



MNSure Board of Directors Meeting Minutes

Wednesday, June 28, 2023, 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, Jessica Kennedy, Suyapa Miranda, Stephanie Stoffel, Josh Syrjamaki, Daniel Trajano, Andy Whitman

Staff in attendance: Angela Benson, Libby Caulum, Emily Cleveland, Pete Engler, Claire Hahn, Joel Ingersoll, Kari Koob, John Nyanjom, Mary Robinson, Dave Rowley, Anne Sexton, Kia Vang, Morgan Winters, Christina Wessel, Jo Wright, Mike Wright

ASL interpreters: Daria Goede, Daisy Jo Shuda

Meeting Topics

Welcome

Suyapa Miranda, Board Chair

The meeting was called to order at 1:03 p.m. by Chair Suyapa Miranda. Chair Miranda 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.

Chair Miranda noted the recent reappointments of Stephanie Stoffel and Andy Whitman to the board and also welcomed Josh Syrjamaki, who is serving as Commissioner Harpstead’s designee for Minnesota Department of Human Services (DHS). MNSure’s chief legal counsel, Dave Rowley, conducted a roll call.

Board Officer Elections

Suyapa Miranda, Board Chair

The terms of the board’s chair and vice chair expire at the second quarter meeting, so Chair Miranda’s term concludes today.

MOTION: David Fisher nominated Ms. Stoffel as chair. Mr. Whitman provided the second. Ms. Stoffel accepted the nomination. No additional nominations were made. Mr. Rowley conducted a roll call and the motion passed unanimously.

Chair Stoffel thanked Ms. Miranda for her service as board chair over the last two years and asked for a nomination for vice chair.

MOTION: Ms. Miranda nominated Mr. Fisher as vice chair. Daniel Trajano provided the second. Mr. Rowley clarified that the term length for board officers is one year; however, the chair and vice chair may be reelected and serve up to two years consecutively. Mr. Fisher accepted the nomination. No additional nominees were made. Mr. Rowley conducted a roll call and the motion passed unanimously.

Public Comment

None.

Administrative Items

Stephanie Stoffel, Board Chair

Approve March 15 and May 3, 2023, meeting minutes

MOTION: Vice Chair Fisher made a motion to approve both minutes. Mr. Whitman provided the second. Vice Chair Fisher mentioned an error on page 9 of the March 15 minutes and asked that it be corrected. Mr. Rowley conducted a roll call and the motion passed. Due to absences, Ms. Kennedy recused herself from approving May 3, 2023, minutes and Mr. Syrjamaki recused himself from both.

Vice Chair Fisher asked for follow-up regarding his March 15 question concerning the number of participants in an employee engagement survey. MNsure CEO Libby Caulum explained that the topic would be covered in the 2023 Goals and Measurements: Q2 Update agenda item, but that MNsure has not yet received results from the survey.

Compliance Work Group

On behalf of the compliance work group, Dr. Trajano presented the FY 24-25 privacy and compliance strategic plans and recommended approval by the board today.

- FY24-25 Compliance Program Strategic Plan
- FY24-25 Privacy Program Strategic Plan

These plans fulfill federal requirements for state-based marketplaces (SBMs) from the Center for Consumer Information and Insurance Oversight (CCIIO). For MNsure, this is the seventh iteration of the compliance strategic plan and the fourth iteration of the privacy strategic plan. There are no significant or substantial changes from prior fiscal year plans.

MOTION: Mr. Whitman made a motion to approve the two strategic plans. Vice Chair Fisher provided the second.

Before a vote on the motion was taken, the board discussed jurisdiction for Medical Assistance (Minnesota's Medicaid program) and MinnesotaCare, MNsure's anonymous tip line, and the data inventory mentioned in the privacy program strategic plan.

Mr. Whitman asked about the third-party vendor that administers the anonymous tip line and how many complaints have been received. Director of Compliance and Program Integrity John Nyanjom responded that MNsure maintains a tally of phone calls — not all are complaints — and have received about 120 from January 1, 2023, to today. Mr. Nyanjom also explained the triage process for reviewing calls to ensure they receive attention from the appropriate entity (for example, MNsure, DHS or Departments of Commerce and Health).

Mr. Whitman also asked about data for denied health claims. Chief Operating Officer Morgan Winters agreed to follow-up with Mr. Whitman about claim denial data from health plans operating in Minnesota and additional information about appeals.

