



IDAHO HEALTH INSURANCE EXCHANGE
DBA YOUR HEALTH IDAHO

MARKETPLACE COMMITTEE
MINUTES
THURSDAY, MARCH 7, 2019

1. COMMITTEE MEMBERS PRESENT

- Mr. Jerry Edgington, Chair
- Ms. Janice Fulkerson, Vice Chair
- Mr. Tom Shores

2. OTHERS PRESENT

- Mr. Pat Kelly, Your Health Idaho
- Mr. Kevin Reddish, Your Health Idaho
- Ms. Frances Nagashima, Your Health Idaho
- Ms. Meghan McMartin, Your Health Idaho
- Ms. Tera Rose, Your Health Idaho
- Ms. Cheryl Fulton, Your Health Idaho
- Ms. Julie Hammon, Idaho Department of Health & Welfare (via teleconference)
- Ms. Moriah Nelson, Idaho Primary Care Association
- Ms. Sara Chase, Drake Cooper
- Ms. Sherry Jansen, Blue Cross of Idaho

3. CALL TO ORDER

Following proper notice in accordance with Idaho Code §74-204, the Marketplace Committee meeting of the Idaho Health Insurance Exchange (dba Your Health Idaho) was called to order by Mr. Jerry Edgington, Chair of the Committee (Chair), at 3:00 p.m., Thursday, March 7, 2019, at the offices of Hawley Troxell Ennis & Hawley, 877 W. Main Street, Suite 1000, Boise, Idaho. In accordance with Idaho Code §41-6104(8), the meeting was held in an open public forum and was streamed in audio format. Members of the public could access the audio stream by dialing into a telephone number that was included in the notice of meeting posted on the Exchange Board's web site and at the meeting location.

4. ROLL CALL

The Chair called the roll and determined that Ms. Fulkerson and Mr. Shores were present, resulting in a quorum. Director Jeppesen was absent.

5. APPROVAL OF PRIOR MEETING MINUTES

Motion: Mr. Shores moved to approve the meeting minutes from the December 4, 2018 Marketplace Committee meeting as presented. **Second:** Ms. Fulkerson. **The motion carried.**

6. REVIEW ROADMAP

The Chair reviewed the roadmap and there were no questions.

7. REVIEW OF AGENDA

No changes were made to the Agenda.

8. OPEN ENROLLMENT 2019 UPDATE

Mr. Kelly said YHI's effectuations as of the end of January are just over 101,000 and prelim February results at 98,700. There were significant enrollment shifts between the carriers specifically with SelectHealth gaining membership due to a low-price position. Modest growth continues for the dental carriers overall with significant growth for Delta Dental. Strong seasonality is seen in effectuation trends in January and February. And as expected, the average premium is just under \$500 which was anticipated with the rate increase of about 5 percent.

Mr. Kelly said that the metal tier mix shifted to the lower cost bronze plans from last January to this January. Gold membership was down slightly, indicating price sensitivity amongst consumers. Enrollment by carrier by metal tier for the month of February shows SelectHealth with an even distribution between bronze and silver. Whereas Blue Cross has a slightly heavier mix of Bronze than Silver.

Ms. Fulkerson recalled seeing a similar shift in 2017 to 2018. Mr. Kelly said the impact of silver loading in 2017 to 2018 resulted from a couple of things. In the fall of 2017, the Administration stopped funding CSRs and when plans were released in 2018, the silver plans had the full cost of the CSR's embedded in the premium. The APTC went up based on the cost of the silver plan making the bronze more affordable.

Chairman Edgington asked how many premiums are no-cost under the scenario just described. Mr. Kelly said he does not have that information but will follow up. Mr. Shores said there is a high number of zero premiums.

