Board of the Commonwealth Health Insurance Connector Authority
Minutes

Thursday, May 14, 2020
9:00 AM to 11:00 AM

Live Stream
https://www.youtube.com/user/TheMAHealthConnector

Attendees: Louis Gutierrez, Lauren Peters (who was Chairing the meeting on behalf of Secretary of Health and Human Services Marylou Sudders), Nancy Turnbull, Lou Malzone, Michael Chernew, Mark Gaunya, Dimitry Petion, Matthew Veno, Rina Vertes, Gary Anderson, FayeRuth Fisher, Cassandra Roeder (who was sitting by designation on behalf of Secretary of Administration and Finance Michael Heffernan)

The meeting was called to order at 9:03 AM.

I. February Meeting Minutes: The minutes of the February 13, 2020 meeting were approved by roll call vote, with Mr. Veno abstaining because he was not a member of the Board at that time.

II. April Meeting Minutes: The minutes of the April 2, 2020 meeting were approved by unanimous roll call vote.

III. Executive Directors Report: Mr. Gutierrez thanked the members of the Board for the flexibility and support that they offered to the contact tracing effort during the last Board meeting. He noted that the understanding of the importance of contact tracing continues to grow, especially as the state looks to reopen with the priority of keeping residents safe. He stated that the Health Connector (CCA) remains resolute in making sure residents have access to health insurance coverage, and referenced that the first agenda item would provide greater detail into the expansion and preservation and expansion of coverage during the pandemic. He informed the Board that despite the bleak economic downturn, the Health Connector for Business (HCB) continues to offer coverage to small businesses. He continued to review the items before the Board for the meeting, including the final approval for the program regulation amendments and an update on the Customer Experience Project (CXP). Mr. Gutierrez took a moment to share with the Board that he
continues to be amazed by the hard work and dedication of CCA staff working on this large-scale project. He assured the Board that they will remain updated on the project as it nears the July launch date.

IV. Preserving and Expanding Health Coverage in Massachusetts During COVID-19 Pandemic:
The PowerPoint presentation “Preserving and Expanding Health Coverage in Massachusetts During COVID-19 Pandemic” was presented by Audrey Morse Gasteier. Ms. Gasteier began the presentation by providing an overview of the work that CCA has conducted in response to the pandemic. She reminded the Board of the state’s commitment to a culture of coverage and the critical policy tools that will serve to keep residents, who may be more likely to fall out of health insurance coverage, enrolled during this difficult time. She reviewed the steps that CCA has taken to date to help keep members in health insurance coverage, including postponing terminations from coverage while people get their feet back under them and efforts to support members in updating their income for the purposes of ensuring that they are in the appropriate plan. She informed the Board of system changes CCA was able to make so new eligibility determinations are effective on the first of the next month so long as they are submitted prior to the end of the current month. She provided greater detail on the support and messaging conducted by CCA to encourage members to report changes to their applications. In response to a question from Ms. Turnbull and what the term “assertively reminding” means, Ms. Gasteier elaborated on the frequency and placement of messaging to members about reporting changes on their application. She continued to note that CCA has not sent targeted messages to members in the past encouraging them to make changes to their applications but have recently sent messages that only speak to reporting changes and have also conducted automated phone calls to people to update their information if they have had a change in circumstances. Ms. Gasteier noted that this is the central message with its own headline. In response to a question regarding how many members would have been terminated from coverage if the policies had not been in place, Ms. Gasteier noted that it would have been around 14,000. She continued to review the movement of members within CCA, noting that to date, nearly 13,000 members have moved into a lower cost plan as a result of updating their information. In response to a question from Dr. Chernew about a lower cost plan looks like to a member, Ms. Gasteier explained that this could represent a member moving to a plan type within ConnectorCare that offers a lower cost monthly premium, possibly a positive change in out-of-pocket expenses and has no impact on the metallic tier of the health plan offering, or could reflect a person moving from unsubsidized coverage into a ConnectorCare plan. Ms. Gasteier informed the Board of steps CCA has taken to make the ConnectorCare premium hardship waiver more accessible to members by offering it on the website and clarifying the eligible hardships, particularly those that might be likely during the current COVID pandemic. Ms. Turnbull commented that CCA is doing a lot of things to help members, and it would be great to have an opportunity to tease a part what differences assertive messaging makes and if it is something that should be continued in the future. In response to a question from Mr. Petion regarding the effectiveness of messaging, Ms. Gasteier noted that the material member movement demonstrates that members are seeing the message and taking action.

