BPEL Employee Enterprise End - to - End Model

Name: Employee Enterprise End - to - End Model
Package: Employee Enterprise End - to - End Model
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Synopsis:

This process demonstrates how an Employee would interact with the Exchange to purchase Health Insurance for himself and eligible household members. Major functionality provided to Employees include: simple application to capture Insurance choices and participating family members, shopping and selecting a Health Plan. Based on provided application information the Exchange can identify Individuals potentially eligible to apply as an Individual for state-sponsored insrance and send referrals to the state agency.

Employee

(EME159) Web Requests

Web Request Examples:
- Information
- Apply for Insurance/Exemptions
- Missing Information
- Updates
- Billing / Payment Disputes
- Appeals
- Health Plan Selection

(EME101) Mail / Fax / Email Requests

Mail/Fax / Email Request Examples:
- Information
- Apply for Insurance/Exemptions
- Missing Information
- Personal Information Updates
- Billing / Payment Disputes
- Appeals
- Health Plan Selection

(EME109) Phone Request

Phone Request Examples:
- Information
- Apply for Insurance/Exemptions
- Missing Information
- Updates
- Billing / Payment Disputes
- Appeals
- Health Plan Selection

State Imaging System

(EME100) Process Mail / Fax / Email and Create Work

State IVR

(EME110) Provide Information and Status (if Authenticated)

(EME111) Speak to Agent?

No

(EME112) Call Complete

Yes

State Contact Center

(EME120) Support Call

Other Interface Partners (Agencies)

Submit Appeal

(EME130) Manage Appeals

(EME131) Send Appeal Status Update?

No

(EME132) Appeal Complete

Yes

(EME829) Health Plan Disenrolled Employee

(EME830) Process Employee Disenrollment File

Integration Layer

(EME140) Recieve and Route Work

(EME150) Log In (Staff Log into Exchange and Select Work)

"Select Work" Capabilities still need to be determined if inquiry is done by phone.

(EME160) Access Portal Exchange to Determine Desired Action

(EME161) Desired Action?

Logged In User

General Information

(EME170) Access Program Information & FAQ

(EME171) Complete

Manage Account

(EME180) Update MN HIX Account Information (e.g. change password, update email ID, review notifications and account history)

(EME181) Review Notices

(EME182) Notices Reviewed

Log In

(EME200) Login MN HIX Account

Create Account

(EME190) Create Initial Account

Includes Client Identity Matching Function

Complaint

(EME249) Capture Complaint

Full process flow for complaints not yet understood

A complaint may become an Appeal

(EME251) Foward Complaint?

No

Yes

(EME250) Manage and Resolve Complaints

(EME252) Complaint Complete?

Yes

No

(EME253) Notify Complaint Result

(EME254) Foward Complaint

Rules and processes for receiving Appeal status are not yet defined which impacts how this process will be implemented (i.e. This may trigger a workflow for the case or other processing)

Potential Business Rules for Appeals:
- If an appeal is in process, do not disenroll employee.

(EME260) Process Appeal Status Input

(EME261) Eligibility Impacted?

Re-process Eligibility

Status Updated

(EME262) Appeal Status Updated

Overpayment

(EME162) Type of Activity

Payment Dispute

Apply for Coverage

Verifications of Application Information

(EME231) Verify if currently receiving State-sponsored Insurance (e.g. Medicaid)

(EME232) Verify if receiving APTC (Advanced Premium Tax Credit)

(EME220) Verify if Eligible for SHOP Coverage

(EME221) Not Found On Employee Roster

(EME233) Verify if applying as an Individual in Exchange or is receiving Insurance as an Individual thru the Exchange

(EME230) Verify Household Income (For all Household Members Included on Application)

(EME240) Verify Household Composition

"Verify Household Composition" includes Client Identity Matching for Household Members

(EME352) Notify Individual of Disenrollment

(EME351) Send Disenrollment Information to Trading Partners

(EME461) Send Billing Disput Outcome Notice

(EME421) Record & Communicate Exempt Status

(EME377) Notify Medicaid to determine Cost Effective Coverage

(EME441) Notify Not Found as Employee

(EME376) Select Health Plan Notification

During open enrollment, employee information is re-verified and they are determined to be re-eligible for coverage.

