MNsure Board of Directors Meeting Minutes

Wednesday, September 14, 2022, 1 – 4 p.m.
Hybrid: Remote via WebEx and in-person
355 Randolph Avenue, Suite 100, St. Paul, MN, Mississippi Conference Room

Participants in attendance: David Fisher, Stephanie Stoffel, Dr. Daniel Trajano, Andy Whitman

Staff in attendance: Angela Benson, Libby Caulum, Nate Clark, Emily Cleveland, Claire Hahn, Joel Ingersoll, Kari Koob, Mary Robinson, Dave Rowley, Christina Wessel, Morgan Winters, Mike Wright

Meeting Topics

Welcome

Stephanie Stoffel, Board Vice Chair

The meeting was called to order at 1:04 p.m. by Vice Chair Stephanie Stoffel, who facilitated the meeting, as Board Chair Suyapa Miranda was unable to attend.

Vice Chair Stoffel 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.

Vice Chair Stoffel noted there was no quorum so no action will be taken unless a fourth board member arrives. MNsure’s chief legal counsel, Dave Rowley, conducted a roll call for attendance and David Fisher, Vice Chair Stoffel, and Dr. Daniel Trajano were present.

Public Comment

None.

Andy Whitman joined the meeting, and a quorum was reached.

Administrative Items

Stephanie Stoffel, Board Vice Chair

Vice Chair Stoffel introduced the sole administrative item for today: to approve July 20 meeting minutes.
MOTION: Dr. Trajano moved to approve the meeting minutes. Mr. Whitman seconded. Mr. Rowley took a roll call; all members present voted in favor and the motion passed.

Vice Chair Stoffel explained that the board was deferring the planned presentation of goals and outcomes for 2023 to the next board meeting in October when more members would be present for the discussion.

Affirmative Action Program Presentation

Emily Cleveland, MNsure Policy Director & Privacy Officer

Ms. Cleveland first provided an overview of MNsure’s affirmative action program, which is housed within the Accessibility & Equal Opportunity (AEO) office:

- All state agencies, including MNsure, are required to have an AEO office.
- As MNsure’s dedicated AEO official, Ms. Cleveland is responsible for developing, coordinating, implementing, and monitoring the agency’s affirmative action program.
- Minnesota Management and Budget (MMB) requires all state agencies with more than 25 employees establish an affirmative action plan that is consistent with statewide policies; MNsure follows the process prescribed by MMB.
- The current affirmative action plan is available on the website: MNsure 2020-2022 Affirmative Action Plan (PDF)

MNsure’s affirmative action program involves two main ongoing efforts: setting hiring goals and establishing the two-year affirmative action plan and working with human resources (HR) to monitor staffing and hiring.

Setting Hiring Goals

The affirmative action plan requires analysis and monitoring staffing levels for three protected groups: racial and ethnic minorities, women, and individuals with disabilities. Ms. Cleveland also noted that identification into these groups is self-reported by applicants and employees.

MNsure has recently updated our affirmative action plan for the next two-year period (fiscal years 2022-2024) and submitted to MMB for review. The process included analyzing staffing and hiring data over the past three years compared with labor statistics for the Twin Cities metro area, since it is the agency’s main hiring pool, to determine candidate availability for each protected group category.

Mr. Fisher asked which agency designates the three protected groups; Ms. Cleveland responded that it comes from MMB and applies statewide. Mr. Fisher commented that the three groups seem comprehensive and would cover any underrepresented group that he can think of.
Mr. Whitman asked if the affirmative action plan discriminates against white applicants. Ms. Cleveland responded that the plan is non-discriminatory for everyone and emphasized that the hiring objectives are goals based on job market availability, not requirements or quotas.

Dr. Trajano asked for confirmation that MMB approves the plan and that the MNsure Board of Directors does not weigh in; Ms. Cleveland confirmed this is correct and that MMB provides oversight to ensure consistency across state agencies.

