



Health Industry Advisory Committee Meeting

- > **date:** Thursday, January 15, 2015
- > **building:** UCare, 500 Stinson Boulevard NE, Minneapolis, MN 55413
- > **time:** 2:30 p.m. – 5:00 p.m.
- > **members in attendance:** Reuben Moore – Chair, Forrest Flint – Vice Chair, Andy McCoy, Barbara Zwiener, Charles Sawyer (via phone), Christopher Johnson, David Dziuk, Ghita Worcester, Harlan Johnson (via phone), Heidi Michaels, Jonathan Watson, Kenneth Bence, Samuel Boadu, Stacey Ko (via phone), Thompson Aderinkomi – Board Member Liaison; Aaron Sinner – Board and Federal Specialist, Debby Dill – Board and Federal Coordinator
- > **members unable to attend:** Melissa Larson, Michael Scandrett

topics

Welcome – Previous Meeting Recap & Agenda Review

Reuben Moore, Chair

The meeting was called to order at 2:34 p.m. by Reuben Moore.

Reuben thanked UCare for the use of their conference room and Samuel Boadu for bringing in treats.

Motion: Ken Bence moved to approve the draft December meeting minutes. Andy McCoy seconded. All were in favor and the minutes were approved.

The advisory committee reviewed the agenda and thanked board Chair Brian Beutner and board member Kathryn Duevel for attending.

Board Update

Thompson Aderinkomi – Board Representative

Thompson Aderinkomi stated that the next board meeting will be held on January 28 instead of January 21 so that the Finance Work Group can revise the three-year financial plan to account for the supplemental CCIIO funding discussed at the last board meeting. Brian explained that this is not new money; the original grant had a possible additional 25% extension allotment.

Brian noted that the CCIIO money is a one-year spend which for MNSure affects both fiscal year 2015 and fiscal year 2016. Reuben asked if the advisory committee could offer recommendations on how to allocate the funds. Brian told the committee that the funding was already planned to accelerate the completion of pre-existing priority issues.

Market Development Work Group Discussion

Brian Beutner, Board Chair; Thompson Aderinkomi and Kathryn Duevel, Board members

Thompson gave an overview of the creation of the Market Development Work Group, which consists of himself, Kathryn Duevel and Brian Beutner. The work group was formed to examine what can be done long-term to achieve the broader objectives set forth in the MNSure enabling statute. The work group has conducted many meetings with various stakeholders so far and will continue to do so into early February.

Thompson noted that in these discussions, nothing is off the table, and the intent is to brainstorm “blue sky” aspirations. He stated the board isn’t looking for ideas to restrict or add mandates to the marketplace in a punitive way. Brian noted that the goal at this juncture is for ideas that are voluntary rather than mandatory.

Ideas and suggestions discussed by the committee included:

- Brand MNSure in a way that makes clear it's not just for low-income individuals who need financial help
- Clear tools to guide decision-making and plan selection
- More consumer choice, by removing mandated coverage components
- Implementation of portable and mobile application tools
- Improved website functionality
- Questions about life circumstances to help guide consumer decision-making
- Tools to help match consumers to the best coverage for them at the time—and allowing consumers to change coverage easily if their life circumstances change
- Increased consumer education, with an emphasis that education need not happen at the purchase point
- Navigator and broker portals
- Improved training for navigators/brokers, including an explanation of why certain information is requested
- Allow individuals (certified navigators and brokers) to attest that someone qualifies for a program or a tax credit
- Find funding to allow low-income individuals to set up HSAs
- Additional plan offerings with higher wellness benefits
- Offer opportunities for very personalized, customized care
- Offer plans that reward consumers for meeting certain care goals through things like lower copays or lower deductibles
- Increased price transparency
- Emphasize wellness and preventive medicine in care compensation
- Expand hours of service for safety net clinics and increase opportunities for care via less-expensive means, such as minute clinics, physician assistants, and nurse practitioners
- Educate consumers to understand more expensive care doesn't necessarily mean better care
- Examine lifestyle factors and social determinants of health
- Increase data-sharing between medical institutions, especially speed of data-sharing
- Make MNSure a component of a larger platform that examines eligibility for many entitlement benefits, such as housing and food
- Ask consumers concrete questions about their care experiences to guide plan selection rather



- than more abstract questions
- Offer as many products as possible, but have good tools to narrow plan selection—including enough flexibility that not everyone is asked the same series of questions
- Make it easy for consumers to determine if their doctor is in-network for a plan
- Incentivize conversations about end-of-life care in advance

The advisory committee came up with three overall categories to center further discussions and create recommendations:

1. Eligibility and Enrollment – Reuben Moore, Chris Johnson, and Stacey Ko
2. Education and Engagement – Ken Bence and Ghita Worcester
3. Economics – Dave Dziuk, Andy McCoy, and Forrest Flint

The committee also discussed inviting a representative from the Department of Commerce to attend a joint meeting between the Health Industry Advisory Committee and the Consumer and Small Employer Advisory Committee to discuss plan design.

Industry Updates & Adjourn Committee Members

Chris moved to adjourn. Ken seconded. There were no objections, and the meeting adjourned at 4:40 p.m.