

**FLORIDA HEALTH MAINTENANCE ORGANIZATION
CONSUMER ASSISTANCE PLAN**

**Board Meeting
Monday, January 25, 2021
2:30 p.m. EST**

**By Teleconference
Call In Number: 844.263.5416 Passcode: 8504251634**

AGENDA

- | | | |
|-------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| I. | Call to Order | John Matthews |
| II. | Antitrust Preamble | John Matthews |
| | <p>We are here to discuss and act on matters relating to the business of the Florida Health Maintenance Organization Consumer Assistance Plan (HMOCAP). We are not here to discuss or pursue the business of our individual member companies. All of us should proceed with caution and awareness of the requirements and prohibitions of federal and state antitrust laws. We should not engage in discussions, either at this meeting or in private conversation, of our individual companies' plans or contemplated activities. We should concern ourselves only with the business of the HMOCAP as set forth in the agenda for this meeting. Only HMOCAP matters may be discussed at the meeting and each company's business plans cannot be discussed.</p> | |
| III. | Approval of October 29, 2020 Board Meeting Minutes
(Attachment "A") | John Matthews |
| IV. | Recommendation of Appointment of Brooke Flaherty-Tiner
to the HMOCAP Board of Directors
(Attachment "B") | John Matthews |
| V. | Status of Potential FLAHIGA Long Term Care Assessments | Jeff Tindall |
| VI. | Other Business | John Matthews |
| VII. | Adjourn | John Matthews |

**FLORIDA HEALTH MAINTENANCE ORGANIZATION
CONSUMER ASSISTANCE PLAN
Annual Meeting of the Board of Directors
Thursday, October 29, 2020 at 10 a.m. Eastern Time
By Teleconference Only**

Board Members Participating

John Matthews, Chairman
Sabin Bass, Vice Chairman
David Schandel, Secretary/Treasurer
Jamie Forrest
Jeff Tindall
Holly Prince

Others in Attendance

Bruce Platt, Akerman LLP
Sheryl Rosen, Akerman LLP
LeShan Smith, Akerman LLP
Toma Wilkerson, Florida Department of Financial Services
Heather Morrell, Florida Department of Financial Services
Leean Chojnowski, Florida Office of Insurance Regulation
Karen Hoight, AIDS Healthcare Foundation
Nancy Giroux, Ultimate Health Plans, Inc.
Edward Maydock, Ultimate Health Plans, Inc.

I. Call to Order

Chairman John Matthews welcomed the attendees and called the meeting of the Board to order.

II. Antitrust Preamble

Plan Manager Bruce Platt read aloud the following antitrust preamble:

We are here to discuss and act on matters relating to the business of the Florida Health Maintenance Organization Consumer Assistance Plan ("HMOCAP"). We are not here to discuss or pursue the business of our individual member companies. All of us should proceed with caution and awareness of the requirements and prohibitions of federal and state antitrust laws. We should not engage in discussions, either at this meeting or in private conversation, of our individual companies' plans or contemplated activities. We should concern ourselves only with the business of the HMOCAP as set forth in the agenda for this meeting. Only HMOCAP matters may be discussed at the meeting and each company's business plans cannot be discussed.

III. Approval of Minutes

Mr. Matthews asked the board if the minutes of the August 25, 2020 board meeting were correct. David Schandel moved to approve the minutes as drafted. Jeff Tindall seconded the motion, which passed unanimously.

IV. Appointment of Board Member

Mr. Platt gave a brief overview of the nomination and appointment process to approve new HMOCAP board members. He requested nominations from member HMOs, and the sole nomination received was that of Eric Johnson, currently chief actuary of AvMed and former deputy commissioner of the Florida Office of Insurance Regulation. Mr. Platt briefly summarized Mr. Johnson's resume provided in the meeting materials. Mr. Matthews moved to present Mr. Johnson's name to the Florida Department of Financial Services for appointment. Mr. Schandel seconded the motion, which passed unanimously.

V. Financial Statements

Mr. Schandel presented the financial statements as of December 31, 2019 and for the first half of 2020. Annual audit expenses were below budget. The only expense category for which expenditures exceeded budget was for legal services required as a result of the long-term care insurance assessment issue. Mr. Platt and Mr. Schandel further explained the presence of unknown factors creating uncertainty regarding the amount of legal services the HMOCAP will continue to require, and therefore it is difficult to predict this expense.

