

Plan Management Stakeholder Committee

September 6, 2018





Welcome and Introductions

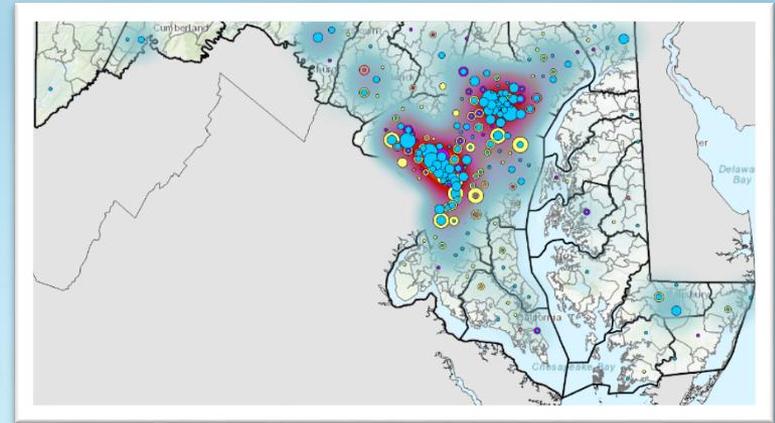
A service of Maryland Health Benefit Exchange

Meeting Minutes Approval

Committee Feedback

Uninsured Persons by Zip Code

Presentation to MHBE Senior Leadership – July 30, 2018



Age	LCBP	150% FPL	200% FPL	225% FPL	250% FPL	300% FPL	350% FPL	400% FPL
18	224.56	A	A	A&P	A&P	0	0	0
19	231.45	A	A	A&P	A&P	0	0	0
20	238.58	A	A	A	A&P	0	0	0
21	245.96	A	A	A	A&P	0	0	0
22	245.96	A	A	A	A&P	0	0	0
23	245.96	A	A	A	A&P	0	0	0
24	245.96	A	A	A	A&P	0	0	0
25	246.94	A	A	A	A&P	0	0	0
26	251.86	A	A	A	A&P	0	0	0
27	257.77	A	A	A	A&P	0	0	0
28	267.36	A	A	A	A&P	0	0	0
29	275.23	A	A	A	A&P	0	0	0
30	279.16	A	A	A	A&P	0	0	0
31	285.07	A	A	A	A&P	0	0	0
32	290.97	A	A	A	A&P	0	0	0
33	294.66	A	A	A	A&P	0	0	0
34	298.60	A	A	A	A&P	0	0	0
35	300.56	A	A	A	A	0	0	0
36	302.53	A	A	A	A	0	0	0
37	304.5	A	A	A	A	0	0	0
38	306.47	A	A	A	A	0	0	0
39	310.4	A	A	A	A	0	0	0
40	314.34	A	A	A	A	0	0	0
41	320.24	A	A	A	A	0	0	0
42	325.90	A	A	A	A	0	0	0
43	333.77	A	A	A	A	0	0	0
44	343.61	A	A	A	A	A&P	0	0
45	355.17	A	A	A	A	A&P	0	0
46	368.94	A	A	A	A	A&P	0	0
47	384.44	A	A	A	A	A&P	0	0
48	402.14	A	A	A	A	A&P	A&P	0
49	419.61	A	A	A	A	A&P	A&P	0
50	439.28	A	A	A	A	A	A&P	0
51	458.72	A	A	A	A	A	A&P	A&P
52	480.11	A	A	A	A	A	A&P	A&P
53	501.76	A	A	A	A	A	A	A&P
54	525.12	A	A	A	A	A	A	A&P
55	548.49	A	A	A	A	A	A	A&P
56	573.82	A	A	A	A	A	A	A
57	599.40	A	A	A	A	A	A	A
58	626.71	A	A	A	A	A	A	A
59	640.23	A	A	A	A	A	A	A
60	667.54	A	A	A	A	A	A	A
61	691.15	A	A	A	A	A	A	A
62	706.64	A	A	A	A	A	A	A
63	726.07	A	A	A	A	A	A	A
64+	737.88	A	A	A	A	A	A	A

Stan Dorn of Families USA completed analysis of ACS data and identified consumers that would be able to enroll in insurance coverage for no more than their APTC plus the penalty amount. This table shows the availability of lowest-cost bronze plans, broken down by age and percent FPL.

Note: This geographic group includes Anne Arundel County, Baltimore City, Baltimore County, Carroll County, Harford County, Howard County, Montgomery County, Prince George's County, and portions of Calvert County, Charles County, and Frederick County. LCBP=monthly premium for lowest-cost bronze plan. A=such premium can be paid by the consumer's APTC amount alone, as shown in table 4. A&P=such premium can be paid by the consumer's APTC plus penalty amounts, as shown in table 6. 0=LCBP premium exceeds the consumer's monthly APTC plus penalty amount.

Purpose of GIS Analysis: To visually represent areas within MD with high number of Uninsured persons



Data was sourced from:

- American Community Survey for 2012-2016, dataset “HEALTH INSURANCE COVERAGE BY RATIO OF INCOME TO POVERTY LEVEL IN THE PAST 12 MONTHS BY AGE”
- Internal Revenue Service dataset “MD Individual Shared Responsibility Payments 2015 (most recent data)”

Software utilized:

- ArcGIS Desktop
- Excel

Areas of high need were identified throughout Maryland (more than 1,000 uninsured persons per zip code):

In particular, Prince George's County, Montgomery County, Baltimore County, and Baltimore City have zip codes with a high number of uninsured persons.

