



## Maryland Health Benefit Exchange Board of Trustees

May 20, 2019

2:00 p.m. – 4:00 p.m.

Maryland Health Care Commission  
4160 Patterson Avenue  
Baltimore, MD 21215

### **Members Present**

Robert R. Neall Chair	Ben Steffen, MA
S. Anthony (Tony) McCann, Vice Chair	K. Singh Taneja (by phone)
Mary Jean Herron	Dr. Rondall Allen

### **Members Excused**

Dana Weckesser

### **Members Absent**

Alfred W. Redmer, Jr.	Linda S. (Susie) Comer
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### **Also in Attendance**

Michele Eberle, Executive Director, Maryland Health Benefit Exchange (MHBE)  
Andrew Ratner, Chief of Staff, MHBE  
Venkat Koshanam, Chief Information Officer, MHBE  
Caterina Pañgilinan, Chief Compliance Officer, MHBE  
Sharon Stanley Street, Principal Counsel, Office of the Attorney General  
John-Pierre Cardenas, Director, Policy & Plan Management, MHBE  
Heather Forsyth, Director, Consumer Assistance, Eligibility & Business Integration, MHBE  
Raelene Glasgow, Procurement Manager, MHBE  
Gregory S. James, Deputy Secretary for Operations, Maryland Department of Human Services (DHS)

### **Welcome & Introductions**

Secretary Neall opened the meeting and welcomed all participants.

### **Approval of Meeting Minutes**

The Board reviewed the minutes of the April 15, 2019 open meeting. Ms. Herron moved to approve the minutes. Mr. Steffen seconded the motion. The Board voted unanimously to approve the minutes of the April 15, 2019 open meeting.

### **Public Comment**

Mr. McCann invited members of the public to offer comment. No members of the public offered comment.

### **Executive Update**

*Michele Eberle, Executive Director, MHBE*

Ms. Eberle began by congratulating Mr. Koshanam on being recognized as one of the 2019 CIO 100 award winners by International Data Group Inc.

Ms. Eberle then announced that the agency's privacy impact assessment was found to have no compliance gaps, nor any open issues by the Centers for Medicare & Medicaid Services (CMS). She thanked MHBE staff for their efforts around the assessment.

Next, Ms. Eberle noted that MHBE has two remaining vacant positions. Once those positions are filled, the agency will be fully staffed.

Ms. Eberle then described ongoing activities in the realms of policy and legislation regarding plan management, adding that the MHBE has distinguished itself as an expert in this area as demonstrated by other state-based marketplaces seeking advice from the agency.

Next, Ms. Eberle announced that the final products of the State Benchmark and Affordability workgroups are out for review.

Ms. Eberle then discussed recent efforts by the agency to connect with stakeholders regarding the upcoming changes to the Small Business Health Options Program (SHOP). The MHBE has made contact with legislators, chambers of commerce, small businesses, and insurance brokers, and there is much excitement among all parties for the new program.

Next, Ms. Eberle noted that the Maryland Easy Enrollment Health Insurance Program has begun with a meeting between the MHBE, the Maryland Comptroller's Office, and the Maryland Department of Health. She stated that the team's goal is to have the form change in place for the next tax year, adding that the MHBE intends to use the data gathered through this program to find out where Maryland's remaining uninsured population can be found.

Ms. Eberle then announced that the agency has received the federal pass-through funding under the State Reinsurance Program. The amount of money received was more than anticipated—the MHBE received over \$373 million, whereas they planned on receiving \$303 million.

Next, Ms. Eberle noted that the Maryland Insurance Administration has released the individual and small group rate requests for the next plan year. In the individual market, the average rate decreased by 2.9 percent, as proposed. She thanked the carriers for working with the agency to stabilize the rates in the market.

Ms. Eberle then described a series of efforts to prepare for the upcoming open enrollment period. She explained that the MHBE will have two more major releases before the code freeze prior to the next open enrollment period. The August release will include items related to open enrollment, and the September release will focus on Medicaid. She noted that the training materials for consumer assisters is undergoing extensive revision over the summer, and that marketing collateral is being redesigned. She invited Board members to come to one of the MHBE's ongoing regional forum events.

