

MINUTES

NH HEALTH EXCHANGE ADVISORY BOARD

JANUARY 9, 2015

Due to bad weather and travel conditions some board members who had planned to attend the meeting participated by phone instead, and the meeting began late. The roll call was taken at 9:30 a.m.

Board Members present: Christine Alibrandi, Dianne Chase, Lisa Morris, and Tim Soucy. Participating via conference call were Scott Baetz, Nancy Clark and Lisa Guertin.

Board Members unable to attend: Evelyn Aissa, Russell Grazier, Beth Roberts, and Sandra Ruka.

Agency Representatives: NH Insurance Department, Jennifer Patterson

After welcoming everyone, Lisa Morris (who chaired the meeting) asked for the approval of the minutes for November 14, 2014. The minutes were accepted and approved and Lisa continued on with the agenda.

CoveringNH – Aaron Holman and Karen Hicks

Because the CMS representative was still en route, we started out with the presentation from CoveringNH by Aaron Holman from PCG (Public Consulting Group), a contractor for New Hampshire Health Plan's consumer assistance work. Link to the presentation: http://www.nh.gov/insurance/consumers/documents/cov_nh_01.09.15.pdf

Aaron began by announcing that New Hampshire had been awarded consumer assistance grant funds by CMS (one of only three states receiving such funds this round) to continue the efforts of CoveringNH through the end of the calendar year.

Going through the slides, Aaron reviewed the performance of the Marketplace Assister (MPA) program, and explained that there have been significant increases in efficiency between this year and last year's enrollment cycle. He noted the enrollment figures to date, which are much higher than they were last year at this time. Next he spoke about operational sustainability and leveraging the resources to continue the program after this year. Strategies for this include identifying long term capacity within existing organizations, retraining MPAs, solidifying and leveraging existing human capital, and regionalizing volunteer coordination.

At this point Karen Hicks continued on with her part of the presentation. Karen explained that there are 38 MPAs that work with contractor Louis Karno Associates. She discussed enrollment

numbers for New Hampshire. They also track outputs of programs, and she compared last year's application process time to this year's process time, which went from 4.88 hours last year (when there were many technical difficulties) to 2.00 hours this year. For new plan year 2015, as of December there were 9700 new plans chosen. In year 2014, there were 1500 at this time. She explained that the Healthcare.gov website is integrated with DHHS' site where it can determine eligibility for Medicaid. They should be getting new data numbers from the feds the 2nd week of February.

In 2014, based on a state-wide poll, there were 155,000 uninsured, with a 50-50 split on gender, and the majority were over 45 years in age. Now CoveringNH is focusing its outreach on men under age 45. The plan for the next 8 months is to restructure the program to manage with minimal overhead, working closely with navigators, consumer assister counselors (CAPs), and other non-profit groups, to train the trainer and retrain MPAs.

Lisa Guertin asked for CoveringNH's best estimate of the market expansion for 2015 – i.e., net new enrollees. Karen replied that their estimate is 9700 “new” people.

Lisa Morris noted that many of the newly insured would be accessing the healthcare system with insurance for the first time, so more education on health literacy would be great. Would this be part of CoveringNH's efforts? Aaron replied that, yes, this would be part of the MPAs' message going forward. Jennifer Patterson from the NHID added that the NHID's HealthCost website is in the process of being updated, and will also have information to educate folks about using their insurance benefits.

Karen Hicks reminded folks that CoveringNH's outreach will be targeted at the remaining uninsured, with the message focused on finding a plan that fits within their budget. There has also been some integration with outreach about the NH Health Protection Program. The next phase will be a multi-media campaign, with some direct mailings being sent out, as well as digital advertisements.

In terms of the CoveringNH website, the enhancements are up and running; these include the “find a broker” function and the updated plan comparison tool.

Karen showed everyone the TV PSA with Matt Bonner (professional basketball player from Concord, NH) which was released the day of our meeting and will run on Channel 9.

Tim Soucy asked about total enrollment so far, and how many uninsured people remain in NH. Karen replied that around 23,000 have enrolled in private coverage for 2015 in the marketplace, plus around 30,000 enrolled in the NH Health Protection Program (Medicaid expansion). In terms of the remaining uninsured, Karen replied that estimates are between 90,000-100,000.