Vice Chair Fisher asked for the definition of a privacy impact assessment. Privacy Officer Emily Cleveland explained that this is the term used for the report template that Centers for Medicare & Medicaid Services (CMS) require, concerning what data is used by MNsure, how data is used and stored, how we handle data sharing, and how we move data through the system.

Mr. Rowley conducted roll call for the motion before the board, and the motion passed unanimously.

Navigator Payment Increase

Senior Director for Partner Relations Christina Wessel shared that the Minnesota Legislature approved an increase of the navigator per-enrollee payments for helping consumers apply and enroll in Medical Assistance (MA) or MinnesotaCare. Effective July 1, 2023, navigator agencies will be eligible to receive \$100 for each individual they assist for public health care programs. The increase is funded by DHS. The per-enrollee payment amount for assisting qualified health plan (QHP) enrollees will remain the same (\$70).

Mr. Whitman asked whether this would provide an incentive for navigators to spend less time with individuals. Ms. Wessel said the payment increase acknowledges the complexity involved with assisting households who are eligible for public health care programs, especially MA. Ms. Wessel confirmed that brokers do not receive any compensation for helping with public health care program enrollment and explained that MNsure encourages relationships between brokers and navigators to refer consumer to one another. Ms. Wessel also explained that in greater Minnesota, brokers tend to assist consumers eligible for public health care programs themselves, though many brokers have developed strong relationships with local navigators that they can refer people to, especially in the Twin Cities metro area.

Mr. Syrjamaki expressed appreciation for the partnership with MNsure and the navigator community as the state works through reviewing eligibility for 1.5 million Minnesotans currently enrolled in MA or MinnesotaCare. The payment increase will help DHS achieve its objective to keep eligible Minnesotans enrolled.

Chair Stoffel asked for a motion, pursuant to the board's authority, to approve the navigator payment increases consistent with those approved by the Legislature.

MOTION: Mr. Whitman provided the motion. Dr. Trajano provided the second. Mr. Rowley conducted roll call for the motion before the board, and the motion passed unanimously.

CEO Report

Libby Caulum, Chief Executive Officer

Ms. Caulum began by thanking Ms. Miranda for her two years of service as board chair and expressing gratitude that Chair Stoffel and Mr. Whitman were both reappointed to the board.

Sign-up Activity

Sign-up data shown on slide 6 reflects Minnesota Eligibility Technology System (METS) activity through the end of May 2023:

- 138,141 qualified health plan (QHP) sign-ups
- 70,637 Medical Assistance (MA) applications
- 9,648 MinnesotaCare applications

About 58% of QHP-enrolled households are receiving advanced premium tax credits (APTC) averaging approximately \$520/month per household. So far in 2023, households receiving APTC have received over \$111 million in savings.

The board reviewed the differences between plan sign-ups (at the individual level, top table) and tax credits for enrollees (at the household level, bottom table on slide 6). Mr. Winters explained that the APTC metric is attributable at the household level because a tax household receives the benefit, not an individual. Mr. Winters offered to follow-up with the total number of individuals in the households receiving APTC and agreed to add that information to this slide for future meetings.

At the end of May, MNsure had just under 110,000 effectuated enrollments, up from 107,394 in January 2023 (slide 7). Ms. Caulum reiterated that sign-ups reflect everyone who has applied through MNsure.org and selected a QHP, while effectuated enrollments reflect the number of people who have paid the first month's premium to begin coverage. The difference between the two arises because some people sign-up but do not pay the premium or otherwise drop their coverage during the year — for example, because they gain employer-sponsored insurance or age into Medicare.

MNsire premium withhold revenue to date is strong and just above forecasted amounts (slide 8). The figures on slide 8 are based on the preliminary budget approved in March; the final budget will be presented at the next board meeting in July. Chair Stoffel and Ms. Caulum both thanked Chief Financial Officer Kari Koob and her team for their work on the budget and forecast.

