

## Minutes

### NH Health Exchange Advisory Board Meeting

November 13, 2015

**Board Members Present:** Christine Alibrandi, Sharon Beaty, Nancy Clark, Lisa Guertin, Lisa Morris

**Board Members Unable to Attend:** Scott Baetz, Dianne Chase, Beth Roberts, and Tim Soucy

**Agency Representatives:** DHHS Healthcare Program Specialist, Deborah Fournier, and NHID Life, Accident and Health Legal Counsel, Jennifer Patterson

The meeting was called to order at 9:00am by co-chair Lisa Guertin, who asked for approval of the October minutes. After the minutes were approved Lisa gave a quick review of the history of the Health Exchange Advisory Board and asked for input from the stakeholders, pointing out that now it appears that we are becoming mainly a forum for sharing information. She asked the board to think about cancelling the December meeting and instead meeting next in January. Discussion of this was set for the end of the meeting. She continued with the agenda, asking CMS to speak on Open Enrollment for 2016.

#### **Open Enrollment – 2016**

##### **CMS – Jennifer Syria, External Affairs Team**

Jen reported that open enrollment is going well; it's been a smooth year so far. CMS released a weekly snapshot yesterday, with over a half million active enrollees selecting a plan nationwide in the 1<sup>st</sup> week. They will have NH numbers by the end of the month. The snapshots provide point-in-time estimates of weekly plan selections, call center activity, and visits to Healthcare.gov. The 1<sup>st</sup> week, 34 percent of the enrollees were new enrollees, and 66 percent were renewing their coverage. More than 1.1 million people submitted applications, but not all made a plan selection. Final numbers could fluctuate as plan changes or cancellations occur. The numbers reflect new plan selections, active plan renewals and, starting at the end of December, auto-renewals. They do not include the number of consumers who paid premiums to effectuate enrollment. The call center received 700,000 calls, most under 5 minutes long, and there were 3.1 million user visits on Healthcare.gov.

Continuing, Jen explained that there have been improvements to the website since the last open enrollment period to simplify the reenrollment process. CMS has had a 3 year learning curve and it's getting easier. At re-enrollment, APTC eligibility is now based on the most recent income information CMS has, not last year's tax credit. However, people should still log on to ensure their income information is correct. There are new log-in options, a new window shopping tool, and an individualized out-of-pocket cost feature. People can also now search plans by provider and will be soon able to shop by prescription. These tools are being piloted so they are only available to 1 in 4 visitors at this time.

Consumers need to make selections by December 15 for January 1 coverage, but open enrollment continues through January 31<sup>st</sup>. CMS outreach is targeting three groups with the potential for tax effects if they do not review their coverage/tax credit status: those that did not check the box to allow the IRS to share their tax information; those with income above 400% of FPL; and those that did not file tax returns.

For the SHOP (small group) program, navigators and assisters are training to assist businesses. CMS is working with the Manchester Chamber of Commerce and will be giving a presentation on December 1<sup>st</sup> on the ACA in NH and the Impact on Your Business.

Jen Syria noted that the federal PACE Act was just passed keeping the small group size at 50 or fewer employees. States have the choice of going up to 100, but NH is staying at 50.

Nancy Clark asked about the SHOP employee choice feature, and commented on how great it is that the employees will now have more choices. Discussion opened up about the mechanics of employee choice on the SHOP, and whether the employee can choose among metal levels, or just among carriers at a single metal level. Jennifer will get back to the Board with final information on this. Nancy added that from her experience as a business owner, everything went smoothly with using the SHOP site this year; her employees' information from last year popped up, so she did not have to re-enter data.

Lisa Morris shared that assisters find the functionality of the Marketplace much better this year and appreciate the call center that is available specifically for assisters. She has family members that have used the consumer call center and have found the agents very helpful and professional.

Finally, Jen Syria noted that there will be more data matching to identify people eligible for Medicare who are receiving tax credits. Also, employers with employees who say their employer-sponsored insurance is unaffordable will be contacted to ensure that the information is correct. If the coverage is actually affordable, the employees will no longer be eligible for APTCs (for the entire calendar year).

### **Covering NH – Karen Hicks**

Karen gave a short update about the work Covering NH is doing to contact the remaining uninsured. She pointed out that each year it gets more difficult as those remaining are hard to reach and/or have chosen to stay uninsured.

Ninety-three percent of the population has health insurance coverage in NH, and 90 thousand people are still uninsured, down from 155 thousand. The remaining uninsured are 60% men, and 60% under 40. They are likely to receive information and news mainly through their cell phones. The central message that resonates with this population is affordability, along with receiving more information about the increase in fines for not having coverage. Covering NH is doing digital advertising targeted towards younger males and also towards the moms of men in this age group. Lisa Guertin asked how many would qualify for premium tax credits or Medicaid, with Karen replying about 75% would qualify.

Covering NH has distributed 62 thousand co-branded and generic brochures to stakeholder organizations, 42 thousand posters for public display in break rooms and public libraries. They also plan ten flights of direct mail targeting 30 thousand households; included in the message is that everyone needs to check their options on the CoveringNH site, NH Easy, or Healthcare.gov.

On the updated website, Covering NH has added SHOP and dental plan comparison tools, which have been well received. Web traffic is slow so far, with 2,000 unique visitors and a 10% click-through rate to healthcare.gov.

Nancy pointed out that there's not a SHOP section on the Covering NH site. Karen said there is a "For Employers" section since the general public does not know what SHOP is. Nancy asked whether there was a PR plan to offset the negativity about the ACA. Karen replied that they try to include people's stories, but that doing general PR is beyond the scope of what Covering NH does.