Lisa Guertin asked if CoveringNH was focusing at all on helping enrollees not lapse their coverage. Karen responded that, yes, keeping folks enrolled was increasingly important. They

are also encouraging people to report income changes, and trying to give as much clarity as they can on the tax issues, while not directly giving tax advice, which is outside their role.

Jenny Patterson also reiterated the importance of people checking their options during the open enrollment period, because of the potential tax consequences of continuing with the same plan/tax credit from 2014.

Christine Alibrandi added that people should be aware that if they change their medical plan (or are mapped to a new plan), they do **not** automatically get enrolled in a stand-alone dental plan. They need to reenroll in a dental plan separately. CMS is aware of this issue.

At this point Lisa Morris thanked Karen and Aaron for their presentation and introduced Ray Hurd from CMS.

Ray Hurd – CMS

Mr. Hurd began his update by talking about the premium tax credits and explained that the Marketplace will begin sending out 1095A forms this week. All 1095A forms nationwide should be postmarked no later than February 2, 2015. This form reports the tax credit a consumer has received; consumers receiving a tax credit will no longer be able to use the 1040 EZ form when filing their taxes. Ray reminded everyone that navigators and CACs are not tax advisors; however, they can help inform consumers that they will be receiving the 1095A form and that they should check its accuracy. Ray also noted that since the premium for the NH benchmark plan is lower than the 2014 benchmark, the amount of tax credit people can receive has decreased.

Next, Jenny Patterson presented the New Hampshire Insurance Department update. She noted that the NHID's consumer services unit helps people once they are enrolled in coverage, so people should be aware that they can call if they are having issues after they enroll. Last year at this time we were hearing about a lot of issues, but things have been quieter this year so far.

The biggest item for the Insurance Department right now is starting to prepare the 2016 QHP filing guidance for carriers. CMS has issued its draft Letter to Issuers, which includes an open enrollment period that begins October 1, 2015, and much earlier plan filing dates than the last two years. For instance, the first deadline for the states to transfer plan data to CMS is April 15, and the final deadline for states to make QHP certification recommendations to CMS is July 24.

Board members representing carriers (Lisa Guertin and Christine Alibrandi) voiced their concerns about the timing for the 2016 filings. At this time of year carriers are focused on enrollment and making sure members get all they need; these early deadlines make it harder for carriers to focus on consumers. Christine added that she had a conversation with nearby states about the deadline and open enrollment and they would prefer a later start date, perhaps November 1. Lisa Guertin agreed and commented that the timeline compromises carriers' ability to create the best offerings they can for 2016.

Jenny Patterson noted that the Insurance Department plans to file a comment letter with CMS about the deadlines, and could note board members' concerns in that letter.

Dianne Chase spoke from a broker viewpoint and said that the open enrollment is overwhelmingly intense, and her wish would be for a rolling enrollment period. Jenny responded to her that the ACA has a limited enrollment period so people don't wait until they need coverage to sign up. Ray Hurd noted that the Medicare open enrollment period is every year between October 15 and December 7th, and that there may be an intent to align the Marketplace enrollment with that period.

Sean Caron from Minuteman Health noted that the early deadlines put new market entrants at a particular disadvantage as they have very little data available to use in constructing their rates for the next year. Ray Hurd responded that risk corridors can help with this.

We moved on next to the Carrier Updates section on the agenda.

Lisa Guertin – Anthem

Lisa told the group that it has been a very different year in terms of how things are operating - it is significantly smoother than last year.

Chris Alibrandi – Northeast Delta Dental

Chris agreed that things have been much smoother so far.

Theresa Gallinaro – Harvard Pilgrim

Theresa explained that Harvard Pilgrim's first year on the New Hampshire Marketplace has been going well so far – much more smoothly than in the other states where they offered QHPs last year. In addition, payments to date have been keeping up with enrollment.

Mike Gendron – Maine Community Health Options

Mike told everyone that Maine Community Health has had a good reception in New Hampshire so far, and their enrollment numbers are positive. He also noted that they are issuing a press release about their partnership with Hannaford for prescription drugs, in which generic medications are \$0 out-of-pocket. In addition, their Chronic Illness Support Program has been expanded to include coverage for coronary artery disease.