Legislative Update

This was a very successful legislative session – and perhaps the busiest in recent years — with several items that will affect MNsure. The most impactful is MNsure's IT modernization proposal, which was passed as part of the health omnibus bill. In addition, MNsure had two other items in the Walz-Flanagan budget that were included in the final bill:

1. Easy Enrollment Program:
 - Needs to be fully implemented for taxable year 2024 (the beginning of calendar year 2025)
 - Legislature appropriated \$70,000 per year for MNsure, beginning in FY 24, which has been added to our base budget to administer the program
2. Additional funding for Insulin Safety Net Program marketing and public awareness campaign
 - Investment of \$800,000, allowable for use from FY 24 through FY 26
 - MNsure will have a solicitation (also known as a request for proposals or RFP) for a new marketing vendor for this initiative

Ms. Miranda asked how the public can find RFPs. Ms. Caulum responded that it will be posted on the MNsure website, and we will likely issue a press release. Dr. Trajano asked about MNsure's operation role in the Insulin Safety Net Program. Ms. Caulum replied that MNsure has a few key responsibilities:

- When the program started, MNsure created the application that Minnesotans use
- MNsure trains certified navigators to help Minnesotans enroll in the continuing need program
- MNsure is responsible for ongoing marketing (social media, paid ads online, press releases, etc.)

Dr. Trajano asked whether consumers use MNsure to fill out the application and how MNsure is tracking utilization of the program. Ms. Caulum responded that there is a link included on the MNsure website, but the Insulin Safety Net Program has a stand-alone website (mninsulin.org). Utilization tracking is done by Minnesota Board of Pharmacy, which publishes an annual report based on the data they get from manufacturers on a yearly basis.

Chair Stoffel asked for an update about the lawsuit related to the Insulin Safety Net Program. Mr. Rowley confirmed that MNsure was voluntarily dismissed from the case. An update was provided in May concerning the Eighth Circuit finding that the plaintiff, PhRMA, had standing to bring the suit. Beyond the suit being returned to district court, MNsure is not aware of further proceedings.

Mr. Whitman asked about preparation for RFPs and outreach to affected groups. Ms. Caulum responded that we've been in touch with stakeholders including members of the diabetic community, advocates, providers and navigator organizations. In addition, once a marketing contract is secured, it usually begins with market research that could include focus groups or surveys. Ms. Caulum clarified that there is no RFP related to the Easy Enrollment Program, but it will be created in partnership with Minnesota Department of Revenue (DOR) and stakeholders like tax preparation non-profit organizations will be involved in its implementation and roll-out.

Chair Stoffel asked about implementation for Minnesotans who file taxes digitally. Ms. Caulum referenced her previous work experience with DOR and their dedication to reviewing both paper forms and digital filing.

Dr. Trajano asked whether the board is involved in the RFP process for selecting a marketing vendor. Ms. Caulum responded that this is an item the board has delegated to the MNSure CEO previously. The board also discussed funding limits and when board approval is necessary.

Continuing with the topic of the Insulin Safety Net Program, Ms. Caulum shared an additional change from the legislative session. Starting on August 1, 2023, applicants will be able to use an individual taxpayer identification number or ITIN as proof of residency in Minnesota; this change will allow undocumented Minnesotans to access the program for the first time. Ms. Caulum added that undocumented children (minors under the age of 18) could access the program through a parent or legal guardian.

Additional items from the legislative session include:

- Standardized health plan provision
- Preventive health services that had been guaranteed at no cost under the Affordable Care Act are now codified into Minnesota law
- New requirements for grant management effective starting in 2024 that will increase oversight and review for grants over \$25,000, which will affect MNSure's navigator grantee program
- Change to how appointees are confirmed: starting in 2027, if the Senate doesn't act within 60 days, the appointment is considered confirmed – this includes MNSure board members

Additional items led by other agencies, where MNSure will be a partner in implementation:

- Beginning in 2025, undocumented Minnesotans will be able to access MinnesotaCare coverage.
- The board discussed whether this also applies to MA. Mr. Winters said that this rule change is specific to MinnesotaCare but noted there is a proposal on the federal level to allow Deferred Action for Childhood Arrivals (also known as DACA) recipients access to insurance affordability programs like Medicaid coverage, basic health plan coverage, and marketplace subsidies and cost-sharing reductions for QHPs ([April 24, 2023, HHS press release on proposed rulemaking](#)).
- Provision providing 12 months of continuous MA coverage for youth up to 21 years old, and continuous coverage for children from 0 to 6 years old once enrolled.
- Actuarial and economic analysis for a public option or MinnesotaCare buy-in proposal and waiver application to federal government, which essentially asks CMS for permission to pursue innovative strategies to help people access affordable, comprehensive coverage.

