



MNsure Overview

May 20, 2013

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MNsure Executive Director



Overview

What is MNSure?

Who will MNSure serve?

How will MNSure work?

What is MNsure?

What is an Exchange - MNsure?

A new marketplace where Minnesotans can find, compare, choose, and get quality health care coverage that best fits their needs and budget.

The screenshot shows the MNsure website homepage. At the top, there is a navigation bar with the MNsure logo and the tagline "Where you choose health coverage". Below this, there are links for "how you benefit", "how it will work", "calculate your cost", and "get involved". The main content area features a large banner titled "who can help" with the text "We are building a network of community partners and agents to reach Minnesotans across the state, beginning October 2013. [Join the network...](#)". To the right of the banner are buttons for "faq's", "your stories", and "stay informed". Below the banner, there are three columns of content: "news" with a link to "MNsure to offer small businesses competitive health insurance options beginning in 2014", "ask us" with a link to "What is MNsure?", and "video" with a link to "Welcome to MNsure!". At the bottom, there are four columns of links: "PLANNING ACTIVITY", "NEWS ROOM", "ABOUT US", and "CONTACT US".

Why an Exchange? Why MNsure?

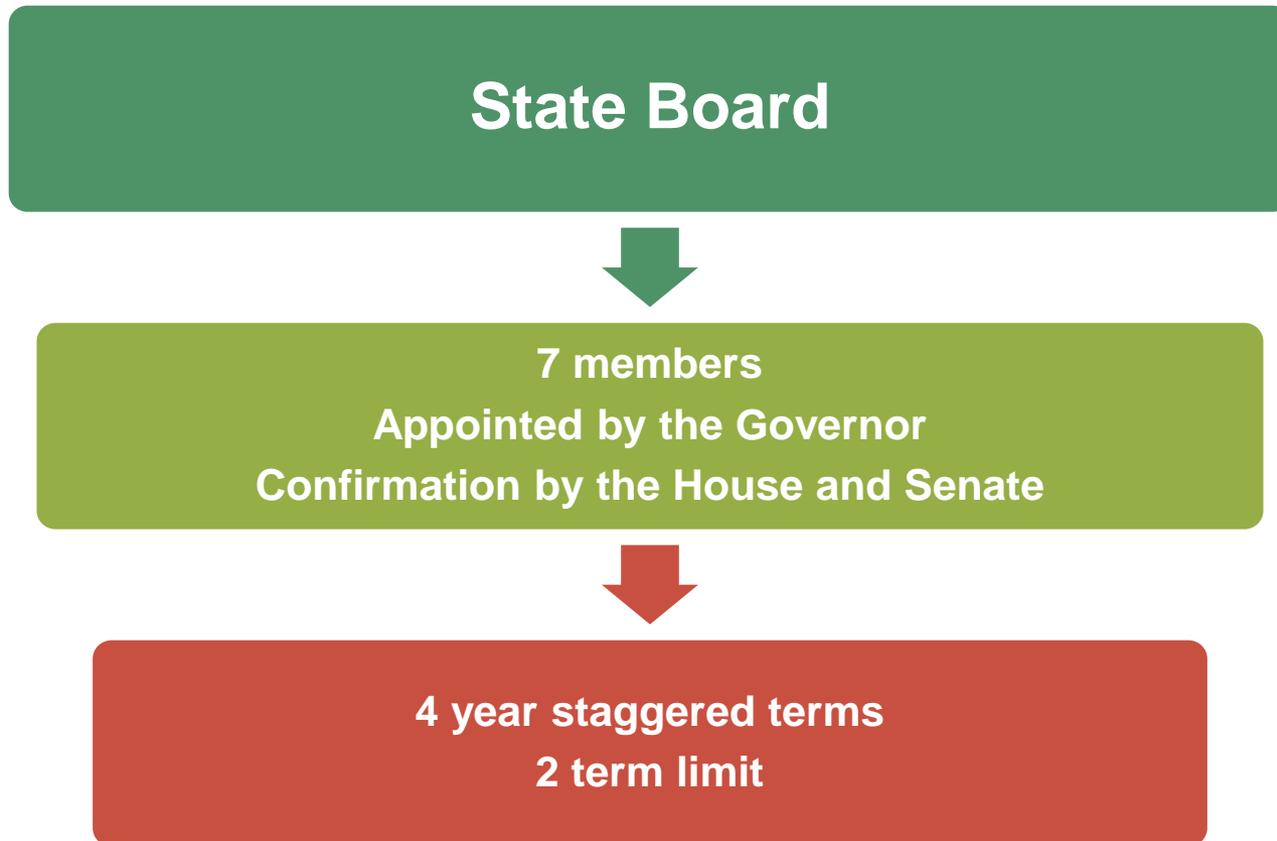
Subject of ongoing dialogue in Minnesota since 2006

