

State and School Employees Health Insurance Management Board

Minutes of the Standing Monthly Meeting June 26, 2019

The standing monthly meeting of the State and School Employees Health Insurance Management Board convened on Wednesday, June 26, 2019, in Room 139 in the Woolfolk Building located at 501 North West Street in Jackson, Mississippi, at 9:00 a.m. Vice-Chairman Christopher Burkhalter presided over the meeting. A quorum was present.

Voting Members Present

Ms. Laura Jackson, Chairman
Mr. Christopher Burkhalter, Vice-Chairman
Mr. Mike Chaney *(Represented by Mr. Bob Williams)*
Mr. Mark Formby
Mr. Kelly Hardwick
Mr. Ray Higgins
Dr. Andrea Mayfield
Dr. Alfred Rankins

Non-Voting Members Present

The Honorable John Read
- Chairman, House Appropriations Committee

Voting Members Absent

Mr. Larry Fortenberry
Mr. Ray Higgins
Dr. Carey Wright *(Represented by Ms. Sheila Buie)*

Non-Voting Members Absent

The Honorable Gary Chism
- Chairman, House Insurance Committee
The Honorable Eugene Clarke
- Chairman, Senate Appropriations Committee

Department of Finance and Administration Staff Present:

Mr. Richard Self
Ms. Cindy Bradshaw
Ms. Latasha Holmes
Ms. Amanda Murphy
Mr. John Anderson
Ms. Terri Ashley
Mr. Chris Shaman
Mr. Chuck McIntosh

Attorney General's Office Staff Present:

Ms. Romaine Richards, Esquire

Call to Order

The meeting was chaired and called to order by Ms. Laura D. Jackson, Chairman of the Board.

Agenda Item 1: Minutes of the Standing Board Meeting of May 22, 2019

Chairman Jackson announced that minutes of the Board's standing monthly meeting of May 22, 2019, had been provided to all Board members for their review in advance of today's meeting. A motion was made by Mr. Kelly Hardwick for the Board to approve the minutes as presented. Mr. Mark Formby seconded the motion. The motion passed by a 6 – 0 vote, with members Burkhalter, Formby, Hardwick, Mayfield, Rankins, and Williams (designee for member Chaney) voting affirmatively.

Agenda Item 2: Financial Statements

Chairman Jackson recognized Ms. Latasha Holmes, Director of Budget and Accounting with the Office of Insurance, who briefly reviewed the financial statements for the State and School Employees' Life and Health Insurance Plan for the month of May 2019. Copies of the financial statements were provided to Board members for their review prior to the meeting. No further action was needed or taken by the Board.

Agenda Item 3: General Schedule

Chairman Jackson recognized Ms. Cindy Bradshaw, Deputy Director with the Office of Insurance, who briefly reviewed the schedule of major activities and actions to be taken by the Board for the next several months. No further action was needed or taken by the Board.

Closed/Executive Session:

Mr. Chris Burkhalter made a motion that the meeting be closed for the Board to consider going into executive session to discuss potential litigation matters. Mr. Hardwick seconded the motion. The motion passed by a 6 – 0 vote, with members Burkhalter, Formby, Hardwick, Mayfield, Rankins, and Williams voting affirmatively. The meeting was closed and the public was excused from the room.

While in the closed session, Mr. Burkhalter made a motion that the Board go into executive session in accordance with the Mississippi Open Meetings Act to discuss potential litigation matters. Mr. Formby seconded the motion. The motion passed by a 6 – 0 vote, with members Burkhalter, Formby, Hardwick, Mayfield, Rankins, and Williams voting affirmatively.

