



MNsure Joint Advisory Committee Meeting Minutes

Tuesday, April 25, 2017, 2:30 – 5:00 p.m.

UCare, 500 Stinson Boulevard NE, Minneapolis, MN 55413

Consumer and Small Employer Advisory Committee members in attendance: Richard Klick – Chair, Mary Ellen Becker, Nancy Breymeier, Matthew Flory, Leigh Grauman (via phone), Kim Johnson (via phone), Ann McIntosh, Peter Musimami (via phone), Kate Onyeneho, Denise Robertson (via phone), Matthew Steffens

Health Industry Advisory Committee members in attendance: Jonathan Watson – Chair, Kenneth Bence, David Dziuk (via phone), Forrest Flint (via phone), Carl Floren, Thomas Hoffman, Hillary Hume, Harlan Johnson (via phone), Andy McCoy, Heidi Mathson, Daniel Miesle (via phone), Reuben Moore (via phone), Chris Rofidal, Bette Zerwas

Consumer and Small Employer Advisory Committee members not in attendance: Amy Chatelaine, Bentley Graves, Kathleen Saari, Hussein Sheikh

Health Industry Advisory Committee members not in attendance: Ghita Worcester – Vice Chair, Kyle Bozentko, Charles Sawyer

Staff in attendance: Aaron Sinner – Board and Federal Relations Director, Christina Wessel – Senior Director of Partner and Board Relations, Karina Milosovich – SHOP and Broker Relations Director, Jackie Edison – Navigator Coordinator, Stephanie Grisell – Digital Communications Analyst

Board members in attendance: Martha Eaves, Kathy Sheran

Meeting Topics

Welcome & Introductions

Jonathan Watson, HIAC Chair and Richard Klick, CSEAC Chair

Jonathan Watson, HIAC Chair, called the meeting to order at 2:33 p.m. Jonathan informed the joint committees that the meeting would focus on the MNsure presentation surrounding the MNsure assister program and discussion surrounding future joint Health Industry Advisory Committee (HIAC) and Consumer and Small Employer (CSEAC) recommendations and workplans. He used the [Joint Advisory Committee meeting slide deck](#) to orient the agenda.

Members introduced themselves.

2017 U.S. Congress & Minnesota Legislature Update

Jonathan Watson, Chair

Jonathan presented a high-level overview of federal and state legislative activities. He began with a federal legislative update. The American Health Care Act (“AHCA”) will be brought to the U.S. House of Representatives’ floor in the upcoming week for discussion. Jonathan informed the committees an amendment to the AHCA was created in the Rules Committee. It is a \$15 billion amendment designed to create invisible risk sharing which would aim to stabilize the market. In addition, the Trump Administration has not firmly indicated whether it will drop the appeal begun by the Obama Administration related to the cost-sharing reductions funds allocation. Finally, Jonathan discussed the Meadows-MacArthur Amendment, which amends the AHCA. The amendment maintains the essential health benefits outlined the Affordable Care Act (“ACA”), but includes a waiver option to allow states to opt out of certain elements of the AHCA.

Members asked about the impact of the AHCA upon state-based exchanges. Aaron Sinner, MNsure staff, explained that the AHCA is silent on the status of state-based exchanges. He noted AHCA tax credit eligibility is age-based rather than income-based; however, the tax credits do have an income cap. He said it was unclear from the bill what entity would be responsible for determining if the income cap had been exceeded.

Richard Klick, CSEAC chair, asked if there was any other plan coming out of the U.S. Congress related to overhauling health care. Jonathan noted that any bill arising from the U.S. House of Representatives and passed along to the U.S. Senate could look very different in the end. Jonathan also commented that the person who would determine whether the AHCA could be approved in the Senate using the reconciliation process was the Senate parliamentarian.

Jonathan moved on to a state legislature update. Jonathan indicated that at this point in the legislative session, both chambers were compiling and reconciling omnibus bills. Jonathan noted the \$900 million allocated by the Minnesota Legislature to provide relief to the individual market across two bills. The first bill signed was the Individual Market Premium Relief bill, which provided funding to health plans in order to pay premium subsidies of 25% on an individual’s premium allocated from the budget reserve. The second bill created a reinsurance program, where the state pays 50-80% of claims between \$50,000 and \$250,000 for an individual claimant. Finally, Jonathan discussed the MNsure provisions currently under consideration in the legislature. The first was the Health and Human Services Omnibus bill, which would direct the Department of Commerce to establish the federally facilitated marketplace (FFM) to replace MNsure beginning January 1, 2019. The second, Senate File 799, would eliminate the reporting requirement of the MNsure board, Department of Health, and Department of Human Services for interagency agreements to the Minnesota Legislature.