Provision within the federal **Affordable Care Act (ACA)** enacted in March 2010

State-based Exchange signed into law by Governor Dayton in March 2013



MNsure Governance



MNsure Board of Directors



- **Thompson Aderinkomi, Founder and CEO, RetraceHealth**

Representing the interests of individual consumers eligible for individual market coverage. Term ends 2015.



- **Peter Benner, Independent Consultant**

Representing the areas of health administration, health care finance, health plan purchasing, and health care delivery systems. Term ends 2017.



- **Brian Beutner, Independent Business Advisor**

Representing small employers. Term ends 2015.



- **Kathryn Duevel, MD**

Representing the areas of public health, health disparities, public health care programs, and the uninsured. Term ends 2016.

MNsure Board of Directors



- **Tom Forsythe, Vice President Global Communications, General Mills**
Representing the area of health policy issues related to the small group and individual markets. Term ends 2016.



- **Lucinda Jesson, Commissioner of the Minnesota Department of Human Services (DHS)**



- **Phil Norrgard, Director of Human Services, Fond du Lac Band of Lake Superior Chippewa**
Representing individual consumers eligible for public health care program coverage. Term ends 2017.

Why MNsure?

Simple One-Stop Shop

Easier for individuals to search, select and enroll, easier for small employers to administer, and streamlined access for public /private coverage

Choice

Individuals and employees of small businesses can pick from among multiple quality plans that best fit their needs

Affordability and Value

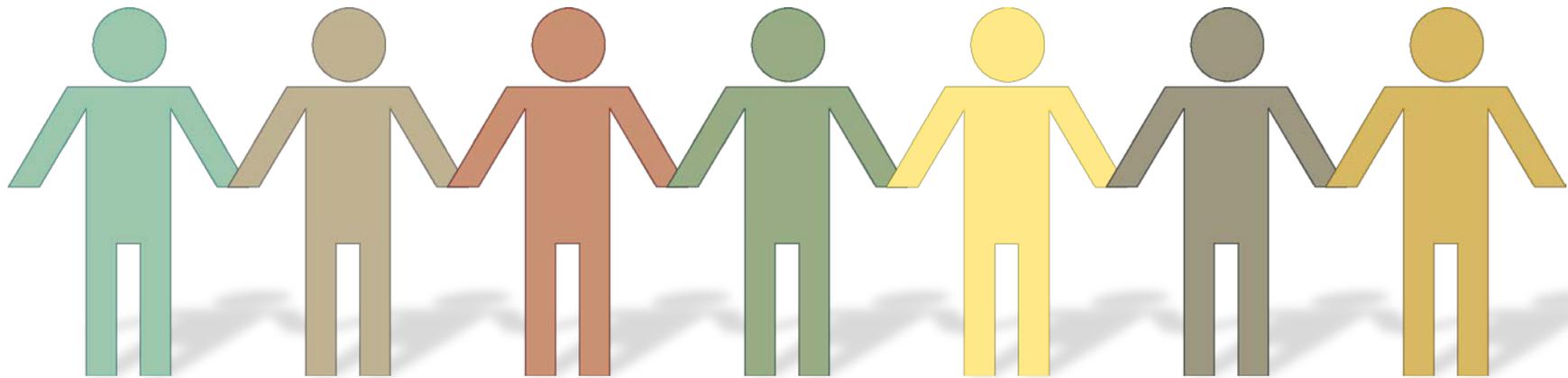
Financial assistance and greater market incentives for competition and innovation on cost, quality, satisfaction, etc.

Comparable Information

Consumers can find easy to use, comparable information on plans and providers

Who will MNsure serve?

Who will MNsure serve – Over 1 million Minnesotans projected by 2016



**Individual Consumers –
300,000**

**Small Businesses and
Employees – 150,000**

**Medical
Assistance/MNCare –
850,000**

Who will MNsure serve?

