

AGENDA
PENNSYLVANIA HEALTH INSURANCE EXCHANGE AUTHORITY
BOARD of DIRECTORS MEETING

Date: August 20, 2020

Time: 12:00 p.m.

Location: Skype - +1 267-332-8737,,693402863#

<https://meet.lync.com/pagov/tglazer/HLQSPW34>

1.0 Preliminary Matters

1.01 Call to Order

1.02 Roll Call

- Commissioner Jessica Altman, Pennsylvania Insurance Department (Chair) - **Present**
- Sheryl Kashuba, University of Pittsburgh Medical Center Health Plan (Vice Chair) - **Present**
- Paula Sunshine, Independence Blue Cross - **Present**
- Aji Abraham, Capital Blue Cross - **Present**
- Jessica Brooks, Pittsburgh Business Group on Health - **Present**
- Antoinette Kraus, Pennsylvania Health Access Network - **Present**
- Dr. Rachel Levine, Department of Health – **Absent**
 - Meghna Patel, Department of Health - **Present**
- Catherine Buhrig, Director of the Bureau of Policy for the Office of Income Maintenance at the Department of Human Service - **Present**
- Laval Miller-Wilson, PA Health Law Project - **Present**
- Mark Nave, Highmark - **Present**
- Tia Whitaker, Pennsylvania Association of Community Health Centers - **Present**

1.03 Approval of Previous Meeting's Minutes

- *Discussion: None*
- **Motion:** *To approve as true, correct and accurate the minutes recording the events, actions and details of the [July 17, 2020 Public Meetings of the Pennsylvania Health Insurance Exchange Authority Board](#).*
- Motion:
 - Aji Abraham
- Second:
 - Sheryl Kashuba
- Yays:
 - All Board Members
- Nays:
 - None

1.04 Opportunity for Public Comment

- Please note that public participation is permitted at this meeting, as required by the Sunshine Act, 65 P.S. § 280.1. In the absence of official policy relating to public comment at Board meetings (which the Board anticipates will be forthcoming), and to ensure the orderly progress of today's meeting, all comments should be directed to the Chairperson, and should be limited to no more than five (5) minutes in duration. Questions asked of the Chairperson or the Board as part of public comment may or may not be addressed at the meeting. **There were no public comments.**

2.0 Action/Discussion Items by the Board

2.01 Standard Updates – Sherman started by thanking everyone for attending this very important effort. He then started with the following updates:

- **Administrative** – We’ve made a few hires since last meeting – **Kelsey Cameron** joined us in the Communications Associate position. Kelsey comes to us after 7 years at the engineering firm McCormick Taylor where she served as a Communications Specialist.

Tammy Kennedy joined the IT Team as our Reconciliation Analyst. Tammy has over 15 years EDI Healthcare Data Exchange related experience. She has worked for DST, Delta Dental and Highmark over the years.

Ben Schrass, another member of the IT Team, will be our Data Manager. Ben brings over 20 years of IT and Management experience. Ben will oversee the Reconciliation Team as well as our organizations data environment and, as his title suggest, will be responsible for all things data.

Those are the 3 new team members. We have a number of open positions across the divisions of the organization. We are hiring additional Reconciliation Specialists, a couple of OPS Team members, someone on the Finance Team and a couple members for our External Affairs Team. We are growing and continuing to grow and we’re well positioned at this point to be prepared, from a personnel perspective, to stand up and launch this organization.