<https://www.marylandhbe.com/news-and-resources/maps/>

NOTE: Partial table displayed, full table available in the report on MHBE's website.

Zip Code	City	County	Total	Adjusted Total	Alternate Adj. Total
20783	Hyattsville	Prince Georges	16735	1,843.20	9,242.00
20906	Silver Spring	Montgomery	9966	2,769.60	6,104.21
20902	Silver Spring	Montgomery	9027	2,416.80	5,496.09
21224	Baltimore	Baltimore City	7755	2,974.40	5,044.18
21215	Baltimore	Baltimore City	6200	4,098.40	4,650.58
20877	Gaithersburg	Montgomery	7382	1,648.00	4,376.60
20904	Silver Spring	Montgomery	6379	2,885.60	4,306.81
20782	Hyattsville	Prince Georges	7111	1,600.80	4,220.71
21061	Glen Burnie	Anne Arundel	5946	3,086.40	4,156.92
20903	Silver Spring	Montgomery	6918	1,060.80	3,927.83
20706	Lanham	Prince Georges	5669	2,425.60	3,777.60
21740	Hagerstown	Washington	4857	3,371.20	3,700.87
20874	Germantown	Montgomery	5491	2,386.40	3,672.26
20744	Fort Washington	Prince Georges	5245	2,727.20	3,668.52
21234	Parkville	Baltimore	4869	3,170.40	3,634.91
21222	Dundalk	Baltimore	4809	3,187.20	3,610.18
20784	Hyattsville	Prince Georges	5330	1,911.20	3,419.06
20737	Riverdale	Prince Georges	5761	1,072.00	3,338.66
20745	Oxon Hill	Prince Georges	4951	2,065.60	3,280.19
21221	Essex	Baltimore	4413	2,812.80	3,272.69
21117	Owings Mills	Baltimore	4680	2,107.20	3,156.19
21229	Baltimore	Baltimore City	3877	2,885.60	3,024.03
20785	Hyattsville	Prince Georges	4376	2,106.40	3,000.04
21207	Gwynn Oak	Baltimore	4103	2,424.00	2,974.13
20743	Capitol Heights	Prince Georges	4084	2,409.60	2,959.22
21218	Baltimore	Baltimore City	3782	2,596.80	2,871.61
21220	Middle River	Baltimore	3937	2,371.20	2,870.06
21217	Baltimore	Baltimore City	3713	2,670.40	2,862.66
20901	Silver Spring	Montgomery	4409	1,540.80	2,813.84
21225	Brooklyn	Baltimore City	3716	2,172.80	2,685.50
20747	District Heights	Prince Georges	3631	2,161.60	2,637.90
20886	Montgomery Village	Montgomery	4223	1,225.60	2,605.28



The maps in this analysis display the age range of 18-64 years old since individuals within this range are the primary audience for the Maryland Health Benefit Exchange.

A StoryMap web mapping application has been created to allow for interactive presentation of the analysis:

<https://arcg.is/1KjCXq>

Conclusions

Overall, this data presentation, in conjunction with the Families USA report, should allow for the Maryland Health Benefit Exchange, MHBE partners, or connector entities to identify “hot spots” of uninsured Marylanders who qualify for low to no cost premium plans via the Health Exchange. This map package has been published via MD iMAP, the ArcGIS portal for the State of Maryland and made available for use via ArcGIS Online for any interested party within MHBE, MHBE partners or stakeholders, or the State.

Contact MHBE Policy Unit: MHBE.policy@Maryland.gov

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Plan Certification Status

Plan Management Updates



Enrollees currently in a Stand Alone Dental Plan (SADP) through Maryland Health Connection will be automatically renewed in a plan for 2019

- ✘ MHBE on track to receive active enrollment lists from participating dental carriers
- ✘ Weekly touchpoint calls established to walk through testing and renewals process
- ✘ Member level reports will also be leveraged to ensure active members are identified and to assist enrollment efforts throughout the year
- ✘ Messaging included in Open Enrollment notices to enrollees



Non Exchange Entity Agreement (NEEA)

The NEEA requires any Non Exchange Entity to bind any downstream entities to the same security and privacy standards and obligations pursuant to the Carrier Business Agreement

- ✦ Confidentiality
- ✦ Privacy
- ✦ Security of data accessed by carriers or exchanged between carriers and MHBE