### **FY19 Q3 Compliance Update**

*Caterina Pañgilinan, Chief Compliance Officer, MHBE*

Ms. Pañgilinan gave the Board an update on the status of compliance at the agency, beginning her remarks by thanking all members of the MHBE team for their ongoing pursuit of compliance and transparency. She noted that, during the last quarter, the MHBE had seven audits and two other reviews ongoing at the same time, along with other duties.

Next, Ms. Pañgilinan discussed the current status of audit findings, noting that only three findings remain open. One open finding relates to the verification of enrollee income, while the other two have to do with Board procedures around task orders under the indefinite delivery indefinite quantity (IDIQ) contracting vehicle. She described efforts the MHBE has undertaken to address the findings, including corrective actions newly implemented in the previous quarter. She added that the next fiscal year will see modifications to how the agency reports on these findings and corrective actions to include more detail, scheduling, and milestones.

Ms. Pañgilinan then gave an update on the privacy program, noting that the MHBE has been working closely with the Maryland Department of Health on how better to support its privacy incident investigation process. She also noted that new non-exchange entity agreement forms are under development, and that the agency's partners are accustomed to operating under the privacy strictures of the Health Insurance Portability and Accountability Act of

1996 (HIPAA) rather than the regulations that govern the MHBE's privacy efforts. She also stated that annual training for all internal and external stakeholders is underway and that the number of people impacted by privacy breaches has declined significantly.

Secretary Neall asked about the types of partner organizations with which Ms. Pañgilinan's department negotiates. Ms. Pañgilinan replied that they negotiate with nearly all partners and potential partners from contractors to other state agencies. Her team gets involved whenever another entity seeks access to the personally-identifiable information gathered by the MHBE.

Ms. Herron asked for confirmation that the MHBE does not have to follow HIPAA. Ms. Pañgilinan explained that the MHBE is not a covered entity.

### **Consumer Assistance Update**

*Heather Forsyth, Director, Consumer Assistance, Eligibility & Business Integration, MHBE*

Ms. Forsyth began her remarks by describing each of the categories of consumer assistance personnel at the MHBE, including those who work for the agency or its contractors, as well as those employed by other organizations, such as local health departments. She presented a chart of MHBE leadership and staff with a role in consumer assistance and discussed the various channels available to those who need help, including online, mobile application, phone, and in-person.

Next, Ms. Forsyth explained that consumer assisters have different ways of connecting with Maryland Health Connection (MHC) depending on their role. While Certified Application Counselors use the Consumer Portal and Producers use a modified version of the Consumer Portal called the Producer Portal, all other categories of consumer assister use the Worker Portal. She then provided a breakdown of consumer assistance categories by headcount, from the largest group, agency caseworkers, to the smallest, Navigators.

Secretary Neall asked whether the headcount includes only those who work full-time assisting MHC consumers. Ms. Forsyth replied that it is difficult to say given that, for instance, Certified Application Counselors work for organizations with other missions and may have duties unrelated to MHC. She added that Navigators are full-time, year-round MHC assisters.

Ms. Forsyth then went into further detail regarding the makeup, distribution, effectiveness, and other supportive efforts of several categories of consumer assister. She discussed Caseworkers, Appeals and Constituent Services staff, Escalated Cases staff, Producers, and Application Counselor Sponsoring Entities and the Certified Application Counselors they sponsor.

Next, Ms. Forsyth provided data regarding the historical performance of the Call Center over the entire life of MHC. She compared the MHBE Call Center's performance in 2018 to that of Minnesota, Washington D.C., Rhode Island, and Massachusetts. Ms. Herron commented that the MHBE compares favorably with the other states. Mr. Steffen, noting that the Massachusetts call center does not handle Medicaid consumers, asked why their call volume was so much higher than MHBE's. Ms. Forsyth responded that, while she suspects that the Massachusetts call center provides enrollment assistance for their SHOP program, she would confirm with Massachusetts authorities and report back to the Board.