Ms. Cleveland shared a table from the current plan to illustrate which protected class categories have active hiring goals and what those goals are (slide 11). Sections marked “monitor” indicate where MNsure’s staff level is aligned with candidate availability in the local job market, and therefore there is no active hiring goal — only monitoring to ensure consistent status. Sections left blank indicate areas where MNsure’s staff level exceeded candidate availability, though in practice these are being monitored as well.

Vice Chair Stoffel asked if Ms. Cleveland could identify the gaps for the two instances where MNsure has active hiring goals. Ms. Cleveland responded that in the professional category, the hiring goal is 56% for females, and current status is 54%. In the Officials & Administrators category, the hiring goal is 24% for racial & ethnic minorities, and current status is 16%.

Ms. Cleveland explained that when hiring goals are in place, MNsure is required to identify specific practices or approaches to achieve the goals as well as possible barriers. For a relatively small agency like MNsure, losing or gaining even one staff member can make the difference for reaching a hiring goal (or not) in some job categories. MNsure also has a stable workforce, which can mean reduced opportunities to hire.

**Monitoring Hiring Process**

The AEO and HR offices work together to monitor and review staffing changes throughout the year and progress towards hiring goals. For example, based on the latest data, as of 9/14/2022:

- **Job category: Professionals** (75 employees)
  - Hiring goal for females: 56%
  - Current status: 54%

- **Job category: Officials/Administrators** (17 employees)
  - Hiring goal for racial and ethnic minorities: 24%
  - Current status: 16%

Dr. Trajano asked a clarifying question about which protected class categories were being referenced with which job category. Ms. Cleveland explained that she was presenting data about female representation in the professional job category because there is no active hiring goal for racial and ethnic minorities in that job category and that MNsure’s staffing levels are above the industry availability.
Vice Chair Stoffel asked Ms. Cleveland to reiterate what triggers a goal being set. Ms. Cleveland explained that the only time a hiring goal is set is when MNsure’s staffing level for a protected class category is less than the candidate availability in the metro area hiring pool.

Using the example for Officials/Administrators, Dr. Trajano asked whether MNsure’s goal of 24% for racial and ethnic minorities reflects what’s available in the hiring pool. Ms. Cleveland confirmed that yes, the hiring goal is the availability for that job category, based on labor market statistics provided by MMB.

Mr. Whitman asked whether this process is required for all Minnesota state agencies, and Ms. Cleveland answered that it is required for all agencies with more than 25 staff. Secondly, Mr. Whitman asked how MNsure compares to other state-based exchanges. Ms. Cleveland responded that she hasn’t compared MNsure staffing with other exchanges and that the affirmative action plan is a state, not federal, requirement.

Mr. Fisher asked how the hiring goals work in practice; for example, more interviews or preference given for people in protected groups because of their underrepresented status. Ms. Cleveland outlined that when two conditions are met — an active hiring goal and MNsure is hiring in that job category — then AEO and HR monitor the job posting and the interview process and work with the hiring manager to ensure compliance with the affirmative action plan. For example, in cases where a candidate from an underrepresented group applies and meets minimum qualifications for the position, the candidate is offered an interview. Mr. Fisher asked a follow-up question about what happens if the AEO does not accept the rationale from a hiring manager for hiring a candidate not in the protected class. Ms. Cleveland responded that if the intent or decision were not clear, it would lead to a discussion with the hiring manager to better understand the circumstances.

Ms. Cleveland concluded that all MNsure staff have a role in compliance with the affirmative action plan, from the CEO setting the tone from the top to HR recruiting candidates and all employees ensuring a respectful workplace.

Dr. Trajano thanked Ms. Cleveland for the presentation and asked whether MNsure knows the makeup of MNsure qualified health plan (QHP) enrollees and public program enrollees in terms of these protected groups (racial and ethnic minorities, women, and individuals with disabilities). He commented that representation is very important, and wondered whether, even if we meet our active hiring goals, MNsure staff would be representative of the people we serve. Vice Chair Stoffel added that representation in particular job categories that are more public-facing may be something to investigate.