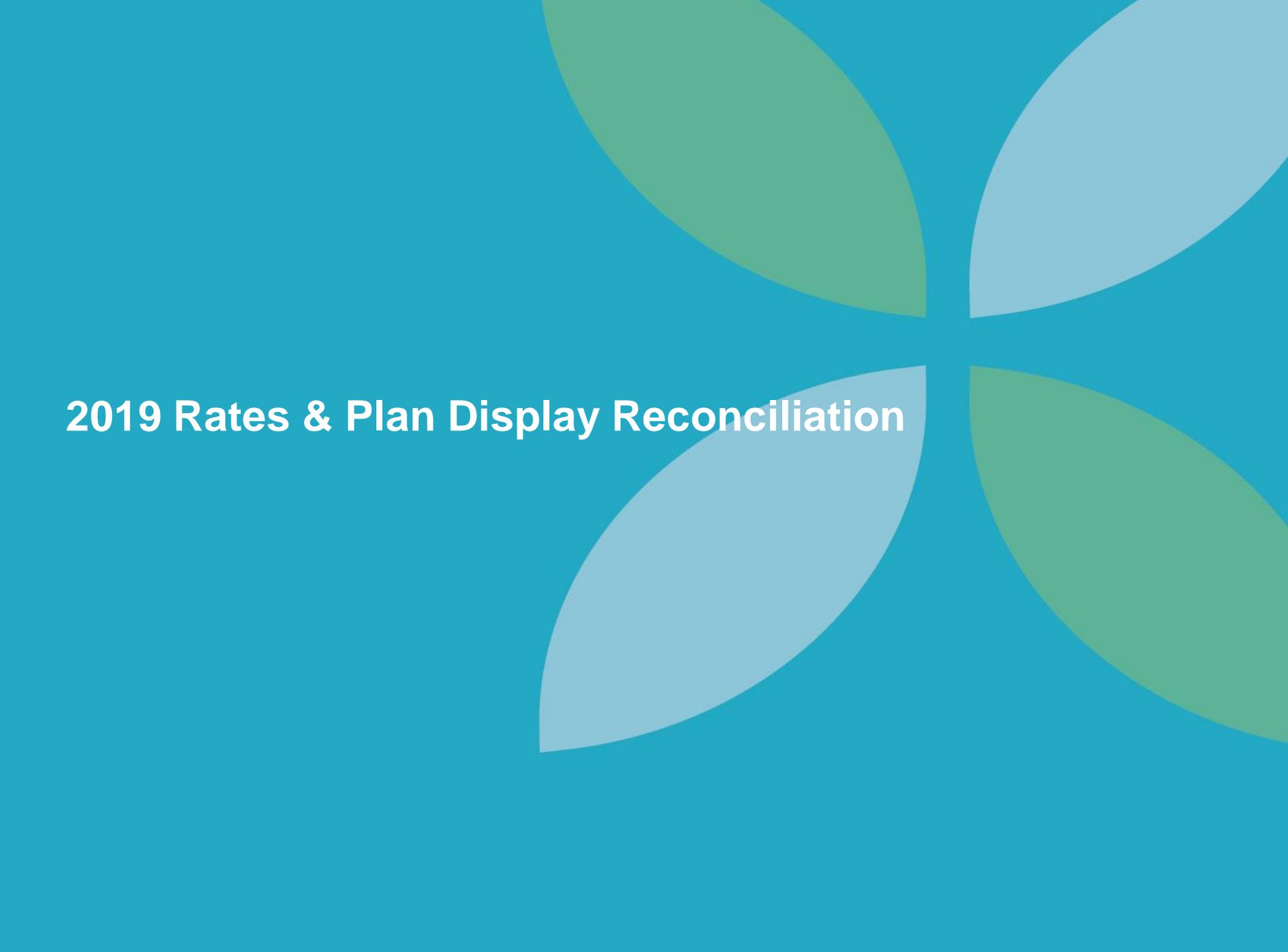
New Points:

- ✦ Capture all of the PII data elements MHBE transmits to carriers.
- ✦ MHBE authorizes Non Exchange Entity to sell QHPs and provide enrollment services pursuant to Carrier Business Agreement.

“Meaningful changes” to the NEEA are on page one. A redlined copy will be sent along with revised NEEA.

Review and Sign off should be completed before January 1, 2019

- ✦ Carriers will have 30 days for review by counsel.
- ✦ Consecutive 30 day period begins after completion of counsel review. This period is provided for additional feedback, review, and edits before effectuation.



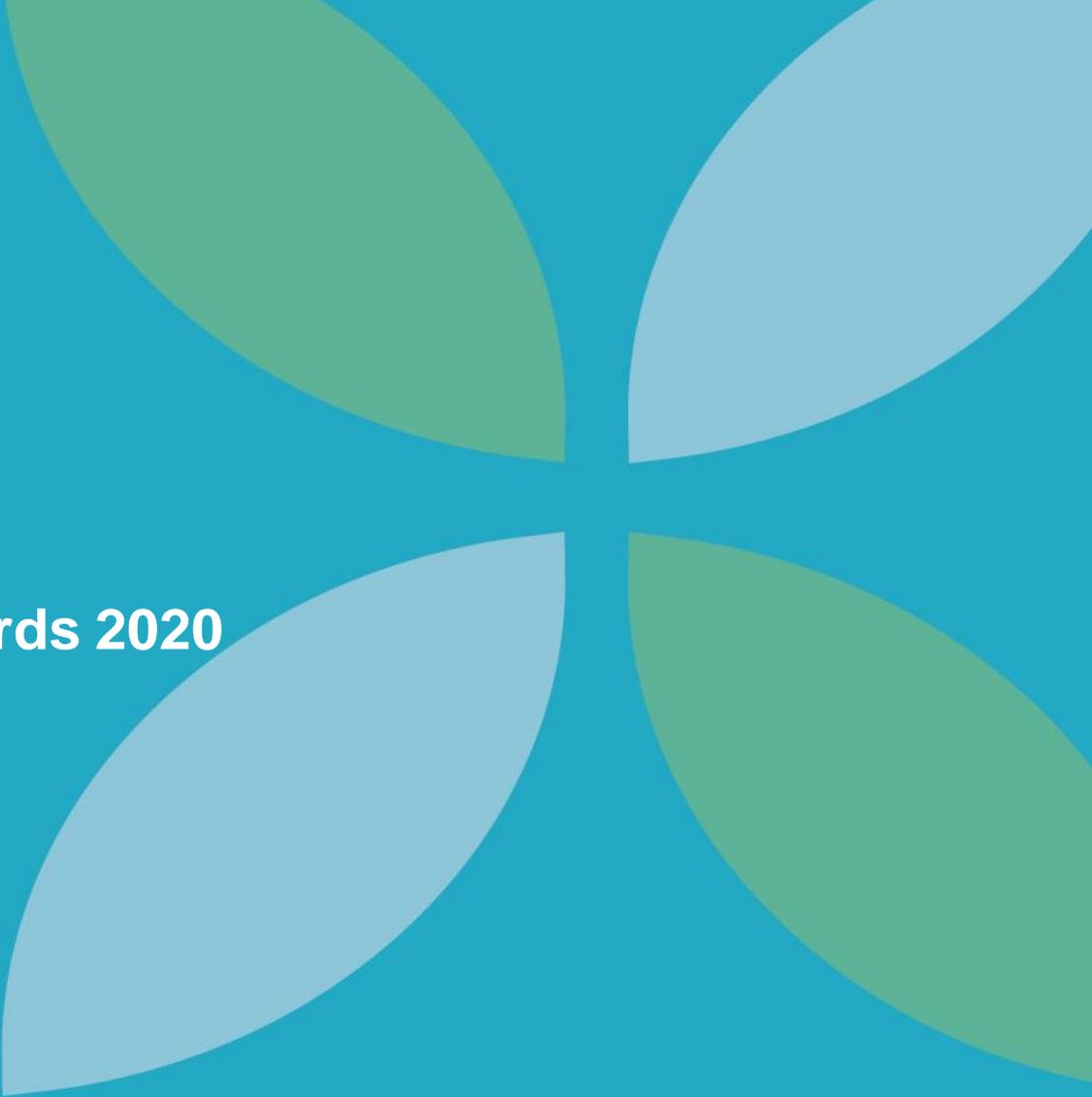
2019 Rates & Plan Display Reconciliation

