

Consumer and Small Employer Advisory Committee Meeting Minutes

Tuesday, September 25, 2018, 2:30 – 5 p.m.
UCare, 500 NE Stinson Blvd, Minneapolis, MN 55413

Members in attendance: Denise Robertson – Chair, Matthew Steffens – Vice-Chair (via phone), Leigh Grauman (via phone), Kathleen Saari (via phone), Bentley Graves, Kate Onyeneho, Ann McIntosh (via phone)

Members not in attendance: Matthew Flory, Richard Klick, Peter Musimami, Jamie Rancour, Kim Johnson, Mary Ellen Becker, Shari Meyer

Staff in attendance: Aaron Sinner – Board and Federal Relations Director, Marie Harmon – Marketing and Communications Specialist

Meeting Topics

Welcome & Committee Introductions

Denise Robertson, Chair

Denise Robertson, chair, called the meeting to order at 2:43 p.m. A quorum was not present.

Committee members introduced themselves.

Public Comment

No public comment.

MNsurance Updates & CSEAC Terms and Recruitment

Aaron Sinner, Board and Federal Relations Director

Aaron Sinner, MNsure staff, began by noting that the MNsure board had two brief telephonic meetings in August. The first meeting, held August 16, involved the CEO search group naming a sole candidate for consideration by the rest of the board. At the second meeting, held August 30, Nate Clark was named MNsure's permanent CEO. The board will meet again on October 17 for an open enrollment period (OEP) readiness meeting.

Aaron advised that he sent an email to the committee in late August with information regarding advisory committee terms. He noted that each member is appointed to a two-year term and each member can serve up to two two-year terms. Furthermore, chair and vice-chair positions

are one-year terms, and can serve up to two one-year terms. Aaron advised there are two members who are “termining out” – Mary Ellen Becker and Bentley Graves. Both Mary Ellen and Bentley served four years on the committee and their last meeting will be in late October. Aaron noted there are a few members whose terms are “expiring,” but are eligible for a second term – Leigh Grauman, Peter Musimami, Denise Robertson, Kathy Saari and Matt Steffens. Additionally, there are a number of members “mid-term” – Matt Flory, Kim Johnson, Dick Klick, Ann McIntosh, Shari Meyer, Kate Onyeneho and Jamie Rancour. He asked all members to send him an email indicating if they would like to continue serving or if they will be rotating off. The deadline for this is October 11, which is also the application deadline for new members. This will allow Aaron and the board to determine how many seats are open.

Aaron noted that Denise is stepping down after serving one year as chair and one member has already expressed interest in serving in that role. He asked anyone interested in serving as vice chair to send him an email. Additionally, Aaron asked that members who know of individuals that would be a good fit for CSEAC to encourage them to apply. Denise noted that individuals with health care industry experience could help fill the positions held by Bentley and Mary Ellen. Aaron noted he is happy to reach out and/or provide more information to interested applicants. The committee currently has 14 members, but can allow up to 17.

Bentley noted that he came to the committee with a small-employer and small group perspective and it would be helpful to continue to have members represent those groups. Denise agreed and noted that many of those purchasing in the individual market are self-employed or employed by a small employer. She added that those individuals represent an important consumer group for MNSure and should remain a focus, as they are likely to purchase qualified health plans (QHPs).

Conversation shifted to discussing possible partnerships that would be beneficial for MNSure to reach individuals in great Minnesota/rural areas and small employers who don’t have the resources they need, such as chambers of commerce and workforce centers.

Committee members discussed an evaluation of MNSure’s outreach priorities. Bentley suggested a topic for a future meeting would be to have MNSure staff present on MNSure’s budget and its current commitment of resources for outreach, in addition to MNSure’s current revenue streams. The committee could then better evaluate MNSure’s priorities and make possible recommendations. Kate added that it would be helpful to ask small employers and populations in greater Minnesota what resources they need to better support them. Committee members also discussed working with the Secretary of State and the Department of Employment and Economic Development (DEED) to find small employers and determine need.

Matt Steffens asked Aaron if how assister certification was looking for 2019. Aaron noted that he has had conversations with the consumer assistance program (CAP) team at MNSure and they noted that early numbers from this year indicate that they are tracking to where they thought they would be, without signs of any large-scale hiccups.

Circling back to missing voices on the committee, members discussed the possible benefits of having a member from the Minnesota Association of Counties or a county worker on the committee.

