

# **MNsure Board of Directors Meeting Minutes**

Wednesday, July 21, 2021, 1 – 3 p.m. Remote: via WebEx

Participants in attendance: David Fisher, Suyapa Miranda, Steffanie Stoffel, Andrew Whitman

Participants not in attendance: Commissioner Jodi Harpstead

**Staff in attendance:** Nate Clark, Gregory Poehling, Dave Rowley, Libby Caulum, Kari Koob, Christina Wessel, Morgan Winters, Emily Cleveland, John Nyanjom, Angela Benson, Joel Ingersoll, Mary Robinson

Guests: Hodan Guled, Matt Schafer

# **Meeting Topics**

#### Welcome

Suyapa Miranda, Board Chair

The meeting was called to order at 1:02 p.m. by Suyapa Miranda, chair.

Suyapa read MNsure's purpose: The purpose of MNsure is to ensure that every Minnesota resident and small business, regardless of health status, can easily find, choose and purchase a health insurance product that they value and does not consume a disproportionate share of their income.

Like the previous board meeting, Suyapa noted that this month's board meeting is being conducted remotely. To accurately record votes during today's meeting, Suyapa said MNsure's chief legal counsel, Dave Rowley, will read the roll call at those times so the vote of each board member can be recorded.

## **Public Comment**

None.

## Administrative Items

Suyapa Miranda, Board Chair

#### Approve June 16 Meeting Minutes

**MOTION:** Stephanie Stoffel moved to approve the draft meeting minutes from June 16, 2021. Suyapa seconded. Dave Rowley took a roll call. All were in favor and the minutes were approved.

#### Advisory Committee Appointments

Suyapa introduced Christina Wessel, senior director of partner & board relations. Christina explained there was a change in leadership for the Consumer and Small Employer Advisory Committee (CSEAC). The committee has nominated Olga Sheveleva as chair and Anna Guler as vice chair and is recommending to the board to approve their appointments.

Olga is the vice president of development and strategic planning for Metropolitan Community Services. Anna works as a disability advocate at Metropolitan Community Services and has a JD from the University of St. Thomas School of Law.

**MOTION:** Andrew moved to appoint Olga Sheveleva chair and Anna Guler vice chair of the Consumer and Small Employer Advisory Committee. Stephanie seconded. Dave Rowley took a roll call. All were in favor and the motion was approved.

#### Compliance Work Group Update

Suyapa said the Compliance Work Group was recommending the FY2022-2023 Privacy Program Strategic Plan and the FY2022-2023 Compliance Program Strategic Plan for approval by the full board. She introduced the MNsure staff who are presenting the two plans, John Nyanjom and Emily Cleveland.

John Nyanjom, director of compliance and program integrity, presented the compliance program strategic plan. He reported that this was the fifth iteration of the plan and the tasks are the same as in the previous six years. He commented that executing the tasks in the plan will allow MNsure to maintain a strong compliance program. He thanked the board and the work group for its continued support and the MNsure executive team and staff for their support and work in standing up and operating the compliance program.

**MOTION:** David Fisher moved to approve the Compliance Program Strategic Plan for fiscal year 2022-2023 as written and presented. Stephanie seconded.

David commented that the board work group vetted the privacy and compliance plans thoroughly and they are in excellent shape. He recommend the approval of the compliance plan.

Dave Rowley took a roll call. All were in favor and the motion was approved.

Emily Cleveland, policy director and privacy officer, presented the privacy program strategic plan. She noted this two-year plan is a road map for the work of the Privacy Office, which includes reporting activities and progress regularly to the Compliance Workgroup. She thanked the Compliance Work Group for their consideration and feedback and for bringing it to the full board.

**MOTION:** David Fisher moved to approve the Privacy Program Strategic Plan for fiscal year 2022-2023 as written and presented. Andrew seconded. Dave Rowley took a roll call. All were in favor and the motion was approved.

# **CEO** Report

Nate Clark, CEO

#### Enrollment Update

Nate began by discussing METS activity on slide 5 of the MNsure slide deck.

Sign-ups as of end-of-day July 18, 2021, for enrollment year 2021:

- 278,469 total Minnesotans have signed up for comprehensive coverage
  - o 142,445 QHP sign-ups
  - o 112,776 Medical Assistance applications
  - o 23,248 MinnesotaCare applications
- Approximately 59% of QHP-enrolled households are receiving tax credits, averaging about \$507 per month.

