

6.0 SHOP

Blueprint Application
November, 2012

6.1 SHOP compliance with 45 CFR 155 Subpart H

Description

The State of Minnesota intends to establish a SHOP compliant with regulatory requirement pursuant to 45CFR 155 Subpart H. Minnesota considers a small employer group as an employer with 2 – 50 employees as defined in Minnesota Statute Chapter 62L.02 subd. 26 and referenced in the attached regulatory bulletin from the Departments of Commerce and Health. Key features of the SHOP will be to allow for small employer groups to sign up and select Qualified Health Plans to make available to their employees. Small employers will be able to select one or more benefit plans for employee selection, select one level of participation for employees to select plans from, or allow their employees to choose from all products offered. To facilitate selection from multiple products from different carriers, small employers will chose a benchmark plan and provide a defined contribution in compliance with federal laws including HIPAA and ERISA. The SHOP will facilitate the eligibility checks and enrollment of employees through the HIX website. The SHOP will facilitate the use of Brokers/Agents through the HIX website for small employers who plan to utilize Brokers/Agents to help them through the plan selection and enrollment process. The SHOP will leverage HIX functions to allow for anonymous shopping and to compare plans and premiums. The SHOP will also support premium calculations as well as any employer tax credits that are applied. Documentation showing compliance with SHOP requirements is included in the attached Technical Infrastructure Master Contract for the Exchange application, business process models, and vendor gap analysis.

Documentation

<u>Document</u>	<u>Description</u>
SHOP White Paper	This document outlines how the Minnesota Health Insurance Exchange will meet the SHOP requirements for establishing and operating an Exchange.
Business Process Models	These 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. Please reference the Enterprise, employee, employer, and health plan process models for this section. Detailed process models from existing products purchased as part of the Exchange application solution that will be refined and configured are also available, but may not be released publicly due to intellectual property protections under the contract.

<u>Document</u>	<u>Description</u>
MN Technical Infrastructure Contract	Ensure that all subcomponents of 6.1 are addressed as well as requirements in 155 subpart H 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 5 Small Employer Eligibility and Enrollment the areas within the Contract referenced for this area are: Exhibit A – Business Functional Requirements 17-21 Section 5
MN Departments of Health and Commerce Regulatory Bulletin	Administrative Bulletin 2012 - #2, regarding the progress for participation and certification including small group size and state law requirements for minimum participation

6.2 SHOP premium aggregation

Description

The SHOP will have the capability to bill employers and collect premiums from the employer and facilitate aggregation of payment from employers to pay multiple carriers for multiple plans selected by employees under defined contribution in the SHOP. Premiums will be aggregated and sent to the related health plan/carrier. The process will allow for aggregation across employee, employer and health plan/carrier. There will be a process to reconcile and manage late payments or non-payments. This will include necessary communications to notify employers if they are late. In the case of employer non-payment, the Exchange will establish procedures for termination of coverage notification to enrollees and notification to carriers as part of this process. Documentation showing compliance with SHOP premium aggregation requirements is included in the attached IT Master Contract for the Exchange application and business process models.

Documentation

<u>Document</u>	<u>Description</u>
Business Process Models	These 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. Please reference the Enterprise, employee, employer, and health plan process models for this section. Detailed process models from existing products purchased as part of the Exchange application solution that will be refined and configured are also available, but may not be released publicly due to intellectual property protections under the contract.
MN Technical Infrastructure Contract	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 5 - Small Employer Eligibility and Enrollment and section 8 –Fund Aggregation and Payment , the areas within the Contract referenced for this area are: Exhibit A – Business Functional Requirements Page 21, Section 5.c.11 Page 31-32, Section 8.b.1

6.3 Electronically report results of eligibility assessment and determinations for SHOP

Description

The SHOP will ensure that the business processes and IT solution will capture the necessary data to provide required reports to Federal agencies including but not limited to HHS, DOL and the IRS. The Minnesota Health Insurance Exchange IT application will serve individuals and small employers through a single system and leverage the same infrastructure and services including connection and reporting mechanisms with the federal data services hub. However, we are awaiting federal guidance on how to electronically report information for tax administration purposes to the IRS. Documentation showing compliance with SHOP requirements is included in the attached IT Master Contract for the Exchange application and business process models.

Documentation

<u>Document</u>	<u>Description</u>
Business Process Models	These 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. Please reference the Enterprise, employee, employer, and health plan process models for this section. Detailed process models from existing products purchased as part of the Exchange application solution that will be refined and configured are also available, but may not be released publicly due to intellectual property protections under the contract.
MN Technical Infrastructure Contract	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 5 - Small Employer Eligibility and Enrollment and section 8 –Fund Aggregation and Payment, the areas within the Contract referenced for this area are: Exhibit A – Business Functional Requirements Page 21, Section 5.c.12 Page 35-36, Section 8.f.1

Open Policy Decisions

We are awaiting federal guidance on how to electronically report information for tax administration purposes to the IRS.