Ms. Forsyth concluded her presentation by discussing the Connector Entity program, providing the Board with details of the regions, Connector Entities, and performance in the previous year.

Mr. Steffen, referring to a statistic presented earlier in Ms. Forsyth's presentation that showed approximately 14 percent of those who used consumer assistance to enroll in Medicaid in the course of the previous year were assisted by Navigators or MHBE staff, commented that there must not be much activity for Navigators outside of the open enrollment period. Ms. Forsyth replied that she believes the ratio would be higher if looking at enrollments completed rather than applications begun.

Secretary Neall commented that, given the Appeals and Grievances unit's perfect success record in Administrative Hearings, it seems that consumers who lodge an appeal do not have a case. Ms. Forsyth responded by pointing out that, often, consumers simply want to be heard regardless of the merits of their case. She added that the unit works to ensure that as few cases as possible rise to the level of a hearing by resolving them before they cross that milestone. Secretary Neall stated that the Board will keep an eye on this situation and evaluate whether a change in process is warranted.

### **Connector Entity Grant Awards**

*Heather Forsyth, Director, Consumer Assistance, Eligibility & Business Integration, MHBE*

Ms. Forsyth presented the Connector Entity grant award request for fiscal year (FY) 2020. She began by providing more in-depth detail on the structure and function of the Connector Entity program, especially its regional focus. She pointed out ways in which the Connector Entity for each region has custom-tailored its approach to the needs of the uninsured in their areas.

Next, Ms. Forsyth described the process by which Connector Entity grants are awarded. She underlined that the grant solicitation currently being presented to the Board represents the third grant award since the beginning of the MHBE, as each grant award comes with two option years.

Ms. Forsyth then presented a timeline of activities around the current Request for Applications (RFA) and provided details of the RFA solicitation, including the total budget and several grantee work requirements. She described the criteria that applying organizations must meet in order to be eligible for one of the grants, as well as the criteria the MHBE used to select which organizations will receive a grant. She noted that the agency received only one application per region, each from the incumbent Connector Entity.

Next, Ms. Forsyth provided the Board an overview of each Connector Entity, including the region(s) covered, contact information, and details of the customized approach each entity has to its region.

Ms. Forsyth then described several new requirements on Connector Entities contained in the RFA. These included firm commitments to holding and staffing open enrollment events, collection of consumer stories, self- and supervisory assessments of Navigator performance, separate explicit targets for new enrollments, and an expanded list of target populations.

Next, Ms. Forsyth provided a breakdown of proposed funding of the FY 2020 Connector Entity program alongside the total and new enrollment targets for each region. She concluded her presentation by asking the Board's approval to fund the FY 2020 Connector Entity program as presented.

Chairman Neall entertained a motion to approve, which was provided by Ms. Herron. Mr. McCann seconded the motion. The motion was approved with no opposition.

### **Quarterly IT Update**

*Venkat Koshanam, Chief Information Officer, MHBE*

Mr. Koshanam began his presentation with a timeline of information technology (IT) releases in 2019, including a list of major system enhancements and a number of open enrollment preparation activities. He described a number of achievements in 2019 and outlined upcoming initiatives.

### **IT Procurements**

*Venkat Koshanam, Chief Information Officer, MHBE*

*Raelene Glasgow, Procurement Manager, MHBE*

Mr. Koshanam provided an overview of three major contracts in the MHBE's IT area. One contract is to provide infrastructure and hosting, he explained, and will be fulfilled by the Maryland Total Human Services Information Network (MD THINK). Another contract, with DMI, is for ongoing IT operations, including releases, batch

processing, and performance monitoring. The third contract is the IDIQ vehicle that was established the previous year with 98 master vendors under a five-year master contract through FY 2023.