Sign-ups continue to be strong since the open enrollment period closed on December 22, 2020, with 20,000 Minnesotans enrolling in coverage.

More than 13,200 Minnesotans signed up through the COVID-19 special enrollment period that ended July 16. Nate said this activity is another indication that Minnesotans have been taking advantage of the benefits offered and demonstrates the flexibility of a state-based exchange to open special enrollment opportunities.

He said there are many other opportunities for Minnesotans to get covered. Other special enrollment options are open for those who have a qualifying life event. There is also a special enrollment period available to eligible Minnesotans who have received unemployment insurance this year.

Nate then presented the information on slide 6. MNsure's strong sign-up activity has translated into a stable effectuation rate. He explained that effectuated enrollments means the consumer has made the first payment toward their health plan and their coverage is in effect. Enrollments have increased slightly since the June report, and compared to 2020, there is a slight increase year to date. He noted the post-APTC premiums are at \$247 in June, which is a monthly savings of just over \$50 compared to January. This is a result of the American Rescue Plan Act.

Nate discussed enrollments by rating region. He noted that rating area 8 has seen an average reduction in premiums of about 11%. In rating area 4, the average reduction is 21.5%. This is another indication of the impact of the American Rescue Plan Act.

#### Finance Update

Nate said that the presentation of the finalized FY2022 budget will be moved to the October board meeting. A key aspect of having a July budget presentation is to update the premium withhold revenue projections for the 2022 plan year based on health insurance carriers' preliminary rate filing information. This year the preliminary rates are being released July 23. He said they would wait to present a budget that reflects updated projections for FY2022.

Although FY2021 has ended, transactions between state agencies (such as invoices from DHS and MNIT) will continue trickling in until the hard close in August. Nate commented that even though a final budget isn't being presented at this meeting, MNsure is continuing to monitor resources and expenses, and is confident about supporting the operating plan in place today.

Regarding the year-to-date premium withholds, Nate said that resources are in line with what was projected in March. He said MNsure is optimistic that this stable course relative to what has been projected will continue.

#### Legislative Update

Nate reported that the state legislature held a special session in June to finish the state budget for the next biennium. All the outstanding budget bills did pass in time for the new fiscal year and the session ended July 7.

Some legislative actions are important to MNsure:

- Minnesota Premium Security Plan extended through December 2022 with \$3.844 million appropriation to MNsure. This legislation extended reinsurance for another year. This appropriation supplements MNsure funding in FY22 and FY23 and replaces the revenue MNsure loses because of reinsurance (reinsurance reduces premium withhold revenue and creates a deficit for MNsure). The plan allows carriers to reassess the impact of reinsurance on their plan year 2022 rates, thus the preliminary rates were moved back to July 23.
- Approval to use newer system to complete background studies for MNsure-certified assisters. DHS performs these checks for MNsure, and they had been using a legacy system to complete this work. The legislation gives approval for DHS to use a newer system to complete these background studies.
- \$2 million for additional one-time grants to MNsure assisters. These funds are being reallocated from assister grants that weren't expended during the pandemic. Navigator grantees experienced a decline in the number of Minnesotans seeking enrollment assistance due to COVID-19, so the Navigator Coalition advocated for repurposing these grant dollars to help assisters. These are DHS funds that MNsure administers; it's budget-neutral for MNsure. The plan is to distribute these funds in the before the end of August.

Other notable actions included new requirements for telehealth coverage, new requirements for state agencies to study proposed changes to health benefits before they become law, federal

background study compliance for all state agency employees with access to federal tax information, and addressing the "family glitch" in MinnesotaCare.

David asked about the MinnesotaCare family glitch. Nate said DHS is still in the planning stages for it, and we don't know yet how it will be implemented. He explained that it will fix the family glitch for those enrolled in public programs, not private coverage. It is a significant benefit for those families who will be affected.

#### American Rescue Plan Act (ARPA) Implementation

Nate said the first two phases of implementation launched successfully in May and June. The third was completed at the end of June, and it makes lower monthly premiums available to those who have received unemployment insurance any time this year. Several thousand enrolled members are now eligible to take advantage of this benefit, and those who are uninsured or insured outside of MNsure might be eligible for these additional savings.