Mike Degnan reminded everyone that Covering NH is operated out of the NH High Risk Pool, which will be winding down in 2016, after open enrollment ends. Jenny Patterson added that the NHID doesn't have a role in doing outreach about enrollment levels. Lisa Morris interjected that she thought that could be a function NH Voices for Health could play, as their focus is on access to health insurance. Christine Alibrandi commented that some of these stories could come out in the legislative discussion about Medicaid reauthorization.

As Karen Hicks was completing her presentation Christine Alibrandi mentioned that she was pleased to see the dental comparison chart, and Karen commented that they got a lot of feedback. Continuing Jenny Patterson asked whether the transition for the Covering NH site, logo, etc. from the NH Health Plan has yet been finalized. Mike Degnan replied that it hasn't been finalized yet, though it is a priority. One concern is the resources it takes to keep the Plan Compare tool current, and what resources can be used after the Consumer Assistance grant funds end.

#### **DHHS – Deb Fournier**

Deb noted that enrollment in the NH Health Protection Program (NHHPP) is now at 43,249, of which 40,228 will be enrolled in Qualified Health Plans (QHP) under the Premium Assistance Program (PAP) for coverage beginning January 1, 2016. The remaining 2800 NHHPP members have self-identified as medically frail, so their coverage will remain with one of the two managed care companies – WellSense and NH Healthy Families.

The PAP enrollment began on 11/2/15, with existing NHHPP members who were enrolled with NH Healthy Families for 2015 being automatically enrolled in the affiliated Ambetter QHP, with the option to select another plan if they preferred. Existing NHHPP members who were enrolled with WellSense were informed that they could choose to enroll with any of the carriers offering QHPs in the private market for 2016. DHHS staff and Maximus, a DHHS contractor, are available to assist NHHPP members. There have been high call volumes to Maximus, but overall the process is going well.

Deb wanted to remind us of the demographics of the NHHPP population. They are all adults between ages 19-65, with 66% under age 45, 48% under age 35, and slightly under half are men. For 75%, their income is under the federal poverty level (\$11,000 per year for an individual).

In terms of available QHPs, there are 5 carriers, 6 networks (1 carrier offers 2 networks). Lisa Guertin asked about the auto-assignment methodology for those who don't choose a plan. Deb explained as of December 3, those who were not auto-enrolled in the Ambetter plan will be enrolled using an algorithm that looks at the county where they live, whether any family members are in a particular plan, and whether their primary provider is in-network; if none of this information is available or relevant, they will be distributed evenly among the 6 available plans. Also, people auto-enrolled with Ambetter may choose a different plan if they do so by December 3<sup>rd</sup>. Jenny Patterson asked if there had been an increase in NHHPP enrollment with the opening of the private market open enrollment period; Deb replied that there was a slight uptick, with the total enrollment number finally surpassing 43,000.

Jenny noted, and Deb confirmed, that those eligible for the NHHPP may sign up at any time during the year; they do not have to wait for the next open enrollment period.

On November 18<sup>th</sup>, DHHS is holding its final training session for providers and assisters on the PAP program. Also, DHHS is filing proposed administrative rules on the program with JLCAR on November 20.

Lisa Morris asked about the primary places to enroll in the NHHPP; Karen Hicks replied that people can enroll at a DHHS office, online through NH Easy, or with assistance from ServiceLink. Lisa noted that there may be some delays in ServiceLink availability until December 7, when Medicare open enrollment ends; ServiceLink will refer people to other Navigators, or to the DHHS regional office.

### **NHID – Jennifer Patterson**

Jenny said there was not a lot to report from the NHID's perspective. Michael Wilkey, the NHID's Director of Compliance, explained that everything has been going smoothly, with call volumes up a little in the consumer services unit. Consumers generally contact us after their coverage has begun; we can help them file appeals or help with other issues related to their coverage. Michael also noted that several carriers have added hospitals to their networks, and that this information is available on the NHID website, along with spreadsheets comparing plan information for the 2016 QHPs.

Christine Alibrandi from Delta Dental asked about the 2017 EHB benchmark plan and which federal dental plan would be used to supplement the benchmark. Michael and Al Couture from the NHID replied that we will confirm that information for next time.

### **General Discussion**

Lisa Guertin brought up the question of whether to meet in December, or to wait until January. Lisa Morris noted that the biggest issues right now are the PAP enrollment process, and the question of what to do with the Covering NH assets once the New Hampshire Health Plan ends its consumer assistance activities. Mike Degan said NHHPP should know by Thanksgiving whether it received the no cost extension on their grant through June 2016, which will give them time to transition. So that information should be available in December. Deb Fournier thinks is valuable to have the meetings as a way of sharing information, and that the January meeting will be key, once the QHP coverage starts for the PAP population. Sharon Beaty suggested that members keep both meetings on their calendars, and the December meeting can be cancelled if it's not needed.

### **Public Comments**

Keith Ballingall, a producer, commented on the ongoing challenges of having the different types of in-person assisters coordinate with each other, particularly as grant funding ends. He noted that effective coordination would be a great benefit to folks looking for assistance. Lisa Guertin agreed, noting that Covering NH has come a long way, but it was designed to go away eventually, and when that happens it is hoped the business world will step up. Lisa Morris also agreed, saying a plan should be established for coordination with the broker community. Karen noted that Covering NH is working on this.

The meeting ended at 10:15. If the December meeting is held it will be at the NHID on December 11<sup>th</sup>. The January meeting will be January 8<sup>th</sup> at the Northeast Delta Dental Building in Concord.