Draft Health Industry Advisory Committee
Meeting Minutes

Thursday, June 29, 2017, 2:30 – 5:00 p.m.
UCare, 500 Stinson Boulevard NE, Minneapolis, MN 55413

Members in attendance: Jonathan Watson – Chair, Kenneth Bence, Forrest Flint, Carl Floren, Thomas Hoffman, Hillary Hume, Andy McCoy (via phone), Heidi Mathson, Chris Rofidal, Bette Zerwas

Members not in attendance: Ghita Worcester – Vice Chair, Kyle Bozentko, David Dziuk, Harlan Johnson, Daniel Miesle, Reuben Moore, Charles Sawyer

Staff in attendance: Aaron Sinner – Board and Federal Relations Director, Stephanie Grisell – Legal Analyst

Meeting Topics

Welcome & Introductions
Jonathan Watson, Chair

Jonathan Watson, chair, called the meeting to order at 2:35 p.m. Jonathan informed the committee that the meeting would emphasize a working session related to how to enhance and improve MNsure’s functionality for assisters. He referred to the agenda found in the meeting slide deck.

Members introduced themselves.

Approval of Minutes
HIAC Committee Members

MOTION: Ken Bence moved to approve the draft February 23 meeting minutes. Chris Rofidal seconded. All were in favor and the minutes were approved.

MOTION: Thomas Hoffman moved to approve the draft May 30 meeting minutes. Ken seconded. All were in favor and the minutes were approved.

Public Comment / Operational Feedback Loop
Jonathan Watson, HIAC Chair

No public comment.

No operational feedback loop comments.
2017 Congress & MN Legislature Update

Jonathan Watson, Chair

Jonathan discussed state and federal legislative movements related to healthcare. He provided a high level breakdown of the Better Healthcare Reconciliation Act (BCRA), which was before the U.S. Senate. Jonathan noted there were no explicit changes in the bill that would affect state-based exchanges, but any changes to the individual market would have an immediate impact on state-based exchanges. In addition, the U.S. Senate bill uses a bronze plan to benchmark tax credits, which would automatically raise premiums for comparable coverage by $3,000.

Chris asked about the Medicaid cuts in BCRA. Jonathan clarified that the Medicaid cuts were rolling back the Medicaid expansion which was authorized under the Affordable Care Act (ACA). Heidi Mathson explained it as an eligibility cut for Medicaid, and Jonathan added that the bill would fundamentally change how the federal government funds Medicaid. Tom Hoffman informed the committee that nationally, 86% of individuals who purchase health insurance on the exchange receive some level of tax credit, and the remaining uninsured would likely be eligible for affordable coverage. He suggested there needed to be a national focus to balance the risk pool on the exchange by bringing in those healthy, but low income, consumers.

Heidi discussed the 1332 waiver program offered by the federal government, which provides states with a lot of flexibility in regards to their individual market. Jonathan noted BCRA would allow waiver submissions with approval by the state legislature, though a recent state law change required any waivers have to be reported to the state legislature.

MNsure Board & Staff Update

Jonathan Watson, Chair

Jonathan and Richard Klick, the chair of the Consumer and Small Employer Advisory Committee, presented the joint advisory committee recommendation on open enrollment length to the MNsure board on June 21. Jonathan felt the joint recommendation was well-received, but might not be possible for MNsure to implement for the upcoming 2018 open enrollment period.

Aaron Sinner, MNsure staff, noted one complicating factor was the 1332 waiver that the Department of Commerce had submitted to the federal government for review seeking to create a reinsurance program. The 1332 waiver process provides the federal government with 180 days to respond; while the federal government understands taking the full window would mean the waiver would not be able to affect 2018 rates, it is nonetheless unclear when Minnesota will receive a response. This complicates MNsure’s ability to start the 2018 enrollment period early, since Commerce’s plan certification timeline could be dependent on the timing of a response.

Aaron provided an update on the June MNsure board meeting. Aaron noted the MNsure board had a new chair, Phil Norrgard, with Kathy Sheran as vice-chair. Peter Benner remains on the board but cannot serve another term as chair. Aaron noted total enrollments through the MNsure exchanged had reached half a million, including over 127,000 qualified health plan
enrollments. Qualified health plan enrollments had leveled off, as MNsure was now in a special enrollment period, but MinnesotaCare and Medical Assistance enrollments continue at a higher pace since enrollment is open year-round for public programs.

