Health Industry Advisory Committee Meeting Minutes

October 28, 2021, 2 – 4 p.m.

Virtual meeting via Cisco Webex

Members in attendance: Matthew Schafer – Chair, Hodan Guled – Vice Chair, Jenifer Ivanca, Maria Lima-Leite, La Sheenlaruba Tyacke, Joel Ulland, Brian Vamstad

Members not in attendance: Matthew Aiken, Danielle Paciulli, Richard Wallace

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

Meeting Topics

Welcome and Attendance
Matt Schafer, HIAC Chair
Matt Schafer, chair, called the meeting to order at 2:03 p.m.

Review and Approval of Prior Meeting Minutes
Motion: Matt Schafer moved to approve the draft September 23 meeting minutes. Hodan Guled seconded. All were in favor and the minutes were approved.

Public Comment and Operational Feedback
No public comments.

No operational feedback.

MNsure Update
Christina Wessel, Senior Director of Partner and Board Relations
Christina Wessel, MNsure staff, shared MNsure updates for the start of the open enrollment period and the most recent board meeting. Christina summarized that MNsure’s 2022 plan renewal batches have largely been completed with only a couple updates needed to catch the more recent 2021 enrollments needing renewal into 2022 yet. Christina reminded the committee that the open enrollment period begins on Monday, November 1. She explained that MNsure’s website “goes live” with 2022 enrollment options at 7:00 am, and the MNsure support telephone lines will open at 8:00 am on Monday morning. She added that MNsure’s contact center will extend its hours to accommodate a higher volume of incoming calls in December. As Christina
explained, consumers have until December 15 to enroll into coverage beginning January 1, 2022, and until January 15, 2022, to enroll into coverage that starts February 1, 2022.

Christina noted that MNsure consumers will have the opportunity to enroll into 2022 coverage after the open enrollment period ends if they have a qualifying life event that determines them eligible for a special enrollment period. Additionally, the enhanced American Rescue Plan Act (ARPA) advanced premium tax credits (APTC) will largely continue for 2022 with exception of the additional unemployment insurance benefits, which end December 31, 2021. Christina explained that the consumers impacted by the end of these enhanced benefits will receive notice from MNsure and their health insurance provider. Christina added that the final release for plan premiums was released at the board meeting which indicated robust enrollment choices for consumers.

Christina gave a brief rundown of the average changes to the 2022 plan rates released. The highest premium increase (from 2021 to 2022) was across the bronze metal level plans. She explained that APTC is calculated using the second lowest costing silver plan for each household, which ultimately factors into how each household may see savings.

Christina also shared with the committee cumulative enrollment numbers since the 2021 open enrollment period began on November 1, 2020. Over 330,000 applications came through MNsure for plan year 2021; 152,000 of which were Medical Assistance applicants, 28,000 MinnesotaCare enrollees, and nearly 150,000 qualified health plan (QHP) enrollees. Christina added that approximately one third, or nearly 50,000, of the QHP enrollees were new consumers who had not enrolled through MNsure in a prior year. She credited this largely to increased APTC through ARPA, and the additional special enrollment opportunities throughout 2021 due to COVID-19 and ARPA.

As of September, MNsure had seen over 109,000 enrollees. Christina noted a markedly higher retention rate from previous years, likely due to a combination of Minnesotans’ sensitivity to remaining insured throughout the COVID-19 pandemic, and enhanced tax credits aiding in the affordability to allow more households to do so. She pointed out that the bottom of slide six showed that although the average pre-APTC premium did not waiver much in 2021, the average post-APTC premium decreased by nearly $60 mid-year when ARPA rolled out at MNsure, indicating widespread financial benefit across Minnesota.

Next, Christina announced that the MNsure board approved the fiscal year (FY) 2022 budget on October 20. She clarified that the 2022 fiscal year had already begun, however, there were numerous factors that needed to be wrapped up before finalization, including approval and receipt of ARPA funds MNsure had applied for. As far as premium withhold, Christina said MNsure remained on the projected track for FY 2021 and were just above projections for quarter 1 of FY 2022. Although several external factors could impact the stability of MNsure’s budget, early signs indicate that FY 2022 should remain on track.