Ms. Gasteier then provided review of the current economic state, the high number of unemployed nationally and locally and the estimated number of Americans expected to lose employer sponsored health insurance coverage. She reviewed the historical role of CCA in serving individuals receiving unemployment assistance through the Medical Security Program prior to the
implementation of the ACA, and stressed that CCA continues to take its role in this space very seriously. In response to a question from Ms. Vertes regarding the impact of additional federal unemployment insurance benefits, Ms. Gasteier responded that for the purpose of Exchange enrollment this income must be counted to determine eligibility. She noted that this is incongruent with the counting requirements for Medicaid which complicates messaging but noted that there is a national dialogue regarding this “wrinkle”. In response to a second question from Ms. Vertes regarding the possibility of waves of increased enrollment in the future, Ms. Gasteier confirmed that CCA is preparing for potentially multiple waves of enrollment increases depending on unemployment and ESI trends. She provided review of the outreach work being conducted by CCA, including running digital and radio ads on ethnic media. In response to a question from Ms. Turnbull regarding the availability of funding for community organizations working to preserve and expand membership, Ms. Gasteier replied that CCA has not created an additional grant or funding opportunities at this time, but reminded the members of the existing Navigator program and grant partnership with Health Care For All (HCFA) called the Marketplace Awareness Grant program. Ms. Turnbull commented that she can imagine that the HCFA helpline is likely overwhelmed and contemplated the possibility of contributions from the state or health care community to support these organizations and all they are offering to their communities, continuing the priority of shared responsibility. In response to this comment Mr. Gutierrez stated that for Fiscal Year 2021 (FY21) the Health Connector is proposing an increase to the Navigator budget, but it may be something that needs to be addressed sooner. Ms. Turnbull acknowledged the importance of this funding increase, while noting that there is currently a lot of demand on organizations and they may need partners. Ms. Gasteier continued with review of CCA’s partnership with the Department of Unemployment Assistance and resources developed to assist those who are losing job-based coverage. She reviewed details of the Special Enrollment Period (SEP) that was opened in response to COVID-19, and noted that even though people losing ESI would have a SEP regardless, it is easier to message that individuals are able to enroll through the SEP. She informed the Board that roughly 8,000 people have entered coverage for the month of April through the COVID-19 SEP, part of a larger group of 22,000 individuals who have joined CCA coverage in total. She shared demographic information on those members, noting that these are the individuals we have been looking to reach (i.e. younger, ConnectorCare eligible individuals who live in communities with higher rates of uninsurance). In response to a question about the possible extension of SEPs from Ms. Turnbull, Mr. Gutierrez stated that CCA continues to examine the SEP in concert with MassHealth and it is possible that there will be an extension recommendation made to the Secretary of Health and Human Services. In response to a second question from Ms. Turnbull regarding any confusion with respect to public charge Ms. Gasteier referenced guidance issued by the Department of Homeland Security (DHS) stating that testing for COVID-19 is not to count towards public charge. She elaborated that CCA continues to monitor enrollment trends and there has been no significant increase in terminations by immigrants. In follow up, Ms. Gasteier noted the importance of the off-Exchange SEP for immigrants to purchase coverage off of the Exchange if they have concerns or are not considered lawfully present. Ms. Gasteier then provided high-level takeaways and reviewed next steps, noting the Board will continue to be kept updated on membership trends.

