Board of the Commonwealth Health Insurance Connector Authority

Minutes

Thursday, April 10, 2014
9:00 AM to 12:00 PM
One Ashburton Place
Boston, MA 02108
21st Floor Conference Room

Attendees: Glen Shor, Dolores Mitchell, Jean Yang, Nancy Turnbull, George Gonser, Rick Jakious, Ian Duncan, Jonathan Gruber and Joseph Murphy. Robin Callahan attended in place of Kristin Thorn. Lou Malzone participated by telephone because of geographic distance.

The meeting was called to order at 9:05 AM.

I. Minutes: The minutes of the March 27, 2014 meeting were approved by unanimous vote.

II. Executive Director’s Report: Ms. Yang began her report by noting that open enrollment officially ended on March 31, 2014. She stated that the Health Connector (CCA) is still processing enrollment through special enrollment periods and that enrollment is trickling in on a daily basis. She then updated the Board on her testimony the previous week in front of the Congressional Committee on Oversight and Government Reforms. She stated that there was also leadership present from the California, Minnesota, Hawaii, Maryland and Oregon Exchanges to testify. She thanked the team at CCA as well as members of the Governor’s Office and the Executive Office of Administration and Finance for their help in preparing for this hearing. She stated that the hearing covered a wide range of topics but was concentrated on the challenges of the rollout, vendor accountability, data security and federal grant dollars. Ms. Yang noted that while she was asked to speak on a number of issues, the overall message was that Massachusetts has been a national leader and will continue to lead the nation for coverage of residents. She also stated that she
believes the oversight and scrutiny of this project are just beginning and that more questions will arise as time goes on. She stated that CCA is prepared to answer these questions and make the most thoughtful and responsible decisions going forward. Ms. Turnbull complimented Ms. Yang on her testimony, noting how articulate, poised and confident she was. Ms. Yang thanked Ms. Turnbull and stated that, while this was in part due to excellent preparation, Massachusetts has worked to achieve the fundamental goal in providing coverage to residents. Mr. Duncan asked whether the University of Massachusetts Medical School (UMMS) was discussed during the federal grant dollars portion of the testimony. Ms. Yang explained that the hearing did not touch upon who was responsible for the oversight of federal grants. Ms. Wcislo then discussed the sudden closing of the North Adams Regional Hospital and the impact on approximately 500 employees who lost their job and benefits. She thanked members of the CCA team who went to North Adams to help those individuals sign up for health insurance; Camie Berardi, Suzi Jervinis, Paul Landesman and Niki Conte, as well as colleagues from MassHealth. Secretary Shor noted that the Governor is also deeply appreciative of these efforts.

III & IV.  2014 Open Enrollment Check-in / Weekly Health Exchange Briefing (Agenda items taken together): The PowerPoint presentation “2014 Open Enrollment Check-in” was presented by Sarah Iselin, Roni Mansur and Ashley Hague. Ms. Iselin began the presentation by noting that Donald Johnson from Optum would be joining her to discuss operations and technology. She stated that the team is in the midst of assessing long-term options and, while she will not be presenting the long-term plan, it will be provided at the next Board meeting as the team seeks input to assess all options.

Ms. Hague provided an overview of open enrollment, beginning with the subsidized population. Ms. Hague explained that March 31, 2014 marked the end of open enrollment; however, subsidized populations will continue to move after open enrollment. She stated that since January of 2014, MassHealth has added 192,432 new members, including those who transitioned from Commonwealth Care under Medicaid expansion under the Affordable Care Act (ACA). She also reviewed current enrollment in the Commonwealth Care program, including former members of the Medical Security Program (MSP); the Commonwealth Care coverage is being extended until June 30, 2014. She noted that individuals who had been Commonwealth Care members and then went to MassHealth due to Medicaid expansion, are included in the new MassHealth enrollee figure. In addition, she stated that MSP included two programs, a direct coverage program and a premium assistance program. She noted that CCA was able to continue the direct coverage program but that those who received premium assistance either kept their plan without continued assistance or could opt into the direct coverage option through CCA. Mr. Gruber asked whether former MSP members still need to transition to new coverage. Ms. Hague stated that they do. Ms. Wcislo requested that CCA work with the Division of Unemployment Assistance (DUA) to make sure coverage options are understood by individuals. Ms. Hague explained that CCA works closely with DUA and that CCA would follow up on this. Ms. Turnbull requested that the MassHealth population numbers be broken out in more detail for the next Board meeting. Mr. Duncan asked where new enrollments in subsidized coverage
were coming from. Secretary Shor noted that there are still uninsured in Massachusetts and that many studies have shown that this is concentrated in low income individuals. He further explained that there were likely many individuals who were eligible for subsidized coverage such as employees who cannot afford their employer sponsored insurance, but who can now obtain coverage through CCA or MassHealth. Ms. Iselin added that the visibility due to the implementation of the Affordable Care Act also likely brought many more people in to apply for coverage. She stated that she has reached out to Aron Boros of the Center for Health Information and Analysis (CHIA) who, along with the members of his team, are restarting the enrollment section of the Key Indicators report which will help to provide more information on coverage of Massachusetts residents. Ms. Turnbull stressed the importance of this study, noting that last time the study was done there were approximately 200,000 uninsured in Massachusetts and the Commonwealth needs to continue pursuing its mission of getting every resident insured.

