2012 Current Fiscal Year Report: Consumer Operated and Oriented Plan CO-OP Advisory Board

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1. Department or Agency				2. Fiscal Year
Department of Health and Human Services			2012	
			3b. GSA	
3. Committee or Subcommittee			Committee	
				No.
Consumer Operated and Oriented Plan CO-OP Advisory Board			73637	
4. Is this New During 5. Current 6. Expected 7. Expected				
Fiscal Year?	•		Term Date	
No	_			
No06/18/2010 06/18/20128a. Was Terminated During FiscalYear?8b. Specific Termination Authority		8c. Actual Term Date		
Yes		PL 111-148, Section 1322, Paragraph 3, F		01/31/2012
9. Agency Recommendation for Next FiscalYear			10b. Legislation Pending?	
Terminate		No		
11. Establishme	ent Auth	ority Stat	utory (Congress	Created)
		13.	14.	
Establishment		Effective	Commitee	14c.
Authority		Date	Туре	Presidential?
PL 111-148, Sec			i ypc	
1322	ction		10 Continuing	No
		06/23/20	10 Continuing	
1322		06/23/20	10 Continuing	
1322 15. Description		06/23/20 mittee No orts for	10 Continuing	
1322 15. Description Board 16a. Total Number of Reports 17a	of Com No Rep this Fise	06/23/20 mittee No orts for calYear	10 Continuing n Scientific Pro	
1322 15. Description Board 16a. Total Number of Reports 17a. 0 17b. Clo	of Com No Rep this Fise	06/23/20 mittee No orts for calYear	10 Continuing n Scientific Pro	gram Advisory

Current Next

	FY	FY
18a(1). Personnel Pmts to Non-Federal Members	\$0.	00\$0.00
18a(2). Personnel Pmts to Federal Members	\$0.	00\$0.00
18a(3). Personnel Pmts to Federal Staff	\$0.	00\$0.00
18a(4). Personnel Pmts to Non-Member Consultants	\$0.	00\$0.00
18b(1). Travel and Per Diem to Non-Federal Members	\$0.	00\$0.00
18b(2). Travel and Per Diem to Federal Members	\$0.	00\$0.00
18b(3). Travel and Per Diem to Federal Staff	\$0.	00\$0.00
18b(4). Travel and Per Diem to Non-member Consultants	\$0.	00\$0.00
18c. Other(rents,user charges, graphics, printing, mail, etc.)	\$0.	00\$0.00
18d. Total	\$0.	00\$0.00
19. Federal Staff Support Years (FTE)	0.	00 0.00

20a. How does the Committee accomplish its purpose?

On June 23, 2010, the Comptroller General announced the appointment of a 15 member CO-OP Program Advisory Board to make recommendations to the Department of Health and Human Services ("the Department" or "the Secretary") on awarding loans and grants. The Board as a whole convened three times in 2011 (January 13, February 7, and March 14) to listen to expert panels and members of the public on how best to assure that sustainable CO-OPs are established. The Chair divided the Board into four workgroups to address specific issues in greater detail and formulate proposed recommendations on the following topics: governance, finance, infrastructure, and process, criteria and compliance. The workgroups presented preliminary recommendations for discussion at the February 7 meeting, and the Board incorporated these recommendations in its proposed draft report presented at the March 14 meeting. At the March 14 meeting, the Board also received comments from the public on its draft report and adopted in substance final recommendations. The Board also considered public comments submitted in response to the CO-OP Request for Comment that was issued in the Federal Register on February 2, 2011. It convened for the last time on April 15 to vote on the final report reflecting the substantive recommendations adopted on March 14. What emerged from these discussions is the conviction that fostering the creation of CO-OPs should provide the operational framework for the program. This means that the Department should develop flexible criteria that recognize the diversity of market conditions around the country and enable various models of CO-OPs created and supported by different types of 5 sponsors to develop. It also means that the availability of technical assistance at all stages of the process from loan application to licensure to operation, will be important to the viability of individual CO-OPs and the success of the program.

20b. How does the Committee balance its membership?

The Comptroller General (GAO)selected the members. The selection was based on the statute, which requires them to appoint 15 members from among individuals with qualifications described in section 1805(c)(2) of the Social Security Act--that is, the qualifications for MedPAC. In addition, the statute requires that appointees shall meet ethics and conflict of interest standards protecting against insurance industry involvement and interference. They were selected from [among] outstanding authorities in the fields of health finance and economics; actuarial science; health facility management and reimbursement; and integrated delivery systems. In addition, they were selected from physicians and other health professionals; employers; researchers in health insurance, health services and economics, and outcomes and effectiveness; experts in the area of pharmacoeconomics or prescription drug benefit programs; and representatives of consumers and the elderly.

20c. How frequent and relevant are the Committee Meetings?

