2.0 CONSUMER AND STAKEHOLDER ENGAGEMENT AND SUPPORT
Blueprint Application
November, 2012

2.1 Stakeholder consultation plan
Description
In order to maximize the potential of the Exchange’s mission, given the magnitude of its goals and the ambitious timelines for establishment, a sustained and collaborative effort on the part of the State of Minnesota and our public and private stakeholder partners is critical. To that end, Minnesota formed an Exchange Advisory Task Force to provide guidance on issues related to the development of an Exchange for Minnesota. The Advisory Task Force is comprised of a variety of stakeholders to ensure a full spectrum of representation as the Minnesota HIX becomes a functional entity. In addition, Technical Work Groups have been formed to provide assistance on the design and development of the Minnesota HIX. These Work Groups are comprised of a variety of stakeholders that provide technical assistance in numerous areas. As a governance structure is considered by the Governor and Legislature early in the 2013 legislative session, a formal structure and process for continued engagement with stakeholders will be recommended for inclusion to advise the governing entity.

Documentation

<table>
<thead>
<tr>
<th>Document</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1 Stakeholder Consultation Plan white paper</td>
<td>Describes Minnesota’s efforts related to engaging and consulting stakeholders</td>
</tr>
</tbody>
</table>

2.2 Tribal consultation plan
Description
Minnesota has created a Tribal Consultation work group that consists of representatives from state agencies and Tribes throughout the state. Minnesota has a signed tribal consultation policy adopted by the state and four Tribes. In addition, tribal representatives participate as formal members of the Advisory Task Force and multiple work groups.

Documentation

<table>
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<tbody>
<tr>
<td>Tribal Consultation Policy</td>
<td>Signed Minnesota Tribal Consultation Policy</td>
</tr>
<tr>
<td>Tribal Consultation Work Group Agendas and Meeting Summaries</td>
<td>Meeting agendas and summaries of Tribal Consultation work group</td>
</tr>
<tr>
<td>Tribal Resolutions</td>
<td>Approved Tribal resolutions adopting Tribal Consultation Policy.</td>
</tr>
</tbody>
</table>
2.3 Outreach and education

Description
A robust outreach, education and communications plan is essential to the ultimate, long-term success of the Exchange. It must drive consumers to the Exchange by using the right mix of communication and marketing tactics. The plan needs to have a wide enough reach to engage all potential users of the Exchange; have the depth to deliver messaging that resonates with targeted groups; and have the flexibility to shift course midstream in response to changing circumstance or new information.

Minnesota is employing a strategic approach for outreach and education that combines the following components: developing a foundation platform of research, branding and messaging; creating and testing delivery concepts; launching education and outreach initiatives; and refining the approach through measurement and analytics.

Documentation

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<tbody>
<tr>
<td>2.3 Minnesota HIX Outreach and Education Plan white paper</td>
<td>Minnesota HIX Outreach and Education Plan</td>
</tr>
<tr>
<td>2012 Integrated Marketing Communications Plan</td>
<td>2012 Integrated Marketing Communications Plan – 2012 approach for communications, outreach and marketing</td>
</tr>
<tr>
<td>Public Outreach Education RFP Public Education-Outreach Market Research Report</td>
<td>RPF for market research, branding and public relations planning</td>
</tr>
<tr>
<td>Salter Mitchell Market Research Contract</td>
<td>Salter Mitchell contract for market research</td>
</tr>
<tr>
<td>PR Planning Contract</td>
<td>Communications and social media planning contract with Himle Rapp</td>
</tr>
<tr>
<td>MN.IT Contract</td>
<td>MN.IT contract for public education and outreach website</td>
</tr>
<tr>
<td>2.3 Outreach and Education marketing materials</td>
<td>Farm Fest flyer, Chamber info piece and State Fair materials: bookmark, retractable banner, display boards</td>
</tr>
</tbody>
</table>

2.4 Call center

Description
Minnesota’s approach to the design, development, and eventual operation of the contact center and overall HIX customer service functionality is based on a Lean Six Sigma methodology called DMAIC, (Design, Measure, Analyze, Improve and Control), which provides a framework for creating and sustaining new business processes for organizational success. It is an iterative process that will allow for the creation of a customer service function that is ready to operate for Exchange open enrollment starting on October 1, 2013 and continues to improve as the Exchange operates and more information is collected about actual customer service needs and functional requirements.