9. CUSTOMER EXPERIENCE

Ms. Rose said YHI had a very successful open enrollment this year. Seasonal staff was brought on earlier with a longer training period which allowed them to be more confident and knowledgeable when OE started. That transmitted across the phones and the consumer connectors and agents also felt that comfortability. YHI saw a 40 percent increase in first contact resolution and 50 percent decrease in turnaround time. Open enrollment began with low ticket inventory which allowed for a quicker response to open enrollment inventory. Even with the increase of seasonal staff, quality scores remained over 90 percent.

Mr. Shores said the agents had a much better experience this year with the first level customer advocates. It was emphasized with the agents this year that they use email in lieu of phone calls and that was very successful. When there was a situation where a phone call needed to be made, the tier 1 customer advocates would quickly escalate to tier 2 and resolve the issue before it had to go through the appeal process.

Ms. Fulkerson asked low volume of what inventory leading into OE? Ms. Rose said existing non-OE customer tickets and emails.

Ms. Rose said December average handle time decreased 5 percent year over year, which is attributed to technology enhancements. There were also improvements made this year to the waterfall processes, the process we have for handling increased call volumes at certain times, enabling the team to shift accordingly to handle those high-volume times more effectively. January handle time also decreased due to fewer complex cases due to technology enhancements.

Chair Edgington asked how the technology enhancements helped decrease the overall handle time. Ms. Rose said the technology improvements enable customers to enroll more easily without assistance or if they do call, the team can handle the resolution more efficiently because of the enhancements. This decreases the handle time. The more difficult a case is, or if there are technology limitations around the consumer's issue, and the YHI team has to reach out to others to resolve an issue, increasing the handle time. Mr. Shores added that the work between YHI and DHW is moving faster and working better this year which helps as well. Email generally allowed for questions to be answered the next day.

Ms. Rose said that overall call volumes decreased by 20 percent from 2017 to 2018. System enhancements allowed consumers to enroll without the need to contact the support center and if they did reach out, the customer advocates were able to resolve their issue in a timelier fashion.

Ms. Rose said the Net Promoter Score ended at 31 for the goal period, compared to the industry standard of 18. YHI uses NPS to look for ways to improve customer service. The response rate ranges from five to ten percent which is expected in a new survey.

Ms. Rose shared some wins from this open enrollment and said bringing on the temps earlier was a huge success and the plan is to do the same next year. The refresher training for existing team members will also be carried forward to next open enrollment as it ensures they are ready and knowledgeable to help when the waterfall process is put into action and to ensure they are consistent with their knowledge in all aspects. A third lead for tier 1 was also implemented this year and that proved very helpful and will be done again next year. Finally, the written team was very successful this year and will be brought back next year.

Ms. Rose said some areas of opportunity for next year include leveraging the current NPS to improve the customer experience even more, look into the detractors and see if there is something that can be done to move them to promoters. The quality assurance process will be revisited to ensure the training is focused in the most appropriate areas.

Ms. Fulkerson asked about the third lead and if that means a fourth will be added next year. Ms. Rose said it means having a third lead during open enrollment again next year. The third lead this year was a temporary assignment and that person remains a customer advocate on the tier one team as per the plan and agreement.

Ms. Fulkerson asked about the quality assurance metrics and if they have been looked at yet and have areas for additional training been identified. Ms. Rose said it is still to come, but we have modified the quality form as the current form did not consider the data and call out the training areas. There will be more to come on that.

Mr. Kelly said that at the Board meeting on the 15th, the Board will see the changes made to the overall headcount structure and staffing plan. With the reorganization in January of this year, YHI has committed additional resources to the quality assurance and training programs. YHI is putting a greater emphasis in that area and the updated quality forms are just the beginning of that process as well as building on information gathered from the NPS survey. Ms. Nagashima is leading that team that is tightly intertwined with policy and both internal and external training. This is a more comprehensive approach with additional resources with the hope of more success in that area.

