

Health Industry Advisory Committee Meeting Minutes

May 28, 2020, 2 – 4 p.m.

Virtual meeting via Cisco Webex

Members in attendance: Joel Ulland – Chair, Thomas Hoffman, Hillary Hume, Todd Hurst, Jenifer Ivanca, Maria Lima-Leite, Daniel Miesle, Danielle Paciulli, Matthew Schafer

Members not in attendance: Hodan Guled – Vice Chair, Matthew Aiken

Staff in attendance: Christina Wessel, Eva Groebner

Meeting Topics

Welcome & Introductions

Joel Ulland, Chair

Joel Ulland, chair, called the meeting to order at 2:03 p.m. Members introduced themselves

Review & Approval of Prior Meeting Minutes

Joel Ulland, Chair

MOTION: Tom Hoffman moved to approve the draft May 7 meeting minutes. Hillary Hume seconded. All were in favor and the minutes were approved.

Public Comment/Operational Feedback

Joel Ulland, Chair

No public comment.

No operational feedback.

MNsure Board and Staff Update

Christina Wessel, Senior Director of Partner and Board Relations

Christina, MNsure staff, stated that the MNsure board had not met since the committee's last meeting. She framed the previous meeting board meeting as a discussion about the COVID-19 special enrollment (SEP) results. Christina continued with an introduction to MNsure's newest special enrollment period: if a consumer was enrolled in minimum essential coverage outside

the marketplace and suffers a decrease in their household's income, they may be eligible for an enrollment through MNsure. Christina explained that other health exchanges have adopted this enrollment opportunity, and MNsure is happy to have added this option to its permanent SEP qualifying life event roster on May 11. Joel Ulland asked whether the SEP has been marketed to Minnesotans, which Christina stated has not been the case. She continued that the SEP meets the needs of a very specific population and would be difficult to widely advertise. She added that brokers have been apprised to the new SEP through a webinar and newsletters. Dan Miesle inquired whether a press release informed the public about the new SEP or who else may be informed by MNsure bulletins. Christina replied that MNsure's communications department releases information to the press, and that MNsure applicants can opt into newsletters, but the new SEP is directed to new applicants, so they are unable to receive the information directly.

Christina informed the committee that MNsure updated its system over the previous weekend, including instructions to include the \$600 weekly unemployment stimulus as projected annual income. Annual income determines MinnesotaCare and qualified health plan eligibility but is not used to determine Medical Assistance eligibility. This information can now be found on the health care eligibility application.

The final MNsure update from Christina regarded implementation of the insulin affordability program, which will launch on July 1. She stated that MNsure is training navigators in preparation.

Political Landscape

Joel Ulland, Chair

Joel informed the committee that the legislative session adjourned May 17. He reminded everyone that this has been a policy year, not a budget year. Pre-pandemic legislature focused on the Alec Smith Insulin Affordability Act and The Prescription Drug Transparency Act. The drug transparency bill requires additional accountability for price increases, obligating manufacturers to report significant price changes to the Department of Health. Joel stated that most of the language in this bill passed last year, but authorization took additional time. Additionally, legislature reformed health care services utilization review and prior authorization requirements to modify standard and expedited timelines.

Since the onset of COVID in Minnesota, legislature has redirected focus to stark new realities. Joel said that hospital funding has been a priority to ensure that health care workers have access to personal protective equipment. Additional funding for small businesses has also been passed in bills.

Joel's next update regarded Governor Walz's emergency orders and executive power. He explained that the House and Senate do not need to approve an extension to executive powers but would need to call a special session to veto the order if they believe that the governor has exceeded his authority.

Joel concluded that the state's budget has been deeply impacted by COVID-19, and he anticipates that legislature will begin to address the deficit sooner rather than later.

