



Health Industry Advisory Committee Meeting Minutes

Thursday, May 7, 2020, 3 – 4 p.m.
Virtual meeting via Cisco Webex

Members in attendance via phone: Joel Ulland – Chair, Hodan Guled – Vice Chair, Matthew Aiken, Thomas Hoffman, Hillary Hume, Jenifer Ivanca, Maria Lima-Leite, Daniel Miesle, Danielle Paciulli, Matthew Schafer

Members not in attendance: Todd Hurst

Staff in attendance: Christina Wessel – Senior Director of Partner and Board Relations, Eva Groebner – Legal Analyst

Meeting Topics

Welcome & Introductions

Joel Ulland, Chair

Joel Ulland, chair, called the meeting to order at 3:01 p.m. Christina Wessel, MNsure staff, took attendance.

Review & Approval of Prior Meeting Minutes

Joel Ulland, Chair

MOTION: Joel moved to approve the draft April 23 meeting minutes. All were in favor and the minutes were approved.

Public Comment/Operational Feedback

Joel Ulland, Chair

No public comment.

No operational feedback.

Discuss COVID-19 Related Issues and Recommendations for the MNsure Board

Joel Ulland, HIAC Chair and HIAC Members

Joel referred the committee to a document prepared by Dan Miesle that incorporated suggestions sent to him before the meeting. Dan added that he received ideas from five members and grouped them in a comprehensive format for the committee. Joel suggested the group review them in this order and discuss the points one at a time.

Consumer Education

Maria Lima-Leite mentioned that she had suggested tele-help services for the discussion. She continued that the health care industry is moving toward less in-person help which is preventing some patients from getting services. Dan replied that this matter would be addressed in a later category but agreed that this important matter could be multi-faceted. Hillary Hume added that some consumers may have inconsistent phone coverage or are without a smart phone for video, so there should always be multiple access platforms to accommodate all consumers. Maria replied that tele-services are inevitable, and that furlough and lay-off rates indicate that more people will be moving to the individual market. Joel suggested the committee brainstorm ways that the MNSure board could market education to these populations.

Hodan Guled called attention to unprecedented disparity in terms of COVID-19 infection and death in black communities. She added that the Minnesota Department of Health (MDH) has statistics that confirm that this phenomenon is impacting Minnesota communities in addition to the national occurrence. Hodan suggested that MNSure invest more marketing money for outreach in these communities and recommended that the board could request additional funding from the Minnesota Department of Human Services (DHS). Joel asked Christina what sort of marketing is being done by MNSure to direct consumers to seek coverage through the exchange during the COVID-19 pandemic. Christina replied that 2020 is the first year that MNSure held out marketing dollars for outside of the open enrollment period so there were available dollars to advertise the COVID-19 special enrollment period. Most of these dollars were directed into targeted paid search advertising such as when an individual searches life events or enrollment options. She clarified that there are no federal or state dollars available for MNSure marketing through recent appropriation bills.

Jenifer Ivanca informed the committee that her office has put together a quick-reference list of carrier tele-health phone numbers. She recommended that MNSure provide this information to MNSure certified brokers, navigators and application specialists to provide the starting point to larger populations. Her suggestion was that MNSure utilize its email lists and include the list in an upcoming assister email, or directly to MNSure consumers.

Dan suggested that MNSure compile frequently asked questions for two groups: current enrollees and potential enrollees. He mentioned that the distinct groups require different forms of education.

Joel confirmed with Christina that individuals must verify they have experienced a qualifying life event in order to enroll in a qualified health plan now that the COVID-19 special enrollment period has ended. Christina added that Medical Assistance and MinnesotaCare enroll consumers year-round.

ACA Structure

Danielle Paciulli referred to certain populations unable to access affordable healthcare because they do not have internet or a computer. She suggested that the idea be tied into consumer education and access.

Dan added that an extended enrollment period and additional staff should be considered by the MNsure board now in order to get ahead of potential problems when the open enrollment period begins in November.

