



Consumer and Small Employer Advisory Committee Meeting Minutes

Tuesday, March 21, 2:30 – 5:00 p.m.

UCare, 500 Stinson Boulevard NE, Minneapolis, MN

Members in attendance: Richard Klick – Chair, Mary Ellen Becker, Nancy Breyemeier, Matthew Flory, Leigh Grauman, Bentley Graves, Kim Johnson (via phone), Peter Musimami (via phone), Denise Robertson, Kathleen Saari, Matthew Steffens

Members not in attendance: Amy Chatelaine, Ann McIntosh, Kate Onyeneho, Hussein Sheikh

Staff in attendance: Aaron Sinner – Board and Federal Relations Director, Stephanie Grisell – Legal Analyst

Meeting Topics

Welcome and Call to Order

Richard Klick, Chair

Richard Klick, chair, called the meeting to order at 2:43 p.m. He noted that a quorum was present. Members introduced themselves.

Approval of February 21 Meeting Minutes

Richard Klick, Chair

MOTION: Nancy Breyemeier moved to approve the draft [February 21 meeting minutes](#). Matt Flory seconded. All were in favor and the minutes were approved.

Review of Enrollment Data

Aaron Sinner, Board and Federal Relations Director

Dick began the review of enrollment data by expressing frustration with the rise in purchases of bronze plans in recent years. He said he wished all brokers would focus on a client-based approach, discussing with the client every aspect of a plan, instead of merely the monthly premium cost.

Matt Steffens agreed with this concern, as he has watched the market buy less platinum and gold plans and settle for bronze plans. He suggested that this pattern illustrates the unaffordability of the plans.

Matt Flory inquired if there was a metric, perhaps at the carrier level, that could provide a score card of people who were buying the wrong plan, such as Minnesotans who are sicker or have a pre-existing condition and should be buying gold plans but instead are purchasing bronze plans.

Matt Steffens suggested that carriers may have that information and it is submitted to the Department of Commerce as part of the rate review process, but was unaware of any way to access that information to review.

Denise Robertson noted that she had clients who had consciously selected a bronze plan because they were healthy and could save money. Denise also emphasized that her clients use MNsure's plan comparison tool to review the quality of the bronze plan in both a good year and a bad year to understand the underlying issues with the plan. From her experience, she was surprised at the number of people who consciously elected a bronze plan.

Dick moved the discussion to the enrollment capacity limits and inquired about the status of HealthPartners capping. Aaron Sinner, MNsure staff, said he was unable to provide any further information about the status of HealthPartners, as only the Department of Commerce and the carriers can see total enrollment, both on- and off-exchange.

Peter Musimami asked about a further breakdown of enrollees by race, ethnicity, or area, for example. Aaron indicated the board deck included a regional breakdown, but because MNsure does not require applicants to state their race to complete enrollment, MNsure does not have a further breakdown by race.

Mary Ellen Becker commented that she was surprised by how low the enrollment was in plans with cost-sharing reductions. Aaron noted that cost-sharing reductions were only available to Minnesotans up to 250% of the federal poverty level, and only those who purchased silver plans. Denise and Leigh Grauman indicated their clients rarely if ever made a decision about a plan based on the cost-sharing reduction. Leigh note that a cost-sharing reduction shifts the actuarial value of a plan by about 3%.

Peter asked about changes that may occur to Medical Assistance or MinnesotaCare as the result of any federal level legislation. Aaron noted he could not provide an official answer, since Medical Assistance and MinnesotaCare were under the management of the Department of Human Services. However, he did note that MinnesotaCare was currently reimbursed at over 85% by the federal government, but under the American Health Care Act, the reimbursement would be 0%.

Matt Steffens inquired about the "existing and pending inquiry" call driver from navigators, which, totals about 50% of all their calls to the MNsure Contact Center. Leigh and Denise provided additional guidance to CSEAC and indicated the "existing and pending inquiry" can be a variety of issues, such as general confusion, MinnesotaCare renewals confusion, and individuals who have qualified health plan eligibility and their children are on Medical Assistance, for example. Matt asked if committee members had any suggestions for how to decrease that call driver. Leigh suggested granting assisters read-only access to the Minnesota Eligibility Technology System (METS).

Nancy asked if CSEAC could provide a recommendations such as read-only access to METS to the MNsure board. Aaron indicated CSEAC was welcome to making such a recommendation to the board; however, he noted the assister stakeholder groups had raised this idea before, though he didn't know the status of it. Leigh commented she had heard hesitancy around implementing this item due to data-sharing and privacy issues. Aaron speculated that it might be difficult to give access to assisters for just cases they are working without providing access to the entire system.

