

Consumer and Small Employer Advisory Committee Meeting Minutes

November 24, 2020, 2:30 – 5 p.m.

Virtual meeting via Cisco Webex

Members in attendance (via Webex): Grace Aysta – Chair, Olga Sheveleva – Vice-Chair, Lana Barskiy, Warsame Guled, Anna Guler, Madison Nelson, Erin Ribar, Melissa Stanton

Members not in attendance: J. P. Little

Staff in attendance: Christina Wessel, Eva Groebner

Meeting Topics

Welcome and Introductions for New and Returning Members

Grace Aysta, Chair & Christina Wessel, MNsure Senior Director of Partner and Board Relations

Grace Aysta, chair, called the meeting to order at 2:31 p.m. She reviewed MNsure's purpose statement:

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.

Grace told the committee she was excited to meet new members. She recommended that the members introduce themselves with a bit of their background and what drew them to join the committee. She led with her introduction as the committee chair. Grace holds a degree in human physiology and epidemiology from the University of Minnesota. She currently works at Hennepin Health and joined the committee to learn about insurance products and help the people around her understand health insurance.

Warsame Guled introduced himself as being a certified navigator with Briva Health since the beginning of MNsure. He helps a lot of people apply and enroll, primarily through Medical Assistance and MinnesotaCare. He said that he is excited to get started and has lots of recommendations for the committee and the MNsure board.

Madie Nelson is currently working at the Blue Cross Blue Shield Foundation and has a master's degree in public health from the University of Minnesota. She mentioned she was a MNsure certified navigator in the past and is gaining experience through private insurance, so she has had a lot of experience in health insurance.

Erin Ribar introduced herself as a small business owner and mother of a child with special needs. She explained that her family has worked with MNsure for health insurance coverage for three years and she has been impressed with the service of MNsure's staff despite technological hiccups she has seen first-hand.

Milly Stanton is a MNsure certified navigator at Health Access MN with a background in public health. She said she has been working with MNsure since 2015 and will serve as a liaison for her agency to ensure that their experiences and suggestions are conveyed to the MNsure board.

Anna Guler is a compliance officer at Metropolitan Community Services with a law degree from the University of St Thomas School of Law. She noted that many people don't know their options for health insurance, and her work with homeless and disabled Minnesotans inspires her to bridge more gaps.

Lana Barskiy is the founder, president, and chief executive officer of Metropolitan Community Services. She mentioned that her agency works with large numbers of Eastern European immigrants that need to learn how to navigate health care options and services available to them.

Olga Sheveleva is the vice president of development and strategic planning for Metropolitan Community Services. She noted that her agency works with many Russian speakers that need help navigating health coverage in Minnesota, but they serve anyone that needs their assistance. She stated this is her second year on the committee and she is beginning her first term as the committee vice chair.

Review and Approval of October Meeting Minutes

CSEAC Members

Grace mentioned to the new members that the committee makes recommendations to the MNsure board each year and have recently been focused on equity in health access. She referred to the October meeting minutes, stating that the committee had invited JustUs Health to discuss issues specific to the LGBTQ+ community. She recommended that each committee member reflect on what populations they work with that could benefit from a similar discussion about representation. The committee reviewed the draft meeting minutes before voting to approve.

Motion: Olga moved to approve the draft October 27 meeting minutes. Lana seconded. All were in favor and the minutes were approved.

MNsure Updates

Christina Wessel, MNsure Senior Director of Partner and Board Relations

Grace informed the committee that Christina Wessel, MNsure staff, gives an update each meeting about any MNsure news or legislative action that may impact MNsure's consumers, staff, board, or committees.

Christina began that MNsure was getting deeper into the open enrollment period and had just had a board meeting the week prior so there were a lot of MNsure updates. She noted that the board voted unanimously on new and returning advisory committee members for both the Consumer and Small Employer Advisory Committee (CSEAC) and the Health Industry Advisory Committee (HIAC.) She continued that Grace was renewed as the committee chair and Olga has been confirmed as the vice chair, so she congratulated and welcomed all members mentioning each committee should look forward to fresh perspectives as well as overall continuity of the committees.