Jenifer added that the unemployment website recently updated that the additional \$600 stimulus is taxable. She suggested that MNsure prepare in the short term for a rise in life event changes and ultimately for complicated tax reconciliation in 2021.

Joel summarized that the committee's short-term recommendation would be for MNsure to prepare for a very different open enrollment period this year. MNsure should increase staff and provide talking points for the staff and certified assisters.

Premium Affordability

Matt Schafer noted that although health insurance carriers were not funding elective surgeries at the start of the pandemic the procedures have only been delayed. Joel agreed and added that suspending care can result in exacerbated issues and drive up the cost of resolution. Enrollees cannot receive wellness checks, so health issues will not be caught as timely. Maria stated that the term "elective" is commonly misinterpreted. She cited cardiac procedures as frequently being caught in this phenomenon.

Joel asked Christina whether MNsure can process income changes live over the phone to avoid processing delays. She replied that is not currently a possibility and would require system upgrades and agreement with the Minnesota Department of Human Services.

Dan asked about the impact that unemployment may have on advanced premium tax credits. He inquired at what point the unemployment is reported and whether a person may owe tax credits back to the federal government if the recipient is found ineligible for the tax credits. Christina replied that an individual must report their income changes to MNsure when it occurs, and that overpayment of tax credits will be reconciled. She added that individuals can reduce their tax credits paid at any time for the upcoming billing cycle. Maria added that tax credits and the inevitable reconciliation of the credits are not common knowledge. She explained that many Minnesotans end up owing back because they did not understand the income that they reported or how it would impact their tax credit eligibility. Hodan agreed with Maria and added that assisters aid in informing consumers, but MNsure should send letters or emails to inform more individuals about the impact of taxable income.

Creation of an Open Enrollment Pandemic option

Jenifer stated that she has been in support of year-round open enrollment for many years, but the pandemic has proven that access to health care should be attainable for everyone. She

continued that she frequently sees consumers that were erroneously disenrolled through no fault of their own. Christina informed the committee that federal regulations prevent year-round enrollment, and each exchange is required to justify any extension that it offers to its consumers. Hodan suggested that gathering data from the COVID-19 special enrollment period may provide insight to the board and the federal government that longer enrollment periods are necessary. Tom Hoffman replied that insurers would have difficulty underwriting policies if consumers only enroll into coverage when they fall ill. He stated that requiring individuals to qualify for health insurance limits adverse selection (where an individual most in need of health care is more likely to purchase insurance.)

Mental/Behavioral Health

Jenifer mentioned that virtual office visits cover physical illness rarely mental illness and suggested that the topic be moved to another category.

Maria noted that Allina provides services to the whole community. Joel added that many virtual options are non-specific to providers. He suggested that virtual visit discussion be added to the consumer education bullet point. He mentioned that the committee has looked at the MNsure website in the past and found it overloaded. Joel recommended that the site either cite more resources or provide community resources through assisters. Hillary added that there are many free virtual or telephone services that do not require health insurance to access. She stated many of these 800 numbers and text services are grant-funded. Matt Schafer affirmed that the committee needs to keep health equality at the forefront of these discussion to ensure that all Minnesotans obtain the same level of access to resources.

Joel summarized the discussion with consumer education as the committee's top talking point. He suggested that the committee recommend telehealth issues, how tax credits and rebate checks impact enrollees, and how to access under-insured populations. He continued that preparations for the open enrollment period will aid in moving into more communities and continue consumer education surrounding public programs. Finally, he stated that identifying and distributing important resources should be beneficial to consumer education.

MOTION: Joel moved to approve the draft recommendations. Tom seconded. All were in favor and the recommendations were approved.

Future HIAC Meeting

Joel Ulland, Chair

Joel confirmed that the committee will still meet on May 28 to discuss long-term recommendations for the board.

Adjourn

Joel Ulland, Chair

Joel dismissed the committee and the meeting adjourned at 4:04 p.m.