The Call Center (Contact Center) for the Minnesota Health Insurance Exchange is envisioned to be a part of a comprehensive customer service solution with multiple modes of assistance including web, phone,
in-person, mail, etc. focused on providing outstanding customer service to meet or exceed the expectations and requirements of those who interact with the Exchange. The ultimate design and organizational model of the overall customer service solution, including the Contact Center, will be determined based on governance and policy decisions made early in the 2013 legislative session including the roles of navigators, agents/brokers, counties, tribes, and others, overall HIX technology functionality and resource plans, and outreach and marketing activities.

At this point in Minnesota’s Contact Center development, there have been no decisions made as to the Contact Center operating model, or the proposed processes, technologies or resources to be deployed.

The next phase will be a deep dive evaluation of a refined list of Contact Center and overall customer service options for consideration early in the 2013 Legislative Session, development starting on or before April 1, 2013, operations starting on or before October 1, 2013, and improvement/enhancement into 2014.

Key issues that will drive the decision regarding the Contact Center operating model and overall customer service solution will include who and how certain types of questions are answered, the timing of questions before or after enrollment, coverage type/status of customer, authority to assist with certain questions, mode of assistance (web, phone, in-person, mail, etc.), and funding.

Upcoming activities include:

- **Design** (8/27/12 – 11/16/12) (COMPLETED) Landscape analysis and assessment to facilitate initial design options. Phase 1 has included:
  - 1) Understanding of high level statutory, business, technical, and operational requirements for the HIX customer service function (including call center, consumer services and communications, and billing and payment)
  - 2) High-level review and understanding of existing capabilities and capacities of customer service operations that serve Minnesota Health Care Program enrollees including Medical Assistance
  - 3) Collection of health care industry specific best practices and case studies for benchmarking purposes, and
  - 4) Identification of possible customer service designs to meet the identified needs and high level business process requirements.

- **Measure and Analyze** (11/16/2012 – 1/16/13) Measurement and analysis to support a refined list of detailed customer service solution options that can be operational within six months and allow for refinements and enhancements to occur over time.

- **Improve** (4/1/13 – 9/30/13) Building and implementing the new HIX customer service solution and improving/enhancing services over time.
• **Control** (10/01/13 – and on) Operational customer service solution including business processes, service level agreements, performance metrics, and process improvement cycles.

The operating model option for the Contact Center determined early in the 2013 legislative session will link into the MAXIMUS contract and development underway on the Exchange IT application.

**Documentation**

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<tr>
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<tbody>
<tr>
<td>2.4 Minnesota HIX Contact Center Blue Print Summary</td>
<td>White paper describing Strategy/Activities to date, Landscape Assessment, High Level Contact Center Requirements, Training Approach, Call Volume Approach, High Level description of Contact Center Options</td>
</tr>
<tr>
<td>End to End Process Models</td>
<td>The Enterprise end-to-end process models document the planned flow of Exchange functions necessary to meet federal and state requirements to support individuals, employees, employers, health plans, providers, and assisters.</td>
</tr>
<tr>
<td>MN Technical infrastructure contract</td>
<td>The Minnesota Health Insurance Exchange will leverage the technical infrastructure contract documents in support of evaluating, analyzing and bringing functionality to a level of operational readiness.</td>
</tr>
</tbody>
</table>

**Open Policy Decisions**

The design and organizational model of the Contact Center and overall customer service solution will be determined based on governance, financing, and policy decisions including the roles of navigators, agents/brokers, counties, tribes, and others, made early in the 2013 legislative session. Decisions on the Contact Center will be completed on or before March 31, 2013 with development starting on or before April 1, 2013, operation on or before October 1, 2013, and improvements into 2014.

**2.5 Internet website**

**Description**

The State of Minnesota awarded MAXIMUS the technical infrastructure contract to develop a fully functioning Health Insurance Exchange. The priority of the Minnesota HIX project is to implement an Exchange that is compliant with the MAGI eligibility rules, as well as an Exchange that creates an organized competitive marketplace to facilitate the comparison, choice, and purchase of health care coverage for individuals and employees of small businesses. Through an Exchange, individuals and employees will have access to comparable information on costs, benefits, health care providers, quality, and customer satisfaction for an array of coverage options, and they can use this information to choose and enroll in the health benefit plan that best fits their personal and family needs. Exchanges will also assist eligible individuals and small businesses to receive premium tax credits and cost-sharing reductions or help individuals enroll in Federal or State health care programs.

A Solution Development process has been established with the vendor and the State of Minnesota as a process in defining requirements, design and development of the Exchange. The Solution Development Process diagram (Solution Planning Document v2.0, Section 1.3) identifies all the processes or tasks that occur in each development sprint cycle. In general, each process corresponds to a single task in each development sprint defined in the Project Schedule. There are six development sprints defined in the Project Schedule, so each of these tasks will occur six times. Each process in the diagram is numbered.
and then explained in the Solution Development Process Definitions Table. The description describes the work to be accomplished in each task, the team or roles responsible for completing the task, and the inputs and outputs of the task. The Project Schedule (MINNESOTAIX-ProjectScheduleBaselineV1.1.pdf) details the iterative development sprint cycle and related analysis, testing and implementation activities supporting the implementation of the Exchange.

