Health Industry Advisory Committee Meeting Minutes

> **Thursday, February 23, 2017, 2:30 – 4:30 p.m.**
> **UCare, 500 Stinson Boulevard NE, Minneapolis, MN 55413**
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> **Members in attendance:** Jonathan Watson – Chair, Ghita Worcester – Vice Chair, Kenneth Bence, Kyle Bozentko, David Dziuk (via phone), Carl Floren, Thomas Hoffman (via phone), Hillary Hume, Andy McCoy, Daniel Miesle, Reuben Moore, Chris Rofidal, Charles Sawyer, Bette Zerwas (via phone)
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> **Members not in attendance:** Forrest Flint, Harlan Johnson, Heidi Mathson
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> **Staff in attendance:** Christina Wessel – Senior Director of Partner and Board Relations, Aaron Sinner – Board and Federal Relations Director, Stephanie Grisell – Digital Communications Analyst

Meeting Topics

Welcome & Introductions

Jonathan Watson, Chair

Jonathan Watson, chair, called the meeting to order at 2:33 p.m. Jonathan informed the committee the meeting would emphasize input on the Minnesota Department of Health's Health Access Survey and a working session related to how to enhance and improve MNsure.org's functionality for assisters.

Members introduced themselves.

Public Comment

None.

Approve Minutes of January 19, 2017 HIAC Meeting

Jonathan Watson, Chair

MOTION: Chris Rofidal moved to approve the draft January meeting minutes. Hillary Hume seconded. All were in favor and the minutes were approved.

MNsure Board & Staff Update

Aaron Sinner, Board and Federal Relations Director

Jonathan reported that he had presented at the February 15 MNsure board meeting along with the chair of the Consumer and Small Employer Advisory Committee (CSEAC), Richard Klick,

where they discussed planned HIAC and CSEAC activities for 2017. In addition, the chairs discussed the three action items in the CSEAC recommendation regarding health literacy, including noting the difference between health literacy and health insurance literacy. Jonathan also reported on the operational feedback loop, particularly regarding assister concerns.

Chris inquired if there was any feedback from board members about the discussion around health literacy versus health insurance literacy. Jonathan and Aaron Sinner reported that the board was welcome to distinguishing the difference between the two concepts but no concrete steps were formed.

Jonathan continued by reviewing highlights from the MNsure board meeting. Aaron and Christina Wessel reported that the board had adopted a policy on fiscal year 2018 Outreach and Enrollment grants. Christina indicated that the policy focused on extending current grantees for a second year instead of disrupting grants and workflow by issuing a new request for proposal. Christina also noted that these grant extensions were contemplated in the previous year's navigator grantee policy.

Christina also reported that before a grant extension will be offered to current grantees, there will be an extensive review process where MNsure will review business processes, staffing, and other elements. Christina indicated that MNsure was working to be more strategic about grants and make more effort to identify truly underserved communities in need of targeted outreach. She noted these grant extensions would just be occurring this year and a full request for proposal would be issued in fiscal year 2019.

Jonathan asked for further information on the criteria MNsure seeks when reviewing grantees. Christina clarified MNsure will look at items such as financial management practices, how many events are conducted, how many individuals a grantee is able to enroll during open enrollment, and other similar factors.

Aaron led the committee through MNsure's latest enrollment numbers, also explaining the premium rebate special enrollment period, which ran February 1 to February 8, 2017. Aaron noted the total enrollment for qualified health plans currently stood at over 117,000, including 2,800 SHOP enrollments. Aaron indicated that this open enrollment period had seen MNsure's highest private and public plan enrollment ever. Committee members asked what had led to the dramatic private market increase. Aaron noted that much of it was likely driven by Blue Cross Blue Shield's exit from the individual market, leaving many individual market enrollees with a need to shop and compare plans. Ghita Worcester added that some carriers only offer plans through MNsure.

Aaron reported on effectuated enrollment, which means members currently paying monthly premiums. In January, MNsure had over 86,000 effectuated enrollments. Aaron indicated this number usually peaks in March because there are many consumers that choose a February or March effective date and there is a grace period for members who are eligible for tax credits. Jonathan asked for a comparison from January 2017 to January 2016. Aaron reported that in January 2016, MNsure had 60,754 effectuated enrollments.

Reviewing the customer service dashboard next, Aaron acknowledged there was a bit slower average speed of answer, which may be due to the premium rebate special enrollment period as well as enrollment deadline days, which always see higher call volume.

Jonathan continued the MNsure update by discussing the fall and winter 2017 release planning found on slide 13. Aaron reported that the project list was generated by the project management team for the Executive Steering Committee. Aaron noted the list had been approved by the MNsure board.

Ghita asked if there would be any updates to the assister portal. Christina indicated there weren't updates include in the fall or winter release, though there was additional functionality coming in the spring 2017 release. Ghita noted that it would be useful for workers to be able to see the progress of an application and enrollment so her agents would not have to make a call to MNsure. Christina indicated the assister portal and the caseworker portal, which is used by internal teams, are different. Jonathan asked for further clarification on the "DEED for Verification of Income" project. Christina indicated it could be related to unemployment benefits, though she was unsure.

Andy McCoy asked how HIAC members could find out more about these projects. Aaron recommended attending an Executive Steering Committee meeting, where these projects are explained in more depth. Christina noted that many of these projects are related to the Department of Human Services (DHS) functionality, such as the METS-MMIS interface redesign, which would be inappropriate for a MNsure employee to speak about. Chuck Sawyer asked if MNsure and DHS have a full catalog of known functionality issues. Aaron and Christina indicated there is a list, but it is important to differentiate between defect fixes and functionality improvements. They are different and approached differently by MNIT.