VI. Independent Auditor Report

Mr. Schandel presented the independent auditor's report and financial statements for calendar years ending December 31, 2019 and 2018. It was an unqualified auditor's opinion. Nothing unusual was noted. Ms. Prince made a motion to accept the report. Mr. Tindall seconded the motion, which passed unanimously.

VII. Budget and Proposed Budget

Mr. Schandel next directed the board to a proposed budget for calendar year 2021. He explained the main change from the current budget is the proposed amount for legal fees is increased from \$5,000 to \$10,000 in order to provide a cushion in case unforeseen events arise requiring legal assistance. Sabin Bass moved to approve the 2021 budget as proposed. Ms. Forrest seconded the motion, which passed unanimously. Mr. Platt said that he would work with Mr. Schandel to establish a budget for legal fees that separate those fees associated with the long term care insolvencies.

VIII. Investment Report

Mr. Schandel presented an investment report to the board members. As of June 30, 2020, the HMOCAP had approximately \$4 million invested in the Florida Treasury's Special Purpose

Investment Account ("SPIA"), \$559,979.49 in a Wells Fargo money market account, \$63,269.11 in a Wells Fargo checking account, and \$5.225 million in a group of 24 laddered Wells Fargo CDs.

The interest rates for the SPIA investment averaged a rate of return of 3.1077% during 2020. A change in Florida law prevents the HMOCAP from investing additional funds into the SPIA program. Meanwhile, the HMOCAP has continued investing additional funds in the CD ladder. The rate of return of the CDs currently ranges from 0.3% to 2.75%. All funds invested in CDs remain within the FDIC-insured limit.

IX. Selection of Auditor

Mr. Platt presented a proposal from the HMOCAP's existing auditor Moran & Smith LLP for 2021 reflecting the same services and cost as for 2020. Mr. Platt explained that the HMOCAP's policies and procedures require solicitation of proposals for audit services every three years. 2021 will be the third year, so solicitation will be required for the following year. He explained the board may opt to solicit additional proposals or re-engage Moran & Smith. Mr. Schandel moved to approve the Moran & Smith proposal. Mr. Bass seconded the motion, which passed unanimously.

X. Plan Manager Report

Mr. Platt presented the board with a copy of the HMOCAP's Plan of Operation marked to show proposed changes. He explained the changes are minor, non-substantive edits and asked for a motion to present the revised Plan of Operation to the Department of Financial Services for adoption. Mr. Forrest made such a motion. Mr. Schandel seconded the motion, which passed unanimously.

XI. Long-Term Care Assessment Update

Mr. Tindall provided a brief update regarding the status of the long-term care assessments to be levied against insurers and HMOs. He clarified the assessment will only affect certain HMOs. Mr. Platt explained those affected are HMOs with commercial premiums and whose statutory capital and surplus is not less than \$200 million as of December 31 of the year preceding the year in which the assessment is made.

XII. Review of Plan Manager

Mr. Platt presented a new plan manager contract for 2021. The proposed rate remains unchanged from 2020. The only changes more clearly define the scope of legal services that are not included within the plan management contract. Mr. Platt and additional representatives from Akerman LLP stepped away from their phones for 5 minutes to allow a board discussion in their absence. Following brief discussion, the board voted to approve the 2021 plan manager contract as proposed.

XIII. Office of Insurance Regulation Updates and Issues

Leean Chojnowski stated that the Office of Insurance Regulation had no update.

XIV. Department of Financial Services Updates and Issues

Heather Morrell stated that the Department of Financial Services had nothing to report due to the lack of HMO insolvencies.

XV. Other Business

Mr. Platt informed the board that there is an additional vacancy because Dr. Raed Assar has left Aetna and has, therefore, stepped down from the HMOCAP board. Mr. Platt will be sending request letters to the HMOs asking for nominations to fill the vacancy. He will then request a board meeting to select among the nominees.

XVI. Adjourn

Hearing no further business, Mr. Matthews declared the meeting adjourned.