- DHS is responsible for the analysis, in consultation with Minnesota Department of Commerce (Commerce), Minnesota Department of Health (MDH), and MNSure.
- Commerce is responsible for producing a report on feasibility and potential implementation, due to the legislature by February 1, 2024, in consultation with DHS, MDH and MNSure.
- Stated goal of the legislation is to have a public option in place for plan year 2027.
- DHS received funding to upgrade and improve METS and the identity and access management system used by both DHS and MNSure.

Dr. Trajano asked about the proposed rule for DACA recipients mentioned earlier. Mr. Winters responded that the comment period has concluded and, as the proposal is currently written, the rule change would be effective November 1, 2023.

Ms. Caulum thanked Government Affairs Manager Pete Engler for his great work this session as well as the Executive Team, Emily Cleveland and Anne Sexton for their valuable contributions.

Continuous Coverage Unwinding

DHS has begun eligibility redeterminations for MA enrollees. Other states that began redeterminations earlier are reporting significant coverage loss due to procedural reasons (for example, failure to return paperwork). To reduce the number of eligible Minnesotans losing coverage, Minnesota is extending MA coverage for one month for those enrollees in the first renewal cohort (those with a June 30 termination date) who have not yet submitted their renewal paperwork. This extension is partly based on the unique circumstances for the first renewal cohort: a new process and the deadline timing with the Fourth of July holiday.

Mr. Syrjamaki added that because CMS was concerned about the number of people who are losing coverage for procedural reasons, it offered states a variety of additional tools and flexibilities designed to protect enrollees. One of those strategies is to delay coverage end dates for one month — for those individuals who would lose coverage due to procedural reasons — while the state and its partners conduct additional outreach. In Minnesota, this protects as many as 39,000 MA enrollees who would have lost coverage over the Fourth of July holiday weekend. DHS does not anticipate requesting similar extensions for future cohorts. CMS published additional strategies, above and beyond the one-month delay, that DHS is reviewing and considering for the remainder of the unwinding.

Vice Chair Fisher asked about outreach. Ms. Caulum explained that DHS is taking the lead on communications and outreach to the 1.5 million Minnesotans enrolled in MA and MinnesotaCare who need to go through the renewal process, including direct mail and text messages. Once an enrollee is determined ineligible for a public health care program and eligible for a QHP, MNSure is reaching out to them via direct mail, email and text messages. Mr. Syrjamaki confirmed DHS is sending notices via U.S. mail, using text messages, and partnering with counties, Tribes and managed care organizations (health plans) who are also using a variety of tactics like robocalls.

Ms. Caulum reported that MNsure has not seen a significant increase in consumers calling the Contact Center, so there has been no negative impact to our service levels for the Contact Center, Assister Resource Center or Broker Service Line. MNsure will continue to monitor for developments. MNsure has initiated the hiring process for the upcoming open enrollment season; as the unwinding continues, we will have a better sense of monthly call volumes and able to make informed staffing decisions and ensure adequate coverage for both open enrollment and unwinding work. The first new hire class of about 20 individuals starts July 5, and we expect to hire up to two or three more classes of similar size. To date, no issues finding people for these temporary positions.

MNsire outreach overview:

- Sent letters (direct mail) to all 4,006 individuals who are newly eligible for QHP
- Sent multiple emails to the roughly 1,200 households with a valid email address listed
- Sent text messages to the approximately 1,700 phone numbers on record
- Approximately 5,700 visits to our unwinding landing page (mnsure.org/newcoverage) to date; most visits are coming from the QR code included on the eligibility notice
- Shared communications toolkits with partners — navigators, brokers, and carriers — so they can amplify our messages and reach more newly QHP-eligible consumers

The coverage transition dashboard is included on slide 10:

- **4,006** total have gone through the redetermination process and found eligible for QHP
- **648** total have taken action on [MNsire.org](https://mnsure.org) to report the loss of coverage (consumer requested a special enrollment period, MNsure opened shopping window for them)
- **312** total have selected a QHP (sign-ups)

Chair Stoffel asked for the total number who have gone through the redetermination process so far (4,006 out of how many people). Mr. Syrjamaki said he would look up the size of the first cohort. Mr. Winters reiterated that there may be additional individuals in the first cohort who will become QHP eligible, since we know approximately 39,000 MA enrollees in the first cohort have not returned their renewal paperwork and therefore have not been redetermined yet.

