

**IDAHO HEALTH INSURANCE EXCHANGE
DBA YOUR HEALTH IDAHO**

**YOUR HEALTH IDAHO BOARD
MINUTES
JULY 31, 2014**

1. BOARD MEMBERS PRESENT

- Mr. Scott Kreiling, Vice Chair (via teleconference)
- Mr. Hyatt Erstad, Secretary
- Ms. Zelda Geyer-Sylvia
- Mr. Tom Shores
- Mr. Dave Self
- Mr. Mark Estess (via teleconference)
- Mr. Jeff Agenbroad
- Ms. Karen Vauk
- Ms. Margaret Henbest
- Mr. Kevin Settles
- Mr. Fernando Veloz
- Dr. John Livingston
- Representative Kelley Packer (via teleconference)
- Representative John Rusche (via teleconference)
- Senator Jim Rice (via teleconference)
- Director Dick Armstrong

2. OTHERS PRESENT

- Ms. Amy Dowd, Your Health Idaho
- Mr. Alberto Gonzalez, Your Health Idaho
- Ms. Jody Olson, Your Health Idaho
- Mr. Ethan Owen, Your Health Idaho
- Ms. Cheryl Fulton, Your Health Idaho
- Mr. Tom Donovan, Department of Insurance
- Mr. Mike Stoddard, Hawley Troxell
- Mr. Jesse Lewin, Burson-Marsteller
- Ms. Brie Gershick, Accenture
- Mr. Michael Fairweather, Accenture
- Mr. Joshua Tauber, Accenture
- Mr. Luke Feaster, Accenture
- Mr. Shankar Srinivasan, GetInsured (via teleconference)
- Mr. Fred Heil, GetInsured
- Ms. Dawn Zhao, GetInsured
- Ms. Becky Webb, GetInsured
- Mr. Srini Dhanan, GetInsured
- Ms. Yen Pham, First Data Corporation
- Ms. Lori Wolff, Idaho Department of Health & Welfare
- Mr. Weston Trexler, Department of Insurance
- Ms. Kathy McGill, Department of Insurance
- Ms. McKinsey Lyon, Gallatin Public Affairs

- Ms. Marnie Packard, Pacific Source
- Mr. Peter Sorensen, Blue Cross of Idaho
- Mr. Doug Dammrose, Mountain Health Coop
- Ms. Noelle Laury Peyron
- Ms. Tammy Perkins, Office of Governor C.L. "Butch" Otter
- Mr. Brody Ashton, Lobby Idaho

3. CALL TO ORDER

Following proper notice in accordance with Idaho Code § 67-2343, the Board of Directors meeting of the Idaho Health Insurance Exchange (Exchange) was called to order by Mr. Hyatt Erstad (Secretary), at 8:02 am, Thursday, July 31, 2014, at the State Capitol Building, Room WW17. In accordance with Idaho Code § 41-6104(8), the meeting was held in an open public forum and was streamed in audio format.

4. ROLL CALL

Mr. Agenbroad called roll and determined that Mr. Erstad, Mr. Kreiling (via teleconference), Ms. Geyer-Sylvia, Mr. Shores, Mr. Self, Ms. Vauk, Mr. Settles, Mr. Veloz, Dr. Livingston, Ms. Henbest, Senator Rice (via teleconference), Representative Packer (via teleconference), Representative Rusche (via teleconference) and Director Armstrong were present, resulting in a quorum.

Mr. Weeg and Director Deal were absent.

Representative Rusche joined via teleconference at 8:05 am. Mr. Estess joined via teleconference at 8:21 am.

5. PUBLIC COMMENT PERIOD

There were no comments from the public at this time.

6. REVIEW OF AGENDA

The Agenda was amended to remove Decision Support for Plan Management. There were no other changes to the agenda.

Motion: Mr. Kreiling made a motion to have Mr. Erstad stand in as Chair in the absence of Mr. Weeg.

Second: Ms. Henbest.

The motion passed.

7. RENEWAL PROCESS REVIEW

Ms. Wolff began by reminding the board that the reason for the meeting is because DHW has still not received a file form CMS.



The process is focused on making sure there are no interruptions in coverage for Idahoans and making sure Idahoans receive an accurate Advanced Premium Tax Credit (APTC). DHW wants to focus on the consumer and minimize any impacts to families and also to coordinate across all stakeholders, from consumers to the marketplace, carriers, brokers and agents.

Renewal Strategy

- 1) Gather info and recalculate APTC for 2015 - DHW has main responsibility.
- 2) Re-enrollment strategy, the process by which an individual is re-enrolled in a plan (passive and active).
- 3) Carrier enrollment - we need to complete and get people in their plans and make sure there is no disruption in coverage.

No information is currently known on the 76,000 Idahoans enrolled through the 2014 Open Enrollment period because a file has not been received from CMS. YHI and DHW will need to rely on other methods to obtain information on the enrollees. Currently, the plan is to work with the carriers to identify the enrollees and initiate an outreach plan to gather the required information needed to calculate their APTC.

Ms. Wolff noted that in the supplemental packet provided to the Board is marketing and outreach information which was sent out in a mailer to the consumers. There will also be a webinar together for agents and brokers to train them to assist with this strategy. 50-60% of enrolled Idahoans have an agent associated with them and we will need assistance from agents and brokers on this group. DHW will handle any enrollees without an agent assigned. DHW will work with Your Health Idaho to put a PDF form on their website for individuals to submit to DHW so they can calculate their APTC. Training and prep for this stage is critical. DHW will spend three weeks getting in touch with as many of those households as possible and will be tracking the data daily. Starting on September 2, 2014, DHW will start running eligibility on Idahoans they have information on and DHW will also verify income data with the IRS.

For those DHW cannot get in touch with, DHW will send out a form in the mail with instructions and a stamped return envelope. DHW will run eligibility on these people when the forms are returned.

Once DHW runs eligibility, enrollees will receive a notice of their APTC calculation. There will then be a window of time to make corrections. Ms. Wolff noted DHW has until December 15 to get in touch with all enrollees. If during this time period, DHW receives the file from CMS, they will stop outreach and use CMS information to verify income and calculate their APTC.

Ms. Wolff emphasized the need to move forward with this plan in order to mitigate the risk and that there is still a lot preparation work that needs to be done next week. Key dates as we move forward include:

- 7/31 Board Approval
- 8/1 Data Use Agreements
- 8/1 Data file from Carriers

- 8/8 Training, marketing and website finalized
- 8/11 Launch renewal campaign
- 8/31 CMS approval of strategy (after outreach and data gathering)
- 9/30 Implement safety net for non-responsive consumer

Ms. Wolff reviewed the process flow for the renewal process.

Ms. Olson said that the process provides the consumer with many options so that they can follow the path most comfortable for them.

Ms. Lyon then gave a communications overview from the packet that was sent to the Board late the previous evening.

Step 1, which begins with the gathering of information on the 76,000 Idahoans currently enrolled. Any Idahoan who received an APTC will receive a direct mail piece which will guide them through what to expect. For those who do not have an agent or broker, they will get a call from DHW and they can give their information over the phone or on the website. Consumers, who provide the necessary information, will then receive information about what their projected APTC is for the coming year. Starting October 1, those with a health plan, but who may or may not have received an APTC, will be notified by their carrier of any changes in their plan. Most consumers during this period will go to the website and fill out the form. They will then receive additional DHW and Your Health Idaho direct mail with more information.

On the front page of the Your Health Idaho website, immediately in the headline, is more information about the consumer's renewal process with links to further detail. The website breaks the next steps for the consumers into two groups, those who received an APTC, and those who did not because the process is different for those two groups. She emphasized again, that the consumer has a lot of choices to customize their experience.

Mr. Gonzalez went into the downstream items. Toward the end of October, the marketplace expects to finalize account creation and APTC determinations. Your Health Idaho would also request an account in the system for those that did not receive APTC in 2014. The consumers who did not receive an APTC in 2014 will be transferred from DHW to the marketplace. GetInsured will validate that the account transfer was successful, which will occur no later than November 3. Additional account validations will occur by November 8 and email notifications to welcome consumers to open enrollment will start November 10. Then people will enter the website and complete their 2015 application.

Your Health Idaho will also begin passive re-enrollment and manually process those consumer's re-enrollment for 2015. This will be a manual process for 2015. It is anticipated that 50,000 files will need to be manually re-enrolled but it is believed the majority may update their information before Your Health Idaho does. Completing manual passive re-enrollment is expected by December 15.

Carriers can start their plan management process November 10. The goals for this process are to prevent gaps in coverage, maintain the client base, and make it easy for the consumer.

Mr. Kreiling asked for a list of criteria for re-determination.

Ms. Wolff said they will need to re-verify who is in the household, last four digits of their Social Security number, and date of birth. DHW will have to contact homeland security to verify their citizenship status. They will also ask for an updated email address, updated tax filings, projected 2015 income and to make a statement verifying that they are a citizen. Agents and brokers will be helping with this.

Senator Rice expressed concern about the process, specifically a phone call asking for personal information and the possibility of scammers.

The working group is offering options. Phone calls were selected for the first step in outreach because they have the best opportunity to reach the most consumers. Individuals will see DHW on caller ID and fraud measures will be presented to them. They can also call their agent, they can update their information online, they can print and send the information to DHW, or they can call back into DHW.

Ms. Lyon said they reached out to the Attorney General's office to obtain wording for fraud message and the overall process

Ms. Henbest asked about media outreach.

Ms. Olson said this will get media attention so Your Health Idaho will get out in front of it and make consumers more aware of the process. The goal is to get local papers to publish a notice.

Ms. Henbest asked about people that have moved away and do not want to re-enroll. There will be segments that should not be re-enrolled.

Mr. Gonzalez said that CMS requires Your Health Idaho to identify segments that do not need to be reenrolled. Your Health Idaho wants to make that number as few as possible, understanding that if we have information that a person has left the state, that we do not passively enroll them.

Ms. Geyer-Sylvia asked when making these calls, how can people validate they are talking to DHW and how will DHW validate who they are talking to?

Ms. Wolff said caller ID introduces DHW and they are only asking for the last four digits of their social security number. DHW will also ask for their date of birth and address to confirm they are talking to the right individual.

Ms. Geyer-Silvia said there are experts that can help with validation and thinks there should be additional validation points.

Mr. Shores asked about how they will calculate estimated income for 2015.

Ms. Wolff said they can estimate their income in a number of ways. If their income is within the standard of reasonable compatibility, DHW can use their monthly income.

Mr. Shores said there is no reason for GetInsured to not start creating accounts on October 1.

Mr. Gonzalez said it has more to do with controlling the environments of the system during development and testing and Your Health Idaho is bound by the account transfer between DHW and GetInsured.

Mr. Shores asked about the worksheet (large process flow) and if there is a spot where carriers can upload information to Your Health Idaho.

Mr. Gonzalez said we have talked in advance of the account transfer about trying to make it available for carriers to update the APTC information to the consumer database. There are reports we could develop to share some of this information, but in terms of pre-work or pre-filling out prior to November 3, it is highly unlikely.

Director Armstrong said he is gaining confidence we will see the file transfer from CMS but likely not until early September. However, that is still very valuable because we know the info exists and we know it is fairly accurate. We will be able to use it in the final phase of open enrollment. CMS is sending a team here next week to address our security and privacy processes at DHW.

Mr. Veloz asked after hearing Director Armstrong's comments, if data coming across will be 2014 data, why wouldn't we just go forward with this and use data from CMS as a secondary source. Which is the primary source of information?

Ms. Wolff said, based on their strategy, the carriers probably have the most updated information. The CMS file will be secondary to the information we get directly from the client.

Motion: Mr. Self moved that the board, pursuant to Idaho Code 41-6102, confirm its commitment to assuring Idahoans have access to a state based health insurance marketplace. This requires creation of a technology platform; and, the establishment of consumer accounts in Idaho's own marketplace for all Idahoans who obtained coverage for 2014 through the FFM platform and who intend on renewing coverage in 2015 through Your Health Idaho. Achieving this objective requires the continued support and assistance from the Department of Health and Welfare, insurance entities offering qualified health plans, and Idaho's health insurance brokers. We are further committed to pursuing a full file transfer from CMS for all consumers who received an Advanced Premium Tax Credit for the 2014 plan year. This file transfer will comply with all data security and operations requirements.

Second: Dr. Livingston.

Ms. Geyer-Sylvia had a question about the motion. The part of the motion that says we will all be working together she is in support of. But the folks at the end of the table are asking for approval of a specific process, which she does not approve of.

Mr. Self said he believes there has to be a go forward process for the team and we are up against time and lack of data. It is fraught with challenges, but we need to move forward and self-correct along the way.

Ms. Geyer-Sylvia said she is happy to separate into two pieces. She would support the first part but not the second. She asked if there was a willingness to amend the motion.

Dr. Livingston said that would not serve us in moving forward.

Mr. Self agrees with Dr. Livingston. This gives the team and Your Health Idaho staff the path forward and he feels it is in the best interest of Your Health Idaho.

Ms. Geyer-Sylvia stated she represents the consumers that are part of the plan and doesn't think she is ready to support this.

Mr. Self thinks it's highly unusual, but the fact is we have an issue with the federal government and they have not been acting as a partner and the level of risk is correctable along the way. He values the fact that Blue Cross has helped so much and knows it may need to be amended going forward.

Ms. Henbest said she is voting in support of the motion because she sees that this motion shows the Board's commitment to the state based exchange, but she is not endorsing the specifics of the plan and shows the support of the creation of consumer accounts. There are a number of specifics that will need to be adapted and changed.

Mr. Kreiling feels the motion is saying we support the plan as laid out today.

The Chair said it is important to recognize that we have come light years from where we started. It is not perfect, but we need to move forward without the federal government to assist Idahoans.

Senator Rice supports moving forward but is concerned with the process and has a concern around fraud and security.

Mr. Settles said we are losing the opportunity and is in support of the motion. He asked if they have emergency messaging.

Representative Packer said she understands the concerns of Ms. Geyer-Sylvia and Senator Rice but she thinks we should be moving forward. The concerns will be focused on and protected.

Ms. Geyer-Sylvia and Senator Rice are opposed to the motion.

The motion carried.

8. PLAN MANAGEMENT CONTINGENCY

Mr. Trexler presented the plan management timeline.

He said the carriers submitted all 2015 plan data to the DOI in June. The DOI has been reviewing with the carriers to make modifications and corrections. They hope to submit all plans to the Board next month for review. Prior to the plans being presented to the Board, depending on whether Your Health Idaho decides to use the FFM platform or a state based exchange, there will be a plan preview for Carriers to look at plan data on Your Health Idaho and contingency plans for providing data to FFM.

In August, the DOI will be sending the SERFF data to Your Health Idaho and to the FFM platform as part of the contingency plan. Carriers will have from August 11 until the end of the month to review both Your Health Idaho and FFM. The final data transfer will take place on September 10. The DOI is able to meet these timeframes for both the FFM and Your Health Idaho.

Ms. Geyer-Sylvia thanked him for clarifying that there is a backup plan and asked if all plans will need to be validated in both systems. Mr. Trexler responded yes, the review must happen in August, therefore all plans will need to be validated in both systems.

Mr. Veloz asked Mr. Trexler what the tentative date for Board review of QHP's would be. Mr. Trexler said at the first September Board meeting.

The Board took a 10 minutes recess and reconvened at 9:55 am.

9. CONSUMER APPLICATION EXPERIENCE

Ms. Gershick discussed the Consumer Application Experience and said there are still some concerns. She introduced a sample of an Idaho family and showed their process of getting through the Marketplace experience.

There are seven steps involved in the consumer application: Account Creation, Application, Verification, Eligibility, Account Transfer, Plan Selection, and Enrollment.

Mr. Shores asked how agents are involved in the process and how consumers can reach out to them for questions.

Ms. Gershick said there is an option to delegate to an agent/broker to their account.

Mr. Shores asked if there is a way to add the broker to step five or if it is limited to one email address.

Ms. Gershick said it can be a future enhancement.

10. PMO PRIVACY & SECURITY SOW

Mr. Owen introduced himself as the new IT Director for Your Health Idaho and provided his background.

He reminded the Board that Privacy and Security is a real concern. Your Health Idaho identified the work that needs to be done before Your Health Idaho can get their third party assessment. At a high level, policies around physical, administrative, and technical security requirements need to be developed. The proposed SOW for Security and Privacy support was sent earlier this week and it covers the work presented by Ms. Dowd. The SOW went through legal review and incorporated suggestions.

Motion: Mr. Veloz moved that the Board act directly rather than through the Marketplace Committee as contemplated by last week's motion, and that the Board approve adding the Statement of Work, in the form presented today, in an amount not to exceed \$260,000 plus expenses to the existing PMO contract for PMO Privacy and Security project management work, and authorize the Executive Director, the Chairman of the Board and the Chairman of the Marketplace Committee to execute the same.

Second: Mr. Shores.

The motion carried.

Mr. Owen said they will issue the RFP for the MARS-E assessment tomorrow and get responses by August 8. Early the following week, a team will be set up to review the responses and recommend a plan to the Marketplace Committee on August 11. The finalist will be notified on August 13.

11. NEXT MEETING

The next meeting of Your Health Idaho's Board of Directors will be held Wednesday, August 20, 2014 at 8:00-11:00 am.

For further items, Mr. Veloz asked what the timing on Committee support of plan selection would be.

Mr. Erstad said this goes back to the Chair and back to the agenda after time in a working group.

12. ADJOURN

There being no further business before the Board, the Chair adjourned the meeting at 10:10 am.

Signed and respectfully submitted,


Hyatt Erstad, Board Secretary