

- Members reviewed and approved the meeting minutes and short summary of the May 26, 2009 meeting.
- Members provided updates on the following:
 - Transition of dual-eligible enrollees to Medicaid
 - Impacts of premium increases on Basic Health's financial sponsorship program
 - Potential access issues resulting from the transition of individuals from Basic Health to Medicaid
 - Federal health reform proposals and impacts on projected caseloads
 - The Governor's support for SCHIP and Medicaid expansions
 - Impacts of program cuts on GA-U clients
 - The stress being put on the health care safety net, including community health centers
 - Family planning centers as referral points
 - MaryAnne Lindeblad's appointment to the Leadership Institute
- Members discussed policy options and identified a number of principles that any insurance product or program should have:
 - Agencies and programs need to adopt standard definitions, e.g., how income is defined.
 - There is a need for more administrative simplification efforts to help people enroll in programs in which they are eligible.
 - Language access services are necessary to help individuals enroll, navigate, and have better experiences with the health care system, e.g., insurance navigators, health care navigators, interpreters, translated materials.
 - All public programs need a single name and point of entry. A state-level exchange could be used as this single point of entry.
 - There is a need for more coordination between the state and local community-based partners that provide outreach.
 - Outreach efforts need to be simple.
 - Issues of stigma need to be addressed.
- The next meeting of the health insurance advisory committee is Thursday, August 13 from 1-5 p.m. in Tumwater.