Leigh volunteered to draft such a recommendation. Mary Ellen suggested including information around costs and benefits in such a recommendation. Aaron stated that Christina Wessel, MNsure's senior director of partner and board relations, was much more knowledge on this topic. He suggested inviting her to attend April's meeting to give more information.

Public Comment

None.

Resources: Jobs and SHOP

Richard Klick, Chair

Dick clarified that this section was added in response to Kate Onyeneho's concerns at the previous month's meeting around employment for unemployed MNsure applicants. Dick noted he had done a little digging and was able to find resources from Hennepin and Ramsey Counties which he passed along.

Update on Meeting with Allison O'Toole Regarding SHOP

Richard Klick, Chair

Dick provided the committee with an update on his discussion with Allison O'Toole regarding SHOP, Minnesota's small employer option. He reported that he found the discussion highly interesting and believes there has been a lot of legwork done to develop SHOP. Additionally, he was encouraged by the progress that had been made and plans for the future. Dick indicated additional discussions may continue with CSEAC members and MNsure staff around SHOP.

Dick noted that as SHOP continues to grow, he would like to see more discussion with insurance carriers to involve them more in the process. He noted he would like to see greater emphasis placed on SHOP in future open enrollment periods. Mary Ellen agreed, indicating that as MNsure grows more stable in the individual market, its focus should pivot to things like SHOP. Aaron alerted the committee that MNsure is proceeding with a RFP for SHOP functionality, possibly as soon as April.

Mary Ellen raised concerns about the limited number of carriers available through SHOP. Dick noted he was encouraged by his conversation with Allison and was hoping for progress and further discussion to bring more carriers into the SHOP program.

Kim Johnson suggested the best way to grow SHOP would be to target employers who do not sponsor plans for their employees. He indicated it would be nice to have more carriers in the SHOP market; however, he does not believe the number of carriers is as important as the cost to an employer. Matt Steffens provided a counterpoint, suggesting if more carriers came in, SHOP might have more cost-effective offerings.

Mary Ellen rounded out the discussion on SHOP's future by wondering if the Health Industry Advisory Committee (HIAC) could do more to encourage carriers to make offerings in SHOP. Dick noted it would be a good topic to discuss at the next joint meeting in May.

Legislative Update

Aaron Sinner, Board and Federal Relations Director and Bentley Graves, CSEAC member

Bentley Graves provided a legislative update. Bentley reported the most important piece of news to arise out of the state legislature was around the state-based reinsurance program proposal. There are two re-insurance bills, one passed by the House of Representatives and one by the Senate, awaiting a conference committee to merge the two bills. The Senate bill funds the program out of the Health Care Access Fund for the next two years, which is levied off a premium tax which ends in two years. The House of Representatives, on the other hand, anticipated repurposing money that is meant to go into the Health Care Access Fund and Minnesota's "rainy day" fund to create the reinsurance program.

Bentley noted that it was a necessity to complete this process quickly so carriers could understand the assumptions they would need to make in setting their 2018 rates. The goal of a reinsurance program is to stabilize the market in 2018 and bring back individuals who left the individual market in 2017. Bentley indicated Minnesota looking to the Alaska model of reinsurance to understand the process. Both Minnesota and Alaska, he noted, had small individual markets. Bentley explained the reinsurance program as a way to defray the cost of consumers with expensive claims. Additionally, Bentley indicated the Department of Commerce developed a cost analysis of what a reinsurance program could do decrease premiums, and estimated a mid-teens to low-twenties percentage decrease.

Bentley reported that the Governor's proposal to stabilize the individual market is a buy-in option to the MinnesotaCare program that would allow all individual market enrollees to purchase coverage through the program. The Governor indicated he is open to discussing a reinsurance program but is skeptical of the program because carriers have not offered assurances it will lower premiums, and it carries a large price tag. Mary Ellen asked if the buy-in to MinnesotaCare was off the table. Bentley reported that there was no legislative action to make the buy-in to MinnesotaCare into law.

Aaron noted the conversation around reinsurance could be affected by the national discussion of repeal and replace efforts and what happens next at the federal level.

Bentley noted the only other major legislation related to MNsure was a proposal to move MNsure to the federal exchange. Bentley noted there were bills in both the House of Representatives and the Senate and both were moving forward, although Governor Dayton had

indicated that as long as the Affordable Care Act is the law of the land, MNSure will remain. Matt Steffens inquired as to the reasoning behind the bills. Bentley explained that it could be about technology and budget, but was mainly a political action related to early issues with MNSure.

