# Member Retention Subgroup Preliminary Draft

Health Industry Advisory Committee
June 21, 2018

#### MNSURE HIAC SUBGROUP OBJECTIVES

- Research issue Perform research and data gathering associated with subgroup topic
- Identify gaps Understand the gaps that MNsure could address
- Discuss solutions Discuss possible action MNsure could take to address gaps and/or improve outcomes
- Document recommendations Briefly document specific recommendations the HIAC should consider for presentation to the MNsure board
- Present recommendations At the May 24 HIAC meeting, present recommendations for consideration

### Research of Issue

Percent of Enrollees that Remained Effectuated													
		Month Coverage Effectuated											
		January	February	March	April	May	June	July	August	Septembe	October	Novembe	Decembe
Monthly Retention Rate	January	100.00%											
	February	95.70%	100.00%										
	March	92.80%	96.80%	100.00%									
	April	90.50%	92.80%	97.00%	100.00%								
	May	88.50%	89.40%	91.20%	95.10%	100.00%							
	June	86.40%	85.80%	86.70%	88.70%	94.10%	100.00%						
	July	84.50%	83.40%	83.10%	85.50%	87.10%	94.40%	100.00%					
	August	83.00%	81.80%	81.00%	82.40%	83.60%	88.20%	95.70%	100.00%				
	Septembe	81.50%	80.40%	79.30%	78.10%	80.30%	83.80%	89.20%	91.80%	100.00%			
	October	80.20%	79.00%	78.00%	76.00%	77.30%	80.80%	84.70%	83.30%	95.30%	100.00%		
	Novembe	79.30%	78.20%	77.40%	75.30%	74.60%	78.10%	82.10%	80.80%	86.70%	96.40%	100.00%	
	Decembe	79.20%	78.10%	77.30%	75.20%	74.30%	77.90%	82.00%	80.70%	86.70%	96.40%	100.00%	100.00%

### Reporting From HealthPlans

#### HealthPlan Interview Findings:

- Hard to compare with data since ACA
- Enrollment was throughout the year, not effective 1/1
- Turnover of roughly 1% per year
- Significant Differences with ACA:
  - Guaranteed enrollment in ACA
  - Premium grace period 90 days

## Gaps in Understanding

#### Reason for Discontinuation of Coverage:

- Non-problematic reasons:
  - Enrollee gained coverage through employer
  - Enrollee gained coverage through spouse
  - Enrollee gained coverage through Medicare (age-in)
  - Enrollee became eligible for MNCare or Medical Assistance
- Problematic reasons:
  - Cost of coverage not affordable
  - Avoiding paying premium at end of year to take advantage of grace period
  - Lack of tax penalty reduced incentive for coverage
  - Didn't fully understand financial obligation of coverage

### **Preliminary Solution Discussion**

- Reinstitute the insurance coverage mandate Not something MNsure can impact
- Eliminate guaranteed issue for insurance products Not something MNsure can impact
- Improve communication between MNsure and plans
- Better educate members regarding coverage benefits and cost commitments
- Improve communications to enrollees that unpaid premiums result in a loss of coverage and individuals cannot sign up outside of open enrollment without a life event
- Better understand who drops coverage and why Follow-up request for MNsure
- Explore flexibility in enrollment outside of open enrollment, especially with changes in the individual mandate at the federal level – may not be something MNsure can impact
- Institute a penalty for a gap in coverage. This was in Federal legislation that did not get through the Senate.

### Recommendations

- Advocate for continuation of reinsurance
- Request for additional MNsure data analysis:
  - Study reasons members drop insurance coverage during the year
  - For members that enroll in January, that have a MNsure account, but were not enrolled in December, how long were they without insurance
  - What % of members re-enroll each year in the same health plan product.
- Advocate for:
  - State based insurance mandate/tax penalty
  - Premium penalty for dropping out and re-enrolling next term.