Ms. Nagashima said appeal volumes are down from the prior year which indicates that the shortened open enrollment dates were better communicated, and the enrollment process is more user-friendly. YHI's reconciliation team and process worked very effectively last year resulting in being better prepared for open enrollment when it began this year. The appeals decline also indicates better internal training and support. Finally, a decline in appeals indicates more streamlined and effective Consumer Connector training and support. The Consumer Connectors have indicated that the increasing information, effective use of the policy manual, and the consistency of YHI's customer advocate responses has helped them to better help their consumers.

Ms. Nagashima said in looking at appeal decisions over the past three years, there was a substantial increase in the number of upheld appeals from 2017 to 2018. This indicates again that the training and use of policy are more consistent and that consumers are receiving the right response, or decision, the first time. Sub categories, the ones you can't see, are appeal reasons like 1095-A. This is the one category we were able to virtually eliminate as a reason for an appeal this year and resulted from the enhancements to the technology and the reconciliation process improvements. Change date, plan selection, and special circumstances over the past few years has been the major trend, and results from changes in networks for the most part. Change date is a standard system request in the insurance arena, so it is fairly normal to have a high number of appeals in this area. Despite the increase in volumes of appeals in 2018, there was minimal impact to YHI's Consumer Connector error percentage of appeal decisions. There was a less than 1 percent increase in that area this year, and the difference in that indicates that Consumer connector training was strong and that they were well prepared to manage that and not gaming the process. Mr. Shores added that the email process has kept agents out of the appeal process.

Ms. Nagashima said the Consumer Connector survey did go out and responses were high and overwhelmingly positive. She shared some of the comments from that survey.

Ms. Fulkerson asked if YHI has any appeals at the federal level currently. Ms. Nagashima said no, there are none at the federal level but we do have two appeals at the state level that are pending.

Ms. Nagashima looked at the opportunities to grow and improve in future years which includes the reorganization that Mr. Kelly mentioned earlier, particularly around the Quality Assurance role. The other area where we have a good opportunity to tie together is the internal and external training and more closely aligning them so that when we work with Consumer Connectors, our CA's on the floor have the same language and the same expectations. We are also working with

Ms. Fulton to get our Open Enrollment Summit in April put together and look forward to the conversations with our stakeholders to see what other areas can be improved upon and what worked well.

10. OUTREACH & EDUCATION UPDATE

Ms. McMartin said Outreach and Education efforts, now that open enrollment is over, have turned towards qualifying life events, special enrollment periods, and overall awareness of coverage and Your Health Idaho as a state-based exchange. Community presentations have been centered around that SEP piece and the qualifying life event. YHI's team recently presented to the Department of Corrections to their team of reentry program specialists. These specialists work with the inmates that are being released and that can qualify for a special enrollment period for them. YHI also continues to work with the Boise Learns community education program. On a quarterly basis, YHI's team presents to the public and again centered around SEPs and overall coverage.

Ms. McMartin said in the events space, YHI recently had a table at an Idaho Steelheads game and interacted with over 500 individuals. Other events include the Idaho conference on refugees, the Hispanic health & job fair, and the Nez Perce job & college fair. Today, YHI's outreach coordinator is in Pocatello attending the Idaho State University Health Fair and will also be meeting with some community groups to maximize our time there.

Mr. Shores asked about income verification of inmates. Ms. McMartin said that this is really on the DHW side and if those inmates were to come to us, YHI would refer them back to DHW to determine that income piece. Mr. Kelly said they go thru the same income verification process that everyone else does. The difference with APTC is that it is projected income. Mr. Shores said the issue is that they don't have jobs, they don't have any history, and that makes it difficult for DHW to verify. Ms. Hammon added that DHW doesn't always look at past income, but instead can look at current income. As long as they have income, it can be verified.