On the federal level, Aaron noted that MNSure is awaiting the CMS rule that would include the length of the fall open enrollment period. The proposed rule included shortening open enrollment to November 1 to December 15, 2017. Aaron indicated it could be finalized in late March, but would more likely be available in April.

Mary Ellen asked why there is a push to shorten open enrollment. Aaron said the federal government has said it hopes that by shortening the open enrollment period, enrollees will need to buy coverage for the full year, rather than waiting and buying plans at the end of open enrollment without paying for January and February. Mary Ellen expressed concern for the young, healthy individuals and how long it can sometimes take for them to take action on their health insurance; she sees an immediate issue if open enrollment is shortened.

Denise inquired if it was possible for MNSure to extend open enrollment if the federal government shortens it. Aaron explained that the federal government has traditionally set the open enrollment period nationwide. MNSure has control do to special enrollment periods, but would not be likely to hold one for six weeks without a valid reason.

Future Meeting Topics

Richard Klick, Chair

Dick asked committee members what they would like to see discussed in upcoming meetings. Mary Ellen expressed interest in learning more about open enrollment 2018 preparation and operational improvements as well as how MNSure would react to a shorter open enrollment.

Leigh suggested inviting Christina Wessel to a meeting so she, and the committee, could continue work on the recommendation for a read-only METS option to present to the MNSure board. In particular, she wanted to understand what assister portal improvements were already in development before drafting a new recommendation.

Member Requests

Richard Klick, Chair

Dick opened the floor to members to discuss any information requests they had.

Bentley said he would like to get a better sense of what the American Health Care Act (AHCA) would mean for exchanges.

Aaron said he could provide a bit more guidance on the AHCA. He noted there had been no proposals at any level that would cancel the 2018 open enrollment period. The AHCA, as Aaron understood it, would retain advanceable tax credits with an income-based component, and therefore, some entity must determine eligibility for such tax credits, such as an exchange. Aaron noted that while it would be theoretically possible for some other entity to make such a determination, exchanges could still fit in such a model. Additionally, under the AHCA, tax

credits have a much smaller income-based component and would be available for when purchasing off-exchange plans, so the role of exchanges was unclear.

Denise asked if MNsure conducted a consumer survey similar to its assister survey. Aaron noted that MNsure does an annual survey of QHP enrollees. Denise asked if the committee could be provided with its results, suggesting it would be a useful tool in developing recommendations for the MNsure board. Aaron noted the survey results for 2017 open enrollment likely wouldn't be available for the April CSEAC meeting, but could be in the future.

Matt Flory mentioned a study just released by the University of Minnesota linking enrollment through exchanges to television ads. He noted there was much work to be done to improve health literacy and helping people understand what MNsure is. He suggested MNsure work with external stakeholders to develop high-level communication to educate the public about their health insurance using TV ads. He noted MNsure does not need to take the full burden of educating the public, but could work with advocacy organizations such as the American Cancer Society to streamline communication. Aaron welcomed the idea of partnering to educate the public, and suggested providing a written recommendation of possible partners the CSEAC would like to see work with MNsure, and of messages that could be presented. Dick noted the next meeting on Tuesday, April 25 could be used as a brainstorming session, particularly if Christina was able to attend that meeting or the next joint meeting.

Denise commented on the consumer story shared at the March board meeting. She noted the consumer had received inaccurate information from a broker regarding what he qualified for. Denise suggested more consistent training for brokers and navigators. Dick noted there was an assister training in fall 2016, but it was primarily navigators in attendance rather than brokers.

Denise commented that if MNsure's goal is to best serve consumers, then there should be greater cross-communication between brokers and navigators. Matt Steffens added that he would welcome more navigator-broker engagement and suggested training courses be accredited as continuing education courses for brokers. Leigh indicated she had looked into this process, but that it was extensive and confusing. Nancy said she would help make sense of the system if it would be beneficial to Leigh and others.

Denise expressed frustration at brokers and navigators who are listed in the assister directory but not actively working as assisters or accepting clients. She wondered if greater quality control could be implemented. Matt Steffens noted he would be open to broker-navigator networking, as he enjoyed the previous networking events he had attended. Leigh noted she would welcome those events and she developed strong relationships with some brokers out of these face-to-face opportunities. Denise noted there is no financial competition between brokers and navigators, so they should be able to work together. She said she would like to see more interactions between all assisters, especially brokers and navigators.

Adjourn

MOTION: Nancy moved to adjourn. Matt Flory seconded. There were no objections and the meeting adjourned at 4:50 p.m.