Next, Denise asked for details regarding the MinnesotaCare lawsuit. Aaron noted that in most states, there is no MinnesotaCare program. For states without a MinnesotaCare-type program, an individual making more than 133 percent of the federal poverty level (FPL) goes into the individual market. MinnesotaCare covers those from 133-200% of FPL. Across the country, there are two kinds of funding through the exchange: advanced premium tax credits (APTCs), which help people pay their monthly premiums, and cost sharing reductions (CSR), which help people pay when they go to the doctor. You are only eligible for CSR if you make 133-250% of FPL. In Minnesota, because of MinnesotaCare, the state has a very small population that's actually receiving CSR. Under the Affordable Care Act, states like Minnesota that have MinnesotaCare-type programs receive the federal funding those from 133-250% of FPL would have received through APTCs and CSR to instead help fund such a program. In fall 2017, the Trump administration announced they were halting funding of CSR. The obligation for insurance companies to pay out those benefits to help pay the doctors' bills remained, but the reimbursement from the federal government went away. So, in other states, their Departments of Insurance restructured rate filings so carriers made that money in a different way that increased people's tax credits, so they wouldn't be harmed by that change. Since MinnesotaCare is outside of Minnesota's individual market, the state didn't have this option and so lost this funding. Since New York also has a program like MinnesotaCare, the two states joined together to sue the federal government saying they continued to owe the states this funding for these programs. The federal government announced last month that they were awarding around 75 percent of the money that would have come under full payment. The Minnesota Department of Human Services is still looking at their legal options.

Denise asked what this meant for MinnesotaCare viability. Aaron advised the bigger question is the future of the provider tax, which is set to sunset at the end of 2019. That will determine if we continue to have a state funding source.

Review CSEAC and HIAC Recommendations to MNSure Board of Directors at June and July Board Meetings; Consider Any Follow-Up and/or Joint Advisory Committee Meeting about Questions Raised by the Board at June and July meetings

Denise Robertson, Chair

Denise began by looking at page six of the [HIAC Recommendations regarding subgroup topics document](#). The HIAC recommends the MNSure board advocate for the continuation of reinsurance beyond plan year 2019. Denise stated that when this recommendation came up, Commissioner Piper referenced how MinnesotaCare took a funding hit that was not anticipated as a result of the reinsurance program. Denise added that Commissioner Piper also asked if there were any other recommendation options besides the reinsurance program, such as the 25% premium subsidy program. Bentley explained that federal funding for MinnesotaCare is tied to individual market rates. Therefore, if the individual market rates go down because of reinsurance, the federal payments are also driven down.

Bentley commented there is a tradeoff with the subsidized programs. For example, some enrollments went away in 2017 because the sticker price of premiums was high and individuals

did not bother to enroll with MNSure to get the actual subsidy. Similarly, with the MinnesotaCare buy-in, there would be fewer private payers, which could strain providers' revenue. Individual market enrollment would probably decrease because the premiums would be lower for MinnesotaCare buy-in enrollees.

Review Prior CSEAC Recommendations to MNSure BOD for Status Check, Possible Revision, Reminder to Board

Denise Robertson, Chair

Denise discussed prior CSEAC recommendations that were brought to the MNSure board. Denise mentioned the topic of having an ombudsperson's office in Minnesota, which she and Mary Ellen had mentioned to the MNSure board. Denise stated that she believes there are some things MNSure could do to clear the frustration for consumers who have mixed eligibility and have to navigate between the two agencies. Kate suggested the idea of utilizing volunteers or high school and college students who are looking for opportunities for community service to help fill in the gap for consumers needing assistance.

Bentley asked if MNSure would have a proactive legislative agenda this year. Aaron noted that in some years, MNSure has had a legislative agenda, often focused on technical matters such as how appeals are structured. He noted the board would likely make decisions after the elections about whether to have a legislative agenda in 2019 and what might be included.

Denise stated that at the next meeting she would like to bring up the topics of the reinsurance issue and the office of the ombudsperson issue and have some bullet points and possible options to present to the board.

Continuing on, Denise stated that open enrollment length recommendation was heard by the board and was recognized by Nate and considered useful, though ultimately extending the enrollment period was Nate's decision. Some recommendations, such as the assister functionality recommendation and the health insurance literacy recommendation, led the MNSure board to ask that staff work on the issue.

Denise asked for an update on health insurance literacy at MNSure. Aaron stated that currently, health insurance literacy has been given to the communications and marketing team as a whole. As one avenue, the team had begun utilizing an application that assesses the reading level of a block of text and makes suggestions for how to make the text easier to read, at a lower grade level. Denise stated that everyone could benefit from MNSure, therefore health care literacy—information to help people understand and use their coverage—is very important. Denise stated the future evolution of MNSure could be to help people get covered and stay covered and promote the usage of health care coverage for preventative care.

Other Ideas for Future CSEAC Consideration

Denise proposed that committee members email Denise their ideas on the future of MNSure, anything from what the next iteration of MNSure should look like to what else needs to be done to better serve consumers.

Adjourn

Meeting ended at 4:45 p.m., no quorum having been achieved.