



# Health Industry Advisory Committee Meeting Minutes

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**April 28, 2022, 2 – 4 p.m.**

**Virtual meeting via Cisco Webex**

**Members in attendance:** Matthew Schafer – Chair, Deb Kersten, Nancy Molenda, La Sheenlaruba Tyacke, Brian Vamstad

**Members not in attendance:** Michael Boho

**Staff in attendance:** Christina Wessel, Eva Groebner

## Meeting Topics

### Welcome, Introductions, and Attendance

*Matt Schafer, HIAC Chair*

Matt Schafer, chair, called the meeting to order at 2:01 p.m.

### Review and Approval of Prior Meeting Minutes

**Motion:** Matt moved to approve the draft March 24 meeting minutes. Brian Vamstad 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 that the MNsure board was on a hiatus from meeting between March and June. She informed the committee that the 2021 Minnesota Department of Health and the University of Minnesota School of Public Health, State Health Access Data Assistance Center (SHADAC) health access survey results were published in April 2022. She commented that although the uninsured rate is the lowest ever at 4%, there are significant and growing disparities in communities of color. She suggested that the committee members review the full report before considering recommendations for the MNsure board.

Christina mentioned that the federal public health emergency was still in effect with a possible end date in July. She clarified that there will be 60 days' notice before the emergency ends, therefore if notice was not given within a couple weeks, it would mean the emergency would likely be extended into the fall.

Next, Christina shared IT enhancements MNsure was working on. First, MNsure is working with health insurance carriers to offer the option for new enrollees to pay their first premium payment online through MNsure. This would allow consumers peace of mind getting their initial "binder" premium paid more quickly.

Another improvement MNsure is working on is improving the application process so that it is mobile friendly. Another IT project is focused on adding more self-service options to METS to support public program renewals once the federal public health emergency ends. Improvements would make consumers' household information more visible and enable consumers to upload verification documents. This would increase access and aid assisters with the renewal process. These upgrades are tentatively scheduled to be in place before the next open enrollment period begins November 1.

La Sheen Tyacke explained her job as a community care associate is to link people with community resources. She continued she had assisted patients get the financial help they needed because they were able to navigate the MNsure site with ease and get through to MNsure staff quickly for tasks like password resets. She concluded that being successful in her role meant supporting patients in a way they could become self-sufficient. Christina replied that it was nice to hear from the consumer end that IT and customer service were improving.

## **Legislative Update**

*Matt Schafer, Chair*

Matt began that the question whether the Congress and the Biden administration would extend subsidies from the American Rescue Plan Act (ARPA) remained. Though conversations surrounding the Build Back Better Act were less extensive when compared to last year, there seemed to be a general acknowledgement the benefits should be extended for at least one year.

Matt continued with the state update. Governor Walz signed the Reinsurance Bill, so the Minnesota Department of Commerce received authority to request renewal of the 1332 waiver through the federal government for another five years. He explained that the law reinstated attachment points for the program from its first years in effect, paying 80% co-insurance for claims \$50,000 to \$250,000. Other provisions included postnatal services, and a \$25 cap on co-pays for all medications and specialty drugs across one gold and one silver product offered. He continued these changes will need to be offered by 2024, and if after three years they are not sought after by the public, the products will no longer be required.

Next, Matt explained that the legislative session was nearing its end, but there was some talk of a supplemental budget. He stated that Governor Walz and the legislators aimed to address reinsurance, front line worker bonuses and replenishment of the unemployment insurance trust

fund this session. The state had an about \$9.3 billion surplus, so the legislature was working to pass supplemental spending bills which could lead to bigger supplemental budget discussions.

Then, Matt shared that an extensive document for federal rate filing procedures was released that morning with 600 pages of benefit payment parameters. Matt explained that health insurance carriers would need to review to ensure their products meet all requirements.

Christina added that due the public health emergency extending coverage for those enrolled in public programs, the Department of Human Services has not used all the funds available for navigator per enrollee payments. Like last year, there is a proposal at the legislature to use the balance of the funds from this fiscal year as one-time grants for qualifying navigator agencies.

## **Committee Discussion**

*Matt Schafer, HIAC Chair & HIAC members*

Matt mentioned the committee was working to schedule a joint meeting with the Consumer Small Employer Advisory Committee (CSEAC) and encouraged members to vote for dates they preferred through an emailed poll.

Matt continued that the biggest thing he believed the committee needed to watch for was sunseting of the public health emergency. He mentioned that the committee made a recommendation surrounding that last year, so he was not sure it needed to be another recommendation this year, but at minimum open communication with MNsure staff when the emergency inevitably ends. He suggested that each of the committee members has unique opportunities to see the MNsure process from outside perspectives and their insight would be valuable to the MNsure board. Nancy Molenda agreed that collaboration between stakeholder groups strengthens the MNsure experience for consumers.

La Sheen suggested that the committee look at how MNsure can be more inclusive regarding gender identities. Matt mentioned that CSEAC had looked at that as a recommendation last year. He continued that other state legislatures have brought forth proposals to prohibit health carriers' reimbursement codes that relate to gender dysmorphia. He has not seen any such proposal in Minnesota but agreed the committee should be ready to address should it come up.

Next, Matt reminded the committee to look at the health access survey results so that they can discuss at another meeting. Nancy mentioned she saw a link for the results in a recent MNsure weekly update. She thanked MNsure staff for sending out useful information and recommended the members sign up for the updates if they had not already.

Matt recapped that for the joint committee members should plan to discuss unwinding of the public health emergency, results of the health access survey, and identity inclusivity at MNsure. Christina added that CSEAC has had a previous recommendation to the MNsure board to take color-coded avatars (pink representing females and blue representing males) off the MNsure application. She explained that the proposed IT enhancements would remove the avatars.

## Adjourn

**Motion:** Nancy moved to adjourn. Matt seconded. All were in favor and the meeting adjourned at 2:38 p.m.