



## Board of Directors Meeting

<b>Date:</b> Wednesday September 11, 2013	<b>Building:</b> 81 East 7th Street, St. Paul, MN 55101
<b>Time:</b> 1:00 – 3:00 pm	<b>Conference Room:</b> 1st floor atrium
<b>Attendees:</b> Thompson Aderinkomi, Pete Benner, Brian Beutner, Kathryn Duevel, MD, Tom Forsythe, Commissioner Jesson, Phil Norrgard	
<b>Staff:</b> April Todd-Malmlov, Carley Barber	

### Topics:

<b>Welcome and any new business</b> Brian Beutner, Chair	Brian welcomed everyone and noted that this is the first meeting in our new location. Please note we are behind the DHS firewall so some websites, especially social networking sites, may be blocked.
<b>Customer story</b> Julie Teslow from Harmony, MN (phone)	<p>Brian Beutner, Chair, reminded the Board that we do these customer stories to keep us grounded in the purpose of MNsure, which is to ensure that every Minnesota resident and small business, regardless of health status, can easily find, choose, and purchase a health insurance product that they value and does not consume a disproportionate share of their income.</p> <p>Julie Teslow from Harmony, Minnesota joined us by phone to share her story. She thanked the Board for inviting her to speak and allowing her to participate by phone, as she lives far away and had appointments in the morning and afternoon. She has been a massage therapist for 19 years and feels her career has been a gift.</p> <p>Julie will be 62 next month. She is a college graduate. Early in her career she taught high school science. Realizing 21 was too young to teach high school students, she left that profession for a time. She waited tables. She worked in direct care at Saint Peter Regional Treatment Center with the geriatric mentally ill and profoundly mentally impaired and non-ambulatory. She became the wife of a Vietnam vet who used the GI Bill to become a college graduate. He worked as a guard at the Minnesota Security Hospital in Saint Peter. Julie became an at home mother when they had a son, and later, a daughter.</p> <p>When the children were three and five, her husband became ill and did not get better. They had state employee health insurance, which was very good. When the children were five and seven, Julie lost her husband to pancreatic cancer. She was left to raise their two children on her own.</p> <p>Their daughter has a rare and severe condition that causes her to spontaneously dislocate joints. For example, she could dislocate her fingers typing on a keyboard. It is a chronic condition and she is in constant pain. She has had to relearn to walk six times to avoid a power wheelchair. Over the years there were</p>

many doctor visits involving a lot of driving. There were big emotional and financial impacts. Julie also dealt with Social Security, which she found interesting.

Over time she was finding that health insurance kept costing more and more. She checked into other options and found that staying on the State of Minnesota insurance (through COBRA) was still the best option for the coverage her family needed. However, she was becoming insurance poor.

Julie has a friend who learned about MNsure at a meeting in town and suggested Julie look into it. The MNsure calculator shows she will be paying roughly \$100 per month, which is much better than the \$500 per month she is currently paying. She will have an extra \$6000 in her pocket annually to help her do the things she has not been able to afford to do. She is also now Medicaid eligible.

Julie is worried about the application process. She found the website hard to use and feels we will lose people if we do not fix it. As she is now moving to Medicaid she is hoping for a smooth transfer as she cannot be caught without insurance.

Many of her massage customers are uninsured. They are skeptical and do not know about MNsure. She has been trying to help educate them. She urged the Board to keep it simple.

**Approve August 21<sup>st</sup> meeting minutes**

Brian Beutner,  
Chair

Phil Norrgard moved to approve the August 21<sup>st</sup> meeting minutes. Commissioner Jesson seconded and the minutes were approved.

There was a closed meeting on September 4<sup>th</sup> concerning one aspect of the negotiations with the carriers about the carrier business agreements to be entered with each carrier that chooses to offer products on MNsure. The contracts needed to be in place prior to the carriers publically releasing information about those products. Now that the carrier business agreements have been signed those meeting minutes are now able to be made public. Phil Norrgard moved to approve the September 4<sup>th</sup> meeting minutes. Commissioner Jesson seconded and the minutes were approved.

**Final appeals rule**

**MNsure operations update**

April Todd-Malmlov,  
MNsure Executive Director

April Todd Malmlov, MNsure Executive Director, provided an operational update.