Ms. Hague then provided an overview of unsubsidized enrollment. Mr. Gruber asked whether there was evidence of how unsubsidized shopping was working on the website. Ms. Iselin stated that unsubsidized shopping was available end-to-end on the website but that this experience was still subject to error messages, timeouts and other glitches. Secretary Shor added that there are individuals purchasing their coverage through the website as is evidenced by enrollment numbers. Ms. Hague and Mr. Mansur explained that there is also a paper application for unsubsidized products, but that this was not highly utilized and that these individuals still needed to shop online or through customer service after submitting an application. Ms. Hague then provided an overview of small group enrollment, which is ongoing throughout the year. She noted that small groups purchasing new products are larger than in the past, which is likely reflective of the fact that sole proprietors can no longer shop for small group coverage through CCA, though they could purchase a non-group plan. Ms. Hague stated that CCA will be evaluating whether sole proprietors are purchasing their new plans through CCA. Ms. Hague also provided an update on dental enrollment, a product that is new to CCA in 2014. Ms. Yang noted that the current procedure for dental shopping is not very consumer friendly, but that enrollment in these products shows that there is market demand and this needs to become an online, consumer friendly process.

Ms. Hague finished the open enrollment overview by illustrating where former Commonwealth Choice members had gotten their new coverage through CCA or Medicaid. She noted that CCA has found that approximately 19,000 former Commonwealth Choice members have enrolled in new coverage with CCA, and just over 6,000 former members are enrolled in temporary Medicaid coverage because they submitted a subsidized application in the system. She noted that the ACA expands eligibility for subsidies to higher income cohorts than was previously available in Massachusetts, which is why these former Commonwealth Choice members likely applied for subsidized coverage. She then stated that the remaining approximately 10,000 former members were not found in new coverage types and that CCA will be looking to administer a survey to find out if these individuals have coverage and, if so, where. Ms. Hague also noted that, of the new enrollees in unsubsidized Qualified
Health Plans (QHPs), approximately 10,000 shopped using the Fast Path method. Secretary Shor remarked that this shows that, of new enrollees, two-thirds shopped through the website. Ms. Hague also noted that analysis is being done to determine if former Business Express sole proprietors have enrolled in non-group coverage through CCA.

Mr. Johnson then discussed operational experiences in the final weeks of open enrollment, noting a spike of website activity on March 31. Mr. Johnson also noted that call center volume for MassHealth and CCA combined spiked on March 31 to 16,000 calls and an average wait time of just over 11 minutes. He stated that by April 8, call wait time was eight seconds. Mr. Mansur stated that between April 1 and April 8 CCA had been able to meet all service levels for the call center. Ms. Mitchell asked what the Optum resources previously used to input paper applications were doing now that the backlog had been eliminated. Mr. Johnson stated that the number of resources has reduced some and that these individuals are working on activities such as processing new paper applications, outreaching applicants with missing data and performing data matching in the system. Mr. Mansur noted that Mr. Johnson is referring to individuals hired by Optum, but CCA also has 240 customer service representatives and CCA is working with Dell to look into reducing staffing while maintaining service levels and quality. Secretary Shor stated that the end of open enrollment does not necessarily mean reduced activity for CCA due to qualifying events, which permit individuals to shop outside open enrollment periods. Ms. Wcislo asked whether CCA was looking at long-term planning and a supportable operating model. Ms. Iselin stated that this was all being taken into account in creating the long-term plan. Mr. Gruber asked how individuals are noticed of qualifying events. Ms. Hague stated that CCA has created pamphlets and flyers as well as guides for employers. She also mentioned the small business and broker advisory councils who help in disseminating this information to the broader market. Ms. Hague acknowledged Audrey Gasteier from CCA who has been working on the notice required of Exchanges under the ACA and who is ensuring that those include qualifying events and closed enrollment information. Mr. Gruber asked whether COBRA notifications include information about closed enrollment. Secretary Shor stated that CCA can check in with DUA and the Division of Insurance (DOI) as well as look into the state mini COBRA laws.

