Snapshot Policy Updates

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Chief of Policy and Strategy

Board of Directors Meeting, September 10, 2020
**CCA’s Policy and Strategic Landscape: Brief Updates for the Board**

<table>
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<th>Support for Members and Public During Economic Challenges</th>
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<td>• Health Connector staff continue to take steps to support members and residents of the Commonwealth during economic upheaval and possible health coverage losses and transitions.</td>
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<th>Possible Federal Policy Changes</th>
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<td>• National/federal dynamics state-based marketplaces like the Health Connector are monitoring and analyzing.</td>
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<th>Recommendation to Adopt Racial Equity Focus</th>
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<td>• Staff recommend adoption of an anti-racism and racial equity focus at our December strategic planning meeting, and seek feedback from Board.</td>
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Supports for Members and the Public Amidst Economic Challenges
Supporting People Losing Job-Based Coverage

The relative stability in health coverage to date during pandemic is not guaranteed to hold, and the availability of supports and on-ramps to new coverage sources will be critical.

- Massachusetts, like the rest of the nation, is undergoing economic and labor market challenges, with high unemployment due to the ongoing COVID-19 pandemic
  - The loss of employment does not necessarily equate to loss of employer-sponsored insurance but it may result in coverage losses and shifts

- Health Connector staff have been working closely with the Division of Insurance, MassHealth, and the Center for Information and Analysis (CHIA) to closely monitor shifts in health coverage status among the Massachusetts population

- The Health Connector’s goal has been to reach, support, and enroll people who newly need coverage so they can avoid disruptions in their health care during this time of uncertainty

- To date, commercial coverage losses have appeared relatively modest, at least compared to initial expectations
  - Massachusetts commercial coverage dropped by roughly 40,000 people, with about 30,000 individuals migrating into other coverage types.
  - Lower than expected commercial drops through July likely due to grace periods encouraged by DOI, furlough activity, use of COBRA, and PPP loans
Supporting Loss of Job-Based Coverage (Cont’d)

In recent months, Health Connector staff have sought to use channels through state government, public messaging, consumer assisters, elected officials, and the employer community to reach people in need of Health Connector coverage. CCA is also engaged with other state-based marketplaces on best practices for reaching those losing job-based coverage.

The Health Connector and MassHealth partnered with the Executive Office of Labor and Workforce Development in an electronic communication to approximately 336,000 Massachusetts residents with “permanent separation” from employment to ensure they know how to apply for health coverage.

The Health Connector has been holding monthly webinars with the public on how to enroll in coverage through the Health Connector for those who have lost job-based coverage.

Videos of past webinars for people losing job-based coverage are available here: https://www.mahealthconnector.org/help-center/video-library
COVID-19 Special Enrollment Period and Supports for Current Members

Supporting Current Members

- Messages encouraging members to report income changes
- Between April and July, over 33,000 Health Connector members experienced health coverage transitions resulting from changes in circumstance (such as job loss or income reduction). Many members newly qualified for programs with more robust subsidies, either moving to a more affordable coverage option within the Health Connector or moving to MassHealth (Medicaid) programs.
- ConnectorCare Premium Hardship waivers – highlighting availability to members

Covering the Uninsured

- CCA and DOI administered a COVID-19 Special Enrollment Period from March 11 through July 23, allowing anyone without coverage to get enrolled
- Messaging highlighted importance of having coverage in general but particularly during a pandemic for health and financial protection
- CCA had 49,500 new enrollees whose coverage began in April, May, June, July, or August 2020 – and about 46% of them came in through the COVID SEP
- New enrollees joining CCA between April and July were more likely to be young, low-income, and from communities with higher uninsurance rates. Those not qualifying for ConnectorCare were more likely to select bronze plans

National ACA/Marketplace Policy Dynamics
**National ACA/Marketplace Policy Dynamics**

CCA staff are monitoring federal ACA policy dynamics and are prepared to analyze possible implications for the Health Connector, its members, and its market.

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<th>Legislative</th>
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<td>Recent legislation (HR 1425) passed by the US House of Representatives in June. The bill’s features include expansion of premium tax credits through marketplaces, expanding outreach, and assistance to states to establish state wrap/subsidy programs or state reinsurance programs.</td>
<td>SCOTUS will hear oral arguments on November 10th for the <em>Texas v. California</em> case challenging the constitutionality of the ACA. A host of other major court cases related to ACA policy are pending, including court cases on: • Risk corridors • Cost sharing reductions • Trump Administration regulations (e.g., public charge, nondiscrimination rules, association health plan/short-term limited duration plan rules, etc.)</td>
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Racial Equity Framework
Introducing a Proactive Equity Lens to the Health Connector’s Work

Overdue national attention to topics of racial justice in recent months provides an opportunity for the Health Connector to adopt a more proactive racial equity lens in the work we conduct.

- CCA staff seek to incorporate an explicit anti-racism and racial framework on the work we conduct – not as an independent project or set of projects, but as an intrinsic standard to ensure we live up to our mission of health care access and financial security for our members and the public.

- While CCA’s work over the years has sought to ensure widespread access to comprehensive health coverage across all populations of the Commonwealth, we can and should:
  - Do more to evaluate the role of racial and other inequities in all facets of our work – program design, policy, member experience practices, internal workforce, and beyond; and
  - Take steps to address areas where our work can become anti-racist, even recognizing the role of upstream and structural inequities that are beyond CCA’s reach.

- We invite the Board’s input on how the Health Connector might best advance the goal of racial equity.

- As initial steps, staff propose:
  - **September-December:** Staff development of proposed criteria for evaluating key policy, program, and business decisions with a health equity framework, for Board consideration.
  - **December:** Return to Board with proposed racial justice framework and equity criteria for CCA’s ongoing work and for strategic plan, as part of our annual strategic meeting.
Looking Ahead

- Staff will keep Board apprised of additional developments on federal policy dynamics relevant to CCA
- Staff will keep Board posted on continued work to support residents experiencing coverage changes or loss due to the pandemic
- Staff will return to Board with a proposed racial equity framework for CCA’s work