

STATE FISCAL YEAR 2023 BUDGET REQUEST STRATEGIC PLAN

OCTOBER 1, 2021



OFFICE OF THE
HEALTH INSURANCE COMMISSIONER

STATE OF RHODE ISLAND

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MISSION

- The State of Rhode Island Office of the Health Insurance Commissioner (OHIC) seeks to improve health care access, affordability, and quality. OHIC does so as it: (1) protects the interest of consumers of commercial health insurance, (2) encourages fair treatment of health care providers by commercial health insurers, (3) improves the health care system as a whole, and (4) guards the solvency of commercial health insurers.



VISION

- OHIC envisions a world where its efforts as a commercial health insurance policy reform and regulatory enforcement agency transform the Rhode Island health care system into one that is accessible, affordable, and high-quality as it improves health outcomes for all Rhode Islanders.

VALUES

- All of OHIC's activities are informed by the following values:
 - **Respect:** OHIC ensures that all those who interact with the office or are affected by the office's decisions are treated with dignity.
 - **Integrity:** OHIC upholds the highest standards of ethical conduct as it adheres to all federal and state requirements while carrying out its statutory responsibilities.
 - **Justice:** OHIC advances policy reforms and takes regulatory actions that result in greater fairness.
 - **Accountability:** OHIC works tirelessly to live up to its commitments.
 - **Collaboration:** OHIC engages a wide array of stakeholders both inside and outside of government in a transparent manner to jointly achieve shared goals.

GOALS

1. Ensure that Rhode Islanders receive adequate coverage for coronavirus disease 2019 (COVID-19) testing, treatment, and vaccinations
2. Leverage the regulatory structure within OHIC to accelerate delivery system reform
3. Develop and implement next generation Affordability Standards
4. Increase behavioral health (BH) care access and ensure parity between BH and physical health care services
5. Begin to demonstrate the effect of the statewide expansion of telehealth services
6. Ensure the sustainability of and impose accountability for cost containment through the Rhode Island Health Care Cost Trends Project



I. ENSURE THAT RHODE ISLANDERS RECEIVE ADEQUATE COVERAGE FOR COVID-19 TESTING, TREATMENT, AND VACCINATION

- OHIC will require standardized data submissions from insurers to monitor compliance with federal and state requirements for testing, treatment, and vaccination related to COVID-19 including but not limited to claims processing and cost-sharing requirements.
- Following receipt of these standardized data submissions, the office will review them and take all appropriate enforcement actions if necessary.
- OHIC will also require ad hoc data submissions if additional information is needed to complete oversight activities.
- **Completion Date:** Ongoing

2. LEVERAGE THE REGULATORY STRUCTURE WITHIN OHIC TO ACCELERATE DELIVERY SYSTEM REFORM

- OHIC will advise the governor and General Assembly on the impact of hospital consolidation.
- The office will also play an integral role in the development and implementation of critical components of a regulatory oversight model aimed at holding any merged entity accountable for improving affordability and improving population health and health equity on a statewide scale including the following components:
 1. Comprehensive price caps
 2. Quality incentive requirements
 3. Advanced value-based payment adoption
 4. Population health and health equity improvement requirements
 5. Regulatory oversight model sustainable funding
- **Completion Date:** June 2023

3. DEVELOP AND IMPLEMENT NEXT GENERATION AFFORDABILITY STANDARDS

- The Affordability Standards are a core component of OHIC's efforts to meet its statutory purpose to improve the health care system by improving the affordability of health insurance and OHIC will continue its regular oversight activities related to them to ensure insurer compliance.
- OHIC will also complete the development and initiate implementation of next generation Affordability Standards that represent an effort to broaden insurer accountability for improving affordability by addressing three substantive areas:
 1. Necessary investment in BH services to ensure a well-functioning continuum of care for Rhode Islanders with BH needs
 2. Accountability for investment in initiatives to improve population health and address social determinants of health
 3. Further initiatives to address total cost of care
- **Completion Date:** June 2023

4. INCREASE BH CARE ACCESS AND ENSURE PARITY BETWEEN BH AND PHYSICAL HEALTH CARE SERVICES

- OHIC will continue implementation of its federal State Flexibility Cycle II Grant that will help the office to enhance its ability to effectively regulate commercial health insurance markets which includes the hiring of a staff person and expert legal consultant assistance to improve access to BH services and ensure BH parity.
- The office will also initiate a market conduct examination, supported by a new principal policy associate position if approved, to assess potential insurer non-compliance with federal and state BH parity requirements.
- Additionally, OHIC will address children's BH network adequacy by systematically reviewing all policy levers available to it to direct insurers toward policies and practices that address the BH needs of children and will engage consumers and providers to discuss and validate the most effective actions that OHIC can take in this area before ultimately acting.
- **Completion Date:** June 2023

5. BEGIN TO DEMONSTRATE THE EFFECT OF THE STATEWIDE EXPANSION OF TELEHEALTH SERVICES

- OHIC will evaluate the effect of and monitor compliance with the amendments to the Telemedicine Coverage Act that went into effect on July 6, 2021 that are reflective of the following elements:
 - Audio-only telemedicine should be covered on a permanent basis.
 - No restrictions on patient location for telemedicine should be in place.
 - Cost-sharing for telemedicine visits should not exceed cost-sharing for in-person visits.
 - Prior authorization requirements for telemedicine should be no more stringent than prior authorization requirements for in-person care.
 - Telemedicine for BH services and primary care services should be paid at the same rate as in-person visits regardless of modality.
 - No restrictions on which provider types can provide telemedicine services within their scope of practice should be in place.
- The office will also make recommendations for additional telemedicine policy reforms as appropriate.
- **Completion Date:** January 2023

6. ENSURE THE SUSTAINABILITY OF AND IMPOSE ACCOUNTABILITY FOR COST CONTAINMENT THROUGH THE RHODE ISLAND HEALTH CARE COST TRENDS PROJECT

- If approved, as authorized by the Health Spending Accountability and Transparency Act, OHIC will implement the Health Spending Accountability and Transparency Program containing two core components that are designed to curb health care spending growth.
- The office will implement a health care cost growth target against which health care spending growth at the state, market, insurer, and provider levels will be measured to ensure transparency in performance and accountability for performance.
- OHIC will also implement an explicit requirement that health care entities whose cost performance exceeds the cost growth target shall submit performance improvement plans and health care entity performance will be disclosed at annual hearings.
- **Completion Date:** June 2023