Aaron continued with the MNsure update. He reported that cumulative enrollment has increased from year to year, with the highest ever so far in 2017, with over 117,000 enrollees in qualified health plans. Aaron noted the open enrollment periods have differed in length so the comparison is not quite apples to apples.

Ghita asked if MNsure would be aligning with the federal proposal to shorten open enrollment for plan year 2018. Ghita clarified for the committee that the proposed rule was to shorten open enrollment so it would run from November 1 to December 15, 2017. Aaron stated that comment on the proposed rule was due in early March, with the rule likely finalized shortly thereafter. Aaron reported that as a state-based exchange, MNsure would still need to abide by the federal decision. State-based exchanges do have some leeway to create special enrollment periods, such as the one created this year for the premium rebate, but there would be no precedent and likely no justification for a month-long special enrollment period.

Aaron indicated 65% of MNsure enrollees receive tax credits, which is the highest ever. Slides 16 to 18 illustrate demographic breakdowns, which have been largely consistent from year to year. Customer service is improving over time, as indicated on slide 19.

Chris asked about the proposal signed in January allowing for-profit health companies to sell health care products in Minnesota. He wanted to clarify that all companies, non-profit and for-

profit can now sell plans in Minnesota, in the large and small group markets as well as the individual market. Aaron confirmed that was accurate. Dave Dziuk clarified this was true, but the only new addition was in allowing for-profit HMOs to sell insurance in Minnesota.

Tom Hoffman, as a follow up to the earlier discussion about the proposed CMS rule, offered a point of clarification. He reported that the shorter open enrollment period was proposed to increase the incentives for individuals to maintain enrollment in health care coverage and to decrease incentives to enroll only after discovering they require services.

MDH Health Access Survey Input

Jonathan Watson, Chair

Aaron indicated the Minnesota Department of Health is gearing up for their 2017 Health Access Survey and had asked MNsure for feedback about questions to include. As such, MNsure is asking the advisory committees for suggestions. Aaron clarified that he does not have a full list of questions that were previously asked and not to worry if a suggestion is already included. According to Aaron, the survey is across Minnesota and receives about 10,000 responses from Minnesotans with all types of insurance.

Dan Miesle asked if there were any action items that came from the 2015 survey. Aaron specified that the survey is useful to MNsure for finding pockets of uninsured throughout the state, but is unsure who else uses the data and for what purposes.

Kyle Bozentko suggested the information could be useful when looking at the next round of grantees to identify target groups and areas. Christina agreed and added that MNsure is asking brokers and navigators for questions to add as well.

Andy recalled that the Department of Health presented on the 2015 survey findings the past fall and suggested Aaron review the minutes for suggestions made at that time.

Dan asked about how individuals who do not speak English are surveyed. Aaron reported that he was unsure, but he knew the Department of Health had previously included them in the survey.

Working Session to develop proposals to enhance/improve MNsure.org's functionality for assisters

Jonathan Watson, Chair

Jonathan devoted the last section of the HIAC meeting to a working session focused on HIAC's upcoming recommendation around ways MNsure can enhance and improve functionality for assisters. He sought to have a three-fold plan: first, identify the problem; second, categorize it as technical, operational, or policy-level; and third, suggest a solution.

Dan clarified the operational category and if Jonathan was speaking of separating people and process. Dan explained that an issue could come from a person, such as not having access to

health care, or it could be an issue within the system. Jonathan suggested it might be worth adding categories to better differentiate.

Kyle commented that he saw two main issues come up during the MNsure update: hold times and checking on applicant status.

Hillary reported that she had completed research comparing the federal exchange with MNsure and found the long hold times and a frustrating technical experience are not unique to MNsure. Her research suggested while some other states believed they would improve their process by moving from a state-based exchange to the federal exchange, they instead found the same experience.

Ghita noted MNsure's hold times have improved over time, while acknowledging there is still work to be done. Kyle suggested action items about what can be done to decrease hold times, such as a callback feature. Hillary recommended a secure messaging system. Christina noted both a callback feature and a secure messaging function are on MNsure's radar.

Dan suggested asking assisters about the system improvements they would like to see. Christina clarified that MNsure holds monthly meetings with assister stakeholder groups, and assisters are not shy in sharing their concerns. Jonathan asked if the stakeholder groups have produced a document or presentation of their top issues. Christina explained that the groups don't produce anything, but serve more as a feedback loop for assisters to MNsure.

Chris inquired about what issues consumers and assisters are usually calling about. Christina noted that many people do not trust the system; they see they are enrolled in their account but are unsure if they are really enrolled. Ghita added that consumers call UCare, or another carrier, a few days after completing the enrollment asking if the carrier has received their enrollment, which is usually still processing. Andy asked about timelines and how long it would take before an enrollment is processed by the carrier following completion of enrollment. Ghita indicated it could take up to a week, depending on the file.

Jonathan suggested an interactive timeline in a consumer's account that tells them what step they are on. Christina noted there are so many different systems that enrollments go through, such as identity management when creating an account, METS when an application is completed, and ESOR when enrollment is completed, that it would be very difficult to create an interactive timeline.

Dan asked if there was an opportunity for him to shadow an assister to find out more about their day to day work. Aaron indicated he should be able to find an assister in his area using the MNsure website, but if he needed any assistance finding one, he should let Aaron know.

Jonathan reported he had taken down about three general themes from the day's discussion and would follow up with Harlan Johnson and Heidi Mathson about issues they encounter.

Next Steps

Jonathan Watson, Chair

Jonathan suggested changing the next meeting to a HIAC-only meeting rather than a joint meeting, and instead look at meeting jointly with CSEAC in April.

Bette Zerwas asked Jonathan to keep the legislative update on the schedule as she finds it very useful.

MOTION: Chris moved to adjourn. Chuck seconded. All were in favor and the meeting adjourned at 4:19 p.m.