New rates are expected to be filed with MIA due to CMS approval of Maryland's 1332 waiver application

- ✦ Rate hearing at MIA scheduled for September 17th.
- ✦ Rate approval by MIA expected from September 18 – 21.

MHBE will complete process of loading plans and new rates upon MIA approval of new rates. MHBE will work closely with carriers to ensure extracts display clean, accurate data due to the narrow window between rate approval and carrier sign off.

- ✦ Plan loading into production with new rates expected by September 21st.
- ✦ Carriers will have a chance to review plans with new rates and sign off dependent on the MIA's rate decision timeline.



Plan Certification Standards 2020

Policy Priorities for 2020

- ✘ Administrative burden reduction
- ✘ Out of pocket cost relief
- ✘ Maximizing advance premium tax credits (APTC) purchasing power and unsubsidized affordability
- ✘ Essential Community Providers (ECPs) petition process and list verification

MHBE welcomes stakeholder engagement and advocacy on other policy priorities not reflected above.

2020 Plan Certification Standards Stakeholder Input Timeline



- ✘ **September 13, 2018**
 - Draft 2020 Plan Certification Standards Released to Stakeholders.

- ✘ **September 19, 2018**
 - Stakeholder Session I
 - 9am-5pm (30 minute sessions)

- ✘ **September 20, 2018**
 - Stakeholder Session II
 - 9am-5pm (30 minute sessions)

- ✘ **September 21, 2018**
 - Stakeholder Session III
 - 9am-5pm (30 minute sessions)

- ✘ **September 25, 2018**
 - Stakeholder Session IV
 - 9am-5pm (30 minute sessions)

- ✘ **September 27, 2018**
 - Stakeholder Session V
 - 9am-5pm (30 minute sessions)

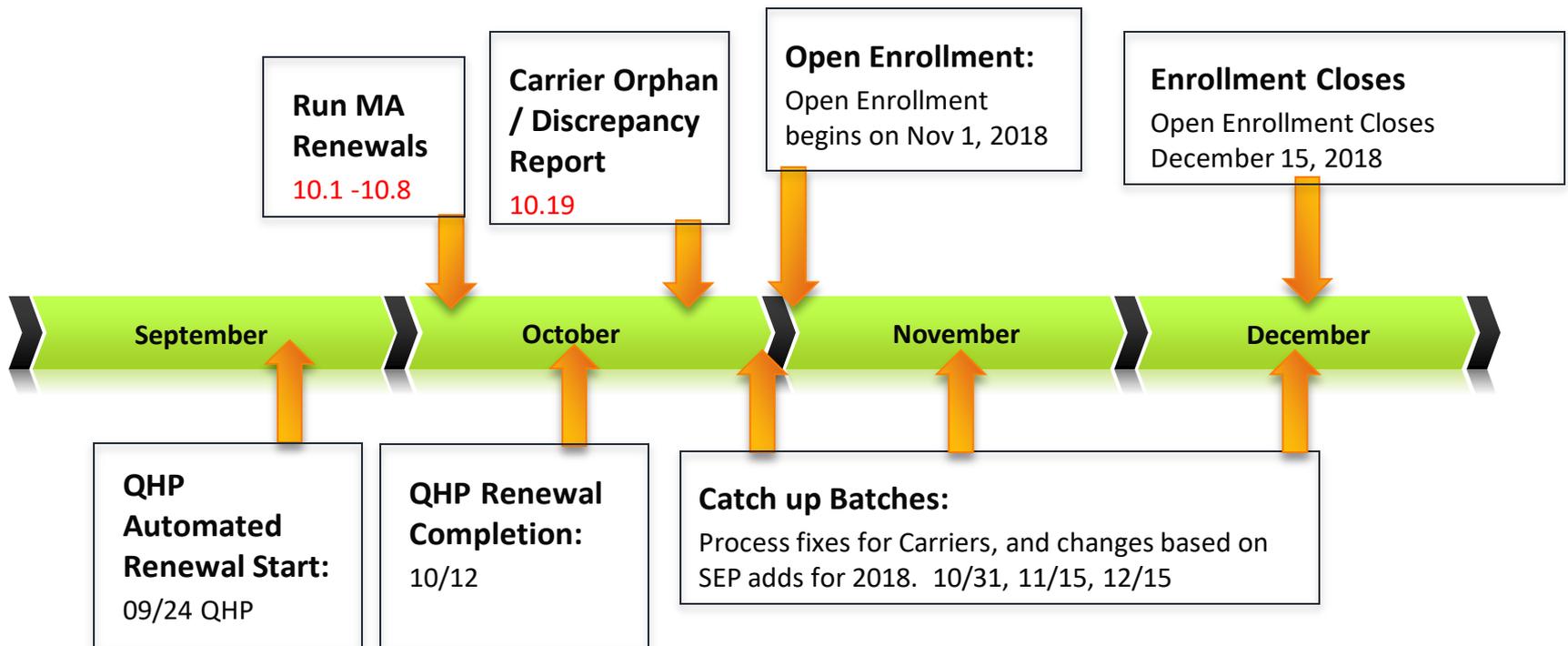
- ✘ **October 1, 2018**
 - Final day for stakeholder input

