

Draft Minutes

NH Health Exchange Advisory Board

October 9, 2015

Board Members Present: Scott Baetz, Christine Alibrandi, Tim Soucy, Lisa Morris, Dianne Chase, Russell Grazier, Beth Roberts

Board Members Unable to Attend: Lisa Guertin, Sharon Beatty, Nancy Clark

Agency Representatives: NH Insurance Department (NHID) Commissioner, Roger Sevigny; NH Insurance Department (NHID), Accident and Health Legal Counsel, Jennifer Patterson.

The meeting was called to order at 9:00am by Co-chair Scott Baetz.

Approve Minutes of September Meeting

Tim Soucy noted that he should be listed as not attending the September meeting. The minutes were approved with that change.

Preparing for the 2016 Open Enrollment

CMS

Rachel Kaprilian handed out the healthcare.gov application checklist with important dates for 2016 enrollment and provided an update on OE3. CMS is advising consumers to update their application asap after November 1st so they can see new plans and make sure they are getting the correct subsidies. SHOP employee choice will begin this year and there are new Youtube videos: 1. Agent / brokers, 2. Employees, 3. Employers. There are also new downloadable consumer tools.

2016 assister training is online. Some assisters have had trouble accessing the training; CMS is working through glitches.

Those now eligible for Medicaid must end their enrolment in Marketplace plans with APTCs and CSRs to avoid penalties.

New data points are out. 17.6 million people have gained access to health insurance; the uninsured rate has decreased (particularly among African Americans) and probably because the under 26 are now covered under their parents and that 29 states including D.C. found affordable insurance through Medicaid Expansion.

Rachel talked about the HHS proposed nondiscrimination rule which is section 1557 of the ACA extended civil rights protections that everyone can be covered and deserves to be covered. In closing she said that that HHS is happy to help the New England states.

Russ Grazier asked for clarification about the need to disenroll from APTCs. Rachel Kaprilian explained that these people (100%-138% FPL) enrolled properly but became ineligible for APTCs when Medicaid

expansion became effective making them eligible for Medicaid. Jenny Patterson explained that they will not be disenrolled automatically but a lot of outreach has been done to notify impacted individuals, including by Anthem. She also pointed out that people were permitted to stay in QHPs with APTCs through 2014 but needed to take action to ensure they were not automatically reenrolled in 2015. Paula Rogers from Anthem detailed the outreach they did to their enrollees. They did see “erosion” of that group so they expect that most people have disenrolled.

Lisa Morris asked how the penalties will be applied. Rachel explained that they’ll be applied through the tax process but that there is an understanding that the penalties may be unaffordable and that is being considered. Russ and Scott expressed concern that this population is not used to insurance and now may face unaffordable tax penalties from the IRS. Christine Alibrandi pointed out that the IRS action is limited in this regard. Rachel and Jenny pointed out that this should be a small group of people in NH.

Lisa Morris suggested that the Board should express its concern. Christine suggested that the Board request that these penalties be waived. Rachel offered to follow up. Jenny also said DHHS may be able to provide more information about the current status and has been doing outreach as well. She will ask them to report on this next month.

Covering New Hampshire

Aaron Holman of PCG gave an update on Covering New Hampshire’s plans leading up to and during Open Enrollment 3 (OE3) and beyond. Covering NH (CNH) is in its final grant period, he explained what they are doing and where they are going. CNH has done additional polling and survey work showing the remaining uninsured are primarily younger men, under 40, split geographically 2-1 men to women. These people are harder to reach and typically have 2 or 3 different jobs, which are shift based, requiring a different outreach strategy. Messaging is similar (affordability, choices, quality) and tone is still factual (versus “pitchy”). Affordability is still the issue, folks are still skeptical of the income eligibility chart. CNH has revamped marketing materials and wording. They are handing out brochures and posters and focusing on outreach events, limited direct mail, trying to micro-target, digital target, rebooting website, ads (similar to healthcare.gov). The website and plan compare have been updated (and now includes dental plans). They continue to get high volume traffic and they had 900+ maneuver through the website Healthcare.gov., which means 20% clicked through to Covering NH. Scott Baetz commented that a 3% click rate is huge and 20% is phenomenal. There also is an earned media strategy (op-eds) and also online videos. CNH has a Marketplace Assister professional development training day next week, with updates and presentations to kick off Open Enrollment. For Marketplace Assistants education should start early on and have in-person meetings.

The work of PCG and the New Hampshire Health Plan (NHHP) work will ramp down at the end of open enrollment (operational staff will ramp down Jan-Feb) and pivot to transition planning for the summer. They will do a debriefing and work with Marketplace Assistants. CNH is hoping the regional partnerships will be the lasting structure and they will work on that over the spring and summer. The NHHP Board will vote on transition plans next week. They have reached out to orgs (including the Healthy New Hampshire (HNH) Foundation) that could keep the brand alive and keep the website and data up-to-date (they have a list of minimum work that needs to be done). The goal is to complete transition by May-June. Scott asked if this will include all assets. Aaron said yes, primarily the website, also updating data and supporting remaining assistants. Scott highlighted that it is a great website and reminded

everyone that he endorses this website and cannot stress enough how awesome it is that the website has 20% hits.

Christine Alibrandi asked for the current uninsured number and their realistic range for what it could be. Aaron said they expect an updated number in 30 days. They do not typically set headcount goals and it is increasingly a harder group to meet. Their goals focus on reaching people and having messages that people respond to.

Tim asked for more explanation about the subsidy issue; what if people acted in good faith, are they exempt for the year? Russ shared his experience the group with receiving a subsidy and that he was eligible when he applied; subsequently his income increased and he had to repay the penalty for the full year. And, his son couldn't get financial aid for college until they repaid that amount. Tim expressed worry that people will not go back in and report income changes. And, Christine added that, due to a technical glitch, if you disenroll from your medical or dental plan, you'll be automatically disenrolled from the other. Michael Wilkey said that NHID is aware that continuity of care issues will arise as people churn on and off PAP too.

Insurance Department

The President signed a law regarding small group size this week, and the NHID issued a bulletin on it yesterday. Federal law now allows states keep the small group size at 50 or increase it to 100. NH law has small group size at 50 and would have to enact a statute to make it 100. Carriers can resubmit rates for change effective April, 2016. Beth Roberts asked if filings could be withdrawn. Michael said that would require binders to be opened, which probably will not be allowed.

Counting rules using FTE equivalent (not eligible employees) remain in effect and are addressed by bulletin.

Beth Roberts pointed out that some groups over 50 have now seen small group rates. Can those be withdrawn? For sicker groups, this may mean their rates go up. But if they are not withdrawn, they will be yet another grandfathered group.

There is a short window next week to make final corrections to submissions prior to certifications. They hope plans will be final next week and information can be shared.

CMS posted a new enrollment manual for SHOP last week. There is new information for the SHOP; also information about the individual market.

Advisory Board recommendations on preserving Covering NH

Scott reiterated the value of the website.

Lisa Morris asked if they feel confident that another entity will take it on. Aaron said they do feel confident. Financing is a bigger issue.

Next Meeting

The next meeting is November 13th in the same location.

Board Members

This is Russ' last meeting. He highlighted the civil and neutral nature of this Board – and its ability to discuss controversial topics productively. Lisa expressed appreciation to Russ and Nancy for sharing their personal experiences. The Board expressed desire that their replacements also be people who use the healthcare.gov site to get coverage. Sharon, Nancy and Christine's terms are also up. Christine's term is being renewed.

Scott asked for a report on the subsidy issue next meeting.

The meeting ended at 10:00 a.m.

DRAFT