



# Health Industry Advisory Committee Meeting Minutes

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**Thursday, May 23, 2019, 2 – 4 p.m.**

**UCare, 500 Stinson Boulevard NE, Minneapolis, MN 55413**

**Members in attendance:** Joel Ulland – Chair, Thomas Hoffman – Vice Chair, Matthew Aiken, Carl Floren, Hodan Guled, Hillary Hume, Jenifer Ivanca (via phone), Maria Lima-Leite (via phone), Daniel Miesle

**Members not in attendance:** Danielle Paciulli, Nancy Yaklich

**Staff in attendance:** Christina Wessel – Senior Director of Partner and Board Relations, Morgan Winters – Senior Director of Operations (via phone), Aaron Sinner – Board and Federal Relations Director, Eva Groebner – Legal Analyst

## Meeting Topics

### Welcome & Introductions

*Joel Ulland, Chair*

Joel Ulland, chair, called the meeting to order at 2:01 p.m. Members introduced themselves.

### MNSure Update: GetInsured Implementation Project

*Morgan Winters, MNSure Director of Operations*

Morgan Winters, MNSure staff, provided the committee with background on MNSure’s current implementation project with GetInsured. In late 2017, MNSure entered a contract with GetInsured, an IT vendor that has equipped other health insurance exchanges with interactive tools to streamline insurance purchasing. Morgan explained that the GetInsured implementation is taking a phased approach to gradually introduce functionality into the MNSure exchange. In July 2018, MNSure launched GetInsured’s anonymous shopping tool to aid consumers with interactive health plan comparison. Morgan shared that the tool had a successful roll out, with continued positive feedback on its functionality.

Presently, Morgan is leading select MNSure staff in integration testing to ensure that the new GetInsured shopping and enrollment system will effectively interact with the Minnesota Eligibility Technology System (METS) used by MNSure and the Department of Human Services. MNSure plans to deploy the new functionality in September.

Morgan shared new functionality with the committee that will empower consumers during their 2020 plan selection in the next open enrollment period. The GetInsured launch will introduce a consumer dashboard, added helper text, a countdown to the next enrollment deadline, the ability to shop for current and future year coverage, hardship exemption functionality for catastrophic enrollments, plan termination capabilities, and visibility of information entered on the application similar to what is sent to the chosen health insurance provider upon enrollment. Matt Aiken inquired whether a consumer's income will be visible on the new dashboard. Morgan clarified that income is not forwarded to health insurance carriers, only the result of the eligibility determination, and therefore income will not be displayed on the GetInsured dashboard.

Morgan demonstrated an enrollment for a fictional household of two. The GetInsured system introduces a new breakdown of individual household members' health care eligibility, including the ability to update tobacco use status throughout the year.

Morgan noted that GetInsured includes new functionality to enroll different household members into different health plans. MNSure can currently accomplish this manually, but consumers have not been able to achieve this without calling to speak to a MNSure specialist. Morgan also informed the committee that for the first time ever, Minnesotans who are eligible for tax credits in greater quantity than their premium will be able to utilize the surplus on their dental coverage. Additionally, a slider tool will be introduced with the GetInsured fall launch, allowing a consumer to visually adjust the amount of tax credits they want to apply toward their premium.

Joel noted that a high call driver for MNSure is password resets. He asked if GetInsured will expand password reset options for consumers. Morgan explained that although that functionality is outside of the scope of the tool, MNSure does have plans to upgrade self-service options for consumers related to password resets to lessen calls to the MNSure Contact Center.

Hillary Hume suggested that MNSure introduce spell check features to avoid mistyped city names. Morgan noted that MNSure intends to explore more standardized features within the health care application in order to prevent simple mistakes, but because the GetInsured tool accepts passive intake from METS, the root of the problem would not be corrected in the GetInsured program.

The remainder of Morgan's enrollment presentation involved the steps that a consumer would currently use through the GetInsured anonymous shopping tool. Morgan explained how entering up to five household prescriptions and entering care utilization information can help GetInsured assess the most appropriate plan available, rather than shopping based only on premiums.

Finally, Morgan noted that a consumer will be able to terminate their health insurance policy through GetInsured, though only prospectively to the end of a month. Mid-month policy terminations will still have to be completed manually by a MNSure specialist in the Contact Center, in order to adhere to federal regulations and Minnesota state statutes.

Dan Miesle asked if GetInsured has the ability to remember plan selection if, for example, a consumer wants to confirm with their doctor that it is in-network. Morgan confirmed that each household member can add a plan selection to the shopping cart without signing a contract to commit to the plan.