(EME269) Open Enrollment

(EME270) Notify Employees of Open Enrollment

(EME271) Open Enrollment Notification

(EME349) Employer Disenrolled from Health Plan

(EME474) Send Enrollment information to Trading Partners

(EME473) Communicate Enrollment and Household Premium Info to Employee

(EME472) Communicate Employee Enrollment Premium and Info to Employee

(EME801) Overpayment Result Notice

Employee Process

Disenroll

No, Continue Application Entry

Yes, Application Entry Complete

(EME241) Application Entry Complete?

(EME440) Communicate Employee Verification Error and Direct to Apply as Individual

(EME456) Periodic Data Verification

(EME450) Perform Periodic Data Re-Verification (Employee)

(EME457) Outcomes Required

Additional Verifications Required

No Changes

(EME458) No Changes

Is this is required of the Exchange to do periodically for Employees enrolled in QHP?

(EME350) Process Disenrollment

Undetermined at this time which swimlane this processing will occur based on where data required will reside.

Employee can also de-select an assister.

Manage Assister

(EME410) Select / Manage Assister

(EME411) Assister Management Complete

Request Exemption

(EME420) Process Exemption Request

(EME453) Program Integrity Check

(EME451) Perform Program Integrity Checks

(EME454) Further Action Required?

Yes

No

(EME452) Trigger Additional Processes / Review

(EME455) Program Integrity Check Complete

CSA - State Advantage

Make Employee Data Changes (by Employer or Employee) - includes Select a Health Plan

(EME430) Process Employee Changes

(EME431) Action Triggered?

Re-Verification

Enrollment Change Only

Basic Data (email, phone, etc)

(EME432) Basic Changes Complete

Submit Missing Information

(EME400) Process Missing Information

(EME375) Employee Completed Health Plan Selection

Yes

(EME374) Health Plan Selection Made?

No

Enroll Employee / eligible household members in SHOP

(EME366) Auto-assign Health Plan

Determines both Employer and Employee premium amounts

(EME373) Wait for Auto-assignment Duration

(EME364) Notify Individual to Select a Health Plan

(EME365) Determine if Health Plan Selection was made

(EME340) Determine Household Premium Payments

(EME367) Prepare Coverage Information for Notification to Appropriate Parties

(EME247) Ready to Select Health Plan?

Not Ready

Yes

(EME290) Shop for Eligible QHP(Employer Plans Only)

(EME300) Select Health Plan

Include Desired Coverage Level:
- Employee Only
- Employee and Spouse
- Employee, Spouse and # of Dependants

(EME360) Enter Application Data

Potentially Eligible for State-sponsored Insurance or Tax Credit?

Offer option to apply as an Individual when:
- Family Income <= 133% FPIL (potentially eligible for Medicaid)
- Family Income <= 4 times FPIL (potentially eligible for Tax Credit)

Potential Duplicate Application or Coverage

Offer option to apply as an Individual when:
- Employee is currently applying as an Individual
- Employee is currently enrolled as an Individual
- Employee is currently receiving a Tax Credit

(EME242) Potentially eligible for State-sponsored Insurance or Tax Credit?

(EME243) Potential Duplicate Application or Coverage?

(EME244) Employer Offer Defined Contribution?

(EME245) Affordable Coverage Available thru SHOP?

(EME246) Household Members Currently Enrolled in State Plans?

Continue if yes or no

Check if any Household member requesting coverage thru SHOP are currently enrolled in STate Provided Plans.

State sponsored plans include: Medicaid, CHIP, IAPD (Insurance Affordability Program)

(EME361) Offer option to apply through the Individual Exchange

(EME362) Offer option to apply through the Individual Exchange

(EME363) Offer Option to apply through the Individual Exchange

(EME368) Apply as Individual?

(EME369) Apply as an Individual?

(EME371) Apply as an Individual?

(EME372) Initiate Individual Application

IBM Curam for HCR

Financial Management System

(EME460) Resolve Premium / Payment Dispute

Employee premium payments are paid through payroll deductions which principally involve the Employer. Detailed information regarding premium payment and other financial processes can be found on the Employer Enterprise End - to - End model.

Note:
MN Business Rule: Employees make payments through payroll deduction, and Employer is responsible for paying Health Plans.

If there is an exception, (e.g. Employee left Employer and is receiving COBRA), the ex-Employee would pay from the Individual-side of the Exchange.

(EME470) Recieve and Process Household Premium Data

(EME471) Ready for Payroll Deduction

Overpayment is managed between Health Plan and Employer. This activity only reports on result of appeal and notifies Employee to contact Employer for details.

(EME800) Manage Overpayment