**Federal Reviews** - Since the last Board meeting we have cleared our Federal Implementation Review of Plan Management. We also had our ORR (Operational Readiness Review) earlier this month. It was mostly an IT review with partners from a number of Federal agencies. We still need to conduct final end-to-end testing, connecting to the Federal hub, as is required by all states. This testing will take place at the end of the month (date to be determined). Tests like that usually take place late at night and/or on the weekend. It will be done in a test environment. Brian Beutner advocated for trying to schedule it as early as possible. We also cleared the 2<sup>nd</sup> review from IRS.

**Assister Training** - Some of the assister training has begun and some will be conducted at the end of the month. Most of the training is around privacy and security and "ACA (Affordable Care Act) 101". The systems training will be conducted closer to October 1<sup>st</sup> so they are trained on the actual system that will

be used. We are giving as much lead time as possible.

**MNsure Website** - With the publication of the rates and plans, some of the MNsure website pages have changed. The calculator has been replaced by rates. This is how the site will exist from now until October 1st so we can put our IT resources to better use working on the system.

### **Final Appeals Rule**

Mike Turpin, General Counsel, joined the meeting to present recommended modifications to the proposed final appeals rule.

On July 22<sup>nd</sup> we solicited public comment on the proposed appeals rule. The public comment period closed on August 13<sup>th</sup>. On August 30<sup>th</sup> we received the final publication of the Federal exchange rules, which included rules on appeals. We wanted to take that into account, as well as the feedback we received from stakeholders such as the public at large, advocacy groups, other state agencies, etc.

The rules relate to the procedures available for individuals who have filed an appeal, including how they file an appeal on an eligibility determination. The rules differentiate between some of the programs available through MNsure and other determinations that are made by DHS (the Department of Human Services), such as MinnesotaCare and MA (Medical Assistance) eligibility determinations. The rules provide a path for how they can be resolved through the appeals process.

All modifications were identified in the materials presented to the Board. There were 13 modifications that Mike specifically reviewed with the Board.

Mike will provide to the Board a summary of all stakeholder comments, and noted that some comments were not incorporated into the rule while others may have suggested specific language which was not accommodated, but the concept raised by the comments was addressed by the modifications.

We are developing the public facing FAQs for the appeals process that will include step by step instructions and other relevant information for consumers.

The final appeals rule must be approved by the MNsure Board and approved by the Legislature. However, since the legislature is out of session the language will be forwarded to the Legislative Oversight Commission. There will be a ten day period where the majority of the members of each legislative body may request additional information. After the ten days without comment from the majority of members of each legislative body it will become effective.

Pete Benner moved to approve the final appeals rules as presented. Tom Forsythe seconded and the motion carried.

### **Tribal Consultation policy**

The Tribal Consultation Policy was carried over from the last meeting. Approval of the policy was put on hold until the second of two scheduled meetings with tribal health directors and tribal leaders occurred. That meeting took place. No

Brian Beutner,  
Chair

substantial changes were made to the policy. There are some minor language changes on the last page that came from Tribal Health Directors and members of the Board in the last meeting.

Commissioner Jesson moved to approve the Tribal Consultation Policy. Kathryn Duevel approved and the motion carried.

**Advisory  
committee  
applications  
update**

April Todd-  
Malmlov,  
MNSure  
Executive  
Director

In the last meeting, Thompson Aderinkomi, Pete Benner and Kathryn Duevel volunteered to identify recommended committee membership for the full Board's approval at the September 25<sup>th</sup> meeting. Thompson provided a high level overview of their review process.

The first round of applicants, while good, did not provide the diversity desired. The call for applicants was re-opened at the request of the Board, and a purposeful effort was made to seek out additional potential members from diverse groups that are anticipated to be served by MNSure. The response was not as we had hoped, as the distribution did not change much among the second round applicants. However, overall it is a very good group of applicants. Applicants took time and provided thoughtful answers.

After discussion about whether or not to open the call for applicants a third time, it was decided we would move forward in the selection process with the applications we have. The main discussion points included:

- If we are not reaching agreement on members that will be an indication that further outreach is needed and we should remain flexible on that.
- This effort is an indication that advisory committees may not be the only or best way to engage some populations.
- We want to be respectful of those who applied and not make them wait longer.
- We expect the members of the committees will provide a collective voice.
- Commissioner Jesson noted that public program enrollees are expected to constitute two-thirds of people who initially come through the exchange and many of them come from communities of color.

