



Health Insurance Advisory Committee Meeting Minutes

June 25, 2020, 2 – 4 p.m.

Virtual meeting via Cisco Webex

Members in attendance (via Webex): Joel Ulland – Chair, Hodan Guled – Vice Chair, Hillary Hume, Jenifer Ivanca, Maria Lima-Leite, Daniel Miesle

Members not in attendance: Matthew Aiken, Thomas Hoffman, Todd Hurst, Danielle Paciulli, Matthew Schafer

Staff in attendance: Christina Wessel and Eva Groebner

Meeting Topics

Welcome & Introductions

Joel Ulland, Chair

Joel Ulland, chair, called the meeting to order at 2:03 p.m. Christina Wessel, MNsure staff, took attendance.

Review & Approval of Prior Meeting Minutes

Joel Ulland, Chair

Motion: Dan Miesle moved to approve the draft May 28 meeting minutes. Maria Lima-Leite seconded. All were in favor and the minutes were approved.

Public Comment/Operational Feedback

No public comments.

No operational feedback.

MNsurance Board and Staff Update

Christina Wessel, Senior Director of Partner and Board Relations

Christina reminded the committee that Governor Walz appointed a new MNsure board member, Stephanie Stoffel, to the MNsure Board of Directors in March. Stephanie serves as the small employer representative on the board. She works at Scholarship America as the vice president of technology and has served on nonprofit boards of directors in the past, including for the

United Way of Mankato. Christina continued that last week Walz appointed an additional three members, marking the board meeting on June 18 the four members' first meeting.

Suyapa Miranda was reappointed for another four years, remaining the board member representing public health programs. Suyapa was first appointed to the MNSure board in 2018 when she completed the second half of her predecessor's term. Suyapa also serves as the director of operations at New Native Theatre. She has previously served as the vice president for the Alliance for Metropolitan Stability and has served on the board of directors for several other Minnesota non-profits and organizations, including the Metropolitan Council Transportation Advisory Board, the Minnesota Council on Latino Affairs, and Southern Minnesota Regional Legal Services.

Andrew Whitman has been appointed to the board seat representing the interests of consumers eligible for individual market coverage. Andrew is both a professor of insurance at the Carlson School of Management and an AARP-IRS tax counselor.

David Fisher fills the board seat representing health policy issues related to both small group and individual markets. David has served on the boards of directors for several organizations such as Project for Pride in Living, Growth and Justice and Senior Community Services. Currently David is an adjunct professor of law at the University of Minnesota Law School and the University of St. Thomas where he teaches contracts and interest-based negotiations.

Christina continued that the board reviewed MNSure's 2020 enrollment numbers as of June 14. 380,347 Minnesotans had signed up for health coverage through MNSure comprised of: 137,347 qualified health plan (QHP) enrollments, 200,427 Medical Assistance (MA) applications, and 42,573 MinnesotaCare applications. MNSure and the Minnesota Department of Human Services (DHS) equated the higher enrollment numbers to citizens' concerns driven by the COVID-19 pandemic. Christina added that MNSure continues to advertise through social media encouraging the uninsured population to apply through MNSure. Key points of the advertisement include the year-round enrollment opportunities of MinnesotaCare and MA, and the ability to determine special enrollment eligibility for a QHP on MNSure.org.

Christina informed the committee that Nate Clark, MNSure's CEO, presented a financial update to the board. By the end of May, premium withhold revenue was roughly \$500,000 above forecast, reaching \$8.2 million. She added that MNSure has spent hundreds of thousands in response to COVID-19 and is seeking relief funding. Despite these changes, MNSure does not anticipate great variance from the preliminary fiscal year 2021 budget presented to the board in March. Christina indicated that MNSure does not intend to change staffing or operations plans and will finalize the budget at the July board meeting.

Christina continued that MNSure, which converted entirely to remote work in early March, has no intention to return staff to work on-site for several months. MNSure will establish health and safety protocols in preparation for eventual return to the building but anticipates remote work through the open enrollment period and beyond.

As of mid-April, MNSure has successfully transferred all Employer Shared Responsibility appeals to the federal Department of Health and Human Services, which will save MNSure hundreds of thousands of dollars annually. Christina explained that if a person is determined

eligible for an advanced premium tax credit (APTC) their employer receives an automatically generated notice to inform (the employer) that they may be at risk of a penalty for not providing their employees minimum essential health insurance. The employer is then then given opportunity to dispute the individual's eligibility for advanced premium tax credits.

Christina shared a fun fact from the board meeting: on the afternoon of June 3 MNSure had zero life event changes (LEC) pending review. This marks the first time since the creation of LECs that MNSure has come completely current with reported changes. Christina continued that the average age of LEC is hovering around one day. She explained this enables MNSure operations specialists to work on additional projects and puts MNSure in a strong position to automatically renew households for plan year 2021 this fall. Some of the 50 other preparatory projects MNSure is tackling for open enrollment are marketplace set-up, improvements to tools, and streamlining verification scanning and indexing.

Christina's final update was that MNSure is preparing to launch its elements of the insulin affordability program July 1. Finalization of MNinsulin.org is underway for the emergency insulin application; MNSure is contracting with a vendor for a statewide advertising and public awareness campaign; materials and a communication plan are being developed; and more than 70 navigator agencies and 160 individual navigators have already completed training to help individuals with the application.

Joel asked whether MNSure anticipates any challenges for remote work during the open enrollment period. Christina referenced the success rate for LECs being better than ever, stating it's symbolic of how effectively MNSure's staff is working from home. She noted that hiring and training new staff will be the largest foreseeable obstacle.

Hodan Guled referred to the second slide from the MNSure board slide deck, inquiring whether there is data to reflect the increase in enrollments based on program from 2019 to 2020. Christina apologized that she was unaware of the numbers and would need to share them later.

