

Pennsylvania Health Insurance Exchange Authority – Board of Directors Meeting

January 23, 2020



Pennsylvania Health Insurance Exchange Authority



Meeting Agenda

1. Preliminary Matters
2. Standard Administrative Updates
3. Standard Technology and Operations Update
4. Discussion of Annual Schedule
5. Executive Session

Preliminary Matters



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Administrative Updates



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Administrative Updates

Updates

- Personnel
 - Chief Information Officer
 - Chief Financial Officer
 - Other updates

- Procurements

- Stakeholder Engagement
 - Advisory Council
 - State-Based Exchange partners
 - Insurers



Insurer Engagement

- One-on-one meetings with each medical insurer are complete
 - More detailed project introduction with timelines and review of key insurer activities
 - Sought feedback on engagement approach
 - Opportunity for open questions and discussion with each insurer
- Dental insurers are engaged in working groups
- Insurer Working Groups
 - Technical/EDI Working Group – 1/15
 - Service Coordination Working Group
 - Policy Working Group
 - Frequency of meeting will vary, driven by needs of each working group
 - Working groups will continue beyond implementation into ongoing operations

Standard Technology and Operations Update



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Standard Technology and Operations Update

Agenda

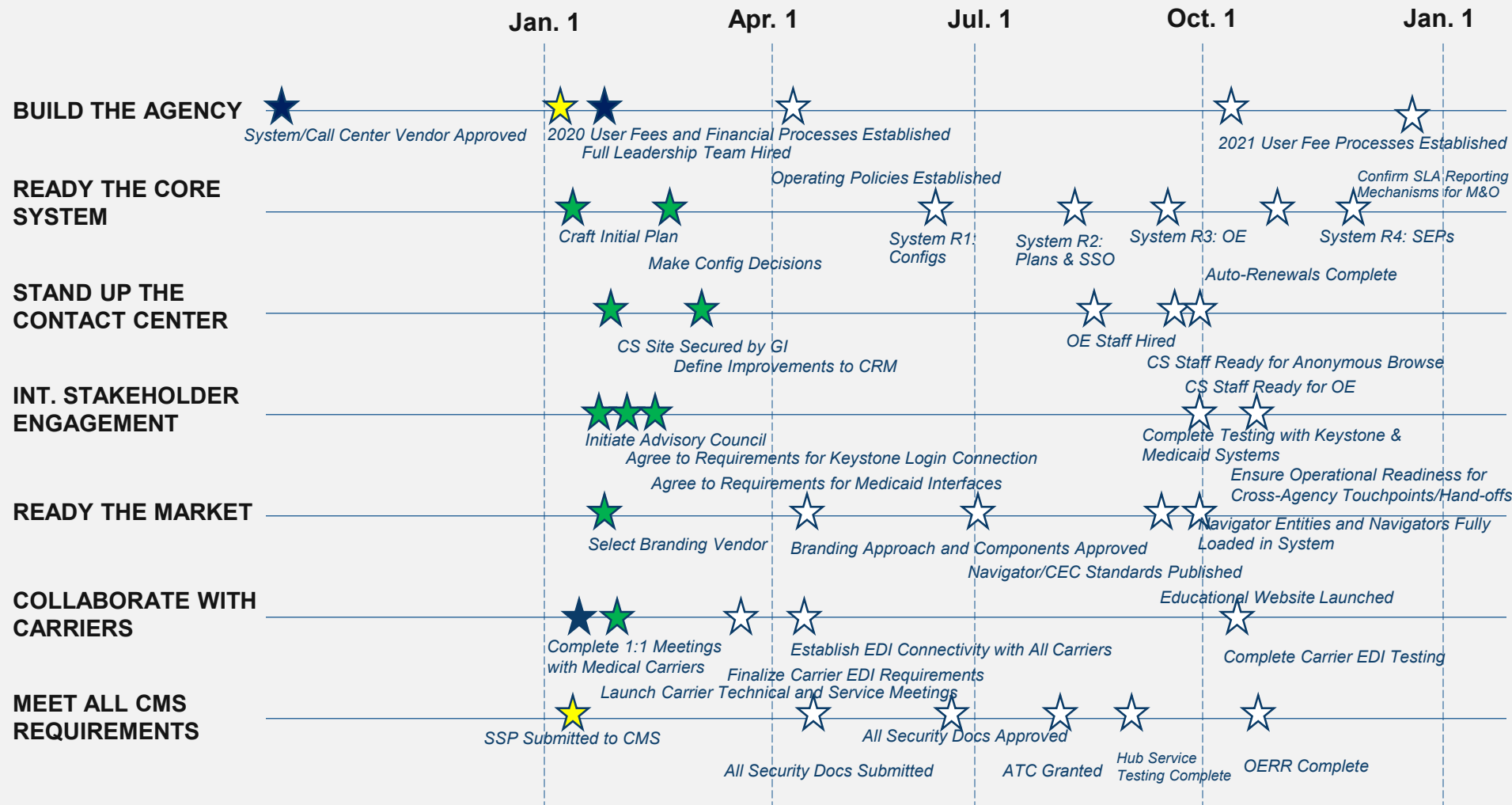
- Status Report
- Consideration of operational, technical and policy questions