Aaron noted that the board meeting metrics had incorporated the average premium post-tax credit, where the deck had previously included only aver premiums pre-tax credit.

Ken inquired about the request for proposal (RFP) MNsure was conducting and how that may bring about new investments in IT. Aaron noted that in fall 2017, MNsure had issued a request for information, which had now turned into an RFP for four main components: system of record, the shopping tool, consumer decisions support tools, and SHOP. The deadline for RFP submissions is August 5. Aaron noted there were no new federal funds to assist with this investment, which would be made out of MNsure’s premium withhold revenue. MNsure’s goal was to have in place any potential IT investments for open enrollment 2019.

Jonathan asked for clarification on when 2018 rates will be presented. Heidi indicated the initial 2018 rates would become public on July 30, with final rates released October 1. Aaron added that with the 1334 waiver up in the air, the Department of Commerce had asked carriers to submit two sets of rates—one assuming the 1332 waiver was approved, and one assuming it wasn’t.

**Assister Functionality Recommendations and Discussion**

*Jonathan Watson, Chair*

Jonathan reviewed slides 15-23 of the meeting deck. He noted a goal of adopting a joint recommendation at the July 10 joint advisory committee meeting, for presentation to the MNsure board at its July 26 meeting.

Committee members discussed the recommendations on slide 20, related to the portal. There was confusion as to which portal was being discussed. Heidi noted the CSEAC draft minutes said Matt Steffens, a member of the CSEAC, could see more information than she could.

Aaron explained there were two different portals: a caseworker portal, for use by staff at MNsure, the Department of Human Services, and county workers; and the assister portal, which assisters could use. There are two large categories of assisters: brokers and navigators. Additionally, one subset of brokers was carrier direct sales staff, who work for a health carrier. One subset of navigators was certified application counselors (CACs), who work for a hospital or clinic and enroll only patients of their employer. Aaron noted that divisions in access within the portals was intentional based on the different responsibilities of different users.

Committee members suggested the recommendation about increasing assister portal training was vague and should be clarified further.

Jonathan moved on slide 21 on agent of record (AOR) recommendations. Heidi clarified this is the underlying piece that leads to brokers being paid, which can take weeks or months. She explained that the current process has the consumer’s enrollment is sent over first and then the AOR for the broker’s association with that enrollment later. Heidi also noted that since brokers
are not paid commissions until consumers pay their premiums, on-exchange commissions can be delayed since on-exchange enrollees have a 90-day grace period for payment. Heidi noted the industry standard is a monthly payment. Jonathan suggested recommending MNsure do what it can to improve the process so on-exchange commissions match the industry standard.

The committee reviewed the recommendations on slide 22 related to the Assister Resource Center (ARC). Committee members placed emphasis on resolving the administrative issues related to life event changes, federal tax information updates, and password resets. Heidi noted the life event change process before open enrollment 2017 left many consumers’ accounts in incorrect standing and consumers were unable to enroll with their correct eligibility.

The committee reviewed the recommendations on slide 23 related to operations and process. Heidi clarified recommendation 11, which should focus on the difficulty of brokers being referred back and forth between MNsure and the carriers. Jonathan added one further recommendation, number 14, which would request a callback feature where brokers or consumers could leave their number and be called back by a MNsure agent, rather than waiting on hold.

Jonathan suggesting refining some of these recommendations and then prioritizing them. When he reviewed the CSEAC notes from June 27, Jonathan believed most of their conversation was around the “read-only” access and staffing up the ARC line during the upcoming open enrollment period. Aaron noted the CSEAC members focused more on immediate changes, such as staffing up the ARC line, but indicated the CSEAC members also expressed a desire to prioritize these recommendations. Hillary Hume recommended breaking the recommendations into buckets. It was decided the recommendations would be prioritized as short-term and long-term, and then categorized as either IT, training and education, or operations.

Committee members discussed how to prioritize and categorize the recommendations. Committee members agreed to make recommendation four a bullet within recommendation one. Committee members clarified recommendation five by changing it to recommending that AOR be transferred simultaneously with a consumer’s enrollment. Committee members eliminated recommendation seven, as they felt it was redundant and matched many of the recommendations under the portal recommendations. Heidi requested recommendation 11 be eliminated, as that recommendation was not within the scope of this discussion, and instead would involve having consumers apply directly with carriers rather than going through the exchange.