Mary Ellen Becker asked about the news surrounding the shortening of open enrollment 2018. Aaron indicated this came out of a federal rule that would be discussed during the Board and Staff Update.

Assister Support Staff Presentation

Jackie Edison, Navigator Coordinator

Christina Wessel, Senior Director of Partner and Board Relations

Karina Milosovich, Director of Broker Relations

Jackie Edison, MNsure staff, presented slides 1-5 of the [MNsured Assister Program Update](#).

Jonathan asked for an explanation of the term “agent of record.” Heidi Mathson and Dick explained it is used to attach a specific broker to a specific enrollment so as to inform the carrier which broker to pay a commission for the enrollment. Heidi expressed frustration at the back-end processing of agent of records.

Chris Rofidal asked for further clarification around the unanticipated marketplace changes she had mentioned. Jackie; Christina Wessel, MNsure staff; and Karina Milosovich, MNsure staff indicated this referred to Medica reaching its enrollment cap in November and then reentering the marketplace in late January, the new 2017 renewal process, issues around manual work which required manual enrollments versus system enrollments, and the special enrollment period for premium relief.

Jackie presented slides 6-11 of the MNsure Assister Program Update.

Jonathan asked where the Assister Central webpage lived on the MNsure website. Christina clarified the Assister Central page does not have a page on the MNsure website, but is a separate website. Christina indicated that previously, there were consumers attempting to use the Assister Portal to find someone in their area to assist them.

Chris asked for clarification around the terms “assister” and “navigator.” Jackie clarified that “assister” is an umbrella term that refers to navigators, brokers, and certified application counselors (CACs). Brokers are paid by carriers, while navigators receive per enrollment payments from MNsure. Chris sought further clarification on why a consumer would go to Assister Central if they were seeking a navigator. Heidi indicated it’s a language difference as the Assister Central is an information webpage, providing updates, but the Assister Portal is a place for assisters to log in to find information about a consumer’s specific case. Christina added the Assister Portal is within the Assister Central webpage and brokers and navigators can both use the Assister Portal and the Assister Central page. Christina acknowledged the terminology can be intimidating and her team works to clarify language surrounding assisters.

Jackie presented slide 12 of the MNsure Assister Program Update.

Jonathan asked for clarification about the difference between the Language Line Solutions service and a MNsure translator. Jackie explained that the Language Line provides translations for most languages, while the in-house MNsure translators provide a limited language capacity.

Kathy Sheran, MNsure board member, asked Chris if the answer to his earlier question had been sufficient. Chris expressed he was still a bit confused based on the language in Assister Central. Christina indicated MNsure uses the word “assister” collectively to encompass navigators, brokers, and CACs. Jackie explained a broker would click on “Broker One Stop” in the Assister Central for more information on broker updates, but all brokers, navigators, and CACs can use the Assister Portal.

Matt Flory asked for clarification on what a CAC role would look like, as they are not paid by MNsure or the carriers. Christina indicated these are the individuals in Goodwill-Easter Seals or

hospitals, for example, who have expressed a willingness to assist consumers in completing an application, but focus on their own clients rather than advertising for additional clients.

Jackie presented slides 13-14 of the MNSure Assister Program Update.

Jonathan asked about the audience at which MNSure aims on social media. Christina indicated MNSure's social media is mainly used to engage consumers, but MNSure also encourages assisters to become engaged on social media to engage consumers on their own social media pages.

Peter Musimami asked if the MNSure website was available in additional languages. Christina indicated the website is only in English. Peter asked how people who do not speak English attain information about MNSure. Christina noted that non-English speakers in particular are recommended to seek out a navigator, as many of MNSure navigators speak other languages in addition to English.

Kate Onyeneho indicated that beyond generating content, consumers' comprehension of that content was paramount. Jackie noted the Navigator and Broker Team at MNSure leans on assisters to reach their targeted networks and communities, and encourages social media use to do so. Kate expressed concern about whether the survey captured the full assister perspective, since it was sent out via email and not all assisters responded. Christina indicated that the survey was sent to all assisters and that MNSure had to rely on assisters to reflect the consumer experience they saw from their daily work.

Jackie presented slides 15-16 of the MNSure Assister Program Update.

Martha Eaves, board member, asked if when assisters are recertified each year, MNSure looked into whether they responded to the survey. Christina indicated that completing the survey is not a requirement of recertification.

Christina presented slides 17-22 of the MNSure Assister Program Update, on the Assister Portal Improvements Overview.

Dick asked if there was any planned work for assisters to be able to use the Assister Portal to see everything a caseworker sees. Christina noted that MNSure looking at ways for assisters to obtain a client's case information, but that privacy and security concerns meant that MNSure could not make the Caseworker Portal available to assisters.