Vice Chair Fisher asked about deadlines and coverage end dates. Ms. Caulum explained that the first renewal cohort, whose deadline would have been June 30, now has coverage through the end of July. Mr. Syrjamaki confirmed that the forms should be received about a month prior to the renewal deadline or coverage end date (see [DHS mailing schedule](#)). He also noted that enrollees have up to four months after that deadline to get retroactive coverage if they are eligible and reenroll. DHS has an [online dashboard](#) to track the unwinding. Ms. Caulum added that if they are determined eligible for a QHP, they have an extended special enrollment period (90 days) to enroll. Mr. Syrjamaki also confirmed that there were about 59,000 households in the July cohort (or about 80,000 individuals), and as many as 39,000 individuals haven't responded yet.

Chair Stoffel asked about a scenario in which an enrollee returns their renewal paperwork sometime later (September, for example). Ms. Calum responded that if they're still eligible for a public health care program, they have a four-month grace period when they can reenroll and get coverage backdated to their original coverage end date. Mr. Winters added that the trigger for the MNsure special enrollment period is the date the enrollee lost MA or MinnesotaCare coverage.

The board discussed the dashboard metrics and whether reporting will be on a monthly or cumulative basis. Ms. Miranda asked about communications in languages other than English; Ms. Caulum responded that we are translating materials into Spanish, the most requested language, and additional languages where there are opportunities to do so. Dr. Trajano asked about available data on language preferences for the newly QHP-eligible population. Mr. Winters responded we do have some language preference data for applicants and enrollees.

Open Enrollment Readiness

The MNsure open enrollment period for plan year 2024 will run from Wednesday, November 1, 2023, through Friday, January 12, 2024. The deadline for January 1 coverage will be December 15, 2023. Enrollments between December 16, 2023, and January 12, 2024, will have coverage starting on February 1.

Vice Chair Fisher asked about plans for backfilling Ms. Caulum's former position, senior director of public affairs. Ms. Caulum responded that the position should be posted soon and hope to have someone on board in early fall.

At approximately 2:50 p.m., the board took a 10-minute break and reconvened at 3 p.m.

IT Modernization Project

Libby Caulum, CEO and Morgan Winters, Chief Operating Officer

The MNsure IT modernization project has been renamed "MNsure Eligibility System Transition" (MEST). The Minnesota Legislature included funds for this proposal in the final Health and Human Services Omnibus bill, which was signed into law by Governor Walz on May 24, 2023.

The goal of this project is to remove barriers to access, improve service delivery and the consumer experience, enable policy flexibility and to address IT gaps and limitations that make MNsure operations difficult and expensive. The bill appropriated \$11 million in fiscal year 2024 and \$10.7 million in fiscal year 2025. These funds will cover the costs to decommission QHP functions from the legacy IT platform (METS), move them to a new platform, and assist with system maintenance and operation costs during the transition. All funds will be received in this biennium, and MNsure will have ability to carry forward funds into the next biennium to finish the project. DHS also received funding related to the MEST project to ensure a smooth transition for both agencies.

Ms. Caulum noted that because this funding is a new appropriation, it was not included in the preliminary budget presented in March; however, it will be included in the finalized budget which will be presented to the board for approval in July. To avoid any delays in beginning work on this

project, MNsire staff is seeking board support for the project today, including a vote to authorize MNsire to enter into contracts that exceed MNsire CEO's delegated authority spending limit (\$500,000).

Mr. Winters reminded the board that the current health care application process is supported by a single application hosted by METS, the state's integrated eligibility platform that supports Medicaid, MinnesotaCare and private health insurance through MNsire. Though a single application for all programs has its advantages, it has become apparent over the last 10 years that using this model also has significant limitations.

The new model will be based on two applications:

1. Current METS application, focused on serving public health care programs administered by DHS
2. New application MNsire will implement, focused on serving private programs offered through MNsire

This model is used in most states and commonly referred to as the "no wrong door" model. The two applications and backend systems powering them will be completely interoperable, which means that irrespective of which application an individual or family fills out, they will have their eligibility assessed for all programs — public and private — without needing to fill out a second application. In practice, this model allows each agency to optimize its function specific to the population it serves, meaning MNsire will be able to greatly improve the user experience for QHP-eligible consumers.