Mr. Johnson then stated that the paper application backlog has been eliminated. Further, he said that the backlog of applications that are missing critical data is approximately 8,000 and Optum expects this to reduce to zero within the next several weeks. Mr. Johnson also discussed the backlog of members who want to implement changes to their current applications and Mr. Mansur added that this backlog at CCA is approximately 13,000 members. Ms. Iselin confirmed that there is also a backlog to implement changes at MassHealth. Ms. Hague responded to a request from Mr. Gruber regarding educating the student population about their options in the market, noting that CCA works closely with this community and that outreach to students is something CCA is working on.
Mr. Johnson then provided an overview of program determination testing, stating that sampling testing has been completed and that more comprehensive testing will be done. Ms. Turnbull asked what was involved in more comprehensive testing. Dan Zerafa from Optum explained that testing will be done by starting with more simple cases and then moving to more complex cases. Ms. Iselin stated that she plans to have every rule tested by the end of June. Ms. Mitchell asked whether the rules being referred to were MassHealth rules. Ms. Iselin replied noting that of the 250 rules, the majority were Medicaid rules. Ms. Iselin also noted that getting an individual into the proper program has many downstream effects and that she would include business process maps in future presentations to illustrate this. Ms. Duncan asked whether MassHealth rules could be simplified given the vulnerability of getting all of the rules tested in time for November open enrollment. Ms. Iselin stated that this was not part of the near-term solution. Ms. Callahan stated that MassHealth has done a great deal of work to determine which rules are most critical for November. Ms. Iselin added that testing of critical aid categories was the priority for November and that the team is looking to see if it feasible to further narrow the number of critical aid categories. Secretary Shor noted that the reason MassHealth has so many aid categories is as a result of progressive programs. Ms. Iselin then discussed the plan of transitioning certain populations from temporary coverage and extension coverage programs. She stated that the team is working on refining a plan that will be presented in more detail at the next Board meeting.

Ms. Iselin then discussed the objective assessment approach and solution options for the project. She noted that the system would not include everything in November 2014, because the priority is to have an ACA-compliant system that can function with as little risk as possible for open enrollment. She stated that while not everything would be in place for the fall, more could be added after the fall. Mr. Gruber asked that decision support be considered. Ms. Wcislo asked that the shopping experience for consumers be discussed at a future Board meeting. Mr. Duncan asked whether manual workarounds would continue and when a budget discussion would be had. Ms. Iselin responded by stating that workarounds and budget were being considered in all short-term and long-term planning. Mr. Johnson and Ms. Iselin then discussed long-term solution criteria selection. Mr. Duncan asked that MassHealth simplification be added to the criteria. Mr. Jakious requested that there be a side-by-side comparison presented to the Board regarding the options for the project. Ms. Iselin stated that the plan is to analyze the existing policy framework to find a low risk or no risk plan and understand what may need to be compromised in contingency planning. Mr. Gonser then asked what the timeline for a decision was. Ms. Iselin responded that there are further conversations to be had with the federal government to determine what the plan going forward will be, but that the final recommendation will be ready for the May 8 Board of Directors meeting. Mr. Jakious asked Ms. Iselin when she will be transitioning off of the project. Ms. Iselin stated that she would not be on this project indefinitely but that she has been working very closely with Governor Patrick on a transition plan for when she leaves. In addition, she has been mapping out a project management infrastructure with offices such as the state’s Information Technology Division (ITD). Secretary Shor
ended the meeting by ensuring that the Board would continue to be kept informed of the goals and progress of the project.

The meeting was adjourned at 11:15 AM.

Respectfully submitted,
Rebekah D. Diamond