- ✘ **October 15, 2018**
 - MHBE Board of Trustees Meeting

Updates from MHBE IT

September 6, 2018

2018 Automated Renewals Execution Plan





**CONSUMER ASSISTANCE WORKERS:
OPEN ENROLLMENT 6**

Training efforts are underway for all consumer assistance workers. Modules have been revised to capture policy changes at State and Federal levels.

- ✦ Consumer assistance workers (CAWs) are currently reviewing training modules.
- ✦ Testing for CAWs will begin on September 12th.
- ✦ Call center staff will begin testing on September 5th.

Producer Operations



Updates from Producer Operations

- ✦ 480 participating producers
- ✦ 40 Brokers anticipated to participate in BATPhone during OE6
- ✦ Annual Training underway
- ✦ Producers are currently using Learning Management System (LMS) for training and credentialing



Consolidated Service Center

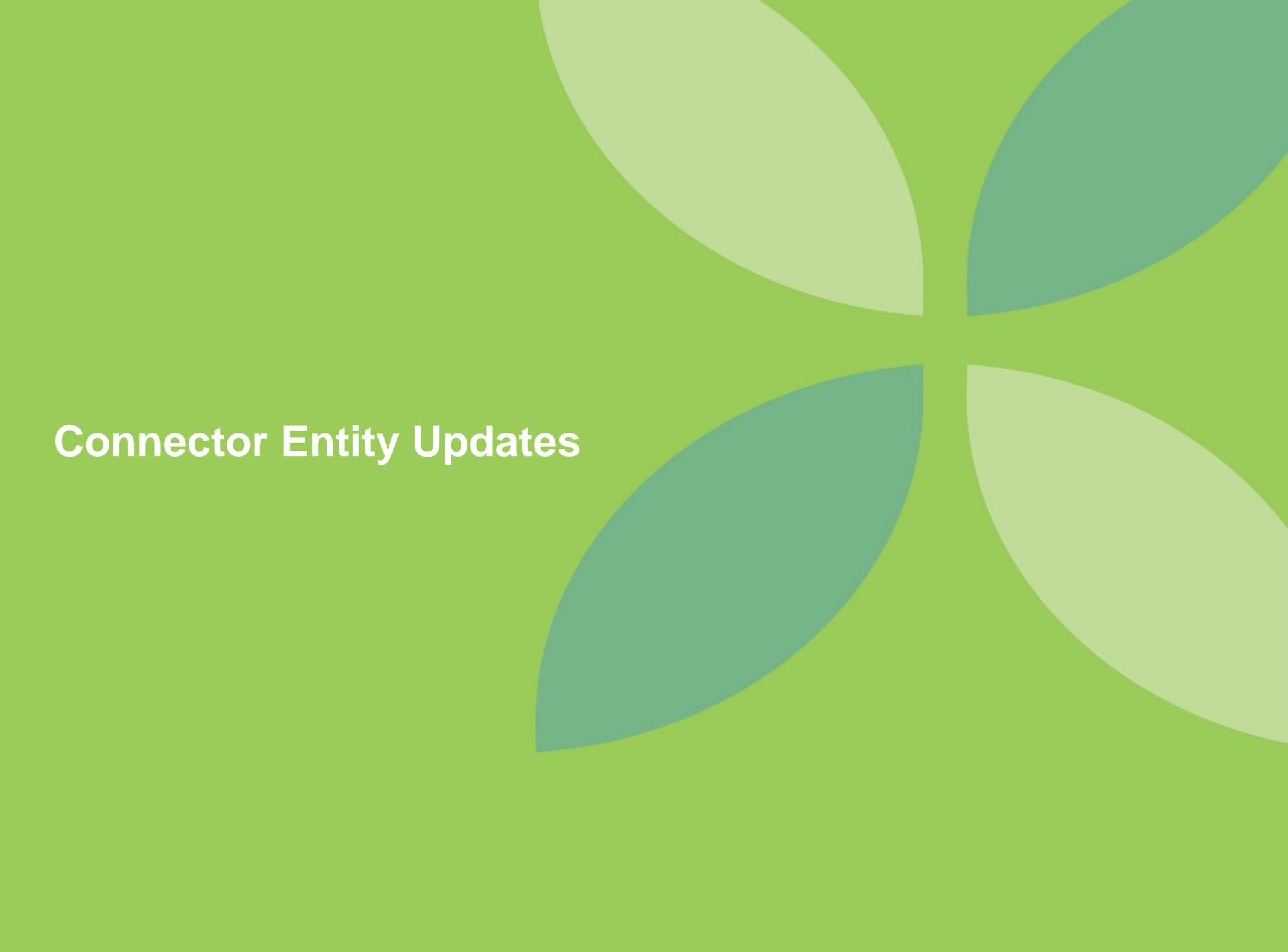
- ✦ Implemented CTI (computer telephony integration) to improve call handle time.
- ✦ Currently hiring-ramp up staff to approximately 285 customer service reps.
- ✦ Finalizing updates to IVR messaging and call flow.