Jonathan and committee members built a chart categorizing the recommendations as follows:

<table>
<thead>
<tr>
<th></th>
<th>Short Term (OEP 2018)</th>
<th>Long Term (OEP 2019 onward)</th>
</tr>
</thead>
<tbody>
<tr>
<td>IT</td>
<td>#5</td>
<td>#1 (including bullet points), #2, #12</td>
</tr>
<tr>
<td>Training/Education</td>
<td>#12, #13</td>
<td>#9, #10</td>
</tr>
<tr>
<td>Operations</td>
<td>#3, #6, #8</td>
<td>#14</td>
</tr>
</tbody>
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HIAC Workplan – July-November 2017

Jonathan Watson, Chair

Aaron indicated that many of the HIAC members’ terms would be ending October 31, without eligibility for an additional term. Aaron asked members to appeal to their connections to apply for positions on the committee this fall to maintain a good mix of voices from across the industry. Members completing their final terms were:

- Jonathan Watson
- Ghita Worcester
- Ken Bence
- Dave Dziuk
- Forrest Flint
- Harlan Johnson
- Heidi Mathson
- Reuben Moore
- Chuck Sawyer

Jonathan thanked the committee members for their hard work on recommendations and noted the committee had made four recommendations to the MNsure board in the last 18 months. Upon review of the upcoming meetings, including board and joint meetings, there were only two board meetings remaining in the year. Jonathan noted the committee could provide one or possibly two more recommendations to the board.

Jonathan presented a few ideas about potential recommendations, including SHOP, individual market stabilization, MNsure reporting metrics, marking and communications planning, and roles and responsibilities of brokers, carriers, and MNsure. Bette Zerwas noted the committee should acknowledge the topics discussed at the January 19 HIAC meeting and think about recommendations from those topics. The slide deck from the January 19 meeting presented the topics the HIAC members wished to focus on.

Heidi discussed SHOP and its potential future, noting there is one carrier. She suggested it was a non-issue, as SHOP had not illustrated success around the country.

Forrest suggested providing a SHOP recommendation would be most beneficial to the Committee’s time. He suggested developing a recommendation to discontinuing SHOP. Aaron noted the federal government would have to approve MNsure discontinuing SHOP, but that it would be a request MNsure could make of its federal regulators. Tom noted some states utilized their own individual market exchanges but relied on the federal marketplace for SHOP.
Tom and Hillary expressed interest in potential marketing and education to enroll young people in exchange coverage to balance risk pools. Hillary suggested focusing on parents whose children would soon be turning 26. Tom suggested it was the poor but healthy uninsured who did not realize they could have relatively cheap insurance. Both suggested further education to bridge knowledge gaps.

Bette suggested a recommendation analyzing MNsure’s role in the insurance market, the potential re-insurance program, and in the stabilization of the individual market. Jonathan noted that because the HIAC makes recommendations to the MNsure board, some of these topics would likely be out of the scope of the HIAC’s charter. Tom noted that someone needs to take on the role of developing market stabilization policy recommendations.

Jonathan raised the possibility of re-examining MNsure’s active purchaser powers. Aaron clarified for committee members that this is a power of the MNsure board that it has not currently exercised, but that the board could set parameters around health plans or carrier submissions that would need to be met in order to sell on-exchange coverage. Chris noted this could be a good idea when there is more competition in the individual market.

Jonathan indicated he will do some individual research on SHOP and come to the next HIAC-only meeting on August 17 with more information.

Bette suggested a recommendation could be completed quickly related to MNsure’s reporting metrics, aligning MNsure’s expectations with industry standards.

Jonathan suggested 75% of the August 17 meeting could be devoted to developing a SHOP recommendation and 25% devoted to a marketing presentation by a MNsure staff member.

**Next Steps & Meeting Schedule**

*Jonathan Watson, Chair*

Jonathan reviewed upcoming meeting dates, noting the joint advisory committee meeting on July 10.

**MOTION:** Chris moved to adjourn. Forrest seconded. All were in favor and the meeting adjourned at 4:36 p.m.