Next, Mr. Koshanam provided the Board with additional context of the IDIQ contract. He delineated ten functional areas within the IDIQ and listed the functions performed by IDIQ resources within the MHBE's IT functional structure. He gave a breakdown of the IDIQ budget by work category and funding source, i.e., federal funds versus state funds.

Mr. McCann asked for an explanation for the difference of \$4 million between the FY 2019 and FY 2020 IDIQ budgets on the HBX migration to MD THINK line item. Mr. Koshanam clarified that, while the agency budgeted \$5.3 million for the MD THINK migration, it only spent \$3.4 million in FY 2019 and that the \$1.6 million budgeted for FY 2020 is the remainder unspent from FY 2019.

Mr. Steffen asked for a breakdown by work category of the IDIQ task orders issued in FY 2019. Mr. Koshanam replied that he would gather that information and provide it to the Board.

Mr. Steffen asked whether IDIQ contractors who have not received any task orders under the contract have complained to the agency. Mr. Koshanam replied that they have not heard many complaints of that nature.

Ms. Herron, expressing concern over implementing the MD THINK migration shortly before open enrollment begins, asked whether any delay in that implementation would necessitate an increase in the budget. Mr. Koshanam replied in the negative.

Ms. Glasgow requested that the Board approve a total not-to-exceed (NTE) amount of \$25,000,000, with the Federal Financial Participation amount of \$16,389,991 and the State Participation amount of \$7,010,008, for the IT Consulting and Technical Support Services IDIQ contracts for the Fiscal Year 2020. Ms. Herron moved to approve. Mr. McCann seconded the motion. The motion was approved with no opposition.

Next, Mr. Koshanam discussed the Akamai license renewal, beginning by explaining what functions Akamai performs on MHC, from security optimization and waiting room functionality to website performance and cloud monitoring.

Ms. Glasgow summarized the procurement status of the Akamai licenses, set to expire on June 30, 2019. She noted that two invitations for bid (IFBs) were issued—one in April 2019 and the other in May 2019. The May IFB closes on May 20, 2019, after which the MHBE will seek the Board's approval to issue the award to the winning reseller.

Mr. McCann asked what changed between the April and May IFBs. Ms. Glasgow replied that there was no difference between the two. She explained that the April IFB received no bids and was reissued in May. Two resellers supplied bids in response to the May IFB.

Next, Mr. Koshanam showed the Board how the total cost of the Akamai license renewal would be divided between federal and state funds. Of the total \$460,000, \$296,700 would be federal funds while \$163,300 would come from the state.

Finally, Ms. Glasgow requested that the Board approve a contract award to Carahsoft Technology Corp. for an amount of \$456,507.24 with federal financial participation of \$294,447.17 and a state participation amount of \$162,060.07 for extending the Akamai software subscription for the period from July 1, 2019 to June 30, 2020. Dr. Allen moved to approve the request. Mr. McCann seconded the motion. The motion was approved with no opposition.

#### **MD THINK Update**

*Venkat Koshanam, Chief Information Officer, MHBE*

Mr. Koshanam gave the Board an update on the migration to MD THINK. He began by presenting a timeline of the

migration, stating that it is the view of MHBE staff that the go-live date must be pushed back. He explained that delays in the delivery of environments, while not completely unexpected, make the schedule change necessary.

Next, Mr. Koshanam provided further detail of the status of each required environment and the functional areas within each that must undergo testing before go-live. He pointed out that each of the critical environments must be fully tested and operational in each functional area before go-live can take place. He reiterated the recommendation that go-live be delayed, stating that the reason for the delay is entirely technological.

Mr. McCann asked Mr. Koshanam to confirm that the testing regimen not only includes tests of the individual components, but also the interoperability of those components under a simulated load, all of which must be completed by the July drop-dead date. Mr. Koshanam replied in the affirmative.

