



MHBE Plan Management Stakeholder Committee
November 1, 2018
2:00 pm – 3:30 pm
Meeting Minutes
Maryland Health Benefit Exchange
750 East Pratt Street, 6th Floor, Baltimore, MD 21202
Call-in: 877-431-1883
ID: 6876841631

In Attendance

Nicole Edge
Elizabeth Leo
Natasha Murphy - CareFirst
Rita Dyer
John Pierre Cardenas
Kimberly Edwards
Tasha Woodberry
Jessica Grau
Alexis Hippe - CareFirst
Amanda Ballard – Kaiser (Phone)
Sheebani Patel - Kaiser
Shaunteria Scott - Kaiser

Louisa Tavakoli - CareFirst
Jon Evans
Rebecca Smith
Monica - Aetna (Phone)
Cindy – Aetna (Phone)
Denise Paparounis - Benefit Mall (Phone)
Sandy Walters – Kelly & Associates
Insurance Group (Phone)
David Brock – Aetna (Phone)
Pat – Aetna (Phone)
Linda Diesch - United Healthcare (Phone)

Welcome and Introductions

Nicole Edge, Manager, Plan Management, welcomed everyone and initiated opening introductions by all parties present.

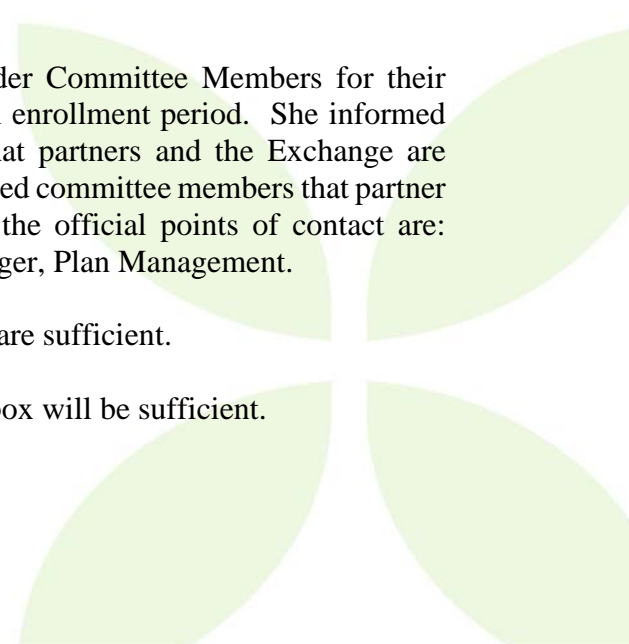
September 2018 session meeting minutes were approved pending CareFirst amendments.

Plan Management Update

Nicole Edge, thanked Plan Management staff and Stakeholder Committee Members for their dedication and support during the planning for the 2019 open enrollment period. She informed the committee that the goal moving forward is to ensure that partners and the Exchange are apprised of points of contact for Plan Management. She reminded committee members that partner inquiries should be directed to the Plan Management Unit, the official points of contact are: Kimberly Edwards, Account Manager and Nicole Edge, Manager, Plan Management.

Louisa Tavakoli asked if inquiries sent to the MHBE mailbox are sufficient.

Nicole Edge answered that sending emails to the MHBE mailbox will be sufficient.





Nicole Edge advised that the PMSC committee member application for 2019 period will run from January 7, 2019 through January 21, 2019. She stated that the charter and application will be available beginning January 7, 2019, and the committee will convene March 7, 2019. She encouraged committee members to provide any feedback on any changes they would like to see, topics or feedback for the 2019 PMSC meetings. She stated that MHBE wants to ensure that the meetings are productive for all stakeholders.

Louisa Tavakoli, asked that clarification be given on the distinction between the PMSC and the Standing Advisory Committee meetings. Specifically, she is looking to clarify what the roles and responsibilities are for each committee meeting.

John-Pierre Cardenas, explained that the Standing Advisory Committee meetings purpose is to collaborate from a public policy perspective. While the PMSC Committee meetings purpose is to examine practices from an implementation perspective. Additionally, some stakeholders are not represented at both meetings. He stated that next year is projected to be a big year for policy pending the upcoming legislation session. He stated that there will be a great deal of future planning depending on the mandate for reinsurance. Additionally, there will be a lot of planning around the special enrollment period. He noted that there will be a great deal of collaboration with issuers/stakeholders for the upcoming year. He explained that policy is first initiated at the Standing Advisory Committee meetings, then presented to the Board of Trustees and finally the PMSC Committee will receive proposal from the Board. John-Pierre advised that there will be a charter modification to include a formal process for policy related to the PMSC Committee.

HBX Enhancements & Updates

Nicole Edge, provided an overview of the new system enhancements introduced to maintain compliance and simplify the user experience. The following enhancements were released on September 29, 2018: Enrollment Payment URL Redirect (PayNow URL), Producer Portal-Client Display Enhancement, Qualified Small Employer Health Reimbursement Arrangements (QSEHRA), Notification for Retro Medical Assistance (MA), Removal of Alimony Selection for Deductions and Other Income, MCO Selection-Right to Change. Those are the main areas that will impact consumers. Nicole presented the timelines as follows:

PayNow URL went live October 15, 2018, a report on usage is forthcoming.

Producer Portal updates has been implemented. Those updates include removal of restrictions limiting producers to only upload 10 clients and the limits for the number of clients that can be exported at one time. Additional updates include a producer option to display “a configurable number of clients on one page”, and the ability to export the entire client list into an Excel document.

