GROUP INSURANCE COMMISSION MEETING
Thursday, April 17, 2025
8:30 A.M.-10:00 A.M.

Meeting held virtually through online audio-video platform (ZOOM) and accessible on the GIC's YouTube channel.

MINUTES OF THE MEETING

NUMBER: Six hundred and ninety-one
DATE: April 17, 2025
TIME: 8:30 A.M.
PLACE: Meeting held virtually through online audio-video platform (ZOOM) and accessible on the GIC's YouTube channel

Commissioners Present:
VALERIE SULLIVAN (Chair, Public Member)
BOBBI KAPLAN (Vice Chair, NAGE)
MATTHEW GORZKOWICZ (Secretary of Administration and Finance) Designee: Dana Sullivan
MICHAEL CALJOUW (Commissioner of Insurance) Designee: Rebecca Butler
ELIZABETH CHABOT (NAGE)
EDWARD T. CHOATE (Public Member)
TAMARA P. DAVIS (Public Member)
JANE EDMONDS (Retiree)
GERZINO GUIRAND (Council 93, AFSCME, AFL-CIO)
PATRICIA JENNINGS (Public Member)
MELISSA MURPHY-RODRIGUEZ (Massachusetts Municipal Association)
JASON SILVA (Massachusetts Municipal Association)
ANNA SINAIKO, Ph.D. (Health Economist)
TIMOTHY D. SULLIVAN (Massachusetts Teachers Association)
CATHERINE WEST (Public Member)

Commissioners Not Present:
JOSEPH GENTILE (AFL-CIO, Public Safety Member)
EILEEN P. MCANNENY (Public Member)

I. Introduction and Approval of the Minutes

At 8:30 A.M. the Chair started the meeting. The General Counsel announced the Commissioners in attendance. The Executive Director provided an overview of the meeting agenda.

The Chair called for a motion to approve the minutes from the February 27, 2025 meeting. Vice Chair Kaplan motioned to approve the minutes and Commissioner Choate seconded the motion. The General Counsel read the motion and took a roll call vote. The vote was unanimous, with Commissioners West and Davis abstaining.

II. The Executive Director's Report

The Executive Director provided updates to the Commission in lieu of a written report. He reminded the Commission that the GIC has been in a financial deficit from a persistent and significant monthly budget variance. He stated that the Governor filed supplemental budget in early April which contained money for the GIC's budget and it was currently before the House. He assured the Commission that GIC staff had been advocating for prompt passage of this bill, and working closely with the health plans to prepare for the unlikely scenario of disrupted funding. He noted that the current appropriation would fund claims payments only through mid-May. Last, he noted that the House just released their version of the budget for the coming fiscal year.

Commissioner Guirand joined the meeting at 8:42am.

The Chair inquired about the status of filling the open CFO role. The Executive Director said the hiring process is underway and hopes to have interviews soon.

The Vice Chair asked whether the GIC would need to amend its FY26 budget request. The Executive Director stated he did not anticipate the need to amend the FY26 budget request, as the current year's escalating cost trends were accounted for in the FY26 budget request.

The Chair asked for an update on Open Enrollment. The Executive Director stated that members seem to be examining the options more than in a typical year, likely due to rising premiums. He then provided an overview of the Commission's calendar for coming meetings.

III. Strategic Framework: Health Equity Update

Presentation by Michael Bailit, President of Bailit Health about his work with the Quality Measure Alignment Taskforce

Michael Bailit presented on the statewide process and the GIC's involvement in the Quality Measure Alignment Taskforce. He reviewed the core quality measures that payers and providers must use in each global budget risk contract they sign. He presented the "Menu Set" of measures, which are optional, but also lists the set of measures that providers and payers can use. He reviewed additional state taskforces that have been and continue to work on other health equity measures. He noted that the state is doing better collecting on race, ethnicity, and language but there is a lot of room for improvement in other areas.

He reminded the Commissioners that on January 7, 2025, Governor Healey signed Massachusetts General Laws, Chapter 343 into law which makes the Standard Quality Measure Set mandatory for

insurers and providers in contracting. He noted that it was not expected to realize big impacts because there was a high level of voluntary adoption prior to being enshrined in law. A new advisory committee will be formed as well, under the law. He stated that it is anticipated that measure sets will be expanded to other types of contracting.

The Chair asked how the measure set is submitted. Mr. Bailit discussed the submission process in detail. The Chair then asked about Accountable Care Organizations and how the measures apply to them. Mr. Bailit stated that Accountable Care Organizations all have global budget type contracts, at least in part, and the measures would apply to those types of contracts.

Commissioner Edmonds asked how Massachusetts compares to other states regarding the capture of health equity measures. She specifically asked whether there are best practices from other states that ought to be adopted (by Massachusetts). Mr. Bailit stated that while he could not speak to every state's approach to this, he is sure that Massachusetts is at the front of the line in developing data standards regarding health equity, with the exception of a few state Medicaid programs.