Functional Business and Technical Requirements for the Exchange application and infrastructure environment are identified in Exhibits A and B of the IT Master Contract (Exhibit A – Functional Requirements, Exhibit B – Technical Requirements). The End to End Process Map identifies the high level complete application solution for the Exchange to satisfy contract and federal requirements and the COTS/development responsibilities and interactions.

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<tr>
<td>Technical Infrastructure contract: Exhibit A – Functional Requirements</td>
<td>The Minnesota Health Insurance Exchange will leverage the technical infrastructure contract documents in support of evaluating, analyzing and bringing functionality to a level of operational readiness. Specific to section 2.5, the areas within the Contract referenced for this area are: Exhibit A – Business Functional Requirements</td>
</tr>
<tr>
<td>Technical Infrastructure contract: Exhibit B – Technical Requirements</td>
<td>The Minnesota Health Insurance Exchange will leverage the technical infrastructure contract documents in support of evaluating, analyzing and bringing functionality to a level of operational readiness. Specific to section 2.5, the areas within the Contract referenced for this area are: Exhibit B – Technical Requirements and Module Definition and Scope</td>
</tr>
<tr>
<td>Solution Planning Document</td>
<td>Solution Planning Document</td>
</tr>
<tr>
<td>IT Project Schedule</td>
<td>Schedule of IT project</td>
</tr>
<tr>
<td>Process models</td>
<td>The Enterprise end-to-end process models document the planned flow of Exchange functions necessary to meet federal and state requirements to support individuals, employees, employers, health plans, providers, and assisters.</td>
</tr>
<tr>
<td>IT Gap Analysis</td>
<td>The gap analysis document captures the Exchange functions that are currently supported by the software packages procured through the technical infrastructure contract. In addition, the document also outlines additional configuration and integration necessary to fully support the Exchange functions detailed in Exhibit A and Exhibit B of the technical infrastructure contract.</td>
</tr>
</tbody>
</table>
2.6 Operating navigator program

Description

Consumer Assistance will be critical to the success of the HIX. In order to ensure quality health care is accessible to consumers and to meet the Affordable Care Act (ACA) requirement that each HIX have a Navigator Program, Minnesota’s Health Insurance Exchange will establish a Customer Assistance / Navigator Program that identifies specific roles and responsibilities. This consumer assistance will provide public outreach and education and help individuals through the eligibility determination process, plan selection and utilization of available subsidies.

As specified previously, Minnesota has established a Navigator, Agent, and Broker Work Group under the Exchange Advisory Task Force. Because final policy decisions for Minnesota’s HIX will not be made until early in the 2013 legislative session, the Navigator, Agent, and Broker Work Group has focused on developing options and general recommendations. As such, Minnesota’s approach is not to assume a single structure for providing consumer assistance. We don’t focus solely on the Navigator Program requirements, but use the term “Consumer Assistance” to address more broadly the navigators, agents/brokers and in-person assister roles. This terminology allows Minnesota and the Navigator, Agent, and Broker Work Group to speak to broader recommendations for consumer assistance in Minnesota.

In supporting the “no wrong door” policy when engaging individuals, all assisters need to be equipped to ensure consumers have access to the right resources, at the right time, to help meet their unique needs. A system which facilitates a streamlined and secure exchange of information amongst all types of certified consumer assisters, and provides the right incentives for active participation will be critical.

Documentation attached to this section provides information on the topics and options under discussion and consideration in Minnesota regarding navigators, agents/brokers, and in-person assisters. Technical documentation from our IT Master Contract and work done to date with our IT vendor describe the technology infrastructure under development to support any policy decisions regarding navigators, agents/brokers, and in-person assisters.