Mr. McCann asked whether the federal certification of the system is something the agency performs or is entirely down to the timing of the federal authorities. Mr. Koshanam explained that, from the CMS point of view, the MHBE's system by itself is one entity, while the combination of MHBE and MD THINK is an entirely new entity, requiring a new Authorization to Connect (ATC). He added that the ATC request package was submitted to CMS on May 7, 2019.

Mr. McCann asked whether the ATC would meet the certification requirements from the United States Internal Revenue Service (IRS). Mr. Koshanam replied that the IRS certification is separate, and is already underway.

Mr. Steffen asked whether CMS will issue the ATC before the testing is complete, based on when the request was submitted. Mr. Koshanam explained that CMS is comfortable certifying a staging environment that mimics a production environment.

Mr. Steffen asked whether the CMS decision on issuing the ATC is binary, or whether it can be conditional on the agency undertaking certain measures. Mr. Koshanam answered that it is not binary and can include conditions. He added that some controls on the system will be inherited by the MHBE from MD THINK's existing certification. He also reiterated that the agency is confident that CMS will issue the ATC.

Secretary Neall asked that Deputy Secretary James of DHS come forward to give testimony and answer questions.

Ms. Herron asked for details on what constitutes the critical path for the migration and whether any components may be less important for a "go." Mr. Koshanam replied that the critical path includes those environments that carry the production data, as well as the availability of other environments that would make it possible to deliver hotfixes to the production system. He added that the so-called non-critical path environments are still critical to MBHE operations and that each of the eight environments already delivered to the MHBE are critical. With regard to whether some set of environments smaller than the full 11 can allow the system to move forward into open enrollment, Mr. Koshanam stated that further discussions are necessary with the MD THINK team, but that a minimum of 8 environments will be necessary to go live and function.

Ms. Herron asked whether there is something forcing the MHBE to go live on such an aggressive schedule, expressing concern over the MHBE's reputation should MD THINK not understand how to support open enrollment activities. Deputy Secretary James replied that the person running MD THINK is intimately familiar with the MHBE, having previously been the Chief Information Officer of the agency and having built the MHC platform in such a way as to enable it to move onto the MD THINK platform. He added that not all 11 environments are required for go-live, especially those that provide a secondary backup to the main environments. Deputy Secretary James underlined that the critical environments have been delivered and that MD THINK believes the testing can be completed on time. He stated that his agency is fully committed to making the MHBE a success and believes going live before open enrollment is realistic.

Secretary Neall asked whether Deputy Secretary James' faith in the go-live is based on the July date. Deputy Secretary James deferred to the MHBE on the testing schedule requirements, but reiterated that going live before open enrollment is realistic.

Secretary Neall asked Mr. Koshanam to confirm his understanding that the MHBE's position is that the June go-live date is impossible but that the third week of July is feasible. Mr. Koshanam replied in the affirmative.

Secretary Neall asked that Mr. Koshanam provide the Board with weekly or daily graphical updates on the status of these environment tests and stressed the importance of completing this project successfully. Ms. Eberle noted that the status graphic is distributed every Sunday night and that the Board will be added to the distribution list.

Ms. Eberle asked whether the go-live date in July will impact the schedules of either the carrier testing or the August or September software releases. Mr. Koshanam replied in the affirmative in the case of carrier testing, adding that any significant change must be tested on carrier systems as well. He stated that carrier and Medicaid managed care organization (MCO) testing usually takes four weeks to complete.

Ms. Eberle asked Mr. Ratner to come forward and address the Memorandum of Understanding (MOU) with MD THINK for ongoing operations. Mr. Ratner stated that the MOU process is underway and will be completed by early June, leaving plenty of time for the Board to review before its June meeting.

Mr. McCann asked whether the go/no-go decision will be made based on a final prototype test with all components in place under a simulated load. Mr. Koshanam replied in the affirmative, and added that the MHBE does not want to go live immediately after that test, due to its coinciding with other critical functions. He stated that the agency wants a full week to complete the final prototype test.

Secretary Neall noted that the week prior to go-live contains Independence Day and may not have full effort available.

**Adjournment**

The meeting was adjourned.