

## Health Industry Advisory Committee - March Report Out

March 12, 2014

## TABLE OF CONTENTS

- Strategic Imperatives
  - \* Alignment & Measurement
  - \* Shared Advisory Committee Survey
- Carrier Concerns Overview
- HIAC IRAAD Tool Ongoing
- Industry Highlight "Consumer Choice"
- Maximizing the HIAC Assets "Utility Optimization"

## **Strategic Imperatives**

- 1. Operations / IT
- 2. Growth
- 3. Experience
- 4. Partnerships
- 5. Disparities
- 6. Meaningful Data
- 7. Outreach
- 8. Communication



### 2014 STRATEGIC IMPERATIVES HIAC & CSBAC

### 8 AREAS OF FOCUS

2014 Strategic Imperatives

- 1. **MNsure IT & Operations Approach:** Focus on building a solid operating model for near term success and future sustainability
- 2. **Patient/Member Experience:** Focus on the consumer experience by improving the application, eligibility determination, and enrollment process, comparison/transparency tools, and overall customer service
- 3. MNsure Growth Strategy & Alignment: Focus on growth creating pathways to increase membership, ensure financial sustainability, solidify alignment and optimize business initiatives
- 4. **MNsure Partnerships:** Focus on selecting the right partnerships and vendors to maximize the industry and community assets in support of the MNsure mission
- 5. Healthcare Disparities: Focus on being a champion, a part of the solution, and key collaborator in bringing stakeholders together to improve healthcare disparities in MN
- 6. Meaningful Data: Focus on creating the data infrastructure to enable MNsure to conduct data analysis and reporting that demonstrates level of success on a broad range of goals and informs ongoing strategy.
- 7. Outreach: Focus on initiatives to expand and improve outreach, especially into underserved communities, and eliminate barriers to enrollment.
- 8. Communications: Focus on improving MNsure communications with all stakeholders, including consumers, navigators and brokers, providers, carriers and the small business community.

#### Alignment & Measurement

- 1. Alignment: The HIAC would recommend the shared planned and development of a MNsure strategic plan to support the mission of MNsure and highlight the above imperatives. MNsure and all its vendors, partners and Board would be aligned to the same strategic imperatives to optimize our resources.
- **2. Measurement:** The HIAC would like to explore a method to measure this alignment to provide a actionable insights for improvement.

### Shared Advisory Committee Survey

We will be launching a shared advisory committee pulse check survey to provide a level of magnitude into each of the above strategic imperatives.

# **MNsure HIAC Carrier Concerns**

Carrier Concerns

DRAFT List of Technical Issues Not Yet Resolved

While there has been much time and attention given to improving the outward functionality of the MNsure website and customer contact center, there is still a long list of issues that are mostly behind the scenes yet contribute to on-going negative consumer experiences and undue burden on carriers, providers, and navigators.

- While the reliability of the website has improved, many consumers still get stuck in the process before completing enrollment, plan selection and payment. This creates confusion for consumers and carriers, and is very time consuming for provider staff to verify coverage
- Consumers are unable to verify coverage and benefits while stuck in the enrollment process
- Connectors and navigators spend many hours assisting consumers in the enrollment process, and will not get compensated if the process is not completed
- Providers are left with uncompensated care

#### The following is a list of technical problems affecting the carriers.

- 1. Carriers are facilitating Cancel and Refund requests instead of MNsure MNsure should be doing this as designed (as the source of truth)
- 2. Carriers are facilitating Full Family Term requests instead of MNsure -MNsure should be doing this as designed (as the source of truth)
- 3. Carriers are facilitating Plan Changes within Carrier (i.e. Carrier Plan A to Carrier Plan B) as long as there is no CSR impact. MNsure should be doing this as designed (as the source of truth)
- 4. Carriers are manually processing enrollments from 834ST Excel files that MNsure sends (the 834ST or 834 Short Term file is enrollment sent via an Excel format instead of the as designed 834 EDI format)
- 5. Carriers are manually processing payments from 820ST Excel files that MNsure sends (the 820ST or 820 Short Term file is payment accounting sent via an Excel format instead of the as designed 820 EDI format)
- Carriers are having to do a lot of analysis when they receive conflicting enrollment information over multiple MNsure enrollment files. Multiple scenarios; Received an 834ST and a later 834EDI that conflicts, received an 834EDI and a later 834ST that conflicts, received an 834EDI and a later 834EDI that conflicts.

- 7. Carriers will be doing a lot of manual processing to support Life Event changes during Special Enrollment Period (SEP). Carriers will be manually processing from an 834ST Excel file when Consumers add a dependent, remove a dependent, change plans, change APTC amount, etc during a qualifying SEP Life Event scenario.
- Carrier Concerns
- Carriers will be manually processing address changes (even if they do not drive an SEP) because the MNsure system cannot currently accommodate any changes after initial enrollment and they will be sending an 834ST for these.
- Carriers are accommodating adds to Broker assignment to a sold case due to MNsure system limitations. Carriers are allowing for an AOR process to retro assign a Broker. Carriers are also attempting to appoint un-appointed Brokers after the fact.
- 10. Carriers have to manually change effective dates for Consumers if the effective date received from MNsure is incorrect. For example there were some 2/1 effective enrollments that had to be changed to 1/1 effective enrollments.
- 11. Carriers will need to work with MNsure on a very large enrollment reconciliation effort and also a financial reconciliation effort in order to support and help facilitate MNsure databases getting updated and assuming the position of "source of truth". This will be a very intensive activity and most likely will be required multiple times.
- 12. Carriers are having to maintain a change log for audit purposes due to all of the manual enrollment and payment application aspects