Hodan Guled asked if the “countdown to enroll” banner would apply to consumers’ individual enrollment windows during special enrollment periods. Morgan confirmed that the banner has high functionality and can start a countdown once MNsure is able to confirm a consumer’s eligibility for special enrollment.

## **Review & Approval of Prior Meeting Minutes**

*Joel Ulland, Chair*

**MOTION:** Matt moved to approve the draft April 25 meeting minutes. Hodan seconded. All were in favor and the minutes were approved.

## **Public Comment/Operational Feedback**

*Joel Ulland, Chair*

No public comment.

Hodan offered operational feedback for MNsure to utilize social media to invite the public to advisory committee and board meetings. Aaron Sinner, MNsure staff, said he would take this feedback to MNsure communications staff for consideration. He also informed the committee that MNsure had relocated its office outside of downtown St. Paul.

## **Political Landscape**

*Joel Ulland, Chair*

Joel updated the committee that the legislative session had adjourned without finalizing a state budget, and a special session would need to be called to pass budget legislation. On May 19, Governor Tim Walz, Senate Majority Leader Paul Gazelka and House Speaker Melissa Hortman had reached an overall budget deal and announced the concessions made by each to progress the budget to finalization, with several details left to committee chairs in the House and Senate to work out.

Joel explained the aspects of the overall agreement that impact the health insurance sector and MNsure. First, the provider tax will continue, but will be decreased from the current 2% to 1.8% on January 1, 2020. The agreement also included an extension of Minnesota’s reinsurance program for an additional two years. Finally, Joel informed the committee that a blue ribbon commission would be established to assess how to reduce the Health and Human Services budget over the next two years.

Joel shared that on the federal level, the Ways and Means Committee of the U.S. House of Representatives had been working on a bill to address “surprise billing” and that the bill appeared to have bipartisan support, but not many details had been made available yet.

## **Underserved Populations**

*Carl Floren, Hodan Guled, and Hillary Hume, HIAC Members*

Hodan [presented a description](#) of the characteristics of underserved or vulnerable populations that have limited access to health insurance coverage (slide 2). Dan asked if those in need of mental health help would be identified as an underserved population. Hodan explained that in this scenario, individuals in need of mental health could be considered a high risk for healthcare problems.

Hodan summarized for the committee results from the Health Access Survey, published by the Minnesota Department of Health (slides 3-4). Significant disparities were noted for individuals that do not identify as white, and individuals that are not native to the U.S., families with a lower household income near the federal poverty level, lower level of education, in poorer health status, and who had limited or no access to the internet. Additional assessment of statistics on the Health Access Survey revealed that a majority of uninsured individuals are permanently employed by someone else and work 31-40 hours per week.

Finally, Hodan presented research from the State Health Access Data Center (SHADAC) that revealed that a vast majority of uninsured individuals live in the Twin Cities area (slide 5).

To lower the uninsured rates, Carl, Hillary and Hodan recommended that MNSure market year-round, develop over-the-phone enrollment options, and for MNSure to lead outreach efforts (slides 6-8).

Hodan noted that in 2018 MNSure processed 319,200 sign-ups outside of the open enrollment period. Hillary suggested that enrollments during the open enrollment period tend to be renewals, so reminding citizens that job changes during the summer, or having a baby partway through the year are good examples of special enrollment opportunities for otherwise uninsured individuals. Joel also noted MNSure could see increased premium withhold revenue if there are more participants. He recommended that advertisements reach more diverse populations, aside from the suburban examples in current MNSure advertising.

Hodan elaborated that individuals with limited or no internet access could benefit from having application options over the phone. Christina Wessel, MNSure staff, noted that there are capabilities for assisters to work on behalf of the individuals they represent, but there are legal obligations that the assisters and MNSure staff face, so any suggestion within this realm would need to be carefully crafted.

Regarding a MNSure-led outreach effort, Hodan suggested that MNSure could personalize MNSure's presence in the community rather than only sending MNSure partners into community outreach opportunities. Carl, Hillary and Hodan suggested MNSure could create an internship program for students to participate and lead these efforts.

## **Next Meeting Topics**

*Joel Ulland, Chair*

Joel reminded the committee that the June 27 meeting will focus on recapping the previous "deep dive" issues from March, April and May meetings in order to present recommendations to the MNSure Board of Directors in July.

Jenifer Ivanca asked if the HIAC would be discussing active selector again, following on the April discussion. Joel agreed it could be included as an item on the June agenda.

## **Adjourn**

*Joel Ulland, Chair*

**MOTION:** Matt moved to adjourn. Dan seconded. All were in favor and the meeting adjourned at 3:56 p.m.