Update on and Board Authorization for the Health Connector's Involvement in Emergency Efforts Relating to COVID-19 Pandemic (VOTE)

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Overview

The purpose of this presentation is to brief the Health Connector’s Board of Directors and obtain their vote authorizing, the Health Connector to undertake activities in support of addressing the Commonwealth’s COVID-19 pandemic emergency.

• In light of the state of emergency resulting from the COVID-19 pandemic affecting the Commonwealth of Massachusetts, the Health Connector has been asked to play a supporting role in activities designed to stem the spread and impact of COVID-19

• Given the Health Connector’s experience in IT contracting, system integration, contact center procurement, and general project and contract management, the Health Connector can provide needed services to support COVID-19 contact tracing activities, while continuing to carry out its core Exchange responsibilities and functions
Today’s Discussion with the Health Connector’s Board of Directors

Today’s board discussion relates to the Health Connector’s support for state Command Center efforts in contact tracing, but is not a review of contact tracing approach.

• Multiple means of support for contact tracing are under consideration
• The Massachusetts Department of Public Health (DPH) will be the lead agency for identifying epidemiological system interfaces and tracing protocols.
• Staff working for partner organizations will be responsible for implementing these protocols.
• The Health Connector is positioned to support some essential needs that underlie any attempt to create a large-scale, automated contact tracing effort

...but the Connector Authority lacks standing to comment upon the design and protocols of tracing efforts per se
Background

On March 10, 2020, Governor Baker declared a state of emergency in response to the spread of the 2019 novel coronavirus, which causes the disease COVID-19, in the Commonwealth.

- The Governor quickly established a COVID-19 Command Center (the “Command Center”), headed by the Secretary of the Executive Office of Health Human Services, and Health Connector Board Chair, Marylou Sudders, from which the Commonwealth’s response is being coordinated.
- COVID-19 spreads from person to person via respiratory droplets, often when an infected individual coughs or sneezes. The spread of COVID-19 poses significant risks to the Commonwealth, including to the health and welfare of its residents and to its health care system, including providers of health care services and the institutions that pay for it, among them the health insurance issuers that sell coverage through the Health Connector and throughout the merged market.
Containing the Spread

Evidence from other countries facing COVID-19 suggests that a multi-pronged strategy is most effective at containing the outbreak and reducing the spread of infection.

• This includes social distancing, widespread testing of symptomatic individuals, and effective and appropriate quarantining of those who are confirmed to have COVID-19 or who have had contact with such individuals.

• A critical piece of such a strategy is “contact tracing,” a technique of identifying those infected with the disease and those with whom they have had contact, and monitoring those individuals to ensure they are tested immediately and otherwise given appropriate care, including, if appropriate through being quarantined.

• Currently, in Massachusetts, contact tracing occurs through local Boards of Health, who coordinate with the Department of Public Health ("DPH") to track diseases through DPH’s Massachusetts Virtual Epidemiology Network ("MAVEN"), the system of record for disease case tracking in the Commonwealth. The Command Center, in conjunction with DPH, has determined that Massachusetts must immediately and significantly supplement its current contact tracing capacity. It is approaching multiple means of doing so.
The Requested Role of the Health Connector

The Command Center has asked the Health Connector to play an enabling role with regard to key infrastructure and contracts. Given its experience in IT contracting, system integration, contact center procurement, and general project and contract management, the Health Connector is capable of providing important services to support expanded contact tracing capacity.

- Specifically, the Health Connector would contract for three categories of service: call center, additional qualified contact tracing personnel, and general project management.
- The current expectation is that the Health Connector will work with outside vendors to provide call center services, including a CRM solution and the integration of same with DPH’s MAVEN case tracking system.
- The Health Connector would also contract for contact tracing support staff, including staff to operate the call center.
- The Health Connector would contract to provide additional project management and support staff.
- These activities necessarily also entail contract and project management work by certain key Health Connector staff.
The Health Connector’s Role (Cont’d)

The Command Center is working closely with the Commonwealth’s Executive Office of Administration and Finance to arrange the financing necessary to carry out these activities.