Escalations Team



- ✘ Updated reporting capacity for sharper insight (captured by daily reporting, deployed monthly closed cases report).
- ✘ Filling out staffing for MHBE team-gives more stability during peak season.
- ✘ Data collection deployment which syncs up EDI with escalated cases and allows for quicker enrollment fixes.

Connector Entity Updates



What You Need to Know

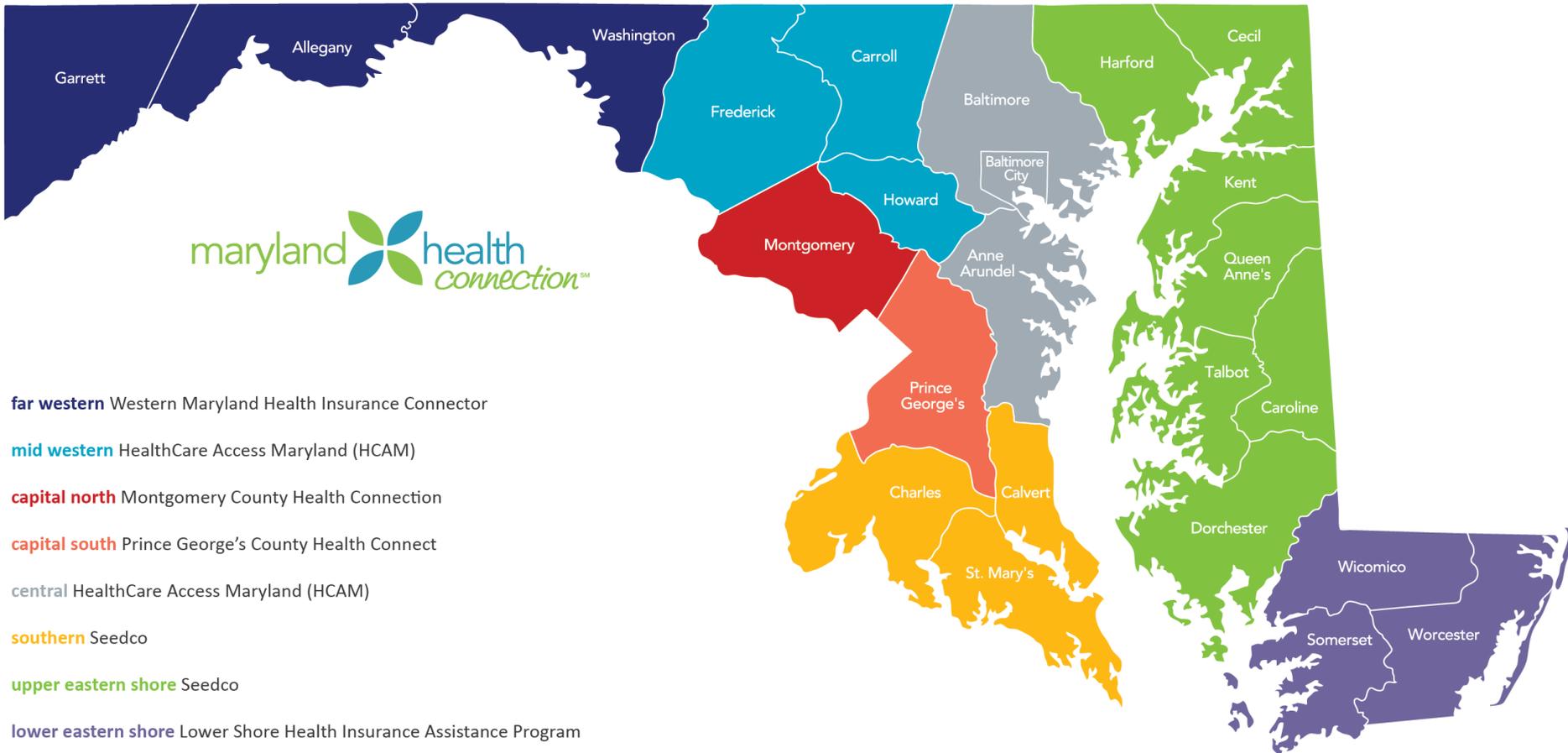
- ✦ Maryland is a state-based marketplace and was not impacted by the recent reduction for the federal navigator program.