Board did not operate in 2012.

20d. Why can't the advice or information this committee provides be obtained elsewhere? This committee is necessary by statute.

20e. Why is it necessary to close and/or partially closed committee meetings?

All four meetings were open to the public.

21. Remarks

The Board was terminated on January 31, 2012 and did not operate at all in 2012. The FACA operated with unusual speed and intensity and provided recommendations within 4 months of first convening.

Designated Federal Officer

Anne Bollinger DFO Committee Members Start End Occupation

Member Designation

Brosseau, James	06/23/2010	01/31/2012	professor	Representative Member
Buchanan, Herbert	06/23/2010	01/31/2012	COO	Representative Member
Buck, David	06/23/2010	01/31/2012	physician/professor	Representative Member
Carlyle, David	06/23/2010	01/31/2012	physician	Representative Member
Christianson, Jon	06/23/2010	01/31/2012	University of Minnesota	Representative Member
Curtis, Rick	06/23/2010	01/31/2012	President of the Institute for Health Policy Solutions	Representative Member
Feezor, Allen	06/23/2010	01/31/2012	Deputy Secretary of the North Carolina Department of Health and Human Services	Representative Member
Gardiner, Terry	06/23/2010	01/31/2012	Policy Director - small business	Representative Member
Haugen, Patricia	06/23/2010	01/31/2012	Coordinator for National Breast Cancer Coalition	Representative Member
Novak, Donna	06/23/2010	01/31/2012	Nova Rest Consultin	Representative Member
Oemichen, William	06/23/2010	01/31/2012	President and CEO - Cooperative Network	Representative Member
Pramenko, Michael	06/23/2010	01/31/2012	physician	Representative Member
Size, Tim	06/23/2010	01/31/2012	Executive Director - Rural WI Health Cooperative	Representative Member
Stanley, Margaret	06/23/2010	01/31/2012	retired	Representative Member
Yondorf, Barbara	06/23/2010	01/31/2012	President - Yondorf and Associates	Representative Member

Number of Committee Members Listed: 15

Narrative Description

The committee will foster the creation of qualified nonprofit health insurance issuers to offer qualified health plans in the individual and small group markets.

What are the most significant program outcomes associated with this committee?

Checked if

Applies

	, appliee
Improvements to health or safety	
Trust in government	
Major policy changes	\checkmark
Advance in scientific research	
Effective grant making	
Improved service delivery	
Increased customer satisfaction	\checkmark
Implementation of laws or regulatory	
requirements	1.1.1
Other	

Outcome Comments

The Advisory Board endorsed four major principles for awarding loans and grants that inform all of the recommendations: (1) consumer operation, control, and focus must be the salient feature of the CO-OP and must be sustained over time; (2) solvency and the financial stability of coverage need to be maintained and promoted; (3) CO-OPs should encourage greater care coordination, quality and efficiency to the extent feasible in local provider and plan markets; and (4) first loans should be rolled out as expeditiously as possible (by the end of 2011) if the CO-OPs are to compete in the Health Benefit Exchanges in the critical first open enrollment period (2014).

What are the cost savings associated with this committee?

	Checked if Applies
None	\checkmark
Unable to Determine	
Under \$100,000	
\$100,000 - \$500,000	
\$500,001 - \$1,000,000	
\$1,000,001 - \$5,000,000	
\$5,000,001 - \$10,000,000	
Over \$10,000,000	
Cost Savings Other	

Cost Savings Comments

What is the approximate <u>Number</u> of recommendations produced by this committee for the life of the committee?

42

Number of Recommendations Comments

The Advisory Board submitted 42 recommendations endorsing the four major priciples above.

What is the approximate <u>Percentage</u> of these recommendations that have been or will be <u>Fully</u> implemented by the agency?

0%

% of Recommendations Fully Implemented Comments

What is the approximate <u>Percentage</u> of these recommendations that have been or will be <u>Partially</u> implemented by the agency?

% of Recommendations Partially Implemented Comments

Does the agency provide the committee with feedback regarding actions taken to implement recommendations or advice offered?

Yes No Not Applicable

Agency Feedback Comments

What other actions has the agency taken as a result of the committee's advice or recommendation?

Checked if Applies

Reorganized Priorities	~
Reallocated resources	
Issued new regulation	\checkmark
Proposed legislation	
Approved grants or other payments	\checkmark
Other	

Action Comments

Is the Committee engaged in the review of applications for grants? No

Grant Review Comments

Not applicable.

How is access provided to the information for the Committee's documentation?

	Checked if Applies
Contact DFO	 ✓
Online Agency Web Site	\checkmark
Online Committee Web Site	×
Online GSA FACA Web Site	\checkmark
Publications	\checkmark
Other	

Access Comments

http://cciio.cms.gov/resources/co_op/index.html#coopp