- **Individuals**
 - Those seeking individual market coverage
 - Tax credits available from 100% to 400% FPL
 - Tax credits available to those without “affordable” employer coverage (employee share of premiums above 9.5% of income) and those not eligible for public programs
- **Medical Assistance and MinnesotaCare**
 - Medicaid Assistance: Adults below 138% FPL, kids under 275% FPL
 - MinnesotaCare: Adults between 138% and 200% FPL
 - Coverage options determined by Department of Human Services
- **Small Employers**
 - < 50 employees through 2015, < 100 employees starting 2016
 - Tax credits for < 25 employees below \$50,000 average wage
 - State option for larger employers starting in 2017

Premium Tax Credits

- Based on household income and family size for the year
 - Between 100% to 400% of FPL (\$23,550-\$94,200 for family of 4)
 - Must be ineligible public programs and “affordable” employer based coverage
- Amount depends on income as % of Federal Poverty Level (FPL)
 - On a sliding scale
 - Limits premium payments as a % of income from 2.0% to 9.5% of income for second lowest cost “silver plan”

Cost-Sharing Reduction

- Based on incomes at or below 250% of FPL (58,875 for family of 4)
 - Receive the premium tax credit
 - Enroll in a silver-level plan
- Reduces cost sharing amount through deductibles, copays, and coinsurance

Small Employer Tax Credits

- Tax credits for < 25 employees with below \$50,000 average wage
- Credit is up to 50% of employer paid portion of premium for employers that contribute at least 50%
- Must purchase through MNsure
- Tax credit is available for 2 years
- Sole proprietors are grouped with Individual market purchasers and eligible for individual premium tax credits

When can you enroll?

- Initial open enrollment runs October 1, 2013 through March 31, 2014
- Annual open enrollment periods after that run October through December
- Special enrollment periods available in certain circumstances during the year
- Members of federally-recognized tribes may enroll or change plan designations one time per month
- Small employers can enroll/renew throughout the year at one time of their choosing
- Individuals may apply and be eligible for Medicaid throughout the year

How will MNsure work?

MNsure Functions

- Provide one-stop shop including a call center and website
- Ensure health insurance plans meet market wide and exchange specific standards
- Provide comparative information on health benefit plans, costs, quality, and satisfaction using a standard format
- Provide assistance online, by phone, in-person, and by mail
- Operate in person assistance programs
- Facilitate “real-time” eligibility and enrollment
- Determine eligibility for individual and employer tax credits, Medicaid, and coverage requirement exemptions
- Process appeals for determinations
- Additional functions for small employers: Employee choice (“defined contribution”) and premium aggregation
- Comply with numerous federal oversight, auditing, and reporting provisions

The Online Experience

A user experience that is responsive to people's different needs, desires and expectations.



Passenger

Get it done for me

How they want to engage: Hands-off

How they want to feel: Unburdened

What they're willing to give up: Control for convenience



Apprentice

Hold my hand

How they want to engage: Hands-on

How they want to feel: Like they're doing the right thing and making appropriate decisions

What they're willing to give up: Speed, convenience, and flexibility



Manager

Keep me posted

How they want to engage: Only when needed for oversight and approval

How they want to feel: Confident and well represented; that their time is used effectively

What they're willing to give up: A certain degree of control over the process



Engineer

Get out of my way

How they want to engage: Detail by detail

How they want to feel: Equipped to make decisions and changes when necessary

What they're willing to give up: Very little



Assister

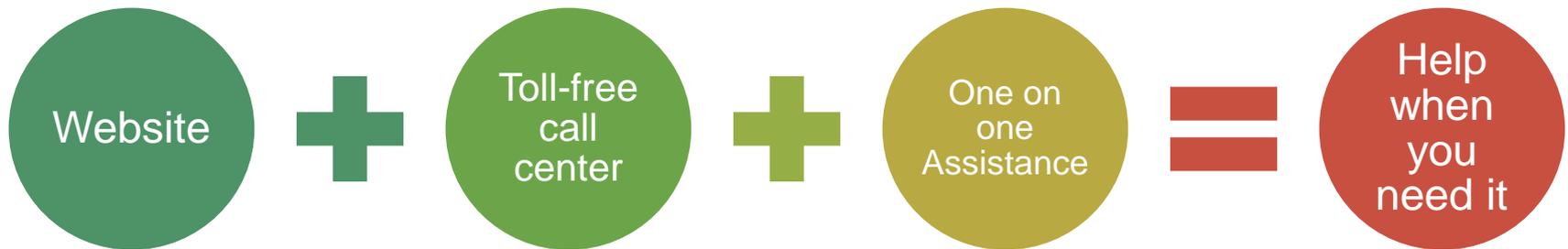
How can I best help you?

