HEALTH EXCHANGE ADVISORY BOARD

MINUTES September 12, 2014

Co-chair Scott Baetz called the meeting to order at 9:30 a.m. on September 12, 2014, at the New Hampshire Insurance Department in Concord, New Hampshire.


Board members unable to attend: Dianne Chase and Beth Roberts.

Agency Representatives: NH Department of Health and Human Services (DHHS) Commissioner Nick Toumpas, DHHS Health Care Program Specialist Katja Fox, NH Insurance Department (NHID) Director of Compliance and Consumer Services Michael Wilkey, NHID Health Policy Analyst Tyler Brannen and NHID Life, Accident and Health Legal Counsel Jenny Patterson.

After Scott Baetz welcomed everyone, the first item on the agenda was discussed and the minutes from the July meeting (there was no August meeting) were approved.

Board membership terms were discussed. Members whose terms expire in November will be contacted by their appointing authority and should consider whether they wanted to be reappointed. Continuing on with the agenda, Evelyn Aissa from NH Voices for Health was introduced as the newest member of the Board, replacing Lisa Kaplan Howe. Evelyn explained to the group that at Voices for Health she oversees policy development, implementation and consumer assistance.

We then skipped to Item 4 on the Agenda and discussed open enrollment. Victoria Goodwin representing CMS announced that this week Navigator grants have been awarded to Bi-State Primary Care and Greater Derry Community Health Services, Inc. In addition, Planned Parenthood of Northern New England will continue to conduct Navigator activities during the 2015 open enrollment period (November 15, 2014-February 15, 2015) under a no-cost extension into 2015.

Continuing on, Victoria explained that under a CMS rule, consumers with 2014 Marketplace coverage will be automatically reenrolled in the same or comparable coverage if they take no action. CMS is nevertheless encouraging consumers to visit healthcare.gov to view their options for 2015, and in particular to ensure that they receive a tax credit in the appropriate amount, because the tax credit will not continue automatically for consumers who did not authorize CMS to access their tax information. Scott Baetz asked if people enrolled but did not release the tax information, would they need to go back to reenroll. Victoria replied that if they want a tax credit they need to reenroll, and that CMS is in
encouraging assisters to help with reminding people to reenroll. There will be training for both
navigators and assisters on this.

Victoria also told the group that CMS has a new on-line streamlined application, and will be releasing
zip code level enrollment data this week or next. Tim Soucy asked about access to the zip code level
data, and Victoria said she will send it to Jenny to send out to the Board. Finally, Victoria noted that the
new SHOP functionalities will be accessible under an early access testing program in five states (NH is
not one of them). The testing will be done in late October in Delaware, Illinois, Missouri, New Jersey
and Ohio.

We then continued on with the DHHS update from Commissioner Toumpas, who spoke first about the
status of the transition to Medicaid Care Management (MCO coverage) for the traditional Medicaid
population. As of September 1, 2014, 127,000 people are enrolled in the Care Management Program,
and 21,000 are enrolled in fee-for-service coverage, for those populations for whom MCO coverage is
optional. Between January and May 2014, there was an increase of 11,000 in the traditional Medicaid
program driven by the change in calculating adjusted gross income.

For the New Hampshire Health Protection Program, as of yesterday enrollment was just shy of 15,000.
Most are enrolled in the alternative benefit plan (ABP) through the MCOs, while approximately 1,000
were determined to be medically frail, and had a choice between the ABP and standard Medicaid.
Standard Medicaid includes long term care services, but not substance abuse or chiropractic treatment.
In addition, 700 people with access to employer-sponsored coverage are now being assessed under the
HIPP program, to determine whether payment of the employee share of this coverage is cost effective
to the Medicaid program. The HIPP numbers so far are significantly lower than projected; this could
change with additional targeted outreach which is currently planned. The New Hampshire Health
Protection Program (NHHPP) went live August 15 with fee for service coverage, and September 1st with
coverage through Managed Care Organization (MCOs). Commissioner Toumpas reminded everyone
again that this is all very complex and that there will be several different forums for providers going
forward, including a webinar.

Continuing on, Commissioner Toumpas talked about the third phase of the NHHPP-- the Marketplace
Premium Assistance Program. Under SB 413, the law establishing the NH Health Protection Program,
the 1115 waiver for mandatory premium assistance/coverage through qualified health plans (QHPs)
must be approved by CMS by March of 2015, or else the entire Health Protection Program, including
expanded HIPP and the bridge program, will end on June 30, 2015. If the waiver gets approved, the
eligible population will be covered under QHPs beginning in January 2016. DHHS is working with NHID,
Public Consulting Group (PCG) and Manatt Consulting to craft the waiver, which under SB 413 must be
filed with CMS by December 1st. The draft waiver will be posted publicly on October 1st, and there will
be public hearings and the opportunity to submit public comment on the draft waiver during the month
of October.
Lisa Guertin then asked about the enrollment numbers for the program, and where they are coming from. Nick explained they expect that by January 2015 there would be 24,000 people enrolled, with a total of 35,000 enrolled by the end of the second year.