Each Consumer Assistance Program has their own phone number and web page

MARYLAND HEALTH CONNECTION CONSUMER ASSISTANCE ORGANIZATIONS

Region	Counties Served	Entity Name	Phone and Website	# Navigators during OE
FAR WEST	Garrett, Allegany, Washington	Western Maryland Health Insurance Connector	Call 1-888-202-0212 or visit www.wmdhealthconnect.org	13
CENTRAL	Baltimore City, Baltimore County, Anne Arundel	HealthCare Access Maryland	Call 410-500-4710 or visit www.healthcareaccessmaryland.org	40
MIDWEST	Frederick, Carroll, Howard	HealthCare Access Maryland	Call 410-500-4710 or visit www.healthcareaccessmaryland.org	14
LOWER SHORE	Wicomico, Somerset, Worcester	Lower Shore Health Insurance Assistance Program	Call 1-855-445-5540 or visit lowershorehealth.org	9
MONTGOMERY	Montgomery	Montgomery County Health Connection	Call 240-777-1815 or visit www.montgomeryhealthconnection.org	20
PRINCE GEORGE'S	Prince George's	Prince George's County Health Connect	Call 301-927-4500 or visit www.PGchealthconnect.org	27
UPPER SHORE	Harford, Cecil, Kent, Queen Anne's, Talbot, Caroline, and Dorchester	Seedco	Call 1-866-492-6057 or visit www.SEEDCO.org/affordable-health-care-maryland	15
SOUTHERN	Calvert, Charles, and St. Mary's	Seedco	Call 1-855-339-3007 or visit www.SEEDCO.org/affordable-health-care-maryland	6
				144 total

Consumer Assistance Regions



Navigators from across the state will be participating at the two statewide enrollment events

Beat the Rush: November 10-11, 2018

Last Chance: December 8-9, 2018

NOVEMBER						
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

DECEMBER						
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29

- Open and close of OE
- Statewide events
- Holidays (Including Election Day – November 6)



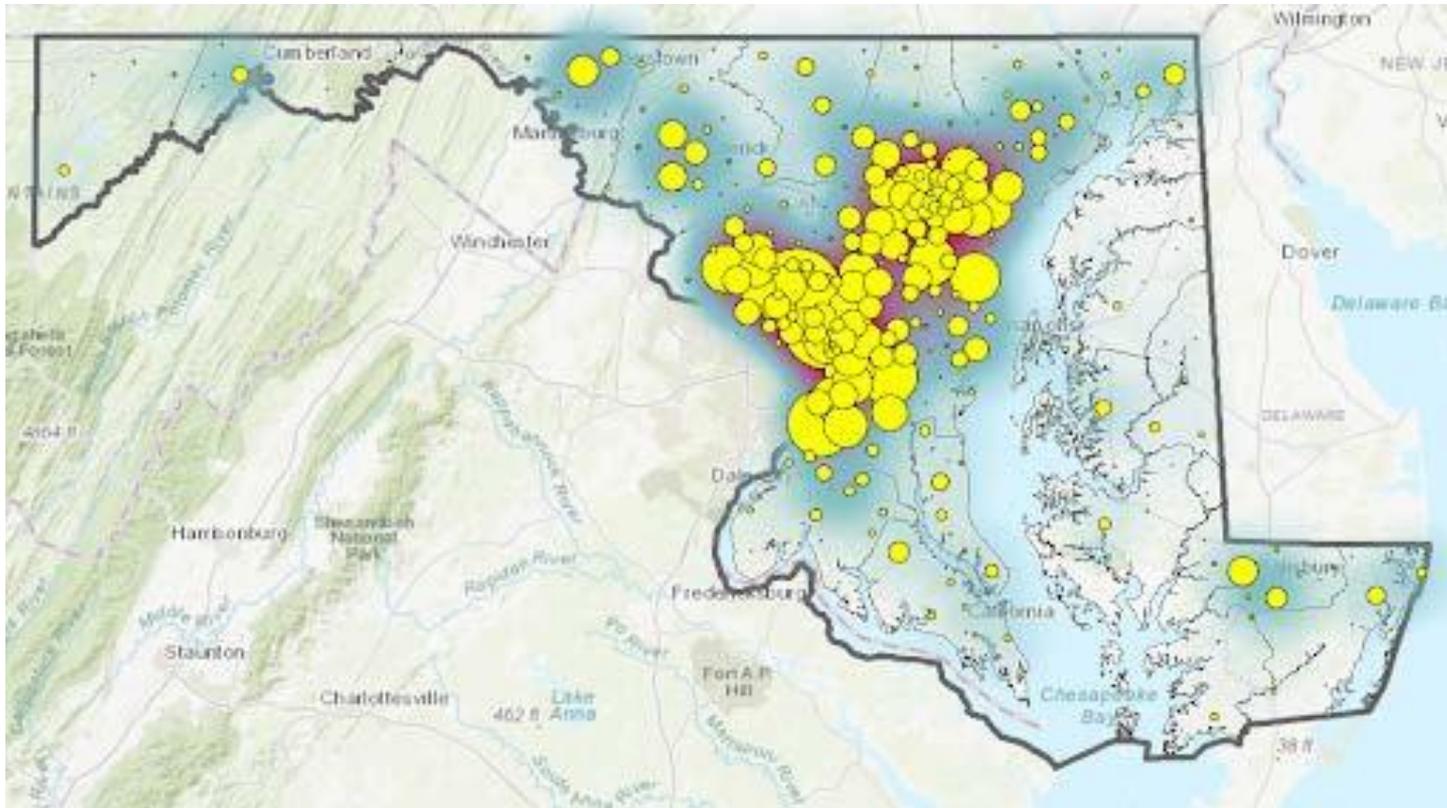
Marketing and Outreach Plan **Open Enrollment 6**

A service of Maryland Health Benefit Exchange

What are our priorities?