The Small Business HRA consumers will be prompted to report if they are receiving their allowance. At that time they will be able to adjust for the allowance. The employees will be able to access allowance immediately. Prompts for questions are also available for consumers



that have additional inquiry.

An upcoming release allowing consumers will not be able to apply for Retro MA during change reporting. Until then, consumers will be prompted to apply for Retro MA during their initial application. Text has been added to the Prior Medical Expenses page to alert consumers. If consumers select “no” they will be prompted to contact Maryland Health Connection or a case manager to request at a later time.

Improving the User Experience on MHC.gov

Nicole informed the committee that MHBE has increased its focus on the user experience. This initiative helps MHBE obtain important insight that influence change within the system. Testing is being conducted along with open enrollment. Information retrieved from last year’s open enrollment is currently available for stakeholders to examine. The top findings are as follows:

- User’s needed better guidance to get started on home page
- Users needed to be able to navigate forward or backwards in the application
- Users needed clarity on how to enter income and determine eligibility
- Making branding between application and the home page consistent

Nicole, presented a comparison of the current design of the website vs the old design.

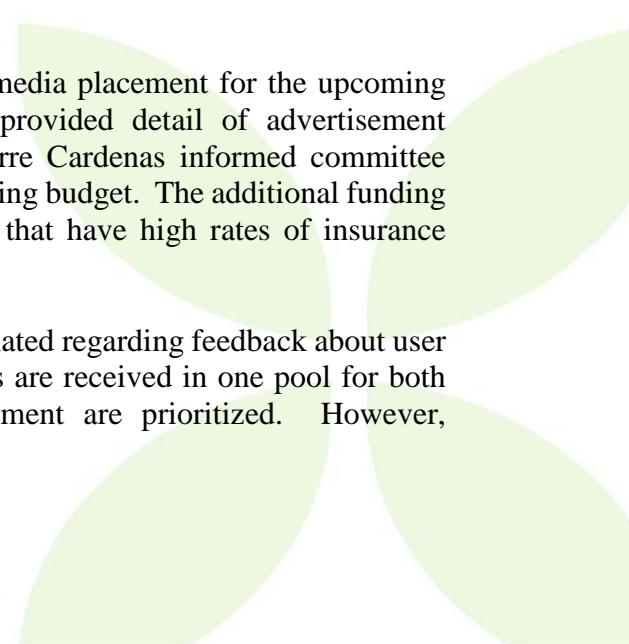
2019 Rate Scenarios

Nicole Edge presented a fiscal year 2018 versus fiscal year 2019, review of plan rate scenarios. She provided an update of the new plan rates available for all plans. John-Pierre, added that it was critical for MHBE to notify consumers that their APTC amount has decreased. He also added that Bronze plans either increased or decreased depending on where consumers lived. Increased initiatives are placed on making sure Consumer Assistant workers are able to provide consumers with information regarding the changes. Nicole, also reviewed year over year plan rates for both Silver and Gold plans.

Open Enrollment Six Media Placements

Nicole Edge, provide a review of the Open Enrollment Six media placement for the upcoming open enrollment advertising schedule. Additionally, she provided detail of advertisement initiatives in super market such as floor talkers. John-Pierre Cardenas informed committee members that MHBE’s Board of Trustees increased the marketing budget. The additional funding allows MHBE to focus its marketing efforts to target areas that have high rates of insurance constituents.

A question was raised asking how focus groups will be coordinated regarding feedback about user experience comments. John Pierre advised that all comments are received in one pool for both carriers and consumers. He advised that areas of agreement are prioritized. However,





consideration is given first to consumers rather carriers.

Draft Plan Certification Standards & Policy Updates

Nicole provided an update on the 2020 Draft Plan Certification Standards and Policy. She advised that the public comment deadline was October 31, 2018. MHBE is working to incorporate any suggestions/changes for Board approval. John-Pierre added that all comments were received and a narrative will be released to the Board during the November session. He advised that there will be a month-long comment period beginning the day after the Board meeting to end December 19, 2018. The draft Issuer Letter will be released for review shortly after the November board meeting and the final Issuer Letter will be released in January 2018. Finally, he advised that the Issuer Letter will only contain any changes.

EDI & IT Updates

Jon Evans provided updates on EDI and IT initiatives. He announced that the EDI status is looking good and currently going through a correction process of analysis. Total renewals run to date are 130,028. 13,739 are dental only passive renewals have been added in the system. He informed that collaboration is happening between Alpha Delta and Dominion as well. The next passive catch up batches will happen November 15th and 30th and again on December 15th.

MD SHOP Updates

Rebecca Smith provided updates on SHOP direct enrollment. She advised that the eligibility application was launched in June 2018. To date MHBE has received 393 eligibility applications. She informed that the goal is to gather data tracking eligibility submissions vs actual enrollment directly into SHOP. MHBE is continuing efforts to work with carriers to get SHOP reporting on a monthly basis. She encouraged SHOP carriers to continue to follow-up and respond to requests regarding SHOP reporting.

She announced that the SHOP Quoting Tool has been released for both the 2018 and 2019 plan years. She advised that the tool is sent to employers and authorized brokers at the time of enrollment. She noted that many employers are opting to review the plan rates themselves rather than through a broker.

Further initiatives are being placed on SHOP marketing materials. A release of a two-sided PDF, 90 second video and window clings for brokers' offices are available for pickup at the MHBE office. She provided a presentation of the video and the PDF to committee members.

Requests were made to issuers to respond and finalized monthly enrollment reports to enable more accurate reporting.

Meeting adjourned at 3:05 p.m.

