



Consumer and Small Employer Advisory Committee Meeting Minutes

April 25, 2023, 2:30 – 5:00 p.m.

Virtual meeting via Cisco Webex

Members in attendance (via Webex): Neal Steffl – Chair, Ann Warner – Vice Chair, Lana Barskiy, Richard Klick, Harvey Perle, Cheryl Scheer

Members not in attendance: Jonathan Vagle

Staff in attendance: Christina Wessel, Joel Ingersoll, Eva Groebner

Meeting Topics

Welcome and Roll Call

Neal Steffl, Chair

Neal Steffl, chair, called the meeting to order at 2:33 p.m.

Review and Approval of Previous Meeting Minutes

CSEAC Members

Motion: Neal Steffl moved to approve the draft March 28 meeting minutes. Ann Warner seconded. All were in favor and the minutes were approved.

Public Comment

No public comments.

No operational feedback.

MNsure Updates

Christina Wessel, Senior Director of Partner and Board Relations

Christina Wessel, MNsure staff, shared that the Minnesota Department of Human Services (DHS) began sending renewal notices to public program recipients with annual renewal beginning in July. She reminded the committee that MNsure and DHS hoped to enhance the consumer experience through IT functionality improvements for the unwinding process, but the project is currently on hold. She continued that DHS is using an alternative functionality, outside

of the shared Minnesota Eligibility Technology System (METS), that will allow consumers to upload forms and supporting documents.

Christina continued that more than 100,000 of the upcoming 1.5 million public program renewals are estimated to move to qualified health plan (QHP) eligibility after their Medical Assistance or MinnesotaCare renewal is completed. She elaborated that MNsure aims to reach that population to offer continuous health coverage from public program to QHP, so there will be extended special enrollment opportunities for those new QHP enrollees. MNsure's communications and advertising campaign targets this population, and MNsure, Portico Health and DHS have partnered to provide additional training to assisters to ensure they are prepared as well. Christina shared that 400 assisters attended the first training session and nearly 500 were registered for the second session that were being held that week.

Next, Christina noted legislature was nearing its final month in session with a few of MNsure's proposals still in play. MNsure's IT modernization proposal to replace METS with an eligibility system better with MNsure's enrollment system was still being discussed but not yet approved for funding. Another proposal was the Health Insurance Easy Enrollment Program which would allow Minnesotans to check a box on their state income tax forms indicating they, or a family member, were seeking health insurance. This would authorize the Department of Revenue to forward to MNsure relevant information about the household. MNsure would then take information about household size and adjusted gross income to make a preliminary determination about what benefits the household may be eligible to receive. That information would be sent to the household that requested it, along with information on how they can find an assister to help get them through the application and enrollment process.

Neal asked whether MNsure would be offering a special enrollment to households no longer impacted by the "family glitch." Employees offered employer-sponsored health insurance (ESI) are ineligible for subsidies if the ESI is considered affordable. Previous rules calculated the price for employer-only ESI against the household income but did not consider the cost for the employee's family members, called the family glitch. New regulations in 2023 calculate the price for the employee's family as well so that affordability for all household members is taken into consideration for subsidies. Christina confirmed that there is currently a special enrollment opportunity for family members, not the employees, who are newly eligible for subsidies but have a non-calendar year renewal period for their employer-sponsored insurance. She clarified that because the impacted population is so small, MNsure was not advertising much for that particular special enrollment, but the information was on MNsure's website.

2023 Advisory Committee Focus Discussion

Neal Steffl, Chair

Neal opened the floor for committee focus discussion. Harvey Perle shared that he had only found out that morning that MNsure requires health insurance brokers to become the agent of record (AOR) on each of their clients' accounts. He asked why an assister would need additional documentation of their clients' status. Ann suggested that the health insurance carriers may have privacy issues, requiring both MNsure and the carrier to hold proof of the AOR. Christina explained that, at the request of carriers, MNsure is the source of truth of AORs

for enrollments through MNsure enrollments, whereas the health insurance carriers hold AOR for enrollments directly through their company. She continued that brokers could associate with their client list through the MNsure assister portal that would not require a paper AOR form. If a consumer does not have an online account, or if a broker is requesting retroactive AOR authority, the broker may need the paper form.

Harvey asked how consumers can obtain a copy of their Form 1095-A. Christina explained that federal regulations dictate that MNsure cannot provide tax data to a third party, only to the tax filer, so that is a situation an assister cannot intervene on the behalf of their client. She explained that the Form 1095-A is uploaded into each consumer's account, facilitating consumers' ability to access additional copies of their Form 1095-A. Christina expanded that in a rare case that a consumer did not have a copy of their Form 1095-A in their MNsure account, they would need to personally call into the Contact Center for assistance.

Next, Harvey noted a significant delay between enrollments through MNsure and the carrier receiving their information. Christina replied that the cases would need to be looked at individually, and that the Broker Service Line would be the best resource for such issues.

Harvey continued that a client provided MNsure with a letter from a former employer stating that he had ended employment, but MNsure later requested additional information from that client. Harvey asked whether MNsure had a form, like the Social Security Administration's I564, that would outline for clients what would be required on their case. Christina responded that MNsure has information listed on its site rather than a specific form. Cheryl Scheer added that she had a similar experience when she applied through MNsure, that proof of employment was requested but Cheryl was not employed. Ann agreed that she also had the same experience with MNsure requesting verification documents.

