

Health Insurance Exchange Advisory Task Force

MEETING SUMMARY

Tuesday, December 11, 2012

1. **Welcome and Housekeeping**

Commissioner Schowalter called the meeting to order. The Task Force adopted the meeting summary of the November 20, 2012 meeting.

2. **Communications and Social Media Planning Update**

Todd Rapp, President and Allison O'Toole, Director at Himle Rapp & Company updated the group on work the firm is doing on public relations planning for the Exchange. The presentation included five main recommended strategies:

- i. Reduce barriers to effective decision making
- ii. Appeal to consumers' search for security
- iii. Engage both consumers' and those who influence their decisions
- iv. Deliver individual and societal benefits, not just a successful process
- v. Continued program improvement

The presentation slides can be found on the Exchange [website](#).

3. **Outreach, Communications and Marketing Work Group Report**

Sue Abderholden, Exchange Advisory Task Force Member and Mary Sienko, Exchange Marketing and Communications Director presented the Outreach, Communications and Marketing work group report to the Task Force. Ms. Abderholden and Ms. Sienko updated the Task Force on the work of the work group including overview of target audience profiles and outreach, communications and marketing approach. The full report can be found on the Exchange [website](#).

ACTION: the Task Force adopted the work group report.

4. **Navigator, Agent and Broker Work Group Recommendations – Compensation**

Robert Hanlon, Exchange Advisory Task Force Member and Bob Paulsen, Exchange Eligibility and Enrollment Director presented the Navigator and Agent/Broker work group report on compensation. Below is a high level summary of key considerations captured by the work group:

- Levels of Service:

- The work group placed an emphasis on activities that support consumer needs for the first year of HIX operation.
- Licensable and non-licensable activities both exist within the Plan Selection Support group and creates a challenge in recommending compensation models based on level of service.
- As the HIX is operationalized, levels of service may begin to merge/overlap to meet consumer needs and increase operational efficiency.
- The list of activities under each Level of Service was not meant to be an all-inclusive list.
- Conflict of Interest:
 - Conflict of Interest standard required by ACA – need to consider current MN Statute.
 - Related to financial incentives and selection bias.
 - Discussed requirement to develop a standard based on existing laws, but no specific recommendations provided by the Work Group at this time.
- Training:
 - Will depend on level of service being provided by organization/individual.
 - Should be reasonable based on amount of compensation.
- Referrals:
 - As the MN HIX leverages the current landscape, referrals must be fostered to organizations with specific expertise.
 - Recognize the need to refer consumers to organizations with expertise, but need to ensure consumers receive seamless customer service.
- If funding levels are inadequate, it may force organizations to depend on other financing to provide services. Initial funding should deliver sustainable levels of compensation for the services provided.
- Consumer assistance entities require a viable and identifiable cash flow to provide the necessary resources to provide the full breadth of services.
- A hybrid compensation model (upfront funds combined with incentive payments) provides a continuum of service approach that provides flexibility between levels of service, referrals, and partnership opportunities.
- A hybrid compensation model provides flexibility for year one and beyond.
- Partnerships should be facilitated, fostered, and encouraged between those entities providing different levels of service.
- Time is of the essence; compensation models for different levels of service should leverage greatest strengths of current landscape to facilitate the shortest implementation timeframe feasible.
- Consumer Assistance has several important interdependencies with HIX decisions/policies on marketing, customer assistance, call center, and financing.
- “Assessment” levels of service interact closely with the other levels of service and should not be separated via compensation.
- Sustainable compensation lends itself to creating a model of consumer assistance that incentivizes year round/service cycle services to mitigate churn and other barriers to coverage.
- Pay-for-performance and per-member-per-month are similar compensation models that can be constructed to incentivize either specific or broad based consumer assistance beyond initial enrollment. These types of compensation may facilitate the best continuum of care for consumers depending on the identified consumer needs and how the compensation model is implemented.

- Pay-for-performance is more administratively burdensome because services must be specifically identified, while per-member-per-month is a case management model that is flexible to the needs of the consumer.
- Depending on how constructed, block grants can also require a focus on specific consumer needs.
- “Assignment” of compensation methods should not be a “static” process, we need to keep it dynamic. Initial implementation/year one requirements versus long-term strategies where lessons learned can be applied and may lend HIX to consider different methods of compensation.

The full report can be found on the Exchange [website](#).

ACTION: the Task Force adopted the recommendations.

5. **Summary of Recently Released Federal Proposed Rules**

Katie Burns, Exchange Plan Measurement and Quality Director presented a summary of recently released proposed federal rules, including:

- Insurance Market Rules/ Rate Review
- Essential Health Benefits/ Actuarial Value and Accreditation Standards
- Multi-State Plan Program (OPM)
- Payment and Benefit Parameters

The presentation slides can be found on the Exchange [website](#).

6. **Comparison of State and Federal Exchange Provisions and Operating Budgets/Financing**

As requested at an earlier Task Force meeting, April Todd-Malmlov, Exchange Director gave an overview presentation on comparison of State and federal Exchange financing provisions. The presentation included:

- Brief update on Minnesota’s budget summary estimates for 2014-2016, personnel, IT infrastructure and business operations
- Comparison of 2015 Exchange private enrollment PMPM costs for other states
- Recently released guidance from HHS regarding State fees for federally facilitated exchanges.

The presentation slides can be found on the Exchange [website](#).

7. **Future Meetings**

Chair Schowalter and Members discussed upcoming meetings and it was decided that a last meeting of the task force will be held in January.

8. **Adjourn**