- ✘ **Increase enrollment in Qualified Health Plans** – particularly among African American, Latino, and young adult Marylanders.
- ✘ **Continue to implement targeted outreach** to hard-to-reach uninsured populations.
- ✘ **Increase understanding of the value of Maryland Health Connection** as a one-stop shop with comprehensive, quality coverage.
- ✘ **Increase awareness of and enrollment in SHOP.**

Initial Analysis: ACS x IRS DATA



*Shading = IRS uninsured data; Dots = American Community Survey uninsured data
Specific to 138-399% FPL*

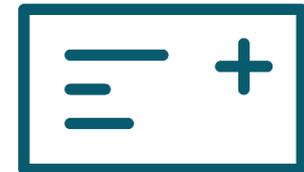
We can't forget to factor in...



Election Day
November 6



No Tax Penalty



Rates
Plan Options
Short-Term Plans

The Work Ahead



Our Work

- ✦ Strategy
- ✦ Advertising Creative + Market Research
- ✦ Online Marketing/Digital Design
- ✦ Social Media
- ✦ Outreach
- ✦ Collateral
- ✦ UX Testing/Design

To further hone our insights...

40 In-Depth Interviews with Uninsured Marylanders

- ✘ Focus on target audiences including small business owners and self-employed Marylanders
- ✘ Mix of urban and rural audiences; include Hispanic, African American and Young Adult Marylanders
- ✘ Spanish-language interviews available

Key Areas of Research

- ✘ Explore beliefs and attitudes about health insurance that prevent or discourage enrollment
- ✘ Assess MHC available enrollment information and the enrollment process
- ✘ Conduct campaign message testing and content delivery testing of outreach materials, including in-person assistance and financial help
- ✘ Investigate the health insurance decision-making process for uninsured small business owners and the self-employed

Testing and Design

Research will help us understand **real-time usage and behavior**, testing will cover natural behavior and administer some guided tasks to review users' experience with specific areas of the website.

- ✦ **Observe 10 Marylanders** going through the plan preview and plan selection process. At least two of the participants will be observed on a mobile application.
- ✦ Findings will be used to **update and refine** website to provide a clear and informative user experience.



Telling the Maryland Health Connection Story

✦ Pre-Open Enrollment

- Communicating success
- Coordinating editorial board meetings
- Educating small business community about SHOP

✦ During Open Enrollment

- Demystifying the enrollment process
- Driving the deadline

✦ Post-Open Enrollment

- Share success; stories
- Coordinating regional forums

MHBE as Convener

- ✦ Establish partnerships with leadership organizations/individuals that have a presence across high-need areas in the state.
 - Enable a trickle-down strategy to allow consumer assistance organizations to make local connections.
- ✦ Focus on key areas, including:
 - Faith community – convene faith leaders
 - Small business community – engage brokers and small business owners; individuals in tech/gig economy/co-work spaces, etc.
 - Schools
 - Housing
 - Influencers – including mommy bloggers, fitness leaders, etc.
- ✦ Foster other existing partnerships

Events and Resources

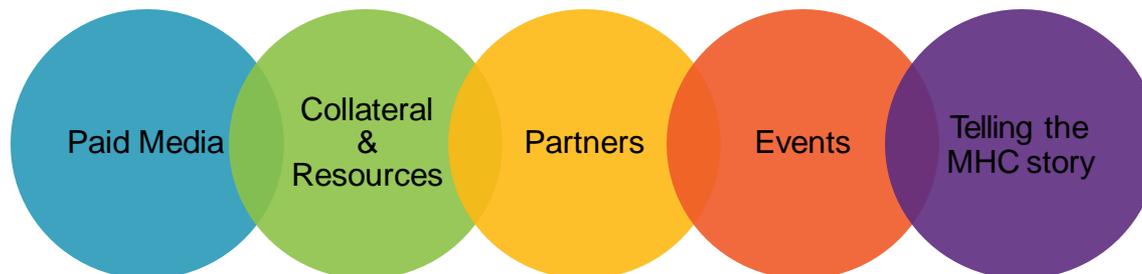
- ✦ Secure participation in targeted **awareness** events across the state
- ✦ Coordinate two **statewide event weekends** and provide **promotional toolkit**, including sample language, template flyer, and social media graphics.
- ✦ Develop resources for consumer assistance organizations including
 - Template print ad
 - Template radio reader
 - Messaging around specific audiences:
 - +400% FPL
 - Immigrant communities
 - SHOP

Where we've been...

- ✦ Shared MHBE paid media plan by region
- ✦ Developed event toolkits; select tailored collateral
- ✦ Coordinated select partnerships and events
- ✦ Held monthly communications & marketing meetings

Opportunities for OE6...

- ✦ **One-on-one calls in August**
- ✦ Review their areas of focus
- ✦ **CE sharing their paid media plans**
- ✦ Develop template print and radio creative
- ✦ Partnership boosting



Enrolling Small Businesses

We want to:

- ✘ Educate brokers on the benefits and processes of SHOP
- ✘ Arm brokers with consumer-facing materials about SHOP
- ✘ Empower small business owners to advocate for SHOP

Initial Tactics

- ✘ Conduct stakeholder interviews with up to six brokers to understand their resistance or motivation to selling plans on SHOP
- ✘ Develop collateral materials for brokers to share with consumers (small business owners) about SHOP
- ✘ Consider earned media opportunities to reach brokers and small business owners
- ✘ Explore partnerships to reach brokers and small business owners



Consumer Assistance Performance Measures & Metrics

Consumer Assistance Workers 2018 Performance Measures



- ✘ 144 In-Person Navigators
- ✘ 120,263 consumer encounters with Connector Entity Staff
- ✘ 98% of calls resolved after first call to CSC
- ✘ Average call handle time is 11 minutes
- ✘ Consumer assistance delivered to approximately 140,000 consumers via Connector Entities and CSC

QUESTIONS?