V. Update on Health Connector for Business and DC Health Benefit Exchange Authority Contract (VOTE): The PowerPoint presentation “Update on Health Connector for Business and DC Health Benefit Exchange Authority Contract (VOTE):” was presented by Heather Cloran
Ms. DiLorenzo began the presentation by informing the Board of the objectives of today’s presentation, including a vote on next year’s HCB budget and ways that HCB has been assisting small businesses during the coronavirus pandemic. She stated that for the month of April 196 members had terminated their coverage through HCB, noting that this was not much higher than typical terms and that only four businesses had called to terminate coverage specifically referencing COVID. She reviewed that HCB has engaged in supporting businesses including additional training for contact center staff to serve as a resource and the option for small businesses to switch to a different plan mid-plan year, though this does reset benefits. She stressed the continued importance of brokers and informed the Board that HCB continues to conduct one-on-one trainings and seminars with brokers. She reviewed the composition of groups that enrolled in coverage for March and April, noting that despite the pandemic, brokers continue to bring new business to HCB and one hypothesis is that these businesses are seeking affordable coverage because of COVID-19. She provided review of call center performance, noting that while the DC Call center staff have been working remotely for two months, they continue to meet the levels of service expected and work with clients to resolve matters quickly.

She provided members with a review of the fiscal year 2021 (FY21) proposed budget, noting that it very closely mirrors the FY20 budget. In response to a question from Ms. Vertes regarding the level budget, Ms. DiLorenzo noted, that even though CCA is no longer building the platform we are continuing to customize and have budgeted for a streamlining of customizations and will be making improvements to the system in the coming year. In response to question from Mr. Petion regarding the differences between customizations and services incorporated in the contract, Ms. DiLorenzo stated that customizations are changes to the code that was purchased from the DC Health Benefits Exchange (DCHBX) to tailor it to the Massachusetts market, including member facing enhancements and processes that will remove the need for manual work arounds. She explained that this upfront cost will introduce processes that will resolve a lot of manual work that is required to resolve member cases. In response to a second question from Mr. Petion, Mr. Gutierrez responded that the product purchased was a viable product when HCB went live but there was a roadmap of improvements to make the product better over time. He continued that anonymous browsing is available off-Exchange and was a customization to improve the product for HCB, and that many of these customizations will result in reduction of manual work, human errors and as a result, possible savings from labor fees. In response to a question from Mr. Petion regarding future year’s budgets, Mr. Gutierrez stated that the next year’s budget has not been model yet but he acknowledged that there is an expectation from the Board that HCB should begin realizing savings. Mr. Petion thanked Mr. Gutierrez for the great work that is being done and wanted to work towards seeing a return on dollars invested.

Mr. Gaunya remarked that he continues to hear very positive feedback from the broker community regarding HCB and then contemplated whether there is an opportunity for HCB to serve as a resource, noting that brokers are receiving a lot of employment questions and there is a fine-line between insurance and labor law. In response to this question regarding CCA’s ability to serve as a resource, Ms. DiLorenzo stated that HCB is tracking the types of question that are coming into our call center and trying to work with brokers to directly address these topics. Mr. Gaunya then noted that if CCA has the capacity to provide vetted resources to the broker and employer community, it would be helpful.
With no further questions or discussion, the Board then proceeded with a roll call vote and unanimously approved the proposed fiscal year 2021 budget.

VI. Final Amendments to Health Connector Program Regulations (VOTE): The PowerPoint presentation “Final Connector Program Regulations Amendments (VOTE)” was presented by Andrew Egan. Mr. Egan began the presentation by reminding the Board of the proposed regulations that were brought before them in October 2019. He reminded the Board that the regulations will not change the way that CCA does things but clarify and provide a basis for operations. He stated that since reviewing the draft regulations with the Board, CCA solicited public comments and made some minor adjustments to the regulations based on the comments received. Mr. Egan provided a high-level review of the CCA proposed changes to the regulations, organizing them into five categories and providing the reason for the update. He then provided a summary of the comments and testimony received through the public comment period. He noted that four stakeholders, including carriers and consumer advocates, provided thoughtful comments and feedback. He reviewed the modifications that were made to the regulations in response to the comments received. He informed the Board that of the modifications made in response to the commenters, none materially changed the amendments previously approved by the Board. He continued, that many were modification of definitions or the addition of definitions. He stated that commenters suggested that text be modified to ensure that at least two premium-free plans be available for Plan Types 1 and 2A, but that the comments were outside of the scope of the regulatory change and so CCA could not respond directly to those comments, though CCA remains committed to making affordable health insurance plans available to its members. In response to a question from Ms. Turnbull regarding this comment, Mr. Egan confirmed that yes, CCA could put out future regulatory amendments that address the premium comment, but that CCA could not currently address because it is out of scope. Mr. Egan reviewed a series of comments that CCA provided clarification on to commenters, including with respect to immigration status changes and updated language on reinstatements. Ms. Turnbull praised Mr. Egan for the careful and painstaking work that went into the regulatory amendments, noting that while the topic does not make headlines, it is important for the smooth operations of our work. She continued to note her appreciation for the way the comments were presented to the members and carefully explained. Mr. Anderson echoed Ms. Turnbull’s praise, noting that the presentation and summary write up were very helpful. Ms. Roeder also commented on the excellent job on the regulatory amendments and thanked CCA for their collaboration with the office of Administration and Finance.