Ms. McMartin continued and said in 2018 we saw significant growth in our Outreach and Education program. We increased our footprint outside of the Treasure Valley, which was our main goal. In 2019, as the program matures, we want to think strategically about events and community outreach. And although we would like to be everywhere and attend everything, our resources do not allow for that. The goal now becomes identifying key opportunities in key areas and we are looking at exploring larger events for exposure and brand awareness. YHI would like to maintain community education and outreach initiatives to supplement those larger events and we want to leverage those existing partnerships to cultivate new opportunities, especially those organizations that have a large statewide presence where we can piggyback on those efforts.

Mr. Shores asked if there are opportunities for the agents who go speak to organizations like churches to obtain collateral from YHI to take with them to those events. Ms. McMartin said we would love to see that as long as we have that information in advance. Mr. Shores said he anticipates a lot of questions and confusion with Medicaid Expansion on the horizon, so this would be helpful. Ms. McMartin said that is exactly right and it is the goal to make sure that the Consumer Connectors and YHI's team have the same information in order to lessen that confusion.

Ms. McMartin said the second part of that strategic plan is to diversify and expand those materials. When our team cannot attend events, we want to send collateral and make sure the information is getting into the attendee's hands.

Finally, Ms. McMartin said we are also identifying areas of opportunity like gaps in enrollment, which means we are taking enrollment data and Consumer Connector data and trying to look at where those geographic gaps are within the state and where our outreach efforts have been and seeing if those match our efforts or if there are areas where we are missing the mark.

Ms. McMartin said in looking at the advertising campaign for OE6, it is split almost 50/50 with traditional media (television and radio) and digital media. This is consistent with previous years and has been proven effective as demonstrated by our 25M total campaign impressions. The strategy for OE6 was to build on the success of previous years and then supplement with the online channels (Sling, Roku, etc.). In the digital space, we aim to maintain a strong presence and drive traffic to our website. This is a large tactical shift this year we focused on getting more qualified users to our site and then interact when they get there, rather than just drive traffic to our site.

Ms. Fulkerson asked about the click to call and click to email. Ms. McMartin said on a mobile device it will click to call or click to email YHI

Ms. McMartin reviewed the wins which included leveraging state-wide partnerships for OE events, flexibility with radio messaging and live reads to target markets, website conversions, and market surveys. Some opportunities are to continue engaging outside of the Treasure Valley, reevaluate the open enrollment open house event format, more communication with internal teams regarding timing and execution of consumer robocalls and emails, and updates to the external website with more detail around account creation and sharing a more holistic view of the enrollment process.

Mr. Shores asked about the total site conversions and if that represented the number of people coming to the website and then purchasing? Mr. Kelly added it is not a 1:1 relationship. People that converted are those that saw an ad and then came to YHI's website and did something. It does not necessarily mean they actually enrolled.

11. TECHNOLOGY UPDATE

Mr. Reddish provided an update on 1095s, an area where improvements continue to be made year after year and can be attributed to the data reconciliation process with the carriers. Both YHI and the carriers understand the importance of making sure the data is consistent, which at the end of the year allows us to generate a clean 1095 for the consumer. Over the past two years, big improvements have been made resulting in a low correction rates and almost non-existent voids. Mr. Reddish said this last year we added the ability for consumers to opt-in to receiving their 1095s electronically and we had 13,000 consumers opt in this year and this increases daily. Mr. Shores added that making it digital has been a tremendous improvement and has greatly reduced the number of phone calls agents receive regarding 1095s.

Mr. Reddish reviewed the tech roadmap and said the timeline is similar to last year. He reminded the Committee that this is tentative as we are still determining the enhancements for this year and

hopes by the Board meeting next week it will be more defined. He also reminded the Committee that the release numbers represent the year and the month of the release, so release 19.3 would be the year 2019 and in the third month of March.

Mr. Reddish said the first item up on the tentative release roadmap is the Verify Lawful Presence compliance item required by CMS to validate the legal residence of a consumer. The team is working very closely with the Department of Health & Welfare as well as the FFM because they are upgrading their technology as well. Everything is on track and this compliance item will be completed by the end of the month. In addition, this release will include various bugs and defects that were identified during open enrollment. They were not significant enough to warrant a patch during OE, so it was paired with the March release to get things cleaned up.

