; Exchange and Insurance Standards for 2015 and Beyond [CMS -9499-P] (RIN 0938-AS02)*, letter to Marilyn Tavenner from Carolyn Quattrocki, April 21, 2014.

¹⁶ *Comments on Comments on Patient Protection and Affordable Care Act; Establishment of the Multi-State Plan Program for the Affordable Insurance Exchanges Proposed Rule (11-24-2014) (RIN 3206-AN12)*, letter to National Healthcare Operations, OPM from Carolyn Quattrocki, December 23, 2014.

¹⁷ *Regs Submitted and MD Register Website*, e-mail to Gwendolyn Majette from Maansi Raswant, January 6, 2015.

Although the proposed regulations were submitted to the Maryland Register during the contract period, the corresponding Notice of Final Action was not submitted during this period.



Hilltop also drafted QHP certification process and standards regulations, setting out a framework of QHP certification for carriers.¹⁸ These draft regulations were submitted to the MHBE Deputy Executive Director and Interim Director of Plan and Partner Management.¹⁹

Policies and Procedures Development: During the contract period, Hilltop continued to analyze federal guidance and draft policies and interim procedures for the MHBE. Hilltop developed a policy development agenda²⁰ highlighting all areas of MHBE operations that might need additional guidance or notice provided to affected stakeholders through formal policy development. Hilltop solicited feedback from drafted interim procedures and policies related to special enrollment periods²¹ and termination of coverage.²²

Ongoing Policy Consultation and Support: Hilltop provided consultation, conducted policy analyses, and provided support to MHBE staff to help them better understand both federal and state rules and regulations. Hilltop provided a memo addressing the regulation of network adequacy in Maryland.²³ Hilltop also researched a question on dependent coverage through the exchange.²⁴ Hilltop analyzed MHBE interim procedures to determine impact on agency operational processes.^{25, 26} Hilltop conducted the research and provided a summary of the impact of the Supreme Court's ruling on contraceptive coverage to the MHBE, per request from the MHBE General Counsel.²⁷ Hilltop researched questions regarding the large employer mandate²⁸ and the process by which individuals can file a complaint against a carrier in the state.²⁹ Hilltop also researched recourse in Maryland for denial of out-of-network services and drafted a summary of the recourse process.³⁰

Assistance during the Legislative Session: Beginning in January 2015 and throughout the 2015 legislative session, Hilltop, on a weekly basis, analyzed bills to determine their potential effect

¹⁸ *Draft Plan Certification Process Regs_8-29-2014-for MHBE review*, August 29, 2014.

¹⁹ *First Draft – Plan Certification Regulations*, e-mail to Michele Eberle, Jonathan Kromm, and Michelle Wojcicki from Maansi Raswant, August 29, 2014.

²⁰ *MHBE Policy Guidance Agenda_5-5-2014*, May 22, 2014.

²¹ *SEP Interim Procedures_4-1-2014*, April 1, 2014.

²² *Draft Coverage Termination Interim Procedures_4-2-2014*, April 2, 2014.

²³ *Regulation of Network Adequacy in Maryland*, January 30, 2015.

²⁴ *Dependent Coverage Question*, January 30, 2015.

²⁵ *Analysis of captive producer, CSC permit, and eligibility appeals statutory and regulatory language*, e-mail to Jonathan Kromm from Maansi Raswant, September 19, 2014.

²⁶ *Definitions*, July 25, 2013.

²⁷ *RE: Fwd: Effect of the Supreme Court's Contraception Coverage Ruling on the Exchange*, e-mail to Kristine Hoffman from Maansi Raswant, July 9, 2014.

²⁸ *Requests related to employer mandate, NAIC Model Act, and MHCC quality report*, e-mail to Gwendolyn Majette from Maansi Raswant, January 16, 2015.

²⁹ *URGENT - New Question - Carrier appeals rights*, e-mail to Gwendolyn Majette from Laura Spicer, March 13, 2015.

³⁰ *Recourse in Maryland for Denial of Out-of-Network Services*, February 19, 2015.



on the MHBE. This process began with a review of the Governor’s Synopsis for the 2015 legislative session, which occurred before the start of the legislative session.³¹ At the start of the legislative session, Hilltop set up weekly phone calls with the MHBE Director of Policy and Government Relations to provide summaries of the bills listed for hearing during the given week. In preparation for these calls, Hilltop created and maintained a bill tracker system, providing a list of bills for which the MHBE had to prepare a fiscal note, bills that were included in the DHMH legislative liaisons meetings, and other bills of interest to the MHBE.³² This tracker contained summaries for all bills Hilltop was tracking on behalf of the MHBE. Hilltop attended DHMH legislative liaison meetings to provide the MHBE positions on tracked bills; consulted with the Maryland Insurance Administration (MIA) on bills related to both the MHBE and MIA;³³ and provided consultation to the Director of Policy related to various bills.³⁴