Dr. Trajano also asked about the process set by MMB and whether it changes depending on leadership at MMB or in the Governor’s office. Mr. Rowley responded that the state’s practices have been fairly consistent and developed over time, though the Walz administration has had an increased focus on affirmative action plans and surrounding policies.
Broker Enrollment Center Initiative and Navigator Grant Program

Awards and Recipients

Christina Wessel, MNsure Senior Director of Partner Relations

Broker Enrollment Center Initiative

Ms. Wessel explained that the purpose of the Broker Enrollment Center Initiative is to partner with a small number of broker agencies that commit to providing easy access to enrollment support and plan selection guidance for consumers. This year’s request for proposals was the first open solicitation for the program since 2018 and resulted in three new partners joining. A map of all 18 broker enrollment center locations is available in multiple languages on the MNsure website. The core of the partnership is a shared financial commitment to a joint advertising campaign with MNsure; this year, MNsure will dedicate over $57,000 of our marketing budget into this joint campaign with a matching amount from the selected brokers.

Dr. Trajano asked a question about the proposed “family glitch” fix and potentially newly APTC-eligible consumers, and whether brokers are planning any specific outreach to reach this population as part of this effort. Ms. Wessel explained that right now MNsure is working on educating our broker partners regarding the proposed eligibility rule changes and is also communicating about the enhanced benefits that were extended another three years by the Inflation Reduction Act. She also mentioned that MNsure is actively looking to partner with more brokers overall.

Navigator Grant Program

For fiscal year 2023, MNsure has invested $4.2 million in grant funding awarded to 22 navigator grantee organizations. The grant funding provides financial support in addition to the per-enrollee payments available to all navigator organizations. The purpose of the Navigator Grant Program is three-fold: to support a year-round, professional workforce of navigators, to ensure that there are navigator organizations representing populations experiencing the highest uninsured rates, significant health disparities, and greatest barriers to enrollment, and to work with partners who have demonstrated effective methods of outreach. Ms. Wessel emphasized that grantees are distributed across the state and highlighted the addition of two brand-new grantees this year — Isuroon and Indian Health Board.

Mr. Fisher asked, given the large number of partner organizations across the state, how MNsure keeps in touch with all of them and ensures they are working in the best interest of MNsure and its mission. Ms. Wessel clarified that there are about 180 navigator organizations that employ about 700 navigators total, with an additional 900 brokers and 300-400 certified application counselors (CACs). She explained that her team is in communication with partners on a weekly basis, hosts monthly webinars and “assister assemblies,” and MNsure also provides annual certification and recertification so the assister community is regularly reacquainted with its duties and obligations.

Vice Chair Stoffel observed that there are some areas of southern and northern Minnesota that seem to not have a navigator grantee, and asked whether that stems from a lack of
organizations in those areas, or whether they exist but are not applying. Ms. Wessel responded that, in large part, gaps are due to particular areas being more rural and not having major population centers; though the map can be misleading as navigator grantees and their paid partners serve a wider swath of counties than the individual office locations may indicate.

**CEO Report**

*Nate Clark, MNsure Chief Executive Officer*

**Enrollment**

Mr. Clark began his presentation by thanking Ms. Cleveland and Ms. Wessel for their presentations and acknowledging their contributions to the organization. Mr. Clark provided an overview of MNsure enrollment data through August 31, 2022 (slide 20). Since November 1, 2021, over a quarter million Minnesotans have signed up for coverage through MNsure, including:

- 147,590 qualified health plan (QHP) sign-ups
- 105,847 Medical Assistance (MA) applications
- 12,109 MinnesotaCare applications

About 60% of QHP-enrolled households are receiving tax credits averaging approximately $512/month per household. To date, Minnesotans have received a cumulative $182,289,112 in tax credits this year.

Turning to effectuated enrollments and average premiums in 2022 (slide 21), MNsure’s enrollment has been steady from July to August. Comparing January to August, MNsure has experienced about a three percent decline, which is consistent with previous years.

Dr. Trajano asked how these numbers compare to the prior year. Mr. Clark noted that since MNsure changed the methodology for reporting 2022 effectuated enrollments in recent months, he did not have year-over-year comparison immediately available but agreed providing this information is a good suggestion and that year-over-year comparisons will be available with the January report.