With no further discussion or comment the Board proceeded with a roll call vote and unanimously approved the final Health Connector program regulation amendments as proposed in the presentation.

Prior to beginning the next presentation, and on account of having a conflict, acting Chair, Undersecretary Lauren Peters passed Chairmanship over to Vice-Chair Dr. Chernew for the remainder of the meeting. The time was 10:25 AM

VII. Customer Experience Project Status Update: The PowerPoint presentation “Customer Experience Project Status Report” was presented by Vicki Coates and Michael Piantanida. Ms. Coates began the presentation by providing an overview of the CXP update before the Board. Mr. Piantanida informed the Board that CCA continues to move forward with the July 6 go-live date
for the Contact Center and Enrollment and Premium Billing. He updated the Board on the changes that have been made in response to the COVID-19 pandemic, noting that while there have been impacts CCA has been able to adjust. He provided the Board with a detailed review of the system lock-down, what it entails and the expected lock-down date and noted that all critical issues identified for go-live will need to be resolved. He informed the Board of the areas that are being tracked with special focus as the project continues to march towards its go-live date.

Ms. Coates then provided the Board with an update on the status of the Electronic Data Management Center (EDMC) implementation for the mailroom, noting that the new go-live date for the mailroom was moved to May 18, 2020. She informed the Board that the systems are ready for transition, notices are prepared to be rolled out and the expectation is to be live as of next Monday.

Ms. Coates then provided an updated on the progress of the Contact Center implementation, noting that risks are being tracked and call center system development will roll into the next week, but emphasized that buffer time was built into the schedule and the matter should be resolved without impact. She continued to note, that with the current economic downturn, there is a decent workforce to pull form with respect to staffing the contact center. She informed the Board that leases are being finalized for walk-in centers, but appropriately, plans to reopen are on hold keeping in mind the importance of reopening safely, and noted that we will need to examine and consider safety precautions such as the installation of splash shields and whether to require appointment-based scheduling. In response to a question from Mr. Petion regarding walk-in center technology and strategy moving forward, Ms. Coates replied that a main reason members go into the walk-in centers is to provide payments or documentation, she noted that the new document upload feature has been available since last summer and members are then able to return documents without needing to travel to a walk-in center. She elaborated that the walk-in centers have been closed since March and CCA has been communicating that both documents and payments can be handled on-line and members do not need to go to the walk-in center. She informed the Board that for the time-being, the plan is to go-live with 100 percent remote call center workforce. In response to a question from Ms. Turnbull regarding our vendors and their operations in other state’s that may be taking a different approach reopening from the pandemic, Mr. Gutierrez stressed that CCA will specify the times and places that remote work moves to brick and mortar work, he noted that despite the contact centers being operated outside of Massachusetts, CCA will work with Faneuil, but ultimately that is CCA’s call in his opinion.

The presentation concluded with a review of the remaining risks and mitigation strategies in place. Ms. Turnbull applauded the team, noting how impressive the progress has been. Dr. Chernew stated that with the onset of the pandemic he felt it was unlikely that CXP would be completed on time, and congratulated the team on all of their work to get here.

With no additional discussion, the question then came on adjourning the meeting. The Board voted unanimously, by roll call vote, to adjourn the meeting at 10:38AM.

Before signing off, Dr. Chernew again noted the amazing work of CCA and thanked the Board.

Respectfully submitted,