Christina sympathized with the scenarios but requested that the committee members speak with the Contact Center about specific cases, even if the committee wished to present an overall verification issue to the MNsure board. Neal agreed that the committee could look at whether the Assister Resource Center or the Broker Service Line could be provided additional resources for their clients rather than discussing specific cases outside the scope of the committee. He asked Joel Ingersoll, MNsure staff for board relations, when an appropriate timeframe would be for presenting issues to the board. Joel responded that the advisory committees typically meet several times to establish recommendations and prepare a paper document or PowerPoint presentation for a 30-minute interaction with the board sometime in the summer. He added that Health Insurance Advisory Committee (HIAC) sent the board a brief statement encouraging specific focus from the board, which was discussed among the board members at a meeting. Harvey volunteered to help present to the board when the time comes.

Harvey encouraged MNsure to communicate better with the health insurance carriers. He described a scenario where a client enrolled during the open enrollment period, but her coverage was dropped by the carrier after January 1, but Harvey was unaware until the client called him for resolution. Lana Barskiy added that she would like to see better communication between MNsure and the Minnesota counties. She said she recently dealt with Stearns County on behalf of one of her clients. Stearns County told Lana she needed to submit an authorized representative form to speak on the consumer's behalf, which Lana disputed. She explained in

dealing with other counties, she as a MNSure-certified navigator cannot be an authorized representative on cases. She asked whether MNSure provides training to the counties. Christina confirmed that navigators should not act as an authorized representative, but rather use the release of information form. She added that DHS owns the relationship with the counties, but DHS also is limited in their ability to dictate county policies and procedures. Dick Klick added that he ensures he has completed the general consent form to authorize release of information for clients that may require he deal with the counties or DHS. Christina confirmed that a best practice for assisters would be to submit the general consent form with renewal information so that the assister can have information released to them through the renewal process and throughout the year.

Harvey reminded the committee that the MNSure mission statement includes the word *easy* (“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.”), which Harvey disputes as inaccurate. He summarized that even as an assister, he finds dealing with MNSure too often to be plagued with minute details and inconsistent guidance from MNSure representatives leading to a tedious, time-consuming and inefficient experience.

Cheryl mentioned that the committee had previously recommended better communication between MNSure, DHS and the counties. She suggested that the committee could add to that better communication with the consumers and assisters. Harvey agreed, mentioning that as an assister he felt outside the loop in many cases. He brought up a client that has dual residency and is out of the United States for extended periods of time, complicating Harvey’s communication with them. He explained that client lost QHP coverage while out of the country and was unaware until much later because the closure was not communicated properly.

Christina clarified for the committee that MNSure is responsible for health care eligibility determinations, whereas the chosen health insurance carrier is responsible for effectuation and maintenance of each consumer’s coverage. She added that MNSure is responsible for updating the carriers with the most current eligibility information available throughout the year as consumers report household changes and enrollments need modifications. Although the carriers update MNSure with enrollment status routinely, they do not share with MNSure the reasons coverage ended. There could be voluntary disenrollment, or a lack of premium payment, but the carriers do not provide MNSure an explanation. Christina continued there is a delay in when MNSure becomes aware of discontinued coverage based upon federally mandated grace periods in addition to overall communication.

Neal asked that committee members put together information to identify communication gaps for the board to address. Joel clarified that members could provide that information to him so that he can distribute materials to the committee for a future discussion. He cited open meeting laws as the reason the members should not discuss committee issues outside the meeting venue.

Neal suggested the committee revisit their pre-retirement discussion. He asked whether the group wanted to review Medicare specifics, or a general age group for their discussion. Ann and Harvey defined “pre-retirement” as anyone approaching age 65. Harvey added that his agency

provides extensive time walking clients through information specific to their scenario because many consumers are unaware of their options. Cheryl added that although MNsure has been pushing to appeal to an older clientele, the information may be buried on its website. She noted that specificity on providing MNsure with an individual's income types is harder to find on the site than it should be. She explained that people approaching retirement may have fewer W2 sources and more interest dividends, IRA distributions and other investment sources than younger consumers. She suggested that MNsure come out with a bullet list of less traditional income sources, like HealthCare.gov has on its site.

Neal moved the discussion to data sharing. Ann suggested the MNsure board utilize established E-Health processes already used in Minnesota. She suggested that MNsure routinely access financial information such as taxes so that consumers do not need to provide that to MNsure. Christina explained that MNsure annually pulls financial data from the federal hub, but that information is not always current, so MNsure often needs to resolve discrepancies by manually verifying changes. She explained MNsure runs renewals for the upcoming calendar year in September, so most Minnesotans' financial information should be current, but anyone that filed an extension for their taxes that year or anyone that changes jobs partway through the year may have discrepancies with the federal hub.

Ann recommended that more data be shared across the counties. Christina explained that DHS requires explicit authorization from a consumer to share their data. Although DHS may have a data sharing agreement with each county those counties do not necessarily have agreements with one another. She elaborated that although the METS information is accessible to all the entities, the verification documents are stored in separate administrative storage systems that are not accessible to all agencies. Neal and Ann each expressed an interest in continuing the discussion so that the MNsure board is aware of the desire for such a system, even if the resolution is not available for a few years. Neal acknowledged that MNsure has legal and moral responsibility to protect the data it obtains but the committee can ask that MNsure explore its options in a responsible way.

Adjourn

Motion: Dick moved to adjourn. Neal seconded. All were in favor and the meeting adjourned at 3:44 p.m.