Continuing with operational slides, Christina noted the Contact Center fields different volumes and categories of calls throughout each year, but consistently sees spikes in volume during the open enrollment period, specifically in November. She shared that in previous years, MNsure utilized out-of-state vendors to manage the high volume of easily resolved cases, leaving more
complex issues to be addressed by specialists in St. Paul, however 2021 has been the first year MNsure has operated without a vendor. Moving all calls in-house should allow MNsure to manage resources better as well as manage the increased staff at a higher level of quality. Christina added that the additional staff had been through months of training and practice leading up to the open enrollment period.

The final operational slide regarded life event processing at MNsure. Christina mentioned that life event changes (LEC) processing is a tedious manual process, and therefore has been a frequent challenge for MNsure operations to keep atop of. Reported LEC ebbs and flows throughout each year, but because of a supply chain delay caused by COVID-19, MNsure was delayed in mailing out renewal notices this year due to an envelope shortage. These notices serve as a reminder to households about the most recent information MNsure has, and how their 2022 health care eligibility was determined ahead of the start of open enrollment. The delay in the household summaries and 2022 eligibility will likely trigger thousands of more households to report changes later into the open enrollment season. To prepare for open enrollment 2022, MNsure operations processed every available LEC prior to the September annual renewals so that initial 2022 calculations were with the most recent available information for as many households as possible. MNsure intends to manage its resources to maintain an average of 10 days’ processing time from when an LEC is reported.

Joel Ulland thanked Christina for the additional information. He suggested that the committee should focus on MNsure’s role in engaging consumers as they move from public program to the individual market at the end of the public health emergency. He continued that public relations and marketing considerations should be made by MNsure and the Department of Human Services (DHS). Christina noted that loss of public program is a qualifying life event for people to enroll through a special enrollment period, and that the shared eligibility system between MNsure and DHS makes it a fairly simple process for consumers. She agreed with Joel that messaging should be directed toward the population.

Christina added that this was the last meeting for Hodan, Jenifer Ivanca, Maria Lima-Leite and Joel Ulland. Hodan praised the committee for their hard work and offered to stay in touch and advocate for the group from her position at Briva Health.

Hodan asked Christina whether year-round marketing will remain one of MNsure’s objectives after open enrollment ends, and if consumer savings will remain the focus. Christina confirmed that with ARPA tax benefits continuing, MNsure will continue to share experiences with savings rather than focusing solely on the healthcare aspect of seeking coverage through the exchange. She continued that MNsure has hired a new advertising vendor, so the previous years’ ads were refreshed as well as new commercials being released. She was unable to address what portion of the year’s marketing dollars were reserved for after the open enrollment period.

**Legislative Update**

*Matt Schafer, Chair*

Matt Schafer began by noting that not much has changed legislatively since the September meeting. Proposals surrounding the Build Back Better Act have scaled back a bit, including a recommendation to extend the subsidies for three years rather than permanently. Additionally,
the federal reinsurance program is in debate. The reinsurance program will not decrease premiums but may see premium increases delayed by as much as 7%. Joel Ulland agreed that reinsurance proposals will continue to be in discussion, and that a compromise may look like a re-authorization for shorter increments.

At the state level, the likelihood of a special session in February seems increasingly likely. Matt mentioned that frontline bonuses for workers working through the pandemic and caring for others with COVID-19 or other medical issues are the likely recipients of such bonuses, though a compromise has not yet been made between the congressional parties.

Brian Vamstad called attention to ongoing discussions about the No Surprises Act. He said that the act will not be passed before 2022, and that it will require a lot of understanding to navigate the requirements. Matt added that Medicare changes will give the Centers for Medicare & Medicaid Services (CMS) more latitude to negotiate drug prices.

**Discussion of Future Topics**

*HIAC members*

Matt Schafer asked that the committee members use the hiatus in November to consider new topics for upcoming meetings. Joel Ingersoll offered to send out a poll to committee members about which date(s) in December would work best for a meeting.

**Adjourn**

*Motion:* Joel Ulland moved to adjourn. Maria Lima-Leite seconded. All were in favor and the meeting adjourned at 2:43 p.m.