Co-chair Scott Baetz brought the Board back to agenda item 4 and introduced Tyler Brannen (Health Policy Analyst at NHID) to give an update on the Wakely Report, which was issued on August 29 and which is posted on the Insurance Department website: [http://www.nh.gov/insurance/reports/documents/wakely_ma_rpt_pr.pdf](http://www.nh.gov/insurance/reports/documents/wakely_ma_rpt_pr.pdf).

Tyler explained that the Wakely Report is an analysis of what changes occurred in New Hampshire health insurance markets between 2013 and 2014, as compared with projections of likely changes made in 2012 by another contractor, Gorman Actuarial. To perform the analyses in this report, Wakely relied on enrollment, claims and premium data collected from New Hampshire insurers, third party administrators (TPAs) who administer self-funded health insurance plans for employer groups, and three public programs (Medicaid and the federal and state high risk pools). He told everyone that, for the entities from which data were collected, the total number of covered members increased by nearly 22,000 or 3%, and that enrollments in the individual market increased by 75% or nearly 26,000 individuals. Eighty percent (35,000 people) were receiving premium subsidies that reduced their premiums by 74% on average, and 16,000 enrolled in plans that provide for reduced cost sharing. One-third of the policies did not yet fully comply with provisions of the ACA that took effect in 2014, either because they were grandfathered (i.e., sold before the passage of the ACA in March 2010), or they were sold or renewed in 2013 and were allowed to continue based on a federal transitional policy announced in late 2013 to reduce the number of consumers experiencing plan terminations. Wakely found that the average age of covered individuals in the individual market increased by 3 years. Small group premiums remained relatively stable, which was consistent with what Gorman had projected.

Russ Grazier asked if there were any surprises from the prior assumptions, and Tyler answered not really, that Gorman projected well when they did their work in 2012. Individual market premiums were somewhat lower than projected, possibly due to the narrow network used in Anthem’s plans.

Jennifer Patterson continued on with the agenda with key consumer issues as people look toward the open enrollment period for 2015 plans, which begins November 15, 2014 and ends February 15, 2015. She reminded everyone of the exchange/marketplace model in NH: the Marketplace website (Healthcare.gov) is operated by the federal government, including IT functions and operations of the 1-800 number. Because New Hampshire is a partnership state, there are certain functions performed by in-state entities - Plan Management, performed by the Insurance Department, and Consumer Assistance, performed by NH Health Plan/Covering New Hampshire.

A draft of the Insurance Department’s talking points on “What’s New for 2015” was handed out. This document explains key choices for NH consumers and businesses in 2015 as well as the dates for open enrollment and network information for 2015. The Department’s key messages are:

- There are more choices for NH consumers and businesses in 2015 (Five carriers have applied to sell individual Marketplace plans, with four applying to sell to small businesses on the SHOP).
• Open enrollment (Nov 15, 2014-Feb 15, 2015) is the time for individual consumers to look at their options for 2015.
• Even people who are already covered should check their options for 2015, as tax credit information changes each year based on the pricing of plans for that year. Automatic renewal may not be the best option.
• The New Hampshire Health Protection Program is a new option for free or low cost coverage. Consumers eligible for this program in 2015 may no longer receive tax credits through the Marketplace. They should cancel any Marketplace coverage and tax credits prior to 1/1/15.
• Network information is available – summary information is posted on the Insurance Department website, and complete network information will be available on each carrier’s website once open enrollment begins.
• People can get help understanding their 2015 options. Navigators and other assisters can help explain general insurance concepts and how the Marketplace works. Licensed producers (agents and brokers) are the only assisters who are legally permitted to recommend particular plan. The Insurance Department’s Consumer Services unit does not help with plan selection or enrollment, but can assist consumers who have issues once they are enrolled in coverage.

The Insurance Department plans to release a consumer alert that incorporates these points. Also, while the Department will not be conducting outreach directly to consumers, they are available to participate in assister training and in helping ensure that NH consumers hear a consistent, NH-specific message.