Chair Edgington said that in addition to that, Idaho residency also needs to be verified and he asked if YHI has any means of verifying that. Mr. Reddish said currently it is self-attestation, but it is a roadmap item for the future.

Mr. Reddish moved to the 19.7 summer release and said this is generally a big release as the summer release includes carrier related updates and requires assistance from carriers with the testing. Some of the items in this release include basic user interface changes to make the user experience seamless following our front-end website changes this past year. Also, Google Tag Manager which allows YHI to track the consumer's experience from start to finish. YHI already has this on the front-end website, but not in the HIX. This will allow YHI to track the customer's seamless experience through the enrollment process.

This release will also include some lessons learned enhancements that came out of the cross-functional lessons learned meetings following OE. Finally, improved noticing will also be in this release. This will include consolidation the number of notices that go to consumers and verbiage changes aimed to reduce or eliminate confusion. This is also anticipated to reduce the number of calls YHI receives as a means to improve the overall consumer experience.

In preparation for open enrollment, the fall release (19.9) will include changes to the system as required by Medicaid expansion. YHI and DHW have already begun work to get an understanding of what is to come with expansion and although it is too early to determine what technology changes will need to be made, we are working to get this conversation started now in lieu of scrambling at the end. Another enhancement in this release will be the ability to have year to year plan comparisons so that a consumer can compare what they had one year to what they might like the following year. Finally, release 19.9 will include anonymous shopping enhancements. Currently we have a system limitation and on October 1 we lose the ability to do anonymous shopping for that current year. So those that had an SEP or QLE in the current year didn't have the ability to anonymously shop for plans. This will allow us to have a dropdown to be able to search for plans for the current year and next year's plans.

Mr. Reddish said the winter release in December is the typical 1095 updates at the end of the year and includes annual changes to the IRS 1095-A form as well as the XML used to electronically send tax data to the IRS.

Mr. Reddish wrapped up with the items that are currently being analyzed because they aren't on the roadmap per se, but may be in the near future as they are items that are repeatedly being brought up. The first is the Agency Portal that will hopefully address some of the challenges the agents are having in this space. YHI is currently soliciting input from agencies to get a better understanding of the pain points they see on a daily basis and if an agency portal will fix that and what the functionality needs to be around shared books of business. This is a big conversation and this will be ongoing for some time.

Other enhancements are continuing for residency validation and we are in the discovery phase with this one. The last one is self-service disenrollment for gain of MEC and this too is in the discovery phase.

12. PY'20 QHP TIMELINE

Mr. Reddish reviewed the QHP Timeline for PY'20 and said these are high level main actions for this coming year. These dates are tentative and may change but represent high-level main actions for QHP prep for this coming year.

13. POLICY UPDATE

Mr. Kelly said the Proposed Payment Rules for 2020 didn't have any specific actions that impacted YHI. The more intriguing comments were in their preamble which was they were seeking comments on, but not implementing rules for 2020. Those two items were auto renewals, or restrictions on auto-renewing, and silver loading, or the prohibition of silver loading. We submitted comments primarily focused on auto-renewals and we also signed on a letter with all the other state-based exchanges with comments on both of these items and reinforcing state flexibility. Many of the concerns that were raised particularly on the auto-renewal process and because the FFM does it completely opposite of the way Idaho does it. In Idaho you renew and are ready to go at 12:01am on November 1st, while the FFM waits and lets you choose a plan and then auto renews consumers who have not chosen a plan on December 15th. The challenge being that on the FFM, if you don't like what you are renewed in, open-enrollment is over and no changes can be made. Those two items were also key talking points in DC earlier this week and we believed they heard us loud and clear.