Nate said a recent survey determined about 16% of the unemployed are uninsured, much higher than overall state uninsured rate. MNsure is doing extensive statewide marketing, press social media and outreach through our assister partners to get the word out about the special 60-day enrollment period for those who are eligible. He added MNsure is also partnering with DEED to build awareness. This benefit is only available in 2021, so MNsure will continue to make it a priority for the rest of the year.

#### ARPA Grant Funding Request

Nate then provided an update on the funding request MNsure is making through ARPA. MNsure requires investments in systems and technology to make the APR benefits available to Minnesotans. The legislation made \$20 million available to help state exchanges implement the features of the plan, and MNsure could receive up to \$1.33 million.

The grant process had limitations on activities that are eligible for reimbursement; "exchange modernization," for example, is eligible. There were also limitations on the amount of funding that could be used to reimburse costs incurred before the award date. Nate said the award date is estimated to be September 10, 2021.

Up to 40% of the award can be used to cover costs incurred between the date the legislation was enacted (March 15, 2021) and the grant submission deadline (July 20, 2021). MNsure is eligible to request up to \$533,000 to cover costs of implementing the benefit.

MNsure has requested the remaining ~\$800,000 post-award costs for other exchange modernization activities--for example, IT system enhancements, changes to notices that improve accessibility, and statewide public awareness and outreach activities to make Minnesotans aware of the ARPA benefits available to them.

MNsure submitted its request July 20. CMS projects that awards will be announced by September 10, 2021.

#### **Operations** Update

Nate then covered information in slides 14-18. The Contact Center dashboard shows a spike in callers during the first week of May. He explained this corresponds to the completion of the first phase of the ARPA implementation, where MNsure redetermined eligibility for benefits that generated notices. MNsure had a stronger call volume than expected. Another spike was at the end of the COVID-19 SEP the week of July 11.

Nate discussed the life event processing graph. The number of workable cases is just above 100 and the average time to process cases is three days. He commented that this shows the strong performance by the operations team and it's important because the ability to get people enrolled in coverage is one factor that's directly correlated to consumer satisfaction.

Nate closed by thanking staff and partners for the successful implementation of the COVID-19 SEP and of significant provisions of federal law that expanded benefits to Minnesotans. He continues to be impressed by the energy, commitment and dedication the team brings.

Suyapa thanked Nate and his team for their work.

David asked whether the October board meeting would be in-person in. Nate said that with the end of the state's public health emergency, the requirement to meet remotely has ended, so the assumption is that by September, in-person meetings could resume at the MNsure office.

Nate also commented that MNsure re-opened the office the first week of July, with a Contact Center new hire training class and a group of staff working on a hybrid schedule as part of a return-to-work pilot.

Nate asked the board if they would be concerned about meeting in person starting this fall. Stephanie asked if there would be an option to attend remotely if not able to be in St. Paul. Nate said there have been options to join remotely prior to COVID-19 and that could be continued. Stephanie said the in-person meetings would be a welcome opportunity. Nate agreed, especially as they are expecting new board members to be appointed this fall.

# IT and Executive Steering Committee Update

#### Gregory Poehling, MNIT

Gregory presented slides 20-33 of the slide deck.

Gregory thanked the board and started with an update on the COVID-19 Relief APTC Changes Project (slide 20). All project milestones have been completed and the project close process will start after the 30-day warranty period. He said MNsure, MNIT and MNsure's vendor came together to get this work done in a timely manner to get real benefits to many Minnesotans so quickly. He thanked Nate and his team for their work and leadership.

Gregory then moved to the next slide, which has been presented at a previous board meeting. There was one change since the June meeting: The number of projects that are on hold due to COVID-19 has been reduced from four to two because two projects will not be funded in decisions made in May by DHS's Enterprise Architecture Board. He anticipates the other two will remain on hold through the end of the federal public health emergency. He reminded the board there is still a risk that more staff reassignments may happen when the public health emergency ends, and this could impact other active METS projects.

The unfunded projects (METS Eligibility: Income and METS Electronic Eligibility Verifications (Discovery)) have been removed from the METS FFY2021 roadmap, and both are relevant to MNsure. The earliest they could be reconsidered and funded is FFY2023.