Mr. Fisher asked about reporting tax credit amounts in different ways (for example, average APTC by household on slide 20) and whether the savings outlined on slide 21 were for individual enrollees or households. Mr. Clark apologized for any confusion and explained that the average APTC number given on slide 20 applies to households receiving tax credits, whereas the average pre- and post-APTC premium numbers on slide 21 apply to the entire enrollee population, including those who do not receive tax credits.

Mr. Clark acknowledged that Dr. Trajano raised a question about the data reported on slide 22 at the board’s last meeting in July, and his suggestion that it would be helpful to see information about the uninsured rates in these areas also. Mr. Clark explained that MNsure relies on the Minnesota Department of Health and SHADAC for data about Minnesota’s uninsured
populations, and has learned that getting microlevel data (such as at the county level) is not possible given the available data. Secondly, Mr. Clark noted that reporting uninsured rates specifically alongside QHP enrollees could result in misperception that there is a connection between being uninsured and being eligible for a QHP; uninsured Minnesotans may not be eligible for a QHP. MNsure is investigating whether to start reporting enrollment for Minnesota’s public health programs. Dr. Trajano responded that since MNsure has an oversight role and provides funding for navigators, that the board deck should include some reporting on their effectiveness in terms of enrolling lower income Minnesotans to public health programs.

Mr. Clark shared the premium withhold revenue totals (slide 24) and noted that the end-of-year target ($21.7 million) is from the final budget approved in July, and actual premium withhold totals are tracking in line with that projection.

Next, Mr. Clark reviewed a number of metrics included in the board member’s packet but generally not discussed during meetings (slides 25-29):

- Average daily call volume — increases through the year. Service goal is 80% of calls will be answered within 5 minutes. Ongoing hiring and training in the Contact Center leading up to open enrollment effectively decreases service level; as new hires begin, call times can lengthen.
- Qualified life events (QLE) — open enrollment traditionally sees an uptick in QLE processing.
- Appeals dashboard — number of appeals and average days open are relatively stable. Special enrollment period appeals remains the top (most frequent) issue.
- Resolution review dashboard — unlike appeals, which are adjudicated by Minnesota Department of Human Services (DHS) human services judges, this dashboard reports on cases reviewed by a special team within MNsure, the resolution review team or RRT. The RRT was created a few years ago to improve services delivered to consumers. The time to resolve a consumer’s issue using a human services judge can be lengthy, while a large percentage of cases can be resolved internally and without a human services judge. Compared to an average appeal time of 36 days, an RRT case can be resolved within two business days.

Mr. Whitman asked for confirmation that this just for private plans (QHPs) and not for public programs; Mr. Clark confirmed that’s correct. Mr. Whitman asked about the appeal process for public programs; Mr. Rowley explained that DHS currently does not have this type of resolution review process in place, and believes all public program issues would need to go to an appeal.

Mr. Fisher asked about the number of “no shows” for appeals (about 30%) and asked whether these are in-person meetings. Mr. Clark answered that after the appeal is filed with DHS, a human services judge collects information and schedules a meeting (which can be in-person, but not necessarily). “No shows” are situations in which the judge initiated the hearing, but they were not able to connect with the complainant. Mr. Rowley added that if an appeal is dismissed as a “no show,” typically the judge has made multiple attempts to reach the complainant or reschedule the hearing.
Vice Chair Stoffel added that she is impressed with MNsure putting together its own program to help consumers. Mr. Clark acknowledged that this was due to Mr. Rowley’s team’s foresight and consideration, and also that of former MNsure board member Martha Eaves, who worked to ensure that the new RRT process would not prevent anyone who wanted to submit an appeal from doing so.

**Additional Updates**

Mr. Clark reminded the board that open enrollment is coming up (begins Nov. 1). Over the next few weeks, MNsure will hit the following milestones in preparation:

- Increasing Contact Center staff to handle the larger volume of calls expected
- Checking eligibility and renewing eligible consumers
- Minnesota Department of Commerce will announce final insurance rates for 2023 on September 30
- Online plan comparison tool available in early October

At the next board meeting, MNsure staff will provide greater detail about preparation efforts, final plan rates, the 2023 insurance market and communication, outreach and public awareness strategies.