- **Stakeholder Engagement** – Sherman turned it over to Hannah Turner (Director of Operations) to talk about the work we have going on with our insurance partners.
- **Insurers**
 - **Discussion:** Hannah shared Insurer updates including EDI Technical, Service Coordination and Insurer Policy Working Group updates consistent with the slide. She also shared that the Plan Preview process started today. Plan Preview is where the Insurers are able to log into our system and view the plans that we have loaded from SERFF, behind the scenes things such as templates and information from PID, but most importantly, they will be able to preview what their plans will look like in the customer plan shopping experience. The carriers will only be able to see their own products, but they can run as many different scenarios as they want, validate how their plans are displaying, their logos, URLs to different materials, etc. The goal is that by the end of the Plan Preview process, Insurers will be able to sign off that plans are accurate and displaying properly. That will allow us to start the renewal process because we can’t start renewals until we have those plans locked down in the system. However, there is a process for corrections that need to be followed through the PID if they need to update their template. PID will review and approve and, once completed, we will push the updated plan information to our system. Coordination is ongoing with PID to be certain this runs smoothly and quickly. We have August 20th through September 14th slated for Plan Preview period. The Board had no questions.
- **Brokers**
 - **Discussion:** Erik Huet, Policy Analyst, gave everyone an update on Broker Pre-Registration, Broker Training efforts and our Broker Engagement and Outreach consistent with the slide. Paula Sunshine asked about “Co-Branding with Pennie” – what that means and where it occurs. Kyrie Perry (Chief of Staff) explained that when we say co-branding, it’s another organization be it an insurance company, a brokerage wanting to have both their branding as well as ours on one piece of collateral. So there are Brand rules around that as well as an approval process in which Pennie reviews the materials. This process is something that we have been talking to our partners about, both Pennie

certified broker community as well as our insurer partners. There are times when our external partners are interested in having our logo used on their materials. Sherman added that the Coffeehouse chat was virtual as he's not been inside a coffeehouse in quite some time, but to reiterate what Erik said, it garnered a lot of interest from the producer community. The URL Insurance Group, led by Deb Wilkinson, did a great job of driving interest to that. It was an effective means for getting brokers to come in and pre-register.

- **Other Stakeholders**

- **Discussion:** Kyrie shared that we are continuing to engage our stakeholders through our Outreach & Education Workgroup. At the August 5th meeting, we focused the conversation on what would be most beneficial to include in the open enrollment toolkit we'll be making available to external parties. Our next Advisory Council meeting is coming up in September and we continue to stay in close communications with other stakeholder groups such as municipalities, community and faith-based organizations, other state based marketplace partners, etc and we are doing a lot to expand connections we have and leverage those in existence. Paula Sunshine asked how we plan to facilitate the switch from in-person to virtual? Antoinette Kraus also asked about the assister training and certification for enrollment? Kyrie stated that we will be speaking about both these subjects today. Hannah will be giving an update on the call center and we will do our standard communications and outreach update that will include discussion on a new idea we're seeking board approval on to help augment the current Outreach plan. We will also go into details about the exchange assister network and specifically training.

- **Technology and Operations**

- **Discussion:** Jennifer Lloyd started the discussion with Stars on a String consistent with the slide. The Board had no questions.
- **Discussion:** Hannah continued by updating everyone on the Call Center consistent with the slide. **Antoinette Kraus** asked about language access and what that will look like if help is needed in a language other than English when calling into the Call Center. Hannah explained that the first greeting you get when calling in will offer English or Spanish. If you need other languages, there will be a language line available with a translator to facilitate the communication. **Aji Abraham** asked if there will be practice sessions with the CSRs to be sure they are refreshed on everything they were taught? Hannah said that after the training they go through a variety of mock phone calls with other staff as well as customer experiences in the system. There are also refresher policy trainings happening for the earlier classes throughout the period up to go live.
- **Discussion:** Duane McKee (CIO) moved us on to the Tech Update. The September Release Progress is on track, the FDSH Testing has been completed, the Security Assessment has been completed and submitted to CMS and Insurer Connectivity Testing is moving along as expected consistent with the slide.

- **Communications and Outreach**

- **Creative & Web Updates**

- **Discussion:** The meeting continued with Kyrie thanking the Board for sharing their opinions on creative concepts as we are moving very quickly and appreciate them weighing in. We have decided to go with a slightly adjusted concept than what was originally proposed. We will be moving forward with creative concept #1 – "*Pennie gets you covered*". We are also on track to launch the Pennie.com website on August 24th. **Sheryl Kashuba** asked if they would be able to look at what the changes are that were made to Concept #1. Kyrie explained that the original concept was Pennie HAS you covered, and the language change we made was Pennie GETS you

covered since it's Pennie's role to connect our customers with the Health plan options available. Currently we do not have anything else to share, but as things progress, we will be bringing it to the Board. Sheryl stated that she was hoping to have a second look at it as she thought it was a bit confusing and potentially suggesting that Pennie was providing the coverage. She thinks a 2nd look would be helpful.