Jenny then introduced Michael Wilkey, Director of Compliance and Consumer Services for the NHID. Michael thanked his staff for their many hours of work on plan review. He explained that all Qualified Health Plans(QHPs) are reviewed first by the NHID, then need federal approval. His staff at the NHID looked at all rates and forms, making recommendations and requiring changes to comply with legal requirements. On August 7, the Department made its recommendations to CMS on which plans should be certified as QHPs; however, even after that recommendation there was much back and forth over plan details with carriers and CMS. Michael anticipations that CMS will announce which plans are certified towards the end of the first week of October. Michael also handed out a list of carriers that are awaiting CMS approval, which can found on the NHID website.

http://www.nh.gov/insurance/legal/documents/pres_updated_network08.25.14.pdf. Five insurance companies have applied to sell health plans on the federal-operated New Hampshire Health Marketplace for 2015 and there are 62 plans, including both HMOs and PPOs. Also there are 8 dental carriers seeking certification. Each NH hospital is part of at least two carriers’ network.

The NHID website lists producers (agents and brokers) who are certified by CMS to assist on the Marketplace: http://www.nh.gov/insurance/consumers/documents/certifi_prod_exchange.pdf. Given the larger numbers of plans, carriers and networks for 2015, Jenny noted, licensed producers will play an important role in assisting consumers. The NHID is also working on a summary of the 2015 plans that we hope to make available to assisters, as we did in 2014.
Nancy Clark asked when this will be posted, and Mike explained that it would be after CMS approval of the plans. Nancy then commented on how pleased she is that there are five carriers - this is how it’s supposed to work. We now have choices.

Karen Hicks from Covering NH spoke about their plans for an outreach and education campaign, for in-person assistance, and how assisters will be functioning during 2015 open enrollment. There are 40 assisters placed throughout the state and they are working with producers. Covering NH will also have a marketing campaign with two main target audiences: people who have signed up (message: check options for 2015), and the 120,000 who are still uninsured.

According to a survey conducted by Covering NH at the end of the last open enrollment period, it’s mostly men, particularly younger men, that are still uninsured. This population knows less about the Marketplace. Much of the planned messaging focuses on affordability. Campaign elements were discussed, and how they will target people through TV, cable, radio, digital, direct mail, events, websites and videos. The campaign will address the availability of coverage through Medicaid as well.

Sandra Ruka noted her concern about North Country assisters having appropriate information that will not confuse consumers. Specifically, rural areas like the North Country don’t always hear as much information about programs. Karen explained that their campaign is targeted at individuals who meet certain demographic characteristics, with direct mail rather than through broad advertising. Sandra commented that it’s not just men who are uninsured - she’s hearing from middle aged women that they still feel they can’t afford coverage.

Nancy Clark asked for more detail on the demographics about the 120,000 uninsured. Karen replied that the best estimate was that they were 63% men, and 47% younger men (under 50). Most were employed in small businesses. Nancy commented that she is an EMT in a rural area and the population she sees is older women and young mothers.

Covering NH is producing material that people or organizations can use for their own outreach; they can put their logos as well as Covering NH and can contact Laura Simoes or Karen Hicks about this. Also, Covering NH plans to incorporate producers more prominently on its website/materials.

Evelyn Aissa asked if there was going to be the ability to filter plans based on particular doctors being in network. Karen replied that would be great but is not presently feasible; instead there will be a link to carrier’s sites which will have that information. Covering NH is, however, expanding its plan comparison tool to allow prioritizing based on geography and other plan features.

Jenny asked if there was going to be a NH-specific training for assisters. Margot Thistle from Public Consulting Group (PCG) said that it hasn’t been set up yet. Karen Hicks interjected that carriers as well as certified application consultants (CAC’s) will be invited to the in-person training.

Russ Grazier commented that there was still a lot of misinformation out there about who is eligible for subsidies. The Wakely report said 80% of Marketplace enrollees are getting subsidies; we need to get that message out there.
Scott thanked Karen for providing her update and we continued on….with carrier updates. Lisa Guertin reported that Anthem is getting ready for enrollment and working with CMS. Christine Alibrandi from Delta commented that she was happy that SHOP is not being tested in NH. A representative from Maine Community Health told everyone that they were continuing to build out and will have more to share at the next meeting.

After Scott asked for any more comments, Lisa Morris commented that she and Dianne Chase were charged at the last meeting with developing a letter about partnerships between assisters and producers. They will have this by the next meeting.

The next meeting is October 10 in Room 100 of the Walker Building.

At this point comments from public were taken. Karen Kelly of Citizen Alliance gave kudos to everyone for doing a good job NH. Many people are now receiving tax credits and other subsidies; when she attended a meeting in Washington D.C., she learned that many states were far behind NH in terms of enrollment.

The meeting ended at 10:50....