Commissioner Edmonds asked about structural and ingrained racism. Mr. Bailit stated that he sees structural and ingrained racism on the federal level but believes that Massachusetts still isn't grappling with core drivers of structural racism. He noted that a particular challenge to equity is that many causes of health inequity are outside healthcare, noting that in Massachusetts there has been a lot of discussion on what should and should not be considered healthcare coverage.

The Executive Director posited that Massachusetts is on the forefront of this because it has been deeply involved in quality work in general.

Mr. Bailit agreed and also said that, in Massachusetts, people know each other and want to work together despite holding different opinions. He emphasized that willingness is a huge piece in making progress on health equity.

Commissioner Choate asked if there is a target date to release some of the results for the health equity work. Mr. Bailit replied that there is currently not a timeline because they hit a data sensitivity road block they are working to overcome.

The Chair asked whether the work will be required in the GIC's Request for Responses (i.e. future procurements). Mr. Bailit explained that the taskforce and measure set is not related to the same law that governs the GIC's procurement process.

Update from Margaret Anshutz, Director of Health Policy and Analytics, on GIC's health equity strategy

Margaret Anshutz, Director of Health Policy and Analytics, gave a presentation on the GIC's health equity initiatives. She started by recognizing that the GIC uses some of the measures that Mr. Bailit presented on, noting that the GIC ties them to financial penalties. She also noted areas of monitoring. The GIC receives progress updated during the yearly stewardship meetings. Specifically, the health equity performance guarantees require that all our plans to have accreditation for health equity from the National Committee for Quality Assurance (NCQA). All current vendors except Mass General Brigham Health Plan (MGB) have achieved this accreditation. The GIC has another specific focus, she

noted, on maternal health outcomes where there are significant health equity gaps, especially for Black people.

The Executive Director asked for Ms. Anshutz to provide the Commissioners with more information on doulas. Ms. Anshutz stated that doulas help with advocacy on behalf of the patient, during pregnancy, delivery, and in the post-partum period. She also provided some specific examples.

Ms. Anshutz continued by discussing some of the deficiencies in the Massachusetts birthing outcomes, noting that C-sections in the Commonwealth are higher than what the Centers for Disease Control (CDC) recommends.

Commissioner Edmonds thanked and commended the GIC staff for the presentation and hard work on the health equity efforts.

IV. Data Warehouse Procurement Recommendation

Lauren Makishima, Data Analytics Manager, presented the procurement team's recommendation of the apparent successful bidder for the data warehouse procurement. She provided an overview of the process and outlined the GIC's priorities in a data warehouse vendor. The procurement team recommended OnPoint Health Data, a nonprofit, as the apparent successful bidder.

The Chair asked what challenges the GIC might face with a new vendor since, she suspected, the GIC will want to move all the data to the new vendor. She asked if Ms. Makishima expects that the costs will be raised due to changing the vendor. Ms. Makishima stated that all of that had been contemplated by the procurement and was built into the bidder's cost proposal.

Commissioner Sinaiko asked if the GIC checks references for vendors. Ms. Makishima stated that the GIC does check references as a standard part of the RFR process. She noted that reference checking can sometimes influence the assignation of best value points.

The Vice Chair asked why Milliman received zero best value points and OnPoint received 5. The General Counsel explained that, typically, best value points are only awarded to one bidder and it is not apportioned between multiple bidders. He also noted that OnPoint would have been the highest scoring bidder, regardless of best value points awarded.

Commissioner Choate left the meeting at 10:00 am.

Ms. Makishima stated that OnPoint provides a more "hands-on" service model and is confident that OnPoint will provide what the GIC needs to grow our analytic capabilities in the long term. She stated that the short-term disruption will allow the GIC to realize its long-term goals.

The General Counsel reminded the Commissioners that there was a change of vendor in the last data warehouse procurement. He noted that the transition from the previous vendor to Milliman (GIC's current data warehouse vendor) had a very short transition timeline, noting that the upcoming transition has a longer runway and should be less disruptive.

Commissioner Davis recommended that the other Commissioners look at OnPoint's website because they are a very impressive company that has done incredible work. She voiced full endorsement and support of the procurement team's recommendation.

The Chair called for a motion to approve the procurement team's recommendation for the apparent successful bidder. Commissioner Davis motioned to approve the recommendation. It was seconded by Commissioner West. The General Counsel took a roll call vote and the motion passed unanimously of the Commissioners voting.

V. Other Business and Adjournment

The Chair called for any additional business. With no Commissioners raising other business, she then asked for a motion to adjourn. The Vice Chair motioned to adjourn and Commissioner West seconded the motion. The vote passed unanimously and the meeting was adjourned.