- **Customer Communication Plan**

- **Discussion:** We are firming up our communication efforts across the board consistent with the slide including finalizing our assets to be included in our OE Toolkit which will be made available towards the end of October to anyone who is interested in helping us spread the word. **Antoinette Kraus** asked if there was a plan for other languages with the Communications Toolkit? Perry said that our Outreach and Education Workgroup has been very instrumental in helping us understand. Our goal for the OE Toolkit is to have resources available for any stakeholder population. We currently have 5 or 6 different languages that we will have a variety of assets in. Everything will be in English, Spanish along with several other languages so that it is will be universally relevant and usable. And any additional suggestions are always welcome.

- **Customer Communication Plan with Insurer**

- **Discussion:** Continuing to work with our Insurer partners to be sure that our communication to customers is clear and consistent with their communication, sharing language that is to be used in their customer communications and updating insurers with notices consistent with the slide.

- **Transition Communications**

- **Discussion:** As previously shared, there are communications from CMS to the current Healthcare.gov customers that explain the transition to Pennie. In order to cut down on the confusion, Pennie will be sending out a Welcome to Pennie mailer in advance of the CMS communication. **Paula Sunshine** asked what the general timing of this is? Kyrie stated that the CMS notice is going out October 15th and we anticipate sending our mailer the first week of October. Sherman also shared that the letter may not reflect all our requested changes which is why we wanted to send a straightforward communication mailer about what's coming in terms of the transition to try and head off some of the confusion. **Laval** suggested that we maybe not wait until the week before and that getting this communication out at the end of September may be more helpful? Kyrie stated that we want to be sure that people are connecting that these two communications are connected. Our mailer is a simple reminder to be on the lookout for the notices as there is very important information in them. We don't believe that increasing the window between the first communication and the time they can take action is necessarily the best idea. Sherman added that the shared communications plan we have with them has been working well.

- **Pennie Ambassadors – Expansion of Outreach Team**

- **Discussion:** Kyrie explained the purpose of these Ambassadors are to establish a presence, increase educational efforts as well as assist with direct customer outreach efforts. They would need to complete Assister training and would conduct educational outreach. The Ambassadors would interact with hard to reach population which could include the Medicaid eligible residents, therefore Medicaid matching funds could be used to support this project. In year one, it is very critical that we are everywhere. Unfortunately we only have so many resources to put towards these specific efforts and we believe that this enhanced team of Ambassadors