• The Health Connector may need to pay directly for some contract services during the initial standup period
• Building out this contact tracing capacity is of utmost urgency and exceptionally time-sensitive
• For the Health Connector to provide the contact tracing support services described above is consistent with the vital maintenance of the Commonwealth’s entire health care system
• This includes the merged market in which the Health Connector operates, and MassHealth, an agency with whom the Health Connector shares not only significant population and major systems, but also the mission of serving as a safety net for individuals who are not otherwise able to access the means of paying for health care
The Health Connector’s Actions to Date and Board Need Going Forward

In the last week, the Health Connector has been in active discussions with the Command Center, the Department of Public Health, and others regarding need for expansion of contact tracing capacity.

- The Health Connector’s General Counsel has determined that the Board may authorize the Health Connector to undertake these activities, as necessary for the maintenance of the Massachusetts health care system, including the Health Connector itself and its close partner MassHealth, under M.G.L. c. 176Q s. 2(e) and 3(m)

- The Health Connector has been laying the groundwork on an emergency basis to support new call center capabilities and contractual vehicles for necessary personnel, as well as project support staffing
The Health Connector’s Actions to Date and Board Need Going Forward (Cont’d)

The contact tracing effort has been proceeding at a pace that is unprecedented – near real-time in some of its demands – and highly fluid, as each day brings deeper awareness of our shared situation and necessary supports

• The Health Connector expects to update the Board regularly on COVID-19 support activities, as well as matters relating to all ACA Exchange functions – which will continue uninterrupted
• COVID-19 support activities will be tracked in separate budgets and accounts from routine ACA Exchange activities
The Health Connector’s Actions to Date and Board Need Going Forward (Cont’d)

The Health Connector executive team is asking for a temporary refinement of Section 6.2 of the Health Connector’s by-laws in order to maximize responsiveness to the current emergency

• Section 6.2 of the Health Connector By-Laws currently limits the Executive Director’s ability to execute contracts that are worth more than $15,000, by either requiring five days’ notice to the board before execution or, if more than $250,000, requiring formal Board vote

• The Health Connector executive team is asking instead that, upon confirmation of need by our Board Chair, and approval as to budget from the Secretary of Administration and Finance or his/her designee contracts be allowed to proceed
Contracts Summary

The Health Connector currently anticipates executing contracts in the following areas:

- Contact tracing and other social support personnel
  - Following such protocols as are stipulated by the Department of Public Health, working in coordination with Local Boards of Health

- Call center infrastructure and CRM system support for contact tracer workforce
  - Exchanging data with DPH’s MAVEN epidemiological system of record

- Project management support for contact tracing efforts

- Interagency Service Agreements (ISA’s) as necessary between Connector, Department of Public Health, EHS, or others as necessary
The Health Connector’s Enduring Commitment to its Core Exchange Mission

The Health Connector will ensure that its core exchange functions and responsibilities continue to be executed with excellence.

• Throughout the Health Connector’s engagement in contact tracing support efforts, the agency will fully discharge its duties to its membership and to the Commonwealth in its program and policy roles as a state-based Exchange

• In recent weeks, beyond its standard Exchange operations and activities, the Health Connector has executed a variety of actions, to ensure that Massachusetts residents currently in Health Connector coverage, as well as residents that will newly need Health Connector coverage, continue to be well served and supported

• Health Connector staff will continue to apprise the Board of its Exchange activities during the COVID-19 pandemic that are not related to contact tracing supports
Health Connector executive staff recommend that the Board vote to waive the requirements in Section 6.2 of the By-Laws requiring five days’ notice for contracts valued at more than $15,000 and up to $250,000, and Board vote for contracts valued at more than $250,000, for any contract determined to be necessary by the Executive Director to carry out the Health Connector’s responsibilities in support of Command Center contact tracing support needs, as described in this presentation, provided that the Chairperson or the Chairperson’s designee has also determined that such contract is necessary, and provided further than the Secretary of Administration and Finance or the Secretary’s designee has approved of any planned expenditure associated with such contract.