Sean Caron – Minuteman Health

Sean was happy to report that Minuteman's enrollment system is working well, that they are seeing strong consumer interest, and that premium payments are coming in.

Lisa Morris thanked everyone and we continued on with the agenda.

Board Member – Dianne Chase

Dianne shared with the group that from a broker perspective the Marketplace was working much more smoothly, and her clients have been able to enroll. Some have come to her in a panic needing help understanding letters they received from Anthem and/or CMS. People are concerned about the tax credit reconciliation process.

Dianne also noted that brokers are concerned about faith-based medical cost sharing entities and whether they comply with the ACA. Jenny Patterson commented that under the ACA there is an exemption from the individual mandate for individuals that participate certain faith-based health sharing organizations, but the exemption is only for individuals, not for employer groups.

DHHS

Commissioner Toumpas was unable to attend the meeting, so Jenny Patterson presented the DHHS update based on information he had provided.

*Enrollment in the NH Medicaid Care Management program as of January 1, 2015 stands at 145,765. There are an additional 22,067 individuals enrolled in Medicaid fee-for-service. Of those, some can opt out of the program based on their eligibility category and many are within the window of time to select a plan. Coverage begins the first of the month so someone may come into fee-for-service and then transition to Care Management. These numbers include all of those who are enrolled in the NH Health Protection Plan.

*For the NH Health Protection Plan, as of January 6, 2015 (Tuesday), there were 30,419 enrollees. DHHS saw an uptick in December as the push for individuals to enroll or re-enroll for coverage via healthcare.gov was messaged at the national, state and local levels ramped up.

*In the first 6 months of 2014, DHHS saw a sharp rise of approximately 12,000 in the Medicaid population driven almost exclusively by the change in how eligibility was calculated for children and their parent caregivers. Specifically, the eligibility calculation no longer had an asset component with a determination based on the Modified Adjusted Gross Income or MAGI.

*On August 15, the first of the NH Health Protection Program population came into the program. They are counted in the total Medicaid population, but they receive the Alternative Benefit Package which includes mental health and substance use disorder services. The services are funded fully by the Federal government until 12/31/2016 whereas the other two Medicaid segments are funded 50% Federal and 50% State.

*The Health Protection Program is now close to 31,000 people thanks to the collaboration of so many people and agencies to get these people covered. In the last 6 weeks DHHS did experience a spike in new enrollments and we believe that is a result of (1) the outreach efforts and messaging as presented by Covering NH and (2) action on the part of people who were in one of the Marketplace based plans and had the decision to move into the HPP or lose their subsidies effective the end of the calendar year.

Jenny also reminded the group that the application for the 1115 waiver for mandatory premium assistance/coverage through qualified health plans (QHPs) for the NHHPP population beginning in 2016 was filed with CMS in November. The waiver must be approved by March 31, 2015 in order for the NH Health Protection Plan to continue. DHHS and NHID are working very closely on this waiver which will use the private market to enhance integration and efficiency of public and private coverage in New Hampshire.

Continuing the discussion on Medicaid, Lisa Morris brought up a question about a letter that has gone out to people over 55 when they enroll in the NHHPP that has cause concern that a lien will be placed on their property. Jenny replied that this is a DHHS issue, but it is addressed in a Q&A document on the HHS website: <http://www.dhhs.state.nh.us/ombp/nhhpp/documents/faq-nhhpp.pdf> (See questions 15, 16 and 17 on pages 12 and 13).

The agenda continued on—

The next discussion was on SHOP, and how the board would like to proceed and gain information about the SHOP. Lisa Morris commented that she needs more education on what it is and how it works, and asked who we could invite to bring the board up to speed. At this point Nancy Clark, who was participating by telephone, told the group that she has successfully used the SHOP to offer coverage to her employees. She agreed to speak about this at the next board meeting. She also mentioned that February 13th is the annual NH small business forum in Concord, New Hampshire, and that she could see whether any of the participants would be willing to attend and speak at the board's March meeting.

Greta Johansson of the Small Business Administration also offered to do a presentation at the February meeting. Tim Soucy asked if someone from the IRS could attend. Ray Hurd said he will try and get someone; he also mentioned that the IRS has a webinar as well as good tip sheets on its website.

The next meeting will be at Delta Dental in Concord on February 13, and Lisa Morris called the meeting to an end at 10:45....