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<tbody>
<tr>
<td>2.6 Navigator White Paper</td>
<td>This document addresses and incorporates all three sections into one document; Operations of a Navigator Program (2.6), an In-Person Assistance Program (2.7) and the roles of Agents and Brokers (2.8).</td>
</tr>
<tr>
<td>2.6 Navigator, Agent and Broker Work Group Presentation</td>
<td>Navigator, Agent &amp; Broker Work Group presentation to the Minnesota Advisory Task Force on 10/24/2012 providing recommendations for Levels of Service (Duties of the Consumer Assistance / Navigator Program) and Training, Certification and Licensure requirements.</td>
</tr>
<tr>
<td>2.6 Navigator, Agent and Broker presentation slides</td>
<td>Navigator, Agent/Broker Work Group: Advisory Task Force Presentation - 12/21/2011</td>
</tr>
<tr>
<td>Navigator and Agents/Brokers</td>
<td>Navigator, Agent &amp; Broker Work Group current landscape breakdown in</td>
</tr>
</tbody>
</table>

2.0 Consumer and Stakeholder Engagement and Support
<table>
<thead>
<tr>
<th>Landscape document</th>
<th>Minnesota; informing the needs and identifying gaps for the populations the HIX will serve.</th>
</tr>
</thead>
</table>
| Technical Infrastructure Contract – Exhibit A | Minnesota Technical Infrastructure Contract – Exhibit A:  
The following sections address **Entire MNHIX Functionality** which supports those entities/organizations providing services via the Consumer Assistance / Navigator Program and their roles within the MN HIX:  
Page 3, Section II. 5, 6, 10  
The following sections address **Individual Eligibility and Exemption** system functionality which supports those entities/organizations providing services via the Consumer Assistance / Navigator Program and their roles within the MN HIX:  
Page 4, Section III, a, 4  
Page 5, Section III,b,2,B  
Page 5, Section III,c,2,E,(ii)  
Page 6, Section III,c,2,H,(ii)  
Page 6, Section III,c,A  
Page 7, Section III,d,6(B)  
Page 8, Section III,d,14  
Page 10, Section III,e,4  
Page 13, Section III,f,1-2  
Page 14, Section III,f,3(E)  
Page 14, Section III,f,6,8-13  
The following sections address **Individual Enrollment** system functionality which supports those entities/organizations providing services via the Consumer Assistance / Navigator Program and their roles and responsibilities within the MN HIX:  
Page 15, Section IV, a,2(B)  
Page 16, Section IV,b,5  
The following sections address **Small Employer Eligibility and Enrollment** system functionality which supports those entities/organizations providing services via the Consumer Assistance / Navigator Program and their roles and responsibilities within the MN HIX:  
Page 18, Section V,b,9 (A)  
Page 18, Section V,b,10 (A)  
Page 20, Section V,c,9  
Page 21, Section V,10 (G)  
The following sections address **Health Plan Benefits and Navigator/Broker Certification and Display** system functionality which supports those entities/organizations providing services via the Consumer Assistance / Navigator Program Assisters and their roles and responsibilities within the MN HIX:  
Page 25, Section VI, b,10  
Page 26, Section VI, d (1-4) |
The following sections address **Fund Aggregation and Payment** system functionality which supports those entities/organizations providing services via the Consumer Assistance / Navigator Program and their roles and responsibilities within the MN HIX:

- Page 32, Section VIII,b,F
- Page 33, Section VIII,c,G
- Page 33, Section VIII,c,2
- Page 34, Section VIII,d 1 – 8
- Page 35, Section VIII,e,3
- Page 36, Section IX, b,1(B)
- Page 37, Section IX, b,4
- Page 37, Section IX, c,2 and 4
- Page 38, Section f,4

**Technical Infrastructure contract – Exhibit B**

Minnesota Technical Infrastructure Contract – Exhibit B: Technical Requirements related to the Consumer Assistance / Navigator Program and associated accountabilities are identified in the following sections of the IT Contract:

- Page 8, Section II, f,2
- Page 16, Section II, k,10

**Business process models**

- **Enterprise end-to-end**
- **Assister**

The Enterprise end-to-end and Assister process models document the planned flow of Exchange functions necessary to meet federal and state requirements to support individuals, employees, employers, health plans, providers, and assisters.

**Open Policy Decisions**

The structure and operation of the navigator, agent/broker, and in-person assister programs will not be made until early in the 2013 legislative session in conjunction with decisions about customer service broadly, including the call center. Decisions for this area will be completed on or before March 31, 2013 with development starting on or before April 1, 2013, and operation on or before October 1, 2013.

**2.7 In-person assistance program**

**Description**

*Reference above Blueprint Certification Application Section 2.6 Operating Navigator Program*

**2.8 Role of agents and brokers**

**Description**

*Reference above Blueprint Certification Application Section 2.6 Operating Navigator Program.*

**2.9 Role of web broker**

**Description**

Some brokers (Web Brokers) enroll individuals in insurance primarily or entirely through a web-based system. Options for defining potential roles of Web Brokers in the Minnesota HIX remain an outstanding issue that could be addressed in the 2013 legislative session.
Open Policy Decisions
May be incorporated pending 2013 legislative session.