Gregory then discussed the pending decisions for returning to normal operations. The state peacetime emergency ended July 1, but the federal emergency constitutes most changes MNIT will make. It's still expected to go until December 31.

The key steps in returning to normal operations for MNsure are planning and a notice for public program enrollees who would be moving to private coverage eligibility once the federal emergency ends. Delivery of that notice is being coordinated with DHS. He reminded the board that the coordination to return to normal services is a big effort. Many functions are involved in implementing the return to normal operations.

He then spoke about 2022 open enrollment. MNIT is working closely with MNsure over the next several months planning and preparing. Dates have not yet been finalized but the planning assumes a November 1 start date.

Regarding upcoming releases, Gregory said there were no changes to the fall release and everything is on track. For the winter release, there are three efforts scheduled and all projects are relevant to MNsure. The other three deliverables happening this winter outside of the METS release date are also relevant to MNsure.

Gregory then moved on to the rolling deliverables schedule updates. Two projects were unfunded as he mentioned previously and two were added (Eligibility and Enrollment Certification and Grant/Pope County Merger). One other update is that the Eligibility Message Functionality project shifted into the closure phase.

He discussed the two added projects. The Eligibility and Enrollment Certification project is being done because of a CMS requirement. The Grant/Pope County Merger (Western Prairie) project Is due to a merger of human services operations in those counties. It is expected to be in effect in January 2022.

He gave two more updates on the rolling deliverable schedule for the ongoing/annual projects. METS Disaster Recovery Exercise 2021.1 moved to the closure phase and the 1095-B Tax Year 2020 project has been closed.

Gregory then gave a preview of the FFY2022 roadmap. This will be presented at a METS Executive Steering Committee workgroup meeting in the next week. It reflects funding decisions made by DHS' Enterprise Architecture Board in May. Two projects were added: Cost Sharing for MA and Curam Upgrade 2022. It doesn't include any potential legislative initiatives or

projects; DHS is still assessing what METS project work might be needed to fulfill legislative requirements from this most recent session.

Suyapa thanked Gregory for his presentation.

# Health Industry Advisory Committee Presentation on Recommendations

#### Matt Schafer & Hodan Guled

Suyapa provided an overview to board members of the two advisory committees, the Health Industry Advisory Committee and the Consumer and Small Employer Advisory Committee. She said committees both respond to requests from the board for guidance on a particular question or issue or bring recommendations based on priorities identified by committee members. The presentation today is from the Health Industry Advisory Committee that represents the broker community, health plans, health care providers and other experts in the health care industry.

Suyapa introduced the committee members presenting the committee's recommendations. Matt Schafer is the chair of the Health Industry Advisory Committee and director of government relations at Medica. Hodan Guled is the vice-chair of HIAC and chief executive officer of Briva Health, a MNsure-certified navigator organization.

Hodan thanked the board for the opportunity to present the recommendations.

Hodan said the MNsure Health Industry Advisory Committee has been discussing ways to advance health equity within the MNsure marketplace. Due to the COVID-19 pandemic and its disproportional effect on racial and ethnic minority groups, ensuring equitable access to health care for all Minnesotans has become one of the committee's top priorities.

HIAC's first recommendation focuses on health equity including the progress made so far and the ways to identify gaps and opportunities for improvement.

Hodan said the World Health defines health equity as "the absence of unfair and avoidable or remediable differences in health among population groups defined socially, economically, demographically or geographically." She said that to ensure health equity within the MNsure marketplace, everyone regardless of socioeconomic status and background should have access to health care they need.

She said we have made great strides in Minnesota since 2013. The uninsured rate has declined from nearly 9% to 4.7% in 2019 across all groups. Overall there has been huge progress across socioeconomic groups. As we continue to advance health equity and equitable access to health care for all Minnesotans, in looking at the data, there are persistent disparities in racial and ethnic groups across income and geographic regions.

Hodan presented data from slides 4 and 5. The first graph shows Minnesota's uninsured rate as a percentage of poverty level in 2019, from the Minnesota Health Access Survey. Looking at household income, as income increases the uninsured rate declines. Families in the lowest income brackets have the highest uninsured rates, across all ethnic and racial groups and all

geographic regions. The groups with lower incomes face unique disparities that are disadvantages to gaining health coverage.