Dick clarified that he wanted to know if assisters might be able to see a "read-only" version of the Caseworker Portal. Christina explained there are three portals associated with Cúram: the Consumer Portal, the Assister Portal, and the Caseworker Portal. The last is used by MNSure, the Department of Human Services, and county staff. Christina noted that even a "read-only" version of the Caseworker Portal presents privacy and security issues. Christina explained that the Casework Portal cannot distinguish which consumer is linked to which assister. Dick asked if an agent of record could be used to acknowledge an electronic link between a consumer and an assister. Christina indicated the system just does not have the functionality to acknowledge an agent of record.

Matt Steffens expressed frustration with the lack of progress made on the consumer-focused element of the Assister Portal, citing long hold times driven by assister calls to see the consumer's application.

Dan Miesle agreed with Matt Steffens's comments and noted underlying system issues. Additionally, Dan noted the role of the advisory committees as a place to affect the decisions of the MNsure board related to system improvements. He suggested the advisory committees could make a strong statement about MNsure priorities.

MNsure Board & Staff Update

Aaron Sinner, Board and Federal Relations Director

Aaron presented the MNsure Board and Staff Update, slides 13-22 of the Joint Advisory Committee meeting slide deck.

Aaron discussed the MNsure preliminary budget which approved on March 8, 2017, which was based on current law at the time, but would need to be updated to take into account the impact of the reinsurance bill upon individual market premiums.

Matt Steffens inquired about the relationship between the effectuated qualified health plan premium withhold and the return on investment especially in regards to the navigator grants. Aaron said he had seen return on investment figures for some aspects of MNsure, but had not seen it for the grants, but noted the grants serve not just to lower the uninsured rate, but also to reach out to individuals who are tax credit or public program eligible, but aren't receiving those benefits.

Jonathan asked about the budget carryover from year to year. Aaron noted there is not a statutory requirement around it, but the federal government has indicated they would like state-based exchanges to develop a six- to nine-month budget reserve. However, MNsure has preferred to prioritize enhancing the customer experience rather than saving in a "rainy-day" fund.

Aaron reviewed the current MNsure enrollment statistics.

Aaron moved on to discussion regarding call hold times. Aaron was able to obtain call metrics from the federally facilitated marketplace (FFM). Throughout open enrollment 2017, the call center for Healthcare.gov had an average speed of answer of 6 minutes 26 seconds, and the top three call drivers were plan comparison, creating or managing accounts, and online applications. Aaron indicated the FFM did not provide its service level goal, did say their call center vendor is contractually bound by a monthly average speed of answer. On the assister call side, the FFM received about 34,000 calls from brokers while MNsure received about 35,000 calls from brokers; the FFM received about 18,000 calls from navigators while MNsure received nearly 24,000; and the FFM received an additional 19,000 calls on its Assister Line. Aaron commented that CMS had noted the FFM does not include transfers from the consumer line in these counts.

Denise Robertson asked Aaron to send out a summary of the information he had presented.

Heidi noted that the high volume of assister calls in Minnesota could have been driven in part by manual processes.

Jonathan moved on to the topic of the CMS Market Stabilization Rule, which was released in April. The main update from the rule was that the open enrollment period would be shortened to closely align with Medicare open enrollment; to decrease fraud, waste, and abuse; and to promote continuous coverage.

Jonathan asked Aaron if MNsure was bound by the open enrollment period set by CMS. Aaron reported that the rule dictates the open enrollment period for all exchanges, but in this rule, CMS had explicitly indicated that state-based exchanges had some flexibility to extend the open enrollment period. Aaron noted MNsure is in discussion with the health plans and other external stakeholders about the best way to move forward to ensure there is a benefit to Minnesotans while being consistent with the federal guidelines.

Harlan Johnson expressed frustration with the CMS rule and commented on the difficulty it created for brokers trying to assist both individual market and Medicare enrollees during their overlapping enrollment periods.

Tom Hoffman noted the shorter the open enrollment period, the less time people have to “game” the system. Ann McIntosh asked for further clarification. Matt Steffens explained that if an enrollee needed to have a major surgery, he or she could purchase a low-deductible plan, have the surgery, and then re-select a plan with a higher deductible and lower premiums, all within open enrollment.

Jonathan asked the MNsure board members if there would be any discussion at the MNsure board meeting and if the MNsure board would be open to receiving comment from the advisory committees. Martha indicated the board was open to receiving comment as it examined the situation. Kathy noted the governor is open to utilizing state flexibility when it comes to open enrollment. In addition, Kathy noted it is important to understand how prevalent the “gaming of the system” is and how shortening the open enrollment period will add value.

Jonathan asked if MNsure does not comment on the ruling, if the agency is able to keep open enrollment as it is currently. Aaron indicated that if MNsure takes no action, the fall’s open enrollment period would align with the one dictated by the CMS rule.

