



**MHBE Plan Management Stakeholder Committee**  
**March 7, 2019**  
**2:00 pm – 3:30 pm**  
**Meeting Minutes**  
**Maryland Health Benefit Exchange**  
**750 East Pratt Street, 6<sup>th</sup> Floor, Baltimore, MD 21202**  
**Call-in: 434-886-0051**  
**ID: 390384094**

**In Attendance**

Nicole Edge  
Elizabeth Leo  
Natasha Murphy  
JP Cardenas  
Carol Ball (Phone)  
Kimberly Edwards  
Tasha Woodberry  
Nabila Rahman  
Marisol Hernandez (Phone)  
Sheebani Patel (Phone)  
Shaunteria Scott

Julie Sinclair (Phone)  
John Fleig (Phone)  
Sandy Walters (Phone)  
Dave Brock (Phone)  
Jessica Grau  
Taylor Kasky  
Rebecca Smith  
Jon Evans  
Paul Spiedell (Phone)  
Joann Burns (Phone)

**Welcome and Introductions**

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

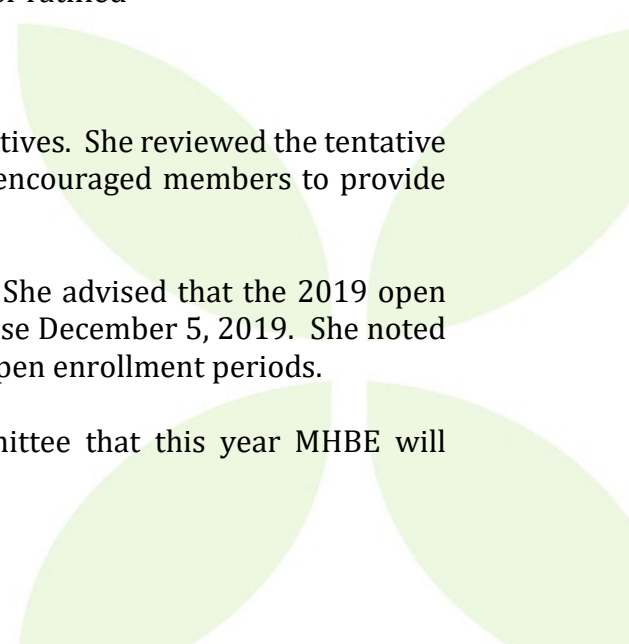
2019 Plan Management and Stakeholder Committee Charter ratified

**Plan Management Update**

Nicole Edge provided an update on plan management initiatives. She reviewed the tentative PMSC meeting schedule and topics to be discussed. She encouraged members to provide feedback and/or topics for future meetings.

Nicole Edge reviewed the 2019 open enrollment period. She advised that the 2019 open enrollment period will begin on November 1, 2019 and close December 5, 2019. She noted that current open enrollment period is reflective of prior open enrollment periods.

Kimberly Edwards, Account Manager, advised the committee that this year MHBE will





conduct annual reviews with each carrier. She stated that she will soon be reaching out to any carrier that has not yet been scheduled within a week. She further stated that the reviews are beneficial to carrier partners as well as MHBE.

Elizabeth Leo, Partner Data Specialist, updated the committee on the status of the ECP Template. She advised that the Template is undergoing testing. The ECP List has been revised to reflect the most accurate provider information. The 2020 ECP list consists of 1249 providers 420 are new providers. There are 40 stand-alone dental providers. She noted the distribution across counties are similar to the previous year's totals. She asked members to review and submit any noted errors discovered for correction. She advised that there is a new ECP applications for providers to submit to be added to the list. Nicole Edge alerted the committee that a demo and walkthrough for the ECP template is forthcoming. John-Pierre Cardenas, Director of Policy and Plan Management expressed gratitude to Elizabeth Leo for the hard work and dedication in creating and updating the ECP Template and List.

### **Renewals & Open Enrollment Report**

Nicole Edge reported that the Annual Renewals Debrief meeting was held on January 29, 2019. She announced that the meeting was beneficial and productive. Members were able to discuss successes, challenges and improvement opportunities from the prior open enrollment period. She reminded everyone about the importance of conducting the meetings and urged members to continue to utilize past experiences as a framework to implement effective changes in the future.