Discussion of Committee Work Plan

Joel Ulland, HIAC Chair and HIAC Members

Joel reminded the committee that the previous meeting was to discuss shorter-term goals, but larger issues stemmed from their discussion. Hillary stated that her staff at Hennepin Health has tackled one crisis after another. She mentioned that although Medical Assistance and MinnesotaCare have suspended closure of cases, they will eventually let up, and many Minnesotans will lose coverage. She also stated that the tele help healthcare system has further complicated wellness for residents with language or technology barriers. Joel added that UCare consumers have expressed confusion about where their households fall regarding the qualified health plan and MinnesotaCare cliff. Matt Schafer echoed Joel, adding that Medica, too, has frequent calls from households going through major transitions and seeking guidance.

Joel mentioned another advisory committee meeting he took part in for UCare, stating certain themes seem to be universal. Among these were the impact of social isolation and mental health and consumers' struggle to prioritize "essential" visits with their health care provider. He added that one member expressed the convenience of tele help visits that have eliminated her 70-mile commute to a specialist. Dan added that virtual visits for the month of January were around 2,000, and by April were performed at a monthly rate of 200,000. He suggested that many patients may get help with quicker access through tele help, but people with technology or language disadvantages are being left behind.

Maria Lima-Leite stated that Allina has observed high satisfaction from tele help patients as monitoring-at-home has rapidly increased. She added that patients without access to tele help will ultimately pay more for the complications involved with not catching illness sooner. She confirmed for Dan that billing for in-person and virtual visits are essentially the same at Allina.

Matt Schafer shared a strange experience that he recently heard about. An individual received a brief call from his physician asking how his medication was working out. The individual replied, and the call concluded. Weeks later, he received an invoice for the call as a medical check. Matt suggested that enforcement methods will need to be in place if virtual medicine is a new normal after the pandemic subsides.

Hillary mentioned that she recently received a robo-call offering to help her sign up for disability Medical Assistance. She mentioned that the Department of Human Services may have new burdens with calls like that going out to the general population.

Dan asked for the timeline for health plans to submit their 2021 plan rates. Joel and Matt Schafer mentioned that filings are under review before submission to the Department of Commerce, but actuarial analysis has been complicated amidst COVID-19. Matt mentioned that many elective procedures were suspended while personal protective equipment was obtained which may have led to additional complications in some cases. He added that elective is a misleading name for the procedures, as they are medically necessary, not a way for people to pass time. Maria confirmed that resuming elective procedures will be a challenge to medical staff. She stated that Allina's end of year projections show loss in their budget. Medical facilities have been avoiding maximum capacity in anticipation of upcoming rises in COVID-19 cases. Maria said that 2020 has been so unpredictable that preparing for 2021 is nearly impossible

Future HIAC Meetings

Joel Ulland, Chair

Joel asked the committee members how best to move forward so that recommendations can be made to the board this summer. Matt Schafer suggested the committee tackle one recommendation at a time. Dan mentioned that finding resolutions for the underserved population is the most significant and causes him the greatest concern. Hillary suggested that hundreds of first-time MNsure applicants came through during the COVID special enrollment period, and that public program recipients will be coming through MNsure again when the suspended Medical Assistance and MinnesotaCare cases are addressed. Joel agreed that all the health care agencies in Minnesota have a role to play in reducing uninsured populations.

Jenifer Ivanca suggested that MNsure give guidance to its consumers to alleviate some of the fear Minnesotans are experiencing. Concepts such as Center for Disease Control health guidelines, some frequently asked questions (and answers) about protecting themselves from illness could give them the courage to seek care instead of putting it off.

Joel suggested that the committee discuss the underserved population at the June meeting. Dan offered to gather excerpts from previous discussions so that the committee can have a document before the June meeting. Danielle Paciulli commended Dan's work on the COVID-19 document that framed the conversation and stated that she supported the idea.

MOTION: Joel moved for Dan's underserved population document to be finalized by June 11th. Matt Schafer seconded. All were in favor and the committee adopted a schedule for a document.

Adjourn

Joel Ulland, Chair

Matt Schafer made a motion to adjourn, Maria seconded. The meeting adjourned at 3:17 p.m.