Christina announced there was a total of about 109,000 people seeking health coverage through the exchange in the opening two weeks of open enrollment, comprised of nearly 102,000 QHP enrollments, 5,500 Medical Assistance applications, and more than 1,500 MinnesotaCare applications. She mentioned that Medical Assistance enrollment numbers are slightly lower from last year and the numbers reset on November 1 for consistent open enrollment data. Overall, the QHP enrollments are 11% ahead of this time last year with about 4,900 that are coming through MNsure for the first time this year, and most enrollees renewing coverage from 2020 to 2021.

On November 10, the U.S. Supreme Court heard oral arguments regarding the legality of the Affordable Care Act (ACA.) There has been a lot of speculation what the court may rule, but Christina assured the committee that MNsure's approach in enrolling Minnesotans has not changed. She stated that until a ruling in the spring of 2021, MNsure continues to emphasize the importance of comprehensive health care, particularly during the pandemic, and will encourage eligible households to act during the open enrollment period to ensure they have confidence in their 2021 coverage.

Christina continued that open enrollment has gone smoothly with no application shopping or Contact Center issues that could not be quickly resolved. She also referred to a quiet start to the call volume for open enrollment explaining there is a decrease in volume each year as more Minnesotans grow comfortable with the application and enrollment systems, but this year's opening call numbers were 10% lower than early projections with gradual increase to projected numbers. She then explained that MNsure uses a vendor for simple resolution of initial calls, but that the specialist staff in the Twin Cities has additional training in operations and can easily pivot from operational work to phone calls to lower call wait times. MNsure anticipates that call volume will be highest between Thanksgiving and the December 22 open enrollment deadline and will continue to offer extended Contact Center hours on Tuesdays and Thursdays. MNsure will also extend Contact Center hours until 6 p.m. on Saturday, December 19 and Sunday, December 20; until 9 p.m. on Monday, December 21; and until midnight on Tuesday, December 22. She clarified that anyone in queue at the deadline will be helped before MNsure closes.

Christina stated that MNsure is preparing to have 1095-A tax forms out to consumers in January. She explained that the forms are used by the Internal Revenue Service to serve as a receipt of what advanced premium tax credits (APTC) enrollees used throughout the year, adding that people can still qualify for tax credits if they did not utilize them each month. She said that some enrollees will see discounts on their December invoices; BluePlus will discount premiums by 20% and HealthPartners will discount premiums by 50%. These adjustments will also be reflected on consumers' 1095-A forms in January.

Next, Christina shared data from open enrollment marketing and communication efforts. She noted that big ticket items like billboards and television advertisements were delayed until after the U.S. presidential election ended. She continued that paid and earned marketing campaigns were each showing signs of success. Paid online targeted marketing between October 26 and November 14 showed 8 million impressions with 29 thousand clicks and nearly 12 thousand conversions—when a person interacted with the site like creating an account, searching for an assister in the look-up tool, or researching income guidelines. Christina added that assister outreach is a huge cause for MNsure success. Finally, she announced that Representative Betty McCollum has posted about MNsure five times, Senator Tina Smith has twice, and Representative Angie Craig has once as well.

Since mid-October more than 25 articles have referenced MNsure, and seven outlets covered the Supreme Court hearings encouraging Minnesotans to enroll in health coverage through MNsure. In general, web traffic on MNsure.org is down, however the plan comparison shopping is comparable to last year. Christina reiterated that applications and enrollment are even paced with projections, so signs are good for MNsure and its marketing.

Grace asked if there has been any news about the Pharmaceutical Research and Manufacturers of America (PhRMA) lawsuit challenging the Alec Smith Insulin Act's legality. Christina confirmed that the MNsure board was removed from the dispute, but replied she is not aware of any more recent developments from the lawsuit.

Olga asked what the motivation was for BluePlus and HealthPartners to offer a December discount to their enrollees and inquired if there's a way to encourage more rebates. Christina replied there is speculation that the health insurance carriers need to reach a certain medical loss that is not being met for 2020, so they may be choosing to refund consumers at a time it can benefit the enrollees rather than wait until 2021, but she acknowledged that she cannot speak for the companies. Olga asked if there could be ways to encourage the carriers to prolong discounts or offer rebates to lower income populations. Christina replied that rate negotiations occur between the health insurance carriers and the Department of Commerce with legislative authorization, so it may not be a plausible financial relief within MNsure's scope.