Nicole Edge identified several tasks slated for implementation as follows:

- Establish template workgroup
- Focus on reduction of manual files
- Provide detail MLR guidance to add to 834 compliance guide
- ECP template testing and demonstration
- Create checklist for plan certification requirements
- Conduct touchpoint calls during plan certification period
- Sharing OE messaging and planned touches to consumers

Nicole Edge advised everyone that the Plan Management Team will follow-up within the next week with a status of implementation of the task. A comprehensive plan will be provided with details on how the task will be implemented. She informed parties that were not present in the workgroup meetings to reach out with ideas or items to be added to the task list.

Dave Brock, Aetna (Phone) announced that he and his colleagues were unable to access today's meeting due to internal firewalls prohibiting access to the Google Meets functions. Nicole Edge advised that the PowerPoint and the Agenda was also emailed to all parties for today's meeting.



Sheebani Patel asked if carriers can get advance notification of upcoming Open Enrollment events so that carriers are able to participate. Nicole Edge advised that she will add to items for consideration.

### **Loss of Minimum Essential Coverage (SEP)**

Nicole Edge informed the committee of new measures that MHBE is taking in the process of requiring verification when consumers report loss of minimally essential coverage (MEC). The HBX will generate a verification check list (VCL) when consumers report a loss of MEC. Consumers will now be notified through the eligibility screen and a 1302 notice will be provided advising consumers of verification needed and the types of documentation that is acceptable. Consumers' enrollment will remain in pending status until acceptable verification is cleared. Carriers will not receive 834 until the verification is satisfied. A 1408 notice will be generated if a consumer does not provide acceptable documentation within 30 days. Consumers will be able to use the new options via desktop computer or mobile app. Nicole informed carriers that there will be an indicator on the 834 explaining retroactive coverage. Additionally, the 834 will be held when any subsequent changes are made to the consumer account.

Nicole advised that there is no anticipated impact to escalation cases. Carriers were encouraged to notify MHBE if they experience any impact to escalations as a result of the changes. Nabila Rahman ask for clarification on what indicators are being added to the 834. John-Pierre Cardenas responded that a loss of MEC indicator and retroactive activity indicator will be added. He advised that MHBE is currently considering whether additional details are necessary in the 834. Further clarity was given that carriers would not receive retroactive enrollments of more than 30 days.

Nabila Rahman asked if the consumer does not provide qualified verification that the 834 notice will not be sent to carriers and that consumers will received the 1408 informing they are not enrolled. Nicole Edge responded in the affirmative. Nicole also stated that at the time of initial enrollment consumers are notified that enrollment is pending until verification documents are cleared. Nabila Rahman asked what consumers will receive when verification is confirmed. John-Pierre Cardenas responded that consumers will receive notification that their enrollment was successful with a retroactive coverage date. Nabila Rahman stated that she would like to confirm that consumers will have a retroactive date at the time of enrollment to prevent confusion. John-Pierre Cardenas responded that consumers are notified at the time of enrollment of their retroactive date. He stated that it provides an incentive for consumers to provide their verification documents as soon as possible. Nabila Rahman asked what actions are taken if a member request a later coverage active date whether MHBE's escalations team will honor that request. John-Pierre Cardenas responded the MHBE will deny the request. He stated that the process and procedures are outlined in MHBE's official regulations.



## **MHBE IT/EDI Update**

### **MLR**

Jon Evans reported that recent performance for MLRs have been good. He stated that MHBE has not experienced any problems over the last several months. He stated as a reminder that MLRs are due twice weekly during open enrollment and once weekly thereafter.

### ***834 Transactions***

Jon Evans reported that 834 transactions have been running successfully since the redesign. He stated that there were some unexpected challenges which have now been resolved. There are additional fixes in progress for reoccurring mixed matched dates. He advised that IT will continue to monitor and raise issues as they occur. He encouraged feedback from carriers on any challenges they encounter.

### ***SBMI***

Jon Evans reported that SBMI experienced an expected spike during January and February, however, has recently decreased to near normal levels. He noted that the spike was less than 1/3 of what occurred last year. He advised that CMS is looking to include initiated members into the SBMI beginning in 2020. He explained that all members are effectuated members rather than initiated. He stated that CMS would like to include the initiated transactions as well. A discussion followed regarding the impact of this request. Nabila Rahman inquired about the origin of this request. Jon Evans responded that it is a requirement of CMS. Nabila Rahman stated that CMS has not relayed this information to her organization and this is the first she has heard of the requirement. Jon Evans responded that CMS has notified carriers however, the notification he is providing can serve as official. Nabila Rahman expressed concerns regarding the impact of implementing the requirement. Jon Evans responded that the requirement is similar to the estimated payments. He noted that CMS is attempting to reconcile the initiated to provide more accuracy. John-Pierre Cardenas suggested that a conference call be initiated to gather ideas, suggestions and questions to relay back to CMS related to the initiated issue. Jon Evans reminded everyone that the schedule for 2018 corrections is monthly for PY2019, quarterly for 2018 and monthly for 2019 in PY2020.