#### The following are general concerns from our carriers:

- 1. All of the above have technology/system impacts as well as an Operations impacts (due to manual processing of data as well as people hours to support the facilitation/interaction with the consumer)
- 2. All of the above have data quality impacts (manual work means potential for people error and consumer-impacting issues and additional people hours to resolve) and introduce considerable Carrier risk.
- 3. Carriers have difficulty supporting Consumers due to dependency on flawed MNsure processes and data (enrollment status implications, financial implications to the Consumer's premium owed, subsidy aspects, etc).
- 4. Carriers spend a lot of people hours with MNsure Enrollment POC to resolve 1) Consumer issues/inquiries reported through either MNsure's Contact Center or Carrier's Contact Center, 2) Enrollment Issues/Discrepancies, 3) Missing payments or suspect payments.



 Carriers spend a lot of people hours either on the phone with Consumers or on offline analysis and follow-up with Consumers to resolve Consumer issues with MNsure.

### **Recommendations:**

Carrier Concerns

- The MNsure Board needs to be aware of the depth of these on-going issues and ensure that the staff are applying the necessary resources to resolve them as quickly as possible
- MNsure should strengthen its engagement with connectors and navigators
- MNsure should work with carriers in forward-looking planning of future state (ie Roadmap or Strategic Planning). If they do not lay out the pathway, there is the risk of making decisions now that are very costly to recover from in the future, as well as delaying the transition toward the more ideal/as designed solution.
- A joint lessons learned activity between Carriers and MNsure would be helpful to add end-to-end perspective to assist with prioritizing MNsure development (technical and operational).

# HIAC IRAAD – Issues, Risk, Assumptions, Actions, Decisions

The purpose of this IRAAD is to provide the MNsure Board and leadership with a management tool that will foster communication, idea exchange, and open problem solving in the advancement of MNsure. The HIAC will use this tool to co-manage concerns from various industry partners and work closely with MNsure to address those concerns.

X   🖌	5	• (°" •    <del>-</del>	_		IAC IRAAD - M	icrosoft Exce	ł.		_		_	-	_	- 0 - X
File		Home Insert Page La	iyout Formulas	Data Review View Corel PDF Fusion	Nuance PD	F								∧ () — ∰ X
Paste	_	Copy + Format Painter	- 11 - A A A - □	= = = ≫ · ■ = = 詳録 型 Merge & Center · Alignment	General \$ - % •	*.00 .000 .000 *.0	Condition: Formatting			e Insert v	Delete Format	Σ AutoSum * Fill * Clear * Edi	Sort & Find & Filter * Select *	
	A	27 - 🤄 .	f <sub>x</sub>											2
	A	В	С	D	E	F	G	H I	J K	LN		0	Р	Q R
1	Tracking Number	Area of Focus - Title	Primary Concern Category . Operations / Financial / Service / IT / General Management / Marketing / Compliance / Systemic		HIAC Owner	Open Date	Close Date	<ul> <li>Issue</li> <li>Risk</li> </ul>	<ul> <li>Assumption</li> <li>Action</li> </ul>	4 Decision	Provided to who at Mnsure	Comments	<ul> <li>MNsure IT &amp;</li> <li>Perations Imperative</li> </ul>	MNsure Growth A perative MNsure Member/Patient
2		Website Reliability	п	<ul> <li>While the reliability of the website has improved, many consumers still get stuck in the process before completing enrollment, plan selection and payment. This creates confusion for consumers and certifers, and is very time consuming for provider staft to verify coverage</li> </ul>				x		_				
3	2	Coverage Verification & Enrollment Process	Operations	Consumers are unable to verify coverage and benefits while stuck in the enrollment process				x						
4	3	Navigators / Connectors - Time & Compensation Concerns	Service	<ul> <li>Connectors and navigators spend many hours assisting consumers in the enrollment process, and will not get compensated if the process is not completed</li> </ul>				x						
5	1	Uncompensated Provider Care	Systemic	Providers are left with uncompensated care				x						
6	5	Cancel of Refund Request	Financial	<ol> <li>Carriers are facilitating Cancel and Refund requests instead of MNsure – MNsure should be doing this as designed (as the source of truth)</li> </ol>				×						
7	5	Full Family Term Request	Operations	<ol> <li>Carriers are facilitating Full Family Term requests instead of MNsure - MNsure should be doing this as designed (as the source of truth)</li> </ol>				x						
H 4 → Ready		IRAAD / Report / Sheet3	3 / 🔁 /	<ol> <li>Carriers are facilitating Plan Changes within</li> </ol>					_	_	Ш		1 🛄 100% 🔶	



# Industry Highlight - "Consumer Choice Presentation"

Please click the below link or open the below document to see the full presentation.

# Maximizing the HIAC Assets "Utility Optimization"

The HIAC would like to offer its collective competencies towards supporting the MNsure mission. We ask that the MNsure Board seek to incorporate the HIAC into the strategic planning, oversight functions, and other areas of need to add bandwidth and diversify perspectives. The committee is suggesting that optimizing our utility is in the best interest of MNsure and the broader stakeholder community.