Joel noted that slide three reflects a high volume of consumers that enrolled through the COVID-19 special enrollment. He asked Christina whether there are statistics on how many of the enrollees effectuated their coverage. Christina replied that MNSure has not received that data from each of the health insurance carriers, but that the update will likely be included for the MNSure board meeting in July as it will impact the 2021 fiscal year budget.

Political Landscape

Joel Ulland, Chair

Joel stated there had been minimal health care related news among legislature. He noted that a special session had been called that lasted a week. Moving forward, Governor Tim Walz will need to call special sessions for legislature every 30 days if he intends to extend his peacetime emergency powers. Both the House and Senate would need to veto Governor Walz's authority by majority vote. The next special session is anticipated July 12 as emergency authority for the governor will need renewal at that time, but another session could come up regarding other topics.

Joel mentioned that legislature did not make plans for the state budget deficit during its regular session, so that will be a priority when they convene for the 2021 session.

The final update Joel shared was regarding a bill that passed during the special session. Among the variety of components to the bill Joel noted that it will extend waiver authority to expand tele-health services until June 20, 2021.

Discuss Committee Work Plan – Underserved Populations

Joel Ulland, HIAC Chair, Dan Miesle and HIAC Members

Joel asked that Dan present his underserved populations research to the committee. Dan stated that the first document was an extraction of the previous meeting minutes, back to January 24, 2019, where the committee had discussed this very topic. In total there were eight references to this conversation. At the end of the document he attached additional information to tie in the MNsure board's authority on the matter. Minn. Stat. § 62V.05 (2019) states that the MNsure board may consider "promotion of initiatives to reduce health disparities" when determining participation from health insurance carriers. He continued that the other document was a presentation that Hodan, Hillary Hume and (former committee member) Carl Floren presented at the May 23, 2019, HIAC meeting. Dan asked Hodan and Hillary to recap their presentation for the committee.

Hodan mentioned recent civil unrest that began in Minneapolis and spread to major cities worldwide. Hodan asserted that while discussions of systemic racism, disparities and inequities are prevalent throughout society, the committee and the MNsure board need to take a deeper look at underrepresented populations. She moved on to note that the Health Access Survey is performed every two years by the Minnesota Department of Health, and the 2019 presentation consisted of this data in addition to research from the State Health Access Data Center (SHADAC.) She correlated high uninsured rates and poor health outcomes, concluding that utilization of preventive care reduces the rates of chronic illness. Hodan continued that the COVID-19 pandemic has exasperated the disparity with larger numbers of minority and chronically ill people being hospitalized or dying of COVID-19 related illness. She stated that the responsibility of the committee should not be in updating data points, but rather in continuing discussions and finding actionable recommendations for the board.

Hillary noted that the data from the original presentation was gathered in 2017. She noted that another Health Access Survey would have been performed in 2019. Christina agreed that the survey has been done, but the site does not reflect updated information yet. She concluded that analysis of the information was likely impacted by the pandemic.

Joel suggested that calling the board's attention to the disparities may be enough to motivate them to seek their own goals in the matter. He stated that these are issues under a microscope for policy makers throughout a variety of industries and community organizations.

Hillary suggested that an obtainable goal for MNsure may be to encourage child visits, vaccines, wellness checks, and other preventive health care. She stated that MNsure should be mindful of the apprehensions people have had to return to "normal" after three months of being told to stay

home. The message she asked MNSure to spread is that preventive services are important for long-term health.

Hodan stated that she would like to see MNSure and DHS coordinate efforts to reach the uninsured populations. She cited a statistic that roughly 60-70% of uninsured people could gain health care through public programs (Medical Assistance and MinnesotaCare) and she would like to see these people gain access and ease of mind by obtaining affordable coverage. Her largest question would be “what more could be done to reach these populations?” Joel deferred to Christina to address any upcoming marketing initiatives to reel uninsured Minnesotans in. Christina replied that MNSure’s communications team has not determined the precise marketing strategy for open enrollment 2021 yet. She suggested that MNSure may continue its recent trend of investing in paid search advertisement with less focus on television ads. Hodan noted that leaning heavily on online advertisement leaves a large population of Minnesota residents out of the loop. Hillary agreed that a vast population is unable to use the technology to be reached by these advertisements. Joel added that elderly consumers may not have a smartphone, or consumers in rural areas may not have the bandwidth to support a video conference.

Dan recommended that MNSure seek out social equality groups that already have similar agendas and unite for a greater cause. He suggested that these groups are already working to find new ways to fix decades-old problems, and if MNSure were to offer a message of “We’re here for you” it could go a long way for bridge-building within the community. Joel agreed this would be a novel approach and added that being an election year MNSure will have a more difficult task to break through news cycles by traditional methods.

Joel summarized the key points that he intends to present to the MNSure board:

- Build on partnerships and direct outreach with the community
- Support of year-round marketing and messaging to target underserved populations (reinforcing that information be available in multiple languages)
- Identify strategies for consumers without internet/compatible technology, ensuring that they understand what MNSure is
- Encourage preventive care
- Identify any items through the lessons learned through COVID-19 and build recommendations

Motion: Joel made a motion to approve the recommendations for the MNSure board. Hodan seconded. All were in favor and the committee adopted the recommendations for the board.

Future HIAC Meeting

Joel Ulland, Chair

Joel confirmed that the committee will take a hiatus in July and August and will reconvene on September 24 to discuss its other recommendations for the board. He clarified that he will work

with Christina to determine when and how best to submit the committee's current recommendations to the board in the meantime.

Adjourn

Motion: The meeting was adjourned at 3:08 p.m.