Chair Edgington asked Mr. Kelly to explain the cost-share reduction. Mr. Kelly said in the fall of 2017 the Trump Administration ceased funding of cost share reductions. At that point, the carriers estimated the cost of continuing to provide those benefits, as required by law to provide, and added that cost to the silver plan premium. This practice is commonly known as silver-loading. The preamble asked for feedback on if CMS were to prohibit silver loading. The vast majority of states did participate in silver-loading as opposed to spreading that cost across all metal tiers when the benefit is only derived from those people that are on a silver plan. Chair Edgington clarified that the second lowest silver is where the subsidy is set so why would we not want that to be as high as it needs to be. Mr. Kelly said we are in favor of silver loading in the absence of funding of CSRs or any similar mechanism. In other words, prohibition of silver loading in absence of CSR funding creates a number of issues for both consumers and carriers, essentially market destabilization.

Mr. Kelly said in December, there was a ruling by a Texas judge that said ACA unconstitutional and it is working its way through the courts and we will continue to watch as it progresses.

The last item that was confirmed while in DC, numerous bills going through the House, though none have made it to the floor and only three that are close like reinsurance, outreach funding and a new bill that allows for funding for new state-based marketplaces. We believe those have support in the House but are unlikely to make it out of the Senate.

Mr. Kelly moved to the state policy update and said the primary thing for YHI is watching Medicaid expansion. There was a sideboard bill earlier this year from the Senate Health and Welfare Committee and that bill has been on hold. We have seen some activity this week two print hearings and a Committee hearing that will take place tomorrow. There are three primary components to that bill: work requirements, legislative action is required if federal funding drops below 90%, and partial expansion. Partial expansion means everything up to 100 percent would be Medicaid and 100 to 138 percent of the poverty level, the consumer would have a choice to get an APTC to use on the exchange or go onto Medicaid. The work requirements and the APTC option would require waivers so we will see what happens and adjust accordingly.

Mr. Kelly said YHI did its annual presentation to the legislature in January and there were lots of comments on what a tough vote this had been way back to 2013. They are now happy with their vote given YHI's tremendous success.

14. FY'19 OPERATIONAL GOAL UPDATE

Mr. Kelly said YHI's goals generally run through their germane committees and for this Committee, it is Idahoans' Experience. There are two components for this goal. First is a reduction in the number of tickets related to linking. The goal was to reduce them by 50 percent, and we are pleased to report we reduced it by over 90 percent. Second part is the Net Promoter Score and we are currently tracking below our thresholds. NPS is currently at 31 compared to a baseline of 32. Thanks to the foresight of the Committees and Board, we placed a very low weighting on that portion of the goal.

The second goal for this Committee is Retention and Enrollment which has no compensation tied to it. As noted earlier, effectuations have been very strong, and we are trending at the 100 percent threshold. This goal will not get measured until April 1, but we are optimistic we will reach that goal threshold.

Mr. Kelly added, without going through all the other goals, they are all trending north of 80 and close to 100 percent.

15. EXECUTIVE SESSION

Motion: The Chair moved that the Committee enter into Executive Session Pursuant to Idaho Code Section § 74-206(1), to consider records that are exempt from disclosure as trade secrets under YHI's public records policy and Idaho's public records act pursuant to Idaho Code Section § 74-206 (1)(d).

Executive Session Roll Call: The Chair called roll and determined that Ms. Fulkerson and Mr. Shores were present, resulting in a quorum. Director Jeppesen was absent.

The Committee entered into Executive Session at 4:13 p.m. and reconvened at 4:36 p.m. No final actions nor decisions were made while in Executive Session.

Chair Edgington left the meeting during the Executive Session at 4:35 p.m.

16. NEXT MEETING

The next meeting will be held in late May or early June of 2019.

17. ADJOURN

There being no further business before the Committee, Ms. Fulkerson adjourned the meeting at 4:47 p.m.

Signed and respectfully submitted,



Jerry Edgington, Committee Chair