Standard Status Report

A continuous work in progress

- Not Started
- In Process, On Track
- In Process, Behind Schedule
- In Process, At Major Risk
- Completed





Policy and Operational Decision Process

Section overview

- Decisions are made focusing on our Strategic Goals:
 - A seamless transition
 - Higher quality access and customer service
 - Lower costs and lower premiums
- Examples of decisions determined by staff
- Examples of decisions requiring Board input
- Board engagement process:





Examples of Decisions Determined by Staff

Decision	Policy Goal(s)	Benefits	Challenges
No Pre-OE Shopping Period (“Soft Launch”)	Provide best customer experience possible	<ul style="list-style-type: none"> • Additional time for readiness testing & auto-renewal validation • Reduces potential customer confusion with FFM transition • Reduces potential customer frustration of finding a plan pre-OE that can't be saved 	<ul style="list-style-type: none"> • Customers cannot see plans earlier than start of OE • Unable to try to solicit new Consents to Auto-Renew from customers who denied in the past
Pre-Certify Brokers Migrated from FFM	Use as up-to-date FFM information as possible for migration and retain as much customer history information as possible	<ul style="list-style-type: none"> • Additional time before customer's FFM data migration begins • Retains broker-customer links even for brokers where limited FFM data is flawed 	<ul style="list-style-type: none"> • May require technical work to alter process from NV model • Process needed to address incomplete FFM broker info • Will require additional step to later decertify brokers who don't complete requirements
Do Not Auto-Renew Members on Application Not on Enrollment	Have auto-renewal parallel 2020 plan coverage as much as possible	<ul style="list-style-type: none"> • Avoids potential enrollment of members never intended to be enrolled 	<ul style="list-style-type: none"> • Will not be optimum for small number of cases in which family member was added with intent to enroll, but enrollment not completed



Examples of Decisions Needing Board Input

Stakeholder feedback is needed before these decisions can be brought to the Board

Decision	Policy Goal(s)	Benefits	Challenges
Default APTC Percentage (On Initial Application and At Auto-Renewal)?	Provide best customer experience possible	<ul style="list-style-type: none"> Setting value at less than 100% could lessen chances that customers have to pay more in taxes at the end of the year 	<ul style="list-style-type: none"> Presenting customers plans that cost more (if less than 100% APTC is applied) could discourage some purchases Could be significant need for technology work to implement not only default changes, but shopping flow changes
Two-Factor Authentication for Brokers & Assistors (e.g. Navigators, CACs)?	Secure customer information without causing undue operational burden on community partners	<ul style="list-style-type: none"> Provides extra layer of security for customer information for those customers working with brokers and assistors 	<ul style="list-style-type: none"> May make operational process slightly more challenging for these partner users



Policy for Discussion

Decision	Policy Goal(s)	Benefits	Challenges
Timing of Auto-Renewal (Before, During, or After OE)?	Create greatest chance for operational success with minimal disruption of stakeholders	<ul style="list-style-type: none"> Pre-OE Auto-Renewal and communication of records to carriers preferred by all carriers we have asked to date 	<ul style="list-style-type: none"> This has been a process the FFM has been changing over the years, so we want to be sure to align with desires of the carriers if possible

Summary of Stakeholder Feedback

- Insurers and stakeholders had agreement on timing of Auto-Renewal prior to OE
- Insurers also agreed the current FFM process has worked
- Consensus among medical carriers that the most recent FFM process of transmitting renewals to carriers at the beginning of OE is preferred as it allows renewing customers to see their Auto-Renewal at the beginning of OE and then decide to shop or pay their renewal invoice
- Stakeholders expressed that Auto-Renewal running prior to OE enhances customer awareness of OE and serves as an educational outreach opportunity. There was opposition to running Auto-Renewal after OE due to customer confusion and their inability to change plans at the time their notice is received (post-OE).

Staff Recommendation

- Transmit Auto-Renewal at beginning of OE.** This provides the most cohesive experience for renewing customers, and allows them to easily understand what they be enrolled in if no action is taken during OE.

Discussion of Annual Schedule





Proposed Meeting Schedule

2020

- January 23 – Harrisburg
- February 5 – phone (*if necessary*)
- February 19 – Harrisburg

From this point forward, the Exchange Authority proposes to meet in Harrisburg, the afternoon of the ***third Thursday of each month.***

- March 19
- April 16
- May 21
- June 18
- July 16
- August 20
- September 24**
- October 22
- November 19
- December 17

**meeting proposed for the fourth Thursday of the month due to scheduling conflict

Adjourn



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Exchange Authority Board of Directors Meeting

Public Session



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Motion

Recommended Motion: *Based on the evaluation team's best value recommendation for RFQ 6100048766, I move to approve the evaluation team's recommendation for branding and design services and authorize the Executive Director to negotiate and then, upon agreement, execute a contract for such services.*

Adjourn



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