**Infrastructure  
grants for  
outreach**

Brian Beutner,  
Chair

Mr. Beutner reviewed the background and concerns that have been expressed publically and by the Legislative Oversight Committee about the Infrastructure Grants for outreach projects that were announced after the last Board meeting.

**Background**

Engaging consumers in what we are offering is critical to our success. We are doing that through navigators, in-person assisters, certified applications counselors, brokers, etc. We have over 300 organizations committed to being assisters. We have over 1,800 brokers in the process of being trained to help consumers. We have allocated \$11 million in enrollment-based funding to encourage these parties to help get new consumers enrolled in a health insurance program.

While putting these assistance programs together, MNSure staff heard from some of these organizations that while anxious to help do this work, they did not have

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the infrastructure needed to do best accomplish what they could do in providing outreach to the communities they serve.. We allocated \$4 million to provide assistance to these organizations in the form of infrastructure grants to help them build the capacity to reach out to the uninsured in the communities they serve. We released an RFP to outline how these funds should be used to create new capacity to inform those without health insurance about MNsure. We received 109 grant applications requesting \$18 million of funding. Thirty recipients were selected and announced on August 23<sup>rd</sup>. Staff is in the process of obtaining final required information for contracting with each of these designated groups.

### Concerns

Concerns have been raised about the initial designation of 30 organizations. The Legislative Oversight Committee raised concerns that there were no African Americans involved in the process of selection and that certain legacy institutions were overlooked. There was also concern that the same old organizations that may not have been effective in the past are part of the process.

Commissioner Jesson confirmed there are gaps, particularly for African Americans, where disparities exist. She noted that just getting MNsure up and running quickly is a huge effort. We know there will be glitches and we need to be able to address and correct them quickly. We have an opportunity to do that.

### Selection Process

Ms. Todd-Malmlov reviewed the selection process used to select the recipients and was discussed. Key points included:

- The process that staff went through was intended to have as broad of a reach as possible. The criteria used was logical and followed the RFP but did not accomplish what we wanted.
- We have to acknowledge it is impossible to please everyone with limited resources and a surplus of very good applications.
- The staff made a good faith effort, but some of the ways to enter communities were missed. It was agreed the gaps exist.
- The suggestion was made to look at what DHS and the Department of Health are doing on the Communities of Health initiative and use their learnings.
- We may have missed an opportunity for outreach in the mental health community.

### Summary Statistics

Ms. Todd-Mallov explained that because contract negotiations are underway, the applications cannot be made public, but the summary statistics provided to the Legislative Oversight Committee were shared:

Geographic distribution among the grant recipients:

- 10 – twin cities metro
- 7 – greater MN
- 7 – metro and greater MN

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- 6 – statewide focus

Racial/ethnic distribution among the grant recipients:

- 6 applications had specific plans to address African Americans
- 6 applications had specific plans to address Hispanics
- 5 applications had specific plans to address American Indians
- 4 applications had specific plans to address Asians
- 4 applications had specific plans to address new immigrants

In addition, many organizations were coalitions with a multitude of organizations within them.

### Options

The possibility of awarding supplemental grants to address the perceived gaps in communities was offered, with two options for funding. The options and some key points made about each option include:

1. We have savings of \$750,000 from various sources that we would be able to reallocate immediately without Federal approval.
  - o This funding comes from multiple areas. A few of the larger items were online training and consumer testing. The online training ended up being less expensive than anticipated.
  - o Since the system is coming in later than anticipated, some of the consumer testing will come later as well and can be paid for from future Federal grants funds, freeing up existing funds immediately.
2. Within the MNsure funding stream, we've allocated \$7 million to "per enrollment" payments. While we could reallocate funds from this performance based pool, concern was expressed by Board members that we did not want to prospectively reduce funds that will be directly tied to having successfully brought a person currently without health insurance into a plan providing coverage. It was noted that starting October 1<sup>st</sup>, staff will be able to see the rate at which those funds are being used based on enrollment. If we anticipate that the full \$7 million will not be used in 2013, we could reallocate some additional funds shift them into another round of grants at a later time.
  - o Ms. Todd-Malmlov indicated she would like to get some experience first and see if there will be funds available from the \$7 million pool. We do not want to overcorrect. Others agreed.
  - o There is already public confusion. Our biggest challenge will be the first 6 - 8 months and we should make as much money as we can available as soon as possible.