Andy McCoy asked if it was possible to move the start date of open enrollment to before November 1 or add time after December 15. Aaron indicated that both options were possible.

Harlan reiterated concerns about conducting enrollment for individual market consumers and Medicare-eligible recipients in the same short time period. Matt Steffens and Dick noted that most brokers are dual, and serve both individual market consumers and Medicare recipients. Dick noted the separate issues related to both types of consumers, especially in regards to recertification and assimilation of new knowledge to update consumers.

Public Comment

None.

Discussion of Joint CSEAC & HIAC Recommendations, Workplan

Jonathan Watson, Chair

Jonathan noted his goal had been for the committees to have a joint recommendation to the MNsure board by summer 2017. Jonathan apologized that HIAC had not been able to focus as much on a joint recommendation, but was encouraged by the work done by both committees related to the health literacy recommendation. Jonathan noted that the HIAC had set goals of developing a recommendation focused on stabilizing the individual market and impacts of that work from federal and state legislation in fall 2017, and a recommendation around strategies to enhance MNsure.org's functionality for assisters in summer 2017.

Dick noted that CSEAC had been concentrated on the assister and consumer facing fronts, particularly focusing on consumer access. In addition, CSEAC had been having a discussion around SHOP.

Jonathan moved on to the brainstorming session and attempted to move the group to discussing and providing a recommendation for items that are less known, such as the role for MNsure as a state-based exchange in 2019 and beyond.

Ken Bence asked about potentially providing a recommendation to elected officials about various successes at MNsure. He pointed to the differences between the MNsure and the FFM call center metrics Aaron discussed earlier in the meeting. Ken felt it would be a good idea to have that information on hand when discussing MNsure's future at the state legislature. Mary Ellen pointed out the committees can only provide recommendations to the MNsure board. Aaron indicated the committees could indicate they recommend MNsure remain as a state-based exchange, to which Ken clarified his point: the committees could provide information to the MNsure board discussing the differing metrics between the FFM and MNsure, for the board's use as they saw fit. Andy commented that he thought without carrier representatives in attendance, the committees were missing an important perspective and overall knowledge of the issue.

Matt Steffens suggested including SHOP in the conversation about a recommendation, specifically regarding how to drive interest in SHOP and get groups enrolled in SHOP. Ann asked if the SHOP plan year 2018 participants were known. Matt Steffens clarified that filing for carriers would be in June, but individuals would not know final rates until October.

Jonathan indicated he believed HIAC could provide the MNsure board with a recommendation related to the length of open enrollment 2018 and asked if CSEAC would be willing to devote their resources to that recommendation. Dick and other members of CSEAC were in agreement.

Jonathan noted the next joint meeting was scheduled for May 18, said he would conduct some policy research before the May meeting to aid in discussion and a possible recommendation.

Jonathan suggested HIAC aim to finalize its recommendation on the assister portal at the June HIAC meeting. Jonathan welcomed the opportunity for CSEAC to join HIAC in that recommendation. Dick suggested that any recommendation HIAC made around assister portal

improvement should acknowledge the technology and resources currently available, and recommend realistic improvements as next steps from that.

Operational Feedback Loop

Jonathan Watson, Chair

Jonathan opened the floor to committee members to provide feedback on the MNsure process, MNsure functionality, or other MNsure issues.

Dick raised issues around the agent of record process. He indicated the front end of tying brokers to specific enrollments is working well, that the back end—transmitting that information to carriers—is still experiencing issues.

Ann noted her frustration with people not understand the root problem of the health care question is the health of citizens. She noted that improve the health of citizens is the best way to drive down cost, and the best way to improve citizens' health is with both health literacy and health insurance literacy. Ann noted she believed MNsure has a role to play in that discussion.

Matt Steffens asked about how to make SHOP more competitive and interesting to potential clients. Matt Flory wondered if people understand what they are paying for with SHOP, and if they understand the value of the plans beyond premium price.

Dave Dziuk indicated the carriers were seeing a lot of retroactive activity, such as people enrolling for January coverage and then dropping off. He added HealthPartners had recently received over 1,200 agent of record changes and was working to process those quickly. Mary Ellen asked for further clarification on the retroactive activity and consumers “dropping off.” Dave clarified that sometimes people are not paying their premium or consumers have changed plans and the carriers do not have the updated information.

Martha raised concerns about the cost of premiums for low-income individuals, and how a small incident like a flat tire might cause them to miss a premium payment. Martha also noted that MNsure has no control over premium rates. Tom reiterated the value of learning the average premium after tax credits.

Next Steps, Future Topics, and Next Meeting

Jonathan Watson, Chair

MOTION: With no objections, Jonathan adjourned the meeting at 5:08 p.m.