Dated this ____ day of _____, 20__

David C. Schandel, Secretary/Treasurer
Florida HMO Consumer Assistance Plan

BROOKE F. TINER
814 E. 7TH AVENUE
TALLAHASSEE, FL 32303
(404) 293-8125
brooketiner@gmail.com

Skills Profile

- Attorney with twenty-three years experience in the legal, government relations, and regulatory process at the state level. Direct relationships with Governors, State Legislators, Insurance Commissioners, Medicaid Directors, Attorneys General, and Departments of Health nationally.
- Nineteen years functional experience in health care delivery for large health-care company interfacing with market leaders and heads of network as well as external provider organizations such as medical and hospital associations, and retail federations.
- Proven leadership and decision making skills managing a regional team and supervising individual contributors. Responsible for internal cross functional teams on company wide strategy regarding individual market withdrawals and acquisition of Humana.
- Strong background in legislative and regulatory matters, including analyzing their effect on large organizations, both government and private.
- Ability to adapt to changing environments and develop strategies to accommodate new legal and regulatory requirements.
- Licensed attorney in Georgia since 1993 and Massachusetts since 1994.

Employment History

CVS Health-Tallahassee, Florida

Senior Director, Government Relations, Southeast Region

February 2000-Present

Manage legislative and regulatory activity in the southeast states as part of corporate affairs department.

- Attend industry conferences (Democratic and Republican Attorneys General., Republican Governors Association, National Association of Insurance Commissioners) and support Executive Board members as well as communicate company position.
- Assist business units in external presentations on recent legislative and regulatory developments, achieving business results in sales for the company.
- Managed proposed acquisitions in six states, including state regulatory hearings and relationships with Attorneys General nationally.
- Worked with business leaders and government relations team developing company wide strategy on legislation requiring levels of broker compensation in individual and small group markets. Drafted and proposed alternative legislation with health plan association and defeated negative proposal. Assured similar legislation was not proposed in other key markets which allowed company to continue competitive broker program.
- Passed legislation in key markets while working with outside lobbyists and trade associations instituting consumer protections from out of network charges. Aligned with company position regarding appropriate reimbursement, providing savings to the company and improving consumer experience.
- Positioned company for Medicaid contract extension in target market and provided support upcoming state health benefit plan and Medicaid procurements in current markets and new states.
- Advocated against and defeated legislation removing Long Term Support Services from Managed Medicaid program in key market so that state program remained unchanged for the upcoming procurement.
- Communicated with state regulators regarding decision to exit the individual market and exchange market in four primary states requiring coordination among federal and state government relations teams. Maintained key relationships with regulators in those states.

- Achieved approval of high level regulatory filings working with business units and regulators to resolve issues. Responsible for communications on individual exchange filings in southeast states, negotiating rates to allow company competitive position.
- Negotiated Consent Order with state regulator addressing treatment of individuals in the exchange market involving internal pharmacy business unit, compliance and counsel. Also required outreach to external groups to achieve input on consumer and ethical issues.

**OFFICE OF INSURANCE COMMISSIONER
STATE OF GEORGIA-Atlanta, GA
Administrative Law Judge**

August 1996-February 2000

Hearing officer responsible for promulgation of Rules and Regulations pursuant to the Administrative Procedure Act.

- Advised Commissioner regarding administrative and legal matters and served on legislative implementation committees. Responsible for hearings on uncontested regulatory matters, notice of proposed hearings and reviewing case transcripts.
- Spoke to industry groups regarding current regulatory issues and attended quarterly meetings of the National Association of Insurance Commissioners. Resulted in consistent communication of state position on a national level.
- Coordinated all requests for documents and subpoenas. Managed all individuals reviewing state documents and maintained state and agency requirements in public review of records.

**OFFICE OF INSURANCE COMMISSIONER
STATE OF GEORGIA-Atlanta, GA
Enforcement Attorney**

January 1995-August 1996

Staff attorney representing agency at administrative hearings regarding the acquisition of Georgia domiciled insurance companies, company compliance and agent licensing matters.

- Negotiated settlement of cases, filed pleadings, advised Commissioner, assisted other state agencies in criminal prosecutions.

EDUCATION

SUFFOLK UNIVERSITY LAW SCHOOL, Boston, MA
J.D., May 1993, Class Rank top 30%

BOSTON UNIVERSITY, Boston, MA
B.A., Political Science, May 1989