The Board entered into executive session, at which time Commissioner Mike Chaney joined the meeting by telephone. While in executive session, the Board discussed two matters that involved potential litigation. Mr. Formby made a motion that (1) the Board comply with current

Plan Document rules on appeals and not grant a request from a participant to overturn a binding external review decision of a claim denial, and (2) that the Board comply with State law and uphold its delegation of the day-to-day management of the Plan to the State Insurance Administrator, and not grant a request from a participant to appear before the Board to discuss his personal claims experience. Dr. Mayfield seconded the motion. The motion passed by a 6 – 0 vote, with members Burkhalter, Formby, Hardwick, Mayfield, Rankins, and Williams voting affirmatively. Commissioner Chaney left the meeting prior to the vote.

Chris Burkhalter made a motion that the Board return to regular session. Bob Williams, designee for Member Chaney, seconded the motion. The motion passed by a 6 – 0 vote, with members Burkhalter, Formby, Hardwick, Mayfield, Rankins, and Williams voting affirmatively.

Return to Regular Session:

Upon returning to regular session, the public was invited back into the room. Chairman Jackson announced that the Board had discussed potential litigation matters during the executive session, and stated that the Board had voted to comply with Plan Document rules on appeals and not grant a request from a participant to overturn a binding external review decision regarding a claim denial. Chairman Jackson added that the Board voted to comply with State law and uphold its delegation of the day-to-day management of the Plan to the State Insurance Administrator, and to not grant a request from a participant to appear before the Board to discuss his personal claims experience. Chairman Jackson then read the following statement: "Before we move on to the next agenda item, I would like to briefly address an issue that has been in the newspaper and on social media over the past several weeks regarding the State and School Employees' Health Insurance Plan's coverage for certain cancer treatment. While I cannot comment on specific claims and/or participants due to privacy and the Health Insurance Portability and Accountability Act (HIPAA) concerns, I would like to take this opportunity to clarify for any guests here today that this Board does not review nor make decisions on individual claim matters. We are an administrative board. We do not have medical professionals sitting on the Board, and we are not in a position to evaluate clinical evidence in order to make such decisions. For this reason, we contract with a third party claims administrator, who provides the Plan with the services of physicians and qualified medical review staff to render medical necessity decisions in support of the benefits approved by the Board. If a participant believes that the third party administrator incorrectly denied a claim or requested procedure, he or she has the right to appeal for a full and fair review of that decision. The Department of Finance and Administration's Office of Insurance is delegated with the authority and responsibility for reviewing the appeals process to ensure that the Board's administrative procedures are followed, and that a participant's rights are properly protected. In addition, participants who have questions regarding an adverse decision or the process itself are able to discuss their concerns confidentially with the appropriate staff at the Office of Insurance to hopefully resolve any issues. For any appeals that involve an issue of medical judgement – such as medical necessity, whether a treatment is experimental or investigational, effectiveness, etc. – the participant has the right to have the decision reviewed by an outside nationally-accredited independent review organization. These reviews are conducted by medical professionals credentialed in the specific areas of the requested treatment, and their decision is final and binding. The entire appeal process is

more fully described in the Plan Document which can be found on DFA's website. This process exists to help ensure that only qualified, medical professionals are making clinical decisions regarding claims, not Board members or staff who may be ill-equipped to review and properly evaluate medical records and standards of care. This process also protects patient privacy and ensures compliance with HIPAA, while maintaining a fair and consistent avenue for managing appeals. For the reasons just stated, this Board does not hear appeals on medical claims decisions. And while I certainly appreciate the concern of anyone here today seeking specific answers on a personal claims matter, we have no intention of violating HIPAA, the Board's policies and procedures, or any patient's privacy."

Agenda Item 4: Old Business

There was no old business for the Board to consider.

Agenda Item 5: New Business

There was no new business for the Board to consider.

Adjournment

Chairman Jackson announced that the next standing meeting of the State and School Employees Health Insurance Management Board is scheduled for 9:00 a.m., on Wednesday, July 24, 2019 in Room 139, located at the Woolfolk Building in Jackson, Mississippi.

As there was no further business, the meeting was adjourned at 10:11 a.m.

A handwritten signature in black ink, reading "Laura D. Jackson", is written over a horizontal line. The signature is fluid and cursive.

Ms. Laura D. Jackson
Chairman

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