How they want to engage: Meet consumers where they are

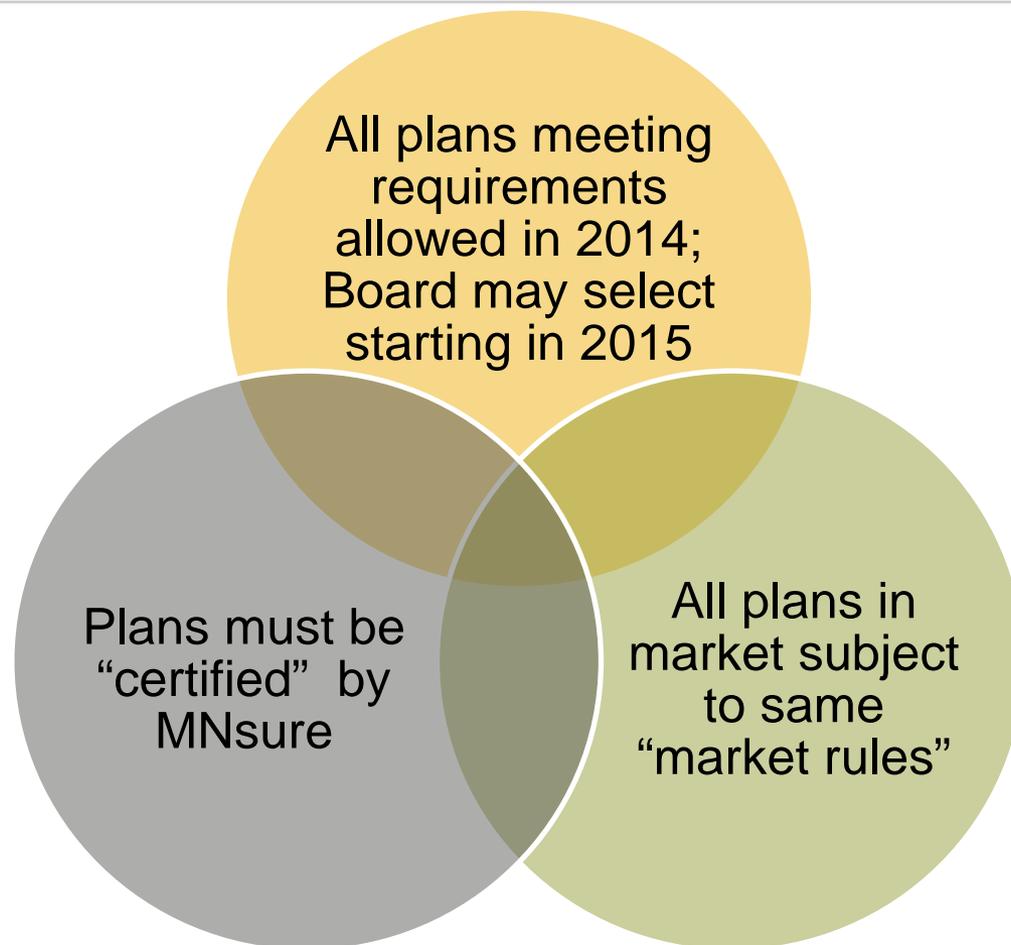
How they want to feel: Like they're providing a valuable service

What they're willing to give up: Many of the easier cases

Consumer Assistance Network



Plan Management



Market Rules



- **Benefit, Rating, and Issue Rules:** Apply to all individual and small group plans inside and outside the Exchange not “grandfathered”
 - **Benefit Rules:** Must provide essential benefits and fit an actuarial level (Bronze, Silver, Gold, Platinum, or “Catastrophic”); small group deductible limits \$2,000/\$4000
 - **Rating and Issue Rules:** Premium variation based on health status prohibited. Rating variation limited to tobacco use (1.5:1), age (3:1), geography, and family composition. Guarantee issue. No pre-existing condition limitations
- **Premiums:** For the “same plans” inside and outside Exchange must be the same
- **Open Enrollment:** Applies inside and outside Exchange

Plan Levels of Coverage

Levels of Coverage	Plan Pays on Average	Enrollees Pay on Average* (in addition to the monthly plan premium)
Bronze	60 %	40 %
Silver	70 %	30 %
Gold	80 %	20 %
Platinum	90 %	10 %