The anticipated timeline for the project is two years, to remove MNsire's functionality from the METS system and design and deploy the new system in summer 2025, ahead of renewals and the open enrollment period for plan year 2026.

Major project milestones achieved to date:

- Project has been officially approved and added to IT portfolio by the governance committees
- MNsire is currently in negotiations with GetInsured — the vendor that supports our plan shopping and enrollment platform — to build the new eligibility system

Mr. Winters added that MNsire expects to have a contract with GetInsured executed in July and the agency is already working closely with MNIT on the METS work that needs to occur. Over the next few months, MNsire, MNIT, and GetInsured will create a detailed project plan including specific activities, milestones and dates. MNsire plans to hire a few consultant positions to bring in additional technical expertise and will keep the board apprised as these activities progress.

Chair Stoffel asked about a commitment or plan for staffing from MNIT for this project. Mr. Winters answered that we do, including how many FTEs, what type and which area. Chair Stoffel asked what percentage of the project MNIT will complete compared to third-party vendor. Exact percentages are not available at this time; project planning will include how much work

MNIT, Merative and GetInsured will each accomplish. Mr. Winters reiterated that GetInsured currently provides the plan shopping and enrollment software used by MNsure. Chair Stoffel asked about real-time online application processing for the consumer. Mr. Winters confirmed that consumers will experience real-time, automated eligibility determination that is bi-directional (that is, if someone fills out the QHP application and is public program eligible, the new GetInsured system will send the information to METS and DHS for processing, while if someone fills out the METS application and they're QHP eligible, METS will send the information to the GetInsured system to process it for private plan shopping).

Ms. Kennedy commented on the value of using a third-party vendor vs. MNIT resources, considering the prospective public option and the MNIT resources required for implementation. Ms. Caulum added that there are many unknowns about a prospective public option, but MNsure assumes that any program that moves forward will have resources (legislative funding) allocated specifically for that work.

The board discussed IT governance and staffing for the project. Mr. Winters confirmed that the METS Executive Steering Committee (ESC) voted to approve this into the IT portfolio, and that as the project moves forward it will continue to be monitored by both the Systems Governance Group (SGG) and ESC. Mr. Winters also explained that there will be a dedicated project manager at MNIT, another with GetInsured, and additional project coordinator-type positions at MNsure.

The board discussed the time allocated for testing the new system before it goes live and specific deadlines for launching. Mr. Winters mentioned that last year another SBM, Your Health Idaho, went through a similar process — moving away from an integrated eligibility system and building their own QHP eligibility system with GetInsured — in just nine months. At the recommendation of MNIT, MNsure is allocating more than twice that amount of time for the project (24 months total) to make sure it's done right. Mr. Winters explained that the "drop-dead" date would be mid-September 2025, as that's when annual plan renewals take place, and a June/July 2025 soft launch would give some buffer.

Ms. Kennedy asked for clarification about the motion before the board and more information about which SBMs currently use GetInsured. Mr. Winters answered that GetInsured supports Idaho, Nevada, New Jersey, Pennsylvania and Minnesota, and will support new SBMs in Georgia and Virginia coming this year.

Ms. Caulum clarified that the vote would authorize MNsure staff to enter into contracts with GetInsured and our partners at MNIT for this IT project, since staff cannot authorize any expenditure over \$500,000 without the board's approval. Chair Stoffel specified that the motion is to authorize MNsure to use the funding appropriated to it by the Legislature to enter into contracts exceeding \$500,000 to develop MNsure's eligibility tool. Approving this today would allow Ms. Caulum, as CEO, to enter into contracts with the organizations needed to execute the project.

Mr. Whitman asked what happens if funds are left over. Ms. Caulum explained that since MNsure is still in contract negotiations, we don't have exact dollar amounts available at this

time. Mr. Whitman suggested that the motion be amended to include language that allows remaining funds to be spent “on other appropriate projects.” Ms. Caulum clarified that the motion would simply enable the project work to begin without specific ties to the amounts appropriated by the Legislature. Mr. Fisher commented that in his experience with legislative appropriations, any money not spent on the project is returned to the General Fund.

The board discussed whether the motion would authorize the expenditure of the total amount appropriated by the Legislature and what potential alternatives for board approval might look like. Vice Chair Fisher suggested amending the motion to specify that the CEO would advise or alert the board before signing any contracts over \$500,000.