The next graph looks the uninsured rate by race and geography. The uninsured rate of nonwhite Minnesotans is about 2 ½ times greater than whites. Minnesota has made progress since 2017 but the disparity still exists. In the Twin Cities and greater Minnesota, the differences between whites and non-whites' uninsured rates are about the same, though for greater Minnesota the overall uninsured rate is higher than in the Twin Cities. There are more differences in uninsured rates when broken down into smaller groups such as Black, white, American Indian, those born outside the U.S., etc.

Suyapa asked Hodan how immigrant communities would compare to these graphs. Hodan said they have data stratified in both white and non-white groups by immigration status; immigrants do have a higher uninsured rate. Suyapa asked why that is and Hodan said immigrants face persistent barriers like technology, language, literacy and access to information. Greater Minnesota also has less internet access and that can also be a factor.

Hodan said HIAC's first recommendation is to do a health equity assessment of the MNsure marketplace and collect good data on disparities--where are gaps, what is working or not working, opportunities for improvement, etc. The purpose would be to advance health equity in the MNsure marketplace.

HIAC recommends hiring an independent entity to conduct the assessment. She said there are existing assessment tools such as the M-HEAT Tool, developed by the Texas Health Institute, which looks at different areas--organizational commitment to health equity, plan management and health equity, community engagement and collaboration, assisters, marketing and communications, and marketplace outcomes.

Hodan said it's important to gather data from the communities experiencing disparities, data from the marketplace and public data to come up with recommendations and see what is working well and what isn't working so well.

Stephanie asked if they have identified organizations that could do this assessment and if there is a cost estimate. Hodan said they don't have an estimate, but they could request that information from other organizations that have done the work. The Texas Health Institute has partnered with other state marketplaces, so that would be one possibility. Suyapa said the board and its workgroups could take the opportunity to do research as well.

Matt Schafer then presented the second recommendation. Matt introduced himself and thanked the board for their service, and thanked Hodan for her work on health equity, and leadership in looking at the committee's work through an equity lens.

He explained the committee had started work on their second recommendation in May before the state peacetime emergency ended in Minnesota.

The second HIAC recommendation is for MNsure to take active steps to maintain open lines of communication with other state agencies as Minnesota and the U.S. continue to unwind measures to address the pandemic.

Matt said MNsure's biweekly calls with the insurance carriers have provided an open line of engagement in this regard.

HIAC recommends that MNsure use its platform to reach out to Minnesotans about the importance of getting vaccinated as well as continuing preventive and well care visits. Committee members observed that messaging about using telemedicine had an impact through the second quarter of 2020. However, last fall and winter people started having more in-person visits and they had more medical needs, after delaying care. Matt said it's important to encourage people to get the care they need by the means that is most comfortable for them.

The committee also recommends MNsure and stakeholders help educate constituents about how they may be affected by the transition out of the peacetime emergency, including the effects of any change in the reinsurance program or American Rescue Plan subsidies on premiums and premium tax credits. It's important for Medical Assistance and MinnesotaCare enrollees to get the help they need if transitioning to private coverage or to other public coverage, due to changes in circumstance like job loss or a reduction in income.

Suyapa thanked Matt and Hodan for their presentation and recommendations. She said that health equity is important to MNsure, and that the communications suggested in the second recommendation are also critical. She recommended the board use their work groups to do more work, strategizing and planning on these topics, and suggested that staff and work groups do research as a follow-up action item.

David agreed that these were important recommendations and those strategies would be satisfactory.

Matt thanked the board for their time and attention. He asked to let him know if they have requests for HIAC to address in their meetings. Hodan thanked the board for their work and asked for those with more questions to reach out to the committee.

Suyapa said this was good guidance for the board's work in work groups.

## **New Business**

Suyapa Miranda, Board Chair

No new business.

# Adjourn

Suyapa stated that the next board meeting may be scheduled for September. The board will be notified, and a public meeting notice will be posted once the date is set.

David asked if there needs to be a certain number of people meeting in person for a quorum. Dave Rowley said just one board member must be present in person as per the open meeting law, as long as everyone can be heard and roll call votes can be taken of all members in attendance.

Suyapa adjourned the meeting at 2:28 p.m.