Plan Certification

- Marketing criteria
- Network adequacy requirements
- Accreditation
- Disclosure of information
- Implementation of a quality improvement strategy
- Utilization of a standard format for comparing plan options
- Utilization of a uniform enrollment form/process
- Health plan offering of at least 1 “Silver” and 1 “Gold” plan
- Multi-state plans within 4 years – potentially different rules
- Plans may start filing the end of March and must file by mid May to participate in October 1, 2013 open enrollment

Plan Selection

- MNsure legislation allows for selection of plans starting in 2015
- To be selected, insurers must:
 - Comply with all market rules
 - Apply to offer plans in all metal levels and markets the insurer offers coverage outside MNsure
 - Not operate under a separate license of the parent company than they operate outside MNsure

Plan Selection

- Plans may be selected based on the following:
 - Affordability
 - Quality and value
 - Promotion of prevention/wellness
 - Promotion of initiatives to reduce health disparities
 - Market stability and adverse selection
 - Meaningful choices and access
 - Alignment with state/private sector purchasing/payment reforms
 - Other criteria deemed appropriate

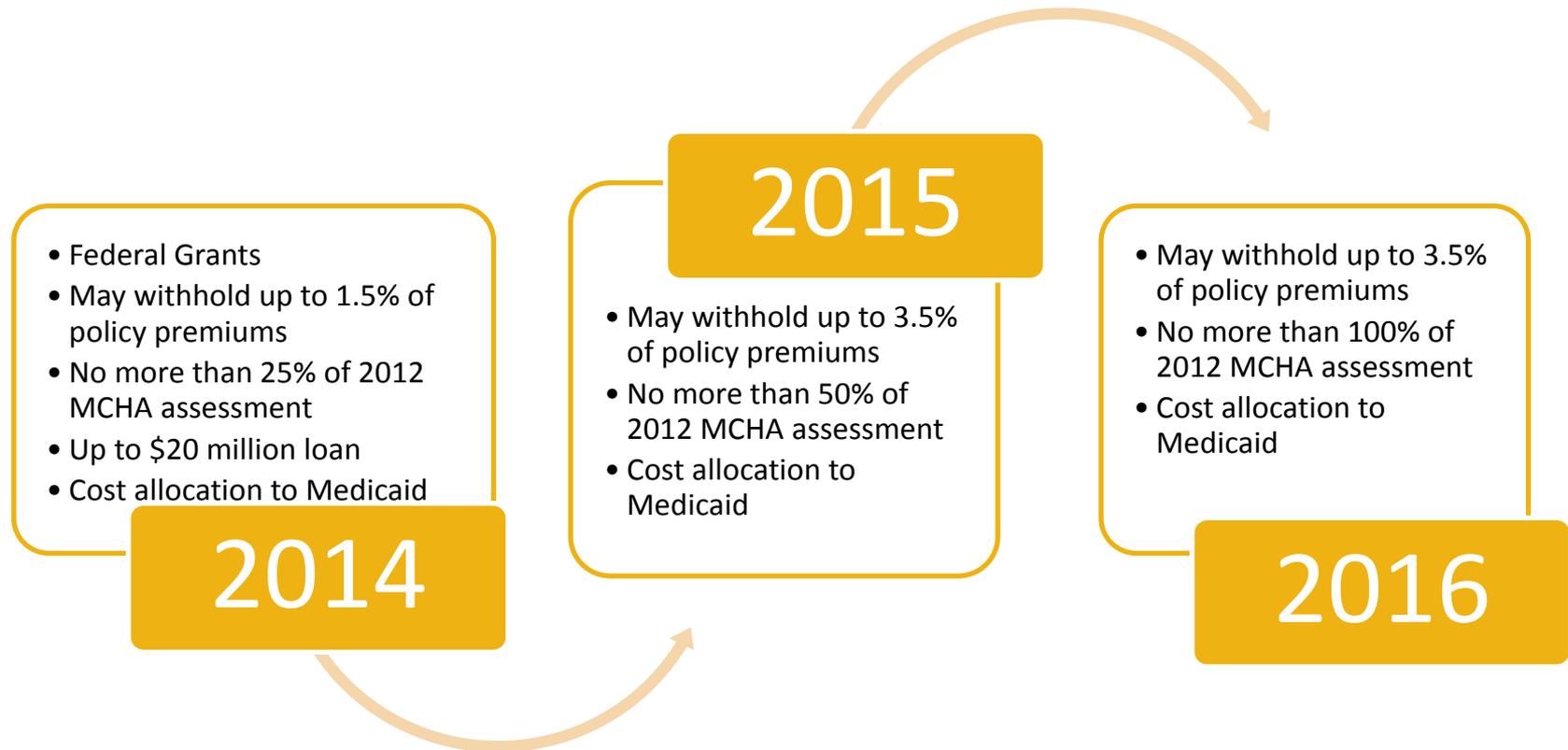
SHOP

- Small Employer Health Options Program
- Employer and employee choice options
 - Employer picks one plan for all employees
 - Employer can pick multiple plans for employee choice
 - Defined contribution towards all plans or smaller set of plans
- Defined contribution
 - Employer selects benchmark/reference plan
 - Employer determines contribution by percentage or equal employee payment
 - Employer determines employee choice options
- Participation (75%) and contribution (50%) requirements for selecting any plan year month
 - Requirements waived November 15 to December 15

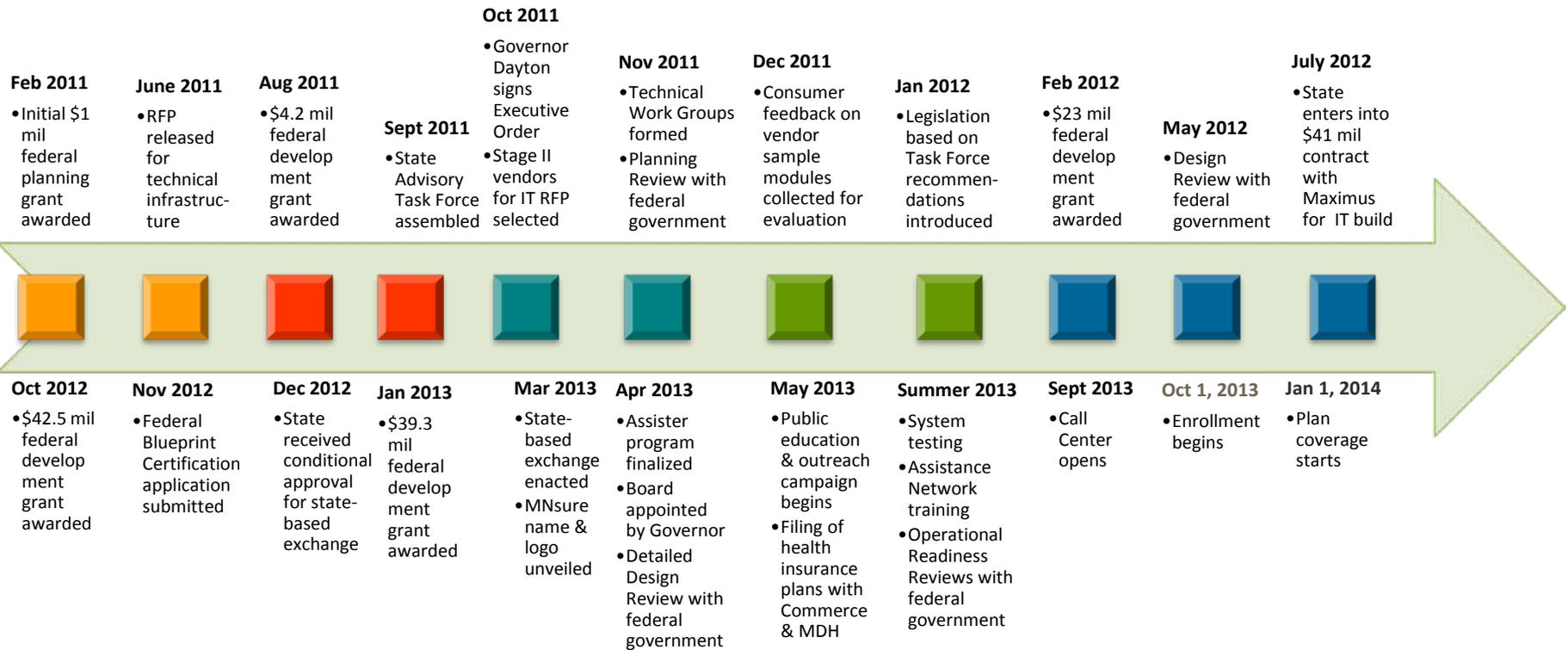
Additional Benefits for Employers



MNsure Financing



MNsure Milestones



Questions?

mnsure.org

healthreform.mn.gov

healthcare.gov

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