**ACTION:** Establish a workgroup to brainstorm ideas regarding the effects and impact of Initiated Members to present to CMS. Start discussions in weekly one on ones to develop ideas.

### ***Carrier Interchange Project***

Jon Evans reported that the new design is Salesforce driven. He advised that the current focus is escalated cases and provided an example. He noted that the design is high level and



based off a previously promised system. He stated that carriers will be engaged as system development is expanded to obtain input. The cost for Salesforce licensing is being covered by MHBE. Jon Evans announced that MHBE's IT division hired additional personnel that will be utilized for this project.

Nabila Rahman offered a suggestion to change the title of the enrollment report from MLR (member level report) due to confusion at CF from use of the same acronym for reports/areas. The question was posed to all present. John-Pierre Cardenas offered the acronym ELR (enrollment level report). MHBE agreed to take back for review.

### **SHOP Update**

Becky Smith reported that the SHOP program is currently drafting new regulations within Maryland. They have collaborated with carriers to review and provide comments. She stated that she requested any additional parties that would like to be a part of development notify her no later than Friday, March 9, 2019. An announcement was given that MHBE is in the process of scheduling a stakeholder kickoff meeting to discuss upcoming SHOP regulations. She is looking at dates around the week of March 19, 2019. The goal is to get feedback from carriers regarding pending regulations. John-Pierre Cardenas announced that the new Policy Analyst, Taylor Kasky, will be the policy lead on the SHOP regulations. Sandy Walters requested a copy of the draft regulations. John-Pierre Cardenas affirmed that once regulations are drafted he will be provided a copy. Becky Smith stated that she will reach out to carriers no later than Friday to schedule meetings.

Becky Smith is looking to change how reporting will happen for the SHOP program. She solicited input from carriers to develop a standard method of reporting to ensure accuracy. She informed everyone that she sent the reporting template on February 26, 2019. She requested that all comments on the template be submitted no later than March 9, 2019, in order to include adjustments. Carriers to provide comments on standardized SHOP reporting with date to comply no later than Friday, March 16, 2019.

David Brock asked for an update on the SHOP portal. John-Pierre Cardenas responded that he would like to establish a focus group session with carrier SHOP contacts to begin discussions on upcoming SHOP initiatives. He encouraged everyone to plan for the 1332 waiver regulations. He provided details on components and benefits of the SHOP 1332 waiver.

### **2019 Legislative Session**

Jessica Grau, Policy Analyst provide an update on current legislative initiatives. She reported that HB-1421 which expands MHBE's function in outreach initiatives. She advised that it incorporates within statutes existing administrative, technical and operational support. Additionally it allows MHBE to conduct outreach and educational activities to increase health literacy.



The small business tax credit bill is HB-1098 which allows MHBE to apply for the 1332 Waiver that allow for advance payments of the Small Business Health Care Tax Credit as well as allow MHBE to advance payments.

John-Pierre Cardenas brought to the committee's attention two important items in the legislature pertaining to insurance market stabilization. The first will prompt the state to assess a 2.75% for each year the federal government waives its 9010 health insurance fee. When the federal government does not waive its fee the state will assess a 1% premium assessment. He urged everyone to keep a look out. He explained that there is opposition to the Bill, however, MHBE continues to monitor its progress. The second is to implement a state individual mandate. He noted that the Bill has received favorable response. He noted that the Bill most likely will first go through committee and may be significantly amended.

### **Surveying Non-Returnees**

Nicole Edge presented a comparison of 2017 and 2019 on the results of a survey conducted on consumers that did not re-enroll in health insurance through MHBE. She advised that the notable difference in number of individuals surveyed in 2019 compared to 2017 is the result of excluding primary account holders 65 years of age or older. The rate of response from consumers is similar between both years. She provided examples of questions consumers were asked. Minimum changes were made to the questions consumers were asked. The primary reason for non-returning consumers remains that they obtained insurance through their employer. Survey results confirmed that 7% of consumers indicated that bad customer service was the reason for leaving. Nicole Edge confirmed that MHBE continues to review customer service for areas of improvement.

John-Pierre Cardenas asked committee members to keep a look out for the SHOP kickoff during the first week of April. He advised once the legislative session is close carriers will receive an impact assessments.

**Meeting adjourned at 3:15 p.m.**