It was noted and discussed that the up to \$750,000 could be made available immediately to address the concerns. That did not exclude the possibility of also pursuing the second option to target populations not being effectively served during the start of open enrollment.

Note: Grant funds were also taken into account; however, our grant funds cannot supplant other grants.

### Decision

Phil Norrgard moved to repurpose \$750,000 and make it immediately available for infrastructure and outreach grants. Pete Benner seconded the motion.

There were questions and further discussion before a vote. Key points included:

- Out of 109 applications there were many great applications from organizations we were not able to fund. The additional organizations to be awarded grants will be selected from those who have already applied.
- There will still be organizations we will be unable to fund.
- We can afford up to \$750,000. We do not need to commit to awarding the entire \$750,000.
- The amounts of the 30 grants awarded range from \$2,000 to \$500,000. Individual applicants could receive \$2,000 to \$200,000. Coalitions could receive up to \$500,000. There is also a negotiation process, which is taking place now, so the initial award amount of \$4 million may change and free up additional funds.
- If additional grants are awarded there will also be a range, so it is hard to say how many new grants we would be able to award.
- Thompson would have liked a quick analysis on the gap in the applicant pool.
- Tom would have liked to see where the money is coming from by line.
- Unsure, from a legal perspective, how we can operate if we do not want to decide now and cannot wait until the next scheduled Board meeting on September 25<sup>th</sup>. It may not be legally possible to call an emergency meeting before September 25<sup>th</sup> to further consider this issue.
- Phil Norrgard felt we should vote today to operate in good faith with our partners. The longer we take to decide, the less time they will have to do the work we want them to do.
- In the future, the Board will be more involved with the process up front and avoid voting because of a time crunch.

Brian Beutner restated Phil Norrgard's motion with the additional input. The revised motion "to reallocate up to \$750,000 to be available immediately against the open RFP to the existing applicant pool that has responded to the RFP." All Board members were in favor. None were opposed. The motion carried.

### Discussion of public comment policy

Brian Beutner,  
Chair

There are formal ways to communicate with the Board, such as our website and the Advisory Committees. The Board discussed additional ways to be more accessible for public comment going forward. There will also be times where we want to hear from stakeholders as we are preparing to discuss or debate an issue.

Suggestions included:

- Add 30 minutes of public comment as a standing agenda item, perhaps before the break. Not at the end of the meeting.
- Holding these meetings at other locations in the community.

The Board requested from the staff a summary of social media input and to anticipate future decisions and allow time for public comment prior to those

decisions being made.

Ralph Crowder from Minneapolis, a member of the audience, asked to speak. He was given a few minutes to share his thoughts with the Board. He described himself as an uninsured African American male.

- Ralph attended the Legislative Oversight Committee meeting held the previous day and had thoughts on the decision to spend the additional \$750,000. He felt it was not a good tactic to rush to that decision and it may not play out well in the broader community. He suggested the Board look systemically to where they are as a Board and connections to community to determine if that's the most effective use of those dollars. Ralph used the analogy "you don't want to give someone who is a manufacturer of sneakers \$750,000 to build a car."
- Ralph noted that the Board speaks of the African and African American communities a lot, for example, today in the discussion of the gaps in grant funding.
- Ralph drew a comparison between MNSure and public education where there are funds designed specifically to assist at-risk, mostly low income, disproportionately children of color, to receive supplements to their education. As an organization and as a Board, he suggests that the board have effective councils, committees and engagement to have targeted communities represented in these public discussions and look at the advisory committees as being an asset.
- The advisory committee applicant summary sheet handouts were printed in black and white, which made it hard to interpret the pie charts and the statistics were not listed. In the future it would be nice to have the statistics noted on handouts and not left open for interpretation.
- If 66% of MNSure initial enrollees are identified as people participating in public programs, and assuming that the disparities that do exist are largely in communities of color, he suggests that we use resources moving forward to do specific targeted campaigns to those communities that we want to have a sincere relationship with to access quality healthcare.
- Media is important. Most people interact with some form of media at least once a day. The communities that are not here interact with media, too, and have specific pathways to how they interact with the media. We should make sure that our communication efforts reach out to the media that the populations we serve use, which may not just be the mainstream media that shows up at our Board meetings.

**Wrap up and  
any new  
business**  
Brian Beutner,  
Chair

Pete Benner moved to adjourn and the meeting adjourned at 3:52 p.m.