

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

**MARKETPLACE COMMITTEE
MINUTES
AUGUST 13, 2014**

1. COMMITTEE MEMBERS PRESENT

- Mr. Mark Estess, Chair
- Mr. Fernando Veloz, Vice Chair
- Mr. Tom Shores
- Ms. Zelda Geyer-Sylvia
- Representative Rusche (via teleconference)
- Director Dick Armstrong

2. OTHERS PRESENT

- Mr. Pat Kelly, Your Health Idaho
- Ms. Jody Olson, Your Health Idaho
- Ms. Cheryl Fulton, Your Health Idaho
- Mr. Vincent Lam, Accenture
- Mr. Rich Birhanzel, Accenture
- Mr. Joshua Tauber, Accenture
- Ms. Eva Szalewicz, Accenture
- Mr. Greg Kunz, DHW
- Mr. Fred Heil, GetInsured
- Ms. Becky Webb, GetInsured
- Ms. Brie Gershick, GetInsured
- Mr. Shankar Srinivasan, GetInsured
- Mr. Weston Trexler, Idaho Department of Insurance
- Mr. Peter Sorenson, Blue Cross of Idaho
- Ms. Dawn Zhao, GetInsured

3. CALL TO ORDER

Following proper notice in accordance with Idaho Code § 67-2343, the Marketplace Committee meeting of the Idaho Health Insurance Exchange (Exchange) was called to order by Mr. Mark Estess, Chair of the Committee (Chair), at 8:00 am, Wednesday, August 13, 2014, at the Idaho State Capitol. 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 visiting www.idahoptv.org/insession and clicking on the link which was also included in the notice of meeting posted on the Exchange Board's Web site and at the meeting location.

4. ROLL CALL

Mr. Veloz called the roll and determined that the Chair, Mr. Shores, Ms. Geyer-Sylvia and Director Armstrong were present resulting in a quorum.

Representative Rusche joined the meeting via teleconference at 8:03 am.

5. MEETING MINUTES REVIEW: June 23, 2014

Motion: Mr. Shores moved to approve the minutes from the June 23, 2014 Marketplace Committee Meeting.

Second: Mr. Veloz.

The motion carried.

6. MARKETPLACE COMMITTEE ROADMAP

Mr. Kelly mentioned that the Committee doesn't have any specific action items with regards to the August Roadmap, however the September Roadmap includes the Committee's report of the effectiveness of the Marketplace Committee and Charter as well as the DOI final QHP recommendations. Mr. Veloz asked what the tentative date is for the Go Live decision. Mr. Kelly said that CMS will let YHI know on or before August 31, and has not given YHI any indication of a negative response.

7. REVIEW OF AGENDA

Motion: Ms. Geyer-Sylvia moved to amend the agenda to include an Operations Transition Update.

Second: Mr. Veloz.

The motion carried.

Ms. Geyer-Sylvia also moved to amend the agenda to postpone the Decision Support section and revisit in a work session or defer it to next year. Mr. Kelly said that a work group was already organized to discuss this, but due to scheduling conflicts a meeting could not be held, therefore Chair Weeg decided that this discussion would be best had at the Marketplace Committee meeting. He mentioned that some components of the system cannot be turned off, as they are inherent to the system itself, so deferring the topic to next year would not be possible. Ms. Geyer-Sylvia withdrew the motion and asked that a work group be formed to determine what is and is not needed within the system.

8. OPERATIONS TRANSITION UPDATE

Mr. Kelly reviewed the Operations work streams, and mentioned that Accenture was engaged upon the resignation of Mr. Alberto Gonzales as it has been determined that there are still not enough resources to support the work to be done. Mr. Kelly is requesting additional funding in the amount of \$300K for a three month period for Accenture to assist YHI with the Operations

role as YHI moves through the design and implementation phase. This funding would be used to assist the individual who is acting as interim Operations Director.

Motion: Mr. Veloz moved that the Marketplace Committee recommend that the Board approve adding the Statement of Work (SOW) to the existing PMO contract for purposes of Operations Support, in the form presented today, in an amount not to exceed \$99,960 plus expenses to the existing PMO contract and delegate to the Chair of Marketplace Committee and the Executive Director authority to sign a SOW for additional Operations Support with the PMO, with this not to extend past 3 months.

Second: Dr. Rusche.

The motion carried.

9. PMO STATUS UPDATE

Mr. Tauber is a member of the Accenture PMO team and has been acting as PMO lead since February. He reviewed the Technology Implementation Dashboard, and reviewed the achievements and the risks that have occurred over the past few weeks.

The main achievements noted are that the RFP for Security and Privacy vendor was issued a week ahead of schedule. The team is evaluating those responses with an internal view on preferences by the end of the week. The Board approved pursuing a high level renewal strategy, and the details are being determined within the working groups to refine what that strategy is. The CMS visit last week to perform an accelerated milestone gate review as well as to review a number of the Privacy and Security processes of DHW with regards to the delivery of data file. As a result of this CMS visit, there were clear steps outlined for Privacy and Security for DHW and YHI to provide a number of document revisions in order to be able to receive the CMS data file. YHI will be holding a checkpoint demo on August 19th which will be open to CMS and any Committee or Board members wishing to participate. Testing efforts are continuing at a high level from a program perspective as well as E2E and UAT testing.

Some notable risks that the project has identified include the Federal data file. The team continues to pursue this, though there is not a clear indication that it will be received expediently. In a parallel path, the team is pursuing receipt of carrier information and performing consumer outreach. The second issue is regarding the Operations transition. Finally, Idaho's adequacy of progress to date in the lens of CMS is still unconfirmed. There are a set of milestones that CMS has defined as key elements to being a state based Marketplace and the team is focused on completing these milestones in the timeline requested.

Mr. Tauber reviewed the layout of the YHI Integrated Project Status and explained how to read it and left the Committee to review it on their own time. Ms. Geyer-Sylvia asked about the red data file delay with green following. Mr. Tauber said the team is tracking the eventual receipt of the data file, and that subsequent outreach activities can progress regardless of the receipt of those files as it is not clear what data will be provided and when. Director Armstrong had a phone call with the CMS and it was indicated that CMS would get back to him with an answer regarding data transfer within 2 days. Mr. Veloz asked if there was any legal action that Idaho could take. Director Armstrong mentioned that would not be possible, and that the path YHI is taking is the

most productive. Rep. Rusche further commented that, having dealt with CMS, there is no value in legal avenues as they would simply shut down. Mr. Shores inquired on training and the challenging timeline, and Mr. Tauber stated that the intention for training to be delivered is September and early October. The project team is working on accelerating that schedule, however that is dependent on the operating processes being fully defined. Ms. Gershick has had several discussions with CMS, and a scaled down training would not be possible if YHI is to minimize the impact of dual YHI and CMS trainings.

10. INTEGRATED TEST STATUS

Mr. Lam is a member of the Accenture team and is the E2E test lead. He will review the YHI Integrated Status report which summarizes the four core major areas of testing within the program including End to End testing, UAT (User Acceptance Testing), DHW System Testing and GI System Testing.

Mr. Lam described how the End to end Testing provides an overview of the testing approach which includes R0/R1, R2A, R2B, R2C and Blueprint testing. R0 and R1 execution has been completed for the agent portal and plan management and the pass rates are higher than expected. There were one critical and four high severity defects identified. Many defects, including critical defects, that have been logged on the Defect Summary Status are now resolved. The team continues to work on the R2A, non-financial, test scenarios and scripts with the reviews and approvals planned to be completed this week. Also, the Blueprint testing is the end scope of E2E testing with includes the test scenarios provided by CMS.

Mr. Lam suggested that the Committee members review the DHW Test Status and GetInsured Test Status and if there are any questions, he will take them back to the team for follow up.

Ms. Geyer-Sylvia questioned whether the end to end testing will be completed on the financial assistance Marketplace piece. Mr. Lam understands that this is a key component and the team is on track to finalize a plan this week to execute the week of August 25. Mr. Veloz asked for Mr. Lam to describe the six failed test scripts and Mr. Lam mentioned that they pertain to the loading of plans, and that these scripts have been resolved.

Mr. Tauber mentioned that this report is available weekly and it is not the team's intention to share the report in this much detail at every Marketplace Committee meeting.

11. POLICY DECISIONS

Ms. Gershick reviewed the Policy decisions that have been worked through by the Project Steering Team in July and August. The strategic decision for Marketplace recommendation and Board approval is #42 which states that the SHOP market maintain the current participation rate of 70%. Ms. Gershick discussed the tactical and operational decision on #48 made by the Project Steering Team regarding Employer and Employee choice. She also reviewed the remainder of the decision log regarding eligibility, enrollment and application, and the log IDs discussed were #'s 32,71,73,96,12,9,10,39,37,93,98 and 99.

Mr. Shores asked if a wife calls on an application on which the husband is the lead applicant, will she be able to make changes or inquire on the account. Mr. Kunz said that reasonable

judgment is used, and with a married couple operating together, DHW does their best to work with them as well as work with the agent of record authorized to do so. Discussion was held around a user creating multiple accounts, and Ms. Gershick will add this item as a priority for policy decisions for the coming year. Ms. Gershick and Director Armstrong explained that all changes and policy terminations need to be reported to the DHW, not the carrier, to ensure proper eligibility reporting as well as per system limitations. Per ACA guidance, life changes must be reported within 60 days. Mr. Srinivasan and Ms. Gershick will research if there are available reason codes to be able to cancel a policy directly with the carrier rather than cancellation occurring due to non-payment, and if not, this item will also be added to the policy decisions for next year. Ms. Gershick will remove the decisions # 96, 12, 9 and 6 from the Board review and will follow-up on these items with relation to determine availability of a reason code for termination, potential use of non-payment for terminations of whole families, and an alternative operational process.

Currently the carriers are working directly with the Treasury and CMS, and beginning January 1, Carriers will funnel this information through YHI. Discussion was held around the reconciliation process of the YHI data to the CMS and the financial risk to the carriers. Ms. Gershick mentioned that it is a requirement of a state-based exchange to send consolidated enrollments on behalf of the state rather than the CMS working with each Carrier, however she will take this back to the CMS team to research any alternative solutions. Ms. Gershick will remove # 39 from the Board review and will be incorporating it into the risk assessment profile.

During the mid to latter part of November, YHI will passively enroll all renewals in the case that they have not taken action. If they choose to make a plan change as of January 1, they will be eligible to choose a new plan prospectively and per special enrollment rules of the ACA and the 10-day look-back period of Idaho. Ms. Gershick mentioned also that if a customer has a health insurance plan with a standalone dental plan on the exchange, that the dental plan will be terminated automatically upon termination of the health plan.

12. DECISION SUPPORT

Ms. Zhao, Associated Project Manager from GetInsured, discussed plan selection and decision support with the goal being to share the research insights and rationale behind GetInsured's design of consumer decision support tools. Mr. Srinivasan explained that it would be risky to turn off the entire decision support mechanism or make a major change to the tool as there are a number of pages utilized in various parts of the application.

Ms. Zhao reviewed the genealogy of the user experience through a timeline which started in 2012 with a redesign in plan selection. Get Insured's approach is to prevent users from being overwhelmed, help users understand the cost of and coverage they care about most and help consumers narrow down their options.

Ms. Zhao explained how expense estimate works in the GetInsured design and how it is one of the most important factors to consumers as it helps consumers understand their bottom line, premium and out-of-pocket. The inspiration for their design came from many different sources. Users can provide information on doctor usage and prescription usage to estimate expenses. Responses are used to calculate the expense estimate, using precise plan cost detail provided by the carriers. She confirmed that the expense calculator is not to be used to predict your exact

spending for the year, rather to estimate the users' medical usage to compare plans and plan costs across the board. Ms. Geyer-Sylvia is concerned about some areas of the decision support filters and algorithms, and Mr. Srinivasan mentioned this is an evolving area of decision support and the team is happy to consider improvements and that all filtering that is done is performed by the consumer. All plans are listed, and it is the consumer who applies the filters to narrow down their search. Ms. Zhao mentioned that she would like to see a list of recommended improvements for GI to add to their pipeline.

Discussion was held around how many consumers drop off at the plan selection time with the GI's filtering tool. Mr. Srinivasan commented that people either completely stop proceeding with the application or they pick up the phone and call. The goal with enhancement of these tools is to ensure people do not drop off and continue with the plan selection using the online tool. Ms. Zhao commented that this tool is to assist consumers in sorting through the metal levels, rather than the carriers. Mr. Srinivasan confirmed that all of the plans are displayed to the user, the sorting is filtered by premium amount, and the expense estimator categorized plans into metal levels. Mr. Shores suggested that the Expense Estimator seems like a duplicate process, where in most cases, people will have gone thru the anonymous shopper and will see what sort of APTC will get and they know what plan they want. Ms. Zhao mentioned that it would be difficult to turn this feature off for this year because these questions are embedded in the flow. This would represent a substantial risk, however, the Chair suggested that Ms. Zhao follow up with the Accenture team and report back to the Committee regarding the risk analysis of turning off this Expense Estimator function. Mr. Srinivasan confirmed that a consumer can bypass the decision support and still actively shop for a plan.

Mr. Birhanzel provided a couple of observations. A selection process by the Board was held when GI was selected as the software vendor and what is being discussed today is out of the box functionality. Something to consider is whether the decision support has evolved from what the Committee or Board expected to see. In terms of evaluating the ability to turn the function off, Mr. Birhanzel would trust Mr. Srinivasan's response; however, it would be worth evaluating another method such as hiding this function on the software and auto push the consumer through the bypass.

Benefit Preferences

Ms. Zhao shared that as recommended by the PBGH study, GI can allow greater personalization by asking which additional benefits are important to users. Selected benefits are displayed on the plan tiles, and plans that do not include them are not filtered, nor does this affect the sorting. Ms. Zhao recommended adding additional preferences that are non-essential health benefits to this page to make it more specific to Idaho.

Filtering and Sorting

Ms. Zhao explained that filtering and sorting are important as a part of the customer decision support tool because they help narrow down options and also is more valuable as many consumers see this on most e-commerce sites. GetInsured has over 100 licensed agents across the country that are part of the consumer support team and are constantly validating the material within the software. Ms. Zhao explained that GI would like to do an Idaho usability study to add

more filters. At this point, the default sort is monthly cost. The Chair suggested that Mr. Birhanzel and the team converse more about the default sort.

Discussion was held around the positive aspect of the decision support and how the consumer may appreciate the decision support as they might find it very helpful. The purpose of YHI is to serve the consumers.

13. PRIVACY AND SECURITY UPDATE

Mr. Owen updated the Board on the Privacy and Security vendor update. An independent assessment of the security and privacy of the YHI solution is required for a State-Based Marketplace per CMS. The timeline is as follows:

- 8/1 – RFP released
- 8/8 – Proposals due to YHI
- 8/12 – Amendments due to YHI
- 8/14 – Proposal Evaluation Team (PET) review
- 8/19 – Marketplace Committee approval
- 8/20 – Board approval
- 8/25 – Targeted start date for the assessment

The next steps include the Marketplace Committee reviewing the PET recommendation for a motion to the Board regarding the contract award.

14. NEXT MEETING

The next Marketplace Committee meeting will be held on Tuesday, August 19 at Hawley Troxell at 8:00 am.

15. ADJOURN

There being no further business before the Committee, the Chair adjourned the meeting at 11:00 am.

Signed and respectfully submitted,



Mark Estess, Committee Chair