Ms. Kennedy commented she would vote yes on the motion as-is. Ms. Kennedy added that MNsure needs to move quickly with the project, the Legislature has already authorized the expenditure of the appropriated funds, and that the board is confident in Ms. Caulum’s leadership. Mr. Rowley reminded the board that MNsure is in ongoing contract negotiations, that additional discussions would need to take place at open board meetings, and that the motion was structured to take the existing spending limits for the CEO into account.

The board discussed the timing of the motion in relation to the next board meeting and public perception. Chair Stoffel reiterated the importance of MNsure staff’s having the ability to start contracts in early July before the next board meeting, with the guard rails already set in place by the Legislature. Ms. Caulum added that she does not share concerns about public perception since the Legislature appropriated funding for MNsure for this project specifically.

Board members discussed how MNsure leadership could report back or advise board members on the project going forward and how to add appropriate language to the motion to make this explicit. Ms. Caulum expressed that she does not have concerns about providing regular reports to the strategy work group and reiterated that board members will have a comprehensive view of the contracts at the next board meeting in July.

Vice Chair Fisher suggested amending the motion to specify that the CEO would regularly advise the strategy work group on progress in contract negotiations and provide regular updates at open board meetings as scheduled. Ms. Kennedy commented that the proposed additions are not substantially different from MNsure’s standard practices. Mr. Whitman asked whether the board has made similar authorizations in the past, and Ms. Caulum confirmed that the board has authorized the CEO to do this previously.

Mr. Rowley offered revised motion language as follows: to authorize MNsure to use the funding appropriated to it by the Legislature to enter into contracts exceeding \$500,000 to develop MNsure’s eligibility tool, and the CEO will regularly advise the board’s strategy work group on progress of all aspects of the IT project and continue to provide IT project updates at regularly scheduled board meetings.

MOTION: Dr. Trajano made the motion. Vice Chair Fisher provided the second. Mr. Rowley conducted roll call for the motion before the board, and the motion passed unanimously.

IT and Executive Steering Committee Update

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

Mr. Wright congratulated Ms. Caulum on her new role as CEO.

MNsire Eligibility System Transition

Mr. Wright reiterated that the project was added to the project roadmap after a recommendation from SGG and approval from ESC. A project manager has been assigned and MNIT is identifying project sponsors and other members of the collaborative project team; a full list is not available yet. The project is currently in the initiation phase until a project charter is approved.

Oversight of Maintenance & Operations Costs

Following direction from the ESC, the SGG has completed a comprehensive overview of the METS budget including development, maintenance and operations costs. The goal is to have SGG members actively overseeing the maintenance and operation costs to better advise the ESC for the 2024 budget process and in future years. The overview included:

- Basics of budget information and historical information
- Merative contract and breakdown of hardware/software
- Components of operations
- Scheduled maintenance and operations and impacts

The METS FFY 2023 roadmap is included on slide 18. Notable changes include:

- Curam upgrade is now in progress.
- Continuous eligibility for children (MA eligible) is planned for deployment in December 2023.
- MEST currently listed as planned: Project charter needs to be agreed upon before this can move to in progress.
- METS citizen engagement: Recently added to roadmap and listed as in progress. This project was part of the renewal self-service (RSS) initiative but is now a stand-alone project expected to deploy in August 2023. This project will allow Minnesotans to submit applications using a mobile-friendly platform with minimal case worker intervention.
- Unique person ID is now complete.
- RSS is now on hold.

Chair Stoffel asked why RSS is on hold. Mr. Wright answered that the project was put on hold due to capacity constraints for business partners at DHS, primarily since they are working with county and Tribal nations on the unwinding of federal continuous coverage requirements and CMS compliance.

As there were only a few minutes left in the planned meeting time, Ms. Caulum proposed sending an email update on the remaining agenda item on the agenda (2023 Goals and Measurement: Quarter 2 Update). Dr. Trajano mentioned wanting to follow-up offline about the family glitch fix and MNsure outreach and enrollment.

New Business

Stephanie Stoffel, Board Chair

None. Vice Chair Fisher mentioned that he would send an email to Chair Stoffel.

Adjourn

Stephanie Stoffel, Board Chair

MOTION: Vice Chair Fisher moved to adjourn the meeting. Dr. Trajano provided the second. The motion passed and the meeting adjourned at 4:01 p.m.