would help us create connections and relationships. Sherman added that the inspiration for this idea came from a call from Laval. Shortly after the Cares Act passed, Laval suggested going after some Cares Act funding to help fund outreach initiatives. Although we did explore that, it is not feasible but we really liked the idea. We're looking to target who we could bring in and talk to. **Laval** asked who is doing the hiring and managing them and their time? Should we have Cognasante do more? Sherman stated that's a very fair question and concern. Our Outreach Manager, Scott Yeager, will oversee, with direction from Kyrie, this initiative. We are in the process of hiring additional outreach specialists so the Outreach Team of 2 will split their time with one being accountable for oversight and collaboration with the Assister team through Cognasante and the other will more directly manage this team. **Antoinette** asked what the coordination plan is, how do we envision the staffing situation for it – regional, local neighborhood? Kyrie explained that we anticipate splitting them up 2 per rating area and others in the areas with the highest uninsured rate. **Antoinette** also asked about travel reimbursement. Sherman stated that we are planning on reimbursing for actual travel, but there is also over the phone and virtual engagement and outreach. **Paula Sunshine** asked what else we should be doing, are there enhanced data analytics, is there better advanced targeting? What are the other things to consider besides more face to face? Kyrie stated that she agrees that there should be more conversation and there are other valid ideas in addition to these. These ambassadors would be an extension of our team who will help us spread the word in this critical time period. These Ambassadors would be doing whatever works in their respective locations for the communities they are asked to serve. **Paula** asked Antoinette or Laval if they see this as overlapping or complimentary. **Antoinette** stated that it has to be coordinated well to not be overlapping and thinks that there is existing community-based organizations that would be able to do this and are already based in and trusted within their communities. **Tia Whitaker** stated that she thought we need to take a step back and spend more time talking about this. Sherman acknowledged that we can do just that but in response to Antoinette's question, it is recognized that if the Board is not prepared to move forward with this, we can gather more information and come back to it at a later date. **Antoinette** asked to go through the timeline to hiring people and **Laval** also was interested in that. He also stated that he supports this concept but the question is deploying, logistics and coordination. Perry added that she believes these ambassadors would be helpful to Cognasante because they are talking to so many additional groups and individuals. Sherman went back to Antoinette's question on timing – she asked about the plan to hire staff, how long are they working, training. Sherman stated that we would start recruiting immediately and bring in resources. We would want to hire for 4 months – October 1 through end of January. Kyrie added that the current census team project will be completed by end of September and if we are to try and connect with those resources, that would be the timing to also consider. **Aji Abraham** added that he doesn't think you can over communicate enough and keeping with that theme, if there's way to reach the hard to reach and help spread the message – he's all for it. **Chair** thanked everyone for the conversation and, having heard the teams perspective, if they wanted to decide today or come back together at a later date after further discussion? **Antoinette** stated that she would like to see a coordinated and targeted approach to make that decision. **Tia** agreed that coordinated and target outreach are best and is a conversation that will take place. **Laval** added that maybe the Ambassador team include organizations and not just individuals and could the compensation structure include

organization's getting \$5,000 or \$10,000 where the organization is an Ambassador to promote Pennie? **Aji & Sheryl** also stated that they are in favor of the proposal and prepared to vote on it now. **Chair** suggested that Zach and team get the Boards approval to continue exploring and get this started and have a report in at the next Board meeting after discussions with Cognasante on ensuring that it is very coordinated with the Assister program and also a deeper thinking on Antoinette's thoughts on geography, location, focus and targeting. That way we aren't holding back the process from starting and also keeping the Board apprised and making sure it's done in the most effective way. Sherman shared that he thought that makes sense and warrants additional conversation with our Assister partners, and would also offer that we want to do this in partnership and collaboration with the Cognasante team and if we talk it through with them and find that there's barriers to making this work successfully we can come back to the Board in September share the outcome. **Paula & Mark** both stated that time is of the essence and we need to move on it now. **Chair** suggested that we give approval and get the process started and do whatever check in is appropriate. There's always the opportunity to pull back, if necessary, but we don't want to delay if this is the direction we're going. **Antoinette, Jessica, Mark & Paula** are all good with this approach.

- **Motion:** *To give approval today so the Pennie team can start preparing position descriptions and get the process started recognizing that we will do an appropriate check-in and acknowledging that there is always an opportunity to pull back if the Board has concerns.*
- Motion:
 - Aji Abraham
- Second:
 - Jessica Brooks
- Yays:
 - All Board Members
- Nays:
 - None

2.02 Implementation Progress Review – Sherman continued by discussing where we are in the timetable and give a few more details behind some key milestones that are in front of us associated with the implementation and launch of Pennie. He also wanted to share some very exciting news – we received a formal letter from CCIO stating that we are in a position to transition to a State Based Exchange, that our progress against the blueprint application is where it needs to be and they (Feds) will cease activities around exchange operations in 2021.

- **Operational and Functional Call Center** - Sherman shared that while the information on the next few slides may be repetitive, they were meant to articulate what we are working towards, the effort underneath it and the potential risks and how we intend to mitigate.
 - **Discussion:** Sherman continued by sharing that we are well on our way to hiring and training our CSRs, building out IVR and ticketing system as well as a range of customer service efficiency and quality consistent with the slide. The biggest perceived risk is customer and call volumes exceeding expectations and we feel the best way to mitