

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

**MARKETPLACE COMMITTEE  
MINUTES  
DECEMBER 10, 2015**

**1. COMMITTEE MEMBERS PRESENT**

- Mr. Fernando Veloz, Chair
- Ms. Zelda Geyer-Sylvia
- Mr. Tom Shores
- Ms. Candace Sweigart
- Ms. Janice Fulkerson
- Representative John Rusche
- Director Dick Armstrong
- Director Dean Cameron

**2. OTHERS PRESENT**

- Mr. Pat Kelly, Your Health Idaho
- Ms. Cheryl Fulton, Your Health Idaho
- Mr. Ethan Owen, Your Health Idaho
- Ms. Dana Packer, Your Health Idaho
- Ms. Jody Olson, Your Health Idaho
- Ms. Susan Scovel, Your Health Idaho
- Mr. Kevin Reddish, Your Health Idaho
- Ms. Frances Nagashima, Your Health Idaho
- Mr. Ryan Beckstead, Your Health Idaho
- Ms. Becky Webb, Get Insured
- Ms. Julie Hammon, DHW
- Mr. Greg Kunz, DHW
- Mr. Peter Sorensen, 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. Fernando Veloz, Chair of the Committee (Chair), at 1:10 p.m., Thursday, December 10, 2015, 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. Geyer-Sylvia, Ms. Sweigart, Ms. Fulkerson, and Director Cameron were present resulting in a quorum.

Mr. Shores arrived at 1:16 p.m., Director Armstrong arrived at 1:21 p.m., and Rep. Rusche arrived at 1:30 p.m.

#### **5. APPROVAL OF PRIOR MEETING MINUTES**

Motion: Ms. Sweigart moved to approve the meeting minutes from the September 8, 2015 Marketplace Committee meeting as presented.

Second: Ms. Fulkerson.

The motion carried.

#### **6. REVIEW OF AGENDA**

There were no changes made to the agenda.

#### **7. OPERATIONS UPDATE**

##### **(a) Dashboard**

Ms. Packer shared the Operations dashboard and starting in the upper left corner, presented a day-to-day comparison of website statistics from last year's to this year's open enrollment (November 15 to November 29). The overall decline in the web statistics is largely driven by the timing of open enrollment in 2015 vs 2014 (i.e. the Thanksgiving holiday). Ms. Packer said the next graph in the bottom left corner shows a breakdown of those individuals and households that have selected a plan on the exchange this year compared to last year. It also breaks it down further by carrier as well as the breakdown for dental. The enrollment numbers reflect where consumers have selected a plan in the YHI system. The numbers as of yesterday were 89,111 individuals' enrolled and 55,377 households which is an exciting increase over last year.

The call center and consumer support graph, in the bottom left corner, shows how YHI is servicing consumers and agents/brokers. This time last year, the call center logged 5,550 tickets and this year only 1,474 have been logged, resulting in a significant improvement. It is a good measurement of the result of how DHW and YHI have come together and empowered the call center staff as well as a result of the outreach and training for agents and brokers. If you compare it to the calls received there has been a decrease in tickets per call, which is a measure of how YHI is improving along with the ability to escalate to Tier 2 consumer support personnel. The call volume is also significantly down, however those levels are increasing as we approach the December 15 deadline.

Ms. Hammon said the call center experienced high call volumes last year during the extended time period. This year, the CSR's were provided with a much more robust training program. In addition, last year all renewals were manual, resulting in lots of consumer questions and

confusion. The process this year is much smoother and it has helped DHW staff get through the calls more quickly.

Mr. Shores said his firm is making more phone calls than they have ever made. He said the front line call center representatives don't have the information and can't answer the questions being asked of them. In the last few days, the call volume in the queue has been so high, that they've closed the phones down each afternoon. He is concerned about this because the deadline is coming up quickly.

Ms. Hammon said that the DHW call center staff are not eligibility specialists and only can answer general questions and agents are calling the DHW lines instead of the YHI lines. Mr. Shores said the wait times on both have been long and he is concerned that we will need to open a special enrollment for these consumers because the agents might not get the answers they need before the deadline. He added that last year, the email system worked well. Ms. Hammon said it is an area DHW is working to improve. Mr. Shores said this year, the return calls and emails are not coming and communication needs to be worked on.

Mr. Shores asked Ms. Packer how the enrollment numbers are being calculated because he said that about one out of ten consumers his agency serves have 3 or more accounts so worries that these numbers are highly inflated. Ms. Packer said the numbers represent each consumer that has selected a plan within the YHI system so the numbers are not affected by people with multiple accounts.

The Chair asked about the abandonment rate and asked what YHI is doing to mitigate that. Ms. Hammon said the abandonment rate represents all calls that come into the call center that do not end up speaking to a representative. They may hang up before they even get through the system for one reason or another. It also includes those that decide to go into the hold pattern and then hang up before they reach a representative. This number is being monitored very closely to see where changes might be made to lower the rate.

### **(b) Consumer Experience**

Ms. Packer moved on to the consumer experience and shared information about renewals and reconciliations. She said that the automation of renewals has helped tremendously with 76% of renewals accomplished through automation and the massive effort of staff to push through the other 24% manually. YHI has identified the reasons the 24% were not triggered to auto renew. Those reasons include duplicate accounts and enrollments, reinstatements, incomplete reconciliation files and incomplete 834 confirmations of effectuations. She said the team is performing checks and balances within the systems and with the carriers to make sure no one falls through the cracks. The team is also identifying the gaps to make sure it doesn't happen again next year.

For notices, Ms. Hammon said there were several meetings to coordinate timing, language used, and to make sure duplication wasn't occurring. Tax credit info was moved to the top and the language was changed to be more easily understood. She said the Idalink account for the agents has also been helpful and has eliminated some of the need to call in with questions.

Ms. Geyer-Sylvia asked if all consumers had to be tied to an agent or broker and wondered how all of that connects. Ms. Packer said within the YHI system, agents are assigned to all consumers, and then reconciled with the carriers for agent commissions.

Ms. Packer said as of the 30<sup>th</sup>, YHI had received 530 appeals. Out of that, almost all were resolved through an informal process and only four went to the appeal board for resolution.

## **8. IT UPDATE**

Mr. Owen reviewed the last year and said release 3.0 was the last major release before open enrollment. There were 444 requirements of which 93% were released, with the remaining 7% planned for release in January. There were some challenges with linking and defects pertaining to the access codes and agent portal which were addressed immediately. Another release is coming up resulting from the risks associated with 1095's. Ms. Geyer-Sylvia said the 1095 process is really important and asked if there will be quality checking prior to these going out. Mr. Owen said the system can handle some of the minor corrections such as lines not printing, incorrect addresses and formatting issues. There are some more complicated issues that will require reconciliations between the Carrier, DHW and YHI. Ms. Packer added that YHI is focusing on the top 3 carriers to do a massive audit/reconciliation/comparative to ensure that the right information is in the system. Ms. Geyer-Sylvia suggested a higher level of quality control before 1095's are sent out like spot checking or random sampling, something to give YHI assurance that this will work properly and not leave YHI vulnerable to consumer anxiety.

Mr. Owen continued with the 2016 roadmap and said YHI is way ahead this year, compared to last year, in relation to its roadmap. YHI is more business as usual through this open enrollment, but grant funding is leveling out so it is important to ensure the most urgent items are on the list.

YHI is tentatively planning 3 major releases next year, the first in March, the second in the May/June timeframe that will focus on carrier related issues, and the last one prior to open enrollment. YHI is exploring several interrelated changes in 2016, and as such unscheduled, including SEP automation in the system for which the timing is contingent on policy level reporting and other reporting requirement changes from CMS, passing the event type from DHW to GI, and changes to the High-Dated APTC reporting from DHW to GI. How much of this YHI can afford to fix will be determined over the next 4-6 weeks.

Rep. Rusche said in past years there have been requests from certain legislators to add capabilities to the system and suspects there will likely be similar requests this year. There may be great ideas out of these requests and they should be looked at. Ms. Geyer-Sylvia agreed and said one of the enhancements might be a total cost-of-care decision making process as she believes comparison shopping will become standard in the exchange industry. Mr. Kelly added that one of the items talked about around this is a third party plug-in that may free up options.

Mr. Owen said the release in January is specifically around 1095's and some requirements that spilled over from 3.0. YHI is cautiously optimistic that from a technology perspective, it will work well for the 1095's.

Mr. Owen added that Accenture is rolling off from their testing capacity. They have been incredibly helpful and added significant value. At the same time YHI didn't want to rely on them

for everything so YHI decided to taper these resources off early which allowed team members to learn while having Accenture to fall back on as needed. The challenge for YHI moving forward will be in assessing the risk and monitoring GI from a risk mitigation standpoint. Next year YHI will need a more robust user acceptance testing plan and will need to get things done earlier to allow time to test. This is still being defined, but is important to think about now to mitigate risk.

**(a) MARS-e RFP**

Mr. Owen explained that YHI is required to have an Authority to Operate (ATO) in order to function as an exchange. In order to obtain an ATO, YHI must complete an Authority to Connect (ATC) package with the Federal government. One component of the ATC package is an assessment of GetInsured called a Security Assessment Report (SAR). The SAR requires independent, third-party assessment of the control framework required of GetInsured, called MARS-E (Minimum Acceptable Risk Standards for Exchanges). MARS-E is undergoing a change from v1.0 to v2.0, and as such YHI must have an additional assessment per CMS requirements. This assessment will also be used by YHI leadership to continue to assess GI's security posture and to protect Idahoans' data. Of course, there is a cost associated with this and YHI created this RFP to help determine what those ongoing costs might be.

Rep. Rusche asked if this is a grant eligible cost or an operating cost. Mr. Kelly said this would be considered an establishment activity so it is covered under the grant dollars.

Motion: Rep. Rusche moved that the Marketplace Committee recommend to the Board that the Board authorize the Marketplace Committee to 1) conduct an RFP for a MARS-E v2.0 Security Assessment Report (SAR) services, 2) establish a Proposal Evaluation Team (PET) to evaluate the responses to the RFP, and 3) accept the recommendations of the PET; and that upon such acceptance the Executive Director and the Chair of the Marketplace Committee may negotiate and execute the contract with an amount not to exceed \$100,000.

Second: Ms. Sweigart.

The motion carried.

Ms. Geyer-Sylvia asked if there was more we could do in this RFP to use establishment funds this year and lessen the cost for future years. Ms. Geyer-Sylvia said YHI should frontload this process to save money in the long run. Mr. Owen agreed and said that is how this RFP is set up.

**(b) IV&V Extension**

Mr. Owen said IV&V is a requirement of YHI's ability to use CMS grant funds. First Data oversees and reviews the activities to ensure we are using the grant funds appropriately as well as identifying risks and issues from an independent point of view. YHI and First Data have focused efforts to close out all CMS IV&V requirements within the current contract period but have three remaining items that are related to the last release.

Due to these remaining requirements, YHI is asking to extend the First Data contract until February 28, 2016 on a time and materials basis, as opposed to the current fixed pricing contract, and in an amount not to exceed \$25,000.

Motion: Rep. Rusche moved that the Marketplace Committee, recommend to the Board, to extend the First Data contract, on a Time and Materials basis, through February 29, 2016 in an amount not to exceed \$25,000 which funds are included in the approved FY16 budget.

Second: Ms. Fulkerson.

The motion carried.

#### **10. PMO UPDATE**

Mr. Kelly reminded the Committee that earlier this year, YHI engaged with a PMO Contractor to manage much of what Accenture had been managing up until that point. This was done in an effort to control costs, enable the roll-off of some of the Accenture resources and was envisioned as a position that would transition in house in some fashion that would suit YHI's needs and budget. Mr. Vanderbilt was contracted in the PMO role at that time and in anticipation of Mr. Vanderbilt rolling off later in the year, YHI also engaged Kristina Eidemiller who will carry on these work streams when Mr. Vanderbilt rolls off next week.

#### **11. EXECUTIVE SESSION**

Motion: The Chair moved that the Committee enter into Executive Session pursuant to Idaho Code Section 74-206 (1), the Committee will convene in Executive Session to consider records that are exempt from disclosure, including those documents covered under Your Health Idaho's Privacy and Security policies and public records policy pursuant to Idaho Code Section § 74-206 (1)(d).

Executive Session Roll Call: Mr. Veloz called the roll and determined that the Chair, Mr. Shores, Ms. Sweigart, Ms. Geyer-Sylvia, Ms. Fulkerson, and Representative Rusche were present resulting in a quorum.

The Committee entered into Executive Session at 2:25 p.m. and reconvened at 2:53 p.m. The Committee took no final actions nor made any final decisions while in Executive Session.

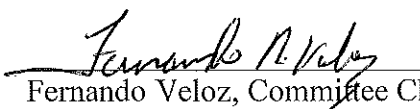
#### **13. NEXT MEETING**

The next meeting will be held in early to mid-March, 2016. Ms. Fulton will conduct a poll to determine the exact date and time.

#### **14. ADJOURN**

There being no further business before the Committee, the Chair adjourned the meeting at 2:55 p.m.

Signed and respectfully submitted,

  
Fernando Veloz, Committee Chair