Mr. Clark also briefly covered a change to the federal public charge rule. The practices in place previously had a chilling effect on health insurance enrollment for non-U.S. citizens. With the new final rule, Homeland Security will not penalize individuals who choose to access health-related benefits that are available to them when considering their applications for legal permanent resident status.

**IT and Executive Steering Committee Update**

*Mike Wright, MNIT Interim Chief Business Technology Officer for DHS and MNsure*

**Open Enrollment Update**

MNIT, MNsure and DHS staff are continuing to work together to prepare for open enrollment. As in previous years, there will be a “change freeze” starting October 24, 2022, that will run through the end of open enrollment (January 15, 2023). The change freeze means any proposed changes that impact MNsure or DHS systems must include a business justification and will be subject to review at daily change advisory board meetings. The freeze is implemented to minimize potential disruptions to systems and staff. Secondly, there will be a virtual command center staffed at all times the MNsure Contact Center is open. Third, the team will be performing daily status checks to identify or resolve issues.

Vice Chair Stoffel asked how many requests for changes have been made and approved during the freeze in past years. Mr. Wright answered he did not have that information immediately available. Mr. Clark said in his experience it’s been very few.
**Curam Update**

*Note:* Following IBM's sale of the Curam product to Merative, the product known as Curam has been renamed Merative Social Program Management or SPM. Mr. Wright explained that there have been multiple positive developments since the last board meeting:

- Product support for the version licensed by the state has been extended to April 30, 2024
- Next upgrade is scheduled to deploy in April 2023
- Portfolio risks outlined at the last meeting have been reviewed and closed

Vice Chair Stoffel asked about the planned upgrade to the newest version in 2023. Mr. Wright confirmed that we’re on track for upgrade in April 2023 and there are no concerns about the upgrade timeline slipping or a potential support lapse.

**Summer Release Recap**

Mr. Wright outlined METS updates deployed in summer 2022 (slide 35), including four on August 7 and two outside of that release date. He also noted that the “revert back” project — which would have returned APTC calculations to pre-American Rescue Plan Act conditions — was removed since the Inflation Reduction Act extended the benefits in place.

**Roadmap**

Mr. Wright shared the METS portfolio roadmap (slide 36), which was approved by the METS Executive Steering Committee in late August. In the table at left, there are currently three projects to ensure systems continuity (considered “lights on” work). In the table at right, there are five development projects that impact MNsure; all are carry-over projects from fiscal year 2022. The last three projects apply to DHS but are included here for awareness.

Vice Chair Stoffel observed that this seems like a small number of updates for 2023, and asked Morgan Winters and Dave Rowley whether there are any concerns regarding items that didn’t make this list. Mr. Winters responded that there is a backlog of projects that MNsure would like to accomplish, including some items related to compliance issues with private programs and some functional improvements for the consumer experience, but none are critical to MNsure’s ability to operate.

Vice Chair Stoffel asked Mr. Wright, if MNsure did have items considered truly critical, what options are available and what constraints would need to be addressed to add items to the roadmap (for example, funding, staff capacity). Mr. Wright answered that the roadmap was developed using parameters of the current budget; if additional work needed to be prioritized, they’d need to seek additional funding. Vice Chair Stoffel mentioned that previously MNsure has seen IT projects come in under projected budget costs; if that’s the case, is there potential for adding additional projects. Mr. Wright replied that the short answer is yes, and that MNIT is working to improve its cost estimates and forecasting for any given project. They also discussed MNIT’s efforts to closely track costs throughout the process, so that MNsure leadership can identify and prepare for additional projects earlier, should the opportunity arise.
New Business

*Stephanie Stoffel, Board Vice Chair*

No new business.

Adjourn

*Stephanie Stoffel, Board Vice Chair*

**MOTION:** Vice Chair Stoffel asked for a motion to adjourn the meeting. Mr. Whitman moved to adjourn; Mr. Fisher seconded. Mr. Rowley took a roll call; all board members present were in favor and the meeting was adjourned at 2:50 p.m.