Discussion of Recommendations Regarding Equitable Access

Grace Aysta, Chair and CSEAC Members

Grace suggested that the committee recap topics previously discussed before exploring new ideas. She began that the committee has been looking at how language can impact MNsure applicants. The system was built on English-comprehending individuals and causes barriers for non-native English speakers. Despite the application asking for language preferences the committee has discovered that MNsure does not provide translated notices and interpreters are third party causing delays and technical issues for access to information. Grace noted that the committee has discussed having the form number more obvious for easier reference and allowing assisters more access to consumer accounts for explanation to the consumers. She noted that another communication barrier is that MNsure's text telephone relay (TTY) service is outdated and most deaf or hard of hearing Minnesotans utilize newer video services they cannot access through MNsure.

Next, Grace recapped key points from the discussion with JustUs Health. She noted that applicants are likely to have a variety of identification documents that may have different gender markers, so MNsure ought to expand gender options beyond binary restrictions. JustUs Health recommended that MNsure define what the purpose of gender questions serve in order to move forward with removal or alternative recommendations by the committee. Grace continued that non-binary or transsexual individuals should have the opportunity to report their gender separately, and pregnancy should be uncoupled from gender questions. Next, the application icons should be updated from purple (female) or blue (male) to more gender-neutral icons. JustUs Health also recommended that MNsure update its Contact Center staff to be receptive to neutral terms like "spouse," "child" and "they" to align better with the identities of their callers' households. The final point Grace recalled from the meeting was that there are several instances of estrangement or separate living conditions for spouses that MNsure should be more aware of and more compassionate toward.

Warsame agreed that households should be better defined for applicants, with focus on tax repercussions, in order to clarify what a household is defined as.

Milly noted that the application asks "are you pregnant?" without any emphasis on "are you a pregnant woman?" Grace explained that the question is only presented to applicants listed as women, and that income guideline pages state that there are certain health care eligibility considerations for pregnant women in their own income bracket.

Lana stated that there are certain issues that Metropolitan Community Services sees frequently that she could highlight briefly, but she and Olga would plan a presentation in early 2021. Lana said that as a navigator she sees large gaps in communication between MNsure, the Department of Human Services, and the counties. She noted being bounced between agencies repeatedly, which is frustrating for assisters but nearly impossible for a consumer. She also mentioned that notices for MinnesotaCare are misleading as they say that eligibility starts on the first day of one month, but then pages later it states that payment must first be made, so in reality the coverage cannot start for an additional month. She stated these notices must be made clearer for consumers. She noted another hurdle she sees frequently is for self-employed individuals that are told to provide income verification to the agencies. She recommends that the agencies offer better guidance on how self-employed income should be reported and verified. Lastly, she said that Medical Assistance recipients are automatically removed from coverage when they age into Medicare at 65, but in private health plans they do not. The agencies should offer consistency to its applicants across the programs and provide better guidance to enrollees approaching 65.

Grace asked if committee members had any other organizations or communities for the committee to reach out to. Olga recommended that more work be done for first wave immigrants. She mentioned that health care is incredibly different in other countries, so MNsure needs to be more explanatory and comprehensive to applicants that are unfamiliar with English, the programs, and how health coverage works in America.

Erin added that health coverage in general is confusing and counterintuitive. She mentioned that her family, with four children, moved to a new county mid-year and were taken by surprise that their qualified health plan was not offered in the next county. Her family had to select a new

policy with a lower premium and higher deductible that restarted mid-year due to the plan change.

New Business

CSEAC Members

Grace introduced this segment as a time to discuss interesting or complex situations that committee members have come across and want to discuss.

Public Comment

No public comment.

Adjourn

Grace announced the committee will break for December to allow everyone to spend holidays with their families. She told the committee that a joint committee meeting will occur with HIAC in January so that the groups can discuss shared values and individual committee recommendation goals for the MNsure board. She said that the committee will aim to polish up recommendations for presentation to the board in May or June.

Motion: Olga moved to adjourn. Madie seconded. All were in favor and the meeting adjourned at 3:33 p.m.