Hilltop provided extensive analysis of HB 990, *Maryland Health Benefit Exchange – Qualified Health Plans – Standards*, which aimed to alter the QHP certification standards process. Hilltop drafted a spreadsheet summarizing key provisions; provided thoughts for a fiscal note and a position paper; and provided the associated federal and state legal provisions.³⁵ Hilltop also drafted an Explanation of Impact (EoI) for HB 990.³⁶ Hilltop provided language and information for EoIs for several other bills: SB 471, *Task Force to Study the Provision of Health Care Coverage to Uninsured Marylanders*;³⁷ SB 92, *Health Insurance – Assignment of Benefits and Reimbursement of Nonpreferred Providers – Repeal of Termination Date*;³⁸ SB 416, *Health Insurance – Mandated Benefits – In Vitro Fertilization and Artificial Insemination Procedures*;³⁹ and SB 803, *Health Insurance – Nonpreferred Providers – Assignment of Benefits, Reimbursement, and Fraudulent Insurance Acts*.⁴⁰

³¹ RE: *Synopsis 1 from the Governor’s Office*, e-mail to Carolyn Quattrocki, Jonathan Kromm, and Robbyn Lewis from Maansi Raswant.

³² E.g., *Bill Tracker_2-18-15*, February 18, 2015.

³³ *Introduction of new MHBE Director of Policy and Government Relations and question on two bills*, e-mail to Nancy Egan from Maansi Raswant, January 30, 2015.

³⁴ *HB1290 and SB - Hearings will be Scheduled Thursday, 04/02/15 - Requesting Position ASAP*, e-mail to Gwendolyn Majette from Laura Spicer, March 21, 2015.

³⁵ *HB 990_3-10-15*, March 10, 2015.

³⁶ *(HB0990 – hmh) State Agency Explanation of Impact*, February 19, 2015.

³⁷ *SB0471 - Fiscal Note Information Request to MHHD and MHBE - - - Due ASAP*, e-mail to Gwendolyn Majette from Maansi Raswant, February 23, 2015.

³⁸ *Need Help SB0092 - Fiscal Note Information Request to MA, MHCC and MHBE - Due 01/30/15*, e-mail from Laura Spicer to Gwendolyn Majette, January 28, 2015.

³⁹ *FW: SB0416 - Fiscal Note Information Request to MA, HSCRC, MHBE, and MHCC - Due 02/13/15*, e-mail to Gwendolyn Majette from Maansi Raswant, February 10, 2015.

⁴⁰ *FW: SB0803 - Fiscal Note Information Request to MA, MHCC, MHBE, and Physicians - Due 02/24/15*, e-mail to Gwendolyn Majette from Laura Spicer, February 20, 2015.



Other Analyses and Support

Hilltop provided consultation and staff support to the MHBE and conducted a number of other analyses to support the work of the MHBE.

Staff Support for MHBE Director of Policy: During the contract period, Hilltop provided subject matter staff support and consultation to the MHBE Director of Policy. When a new Director of Policy joined the MHBE in December 2015, Hilltop provided summaries of major legislation and Hilltop reports as background information.⁴¹ Hilltop prepared a list of all reports due to the Maryland General Assembly from December 2011 to December 2017, including legislative reports and Joint Chairmen's Reports (JCRs).⁴² Hilltop provided consultation on the MHBE implementation of Quality Reporting Mechanisms and the extent to which issuers were already submitting quality data to MHCC.⁴³

Network Adequacy and Essential Community Providers (ECPs): In order to develop policies for ECPs and provider network adequacy, the MHBE tasked its Standing Advisory Committee (SAC) Network Adequacy Workgroup with reviewing background materials and developing and assessing various policy options for provider network standards. Hilltop developed a network adequacy project plan that also listed deliverables;⁴⁴ developed background and analytic materials for the Workgroup's review;^{45, 46, 47, 48} and conducted a background analysis/literature review⁴⁹ to be included in the report to be produced from the Workgroup's discussions and Hilltop's research.

Establishment Grant Reporting: Hilltop assisted the MHBE in completing its Biannual Establishment (Level I and II) Grant Report for the CMS Center for Consumer Information & Insurance Oversight (CCIIO) for the reporting period of January 1, 2014, through June 30, 2014. Hilltop gathered information from MHBE staff, Board members, and other publicly available

⁴¹ *Summaries of MHBE Act of 2012 and Health Progress Act*, e-mail to Gwen Majette from Laura Spicer, February 27, 2015.

⁴² *Required MHBE Studies*, April 1, 2015.

⁴³ *Question about 2016 FFM Issuer Certification Crosswalk*, e-mail string to Gwen Majette from Maansi Raswant and Laura Spicer, February 16, 2015.

⁴⁴ *MHBE Network Adequacy Project Plan*, August 13, 2014.

⁴⁵ *Network Adequacy and Essential Community Providers Workgroup: Kickoff Meeting*, PowerPoint Presentation, and *Essential Community Providers/Network Adequacy Workgroup Meeting Agenda*, August 8, 2014.

⁴⁶ *Network Adequacy and Essential Community Providers*, PowerPoint Presentation, June 30, 2014.

⁴⁷ *DRAFT Network Adequacy and Essential Community Providers Workgroup Meeting*, PowerPoint presentation, March 13, 2015.

⁴⁸ *Network Adequacy: Unreasonable Delay Research*, and *Network Adequacy and Essential Community Providers Workgroup Meeting*, April 7, 2015.

⁴⁹ *Network Adequacy and Essential Community Providers: A Report to the Maryland Health Benefit Exchange*, draft preliminary report containing background analysis and literature review, August 8, 2014.



materials to ensure comprehensive documentation for each key activity.⁵⁰ Hilltop prepared a workbook containing the gathered information and submitted it to the MHBE Executive Director.⁵¹

MHBE Annual Report: The Maryland Health Benefit Exchange Act of 2011 requires the MHBE to forward to the Secretary of HHS, the Governor, and the Maryland General Assembly an annual report on the activities, expenditures, and receipts of the MHBE. Hilltop drafted a timeline;⁵² a document that described the reports needed for both the federal government and Maryland and outlined requirements for the reports;⁵³ assisted the MHBE in conducting the research; drafted the 2014 annual report and its exhibits;⁵⁴ worked with the MHBE to revise the report based on comments from staff and the Board; and finalized the report.⁵⁵ After the report was submitted to HHS and questions were received from the Office of the Inspector General, Hilltop assisted the MHBE by drafting the response to and providing supporting documents for a question regarding Hilltop's simulations of enrollment in QHPs and Medicaid.⁵⁶

Tobacco Use Rating Study: The ACA allows health insurance issuers in the individual and small group markets to charge higher premiums to tobacco users. The Maryland Health Progress Act of 2013 required the MHBE and the MIA to study the impact of the ACA's allowance of a tobacco use rating, including its effect on premiums generally, its effect on the affordability and purchase of insurance and access to health care for tobacco users, and any disparate effects on vulnerable populations. The MHBE contracted with Hilltop to conduct this study, which began during the previous contract period and concluded during this period. The final Tobacco Use Rating Study report was presented to the Maryland General Assembly on September 1, 2014.⁵⁷

Data Analysis

Data Sources: Hilltop provided the MHBE with information on current data sources from the MHBE, MHCC, MIA, and Maryland Medicaid that are available for measuring and evaluating network adequacy of QHPs participating in the exchange for the 2014 benefit year.⁵⁸

⁵⁰ *CCIIO Biannual Establishment Grant Report Template-Hilltop*, and e-mail *Biannual Establishment Grant Report Due July 30th*, to MHBE staff, July 18, 2014.

⁵¹ *CCIIO Biannual Establishment Grant Report 012014-072014-Hilltop Master*, July 28, 2014.

⁵² MHBE Annual Report Timeline, October 2, 2014.

⁵³ *Maryland Health Benefit Exchange Federal and Maryland Annual Report Requirements*, October 9, 2014.

⁵⁴ *Annual Report for 12-14-14 and Exhibits*, November 14, 2014.

⁵⁵ *Annual Report with MHBE Revisions 11-25-14 and Exhibits*, November 25, 2014.

⁵⁶ *Department of Health and Human Services, Office of Inspector General's Request for Items #32*, memo and supporting documents to Leslie Lyles Smith from Maansi Raswant, April 11, 2014.

⁵⁷ *Report on Tobacco Use Rating for Health Insurance Policies*, September 1, 2014.

⁵⁸ *Data Sources to Measure Network Adequacy*, memo to Gwendolyn Majette from Laura Spicer, February 18, 2015.



Administrative Support

Throughout the contract period, Hilltop continued to provide administrative support to the MHBE. This support involved arranging logistics for some advisory committee and other public meetings, hosting meetings at UMBC, and attending and taking minutes at Board meetings.

Logistical Support for Meetings: During the contract period (until May 1, 2015), Hilltop continued its logistical support to the MHBE by reserving and paying room rental fees for various MHBE committee and public meetings at the UMBC Technology Center.

MHBE Board Meeting Minutes: Hilltop staff attended all of the open session meetings of the MHBE Board of Trustees, distilled the information presented, and drafted meeting minutes.⁵⁹

Advisory Committee Meeting Minutes: Hilltop staff attended meetings of the MHBE Standing Advisory Committee, Producer Advisory Council, and Network Adequacy and ECPs Workgroup; distilled the information presented; and drafted meeting minutes for committee meetings.⁶⁰

⁵⁹ *Maryland Health Benefit Exchange Board of Trustees Meeting Minutes*, April 15, 2014, May 20, 2014, June 24, 2014, July 15, 2014, August 19, 2014, September 16, 2014, October 21, 2013, October 23, 2014, November 12, 2014, December 16, 2014, January 20, 2015, March 17, 2015, and April, 21, 2015.

⁶⁰ *Maryland Health Benefit Exchange Standing Advisory Committee*, meeting minutes, April 10, 2015.

Maryland Health Benefit Exchange Producer Advisory Council, meeting minutes, March 11, 2014 and April 15, 2014.

Maryland Health Benefit Exchange Essential Community Providers/Network Adequacy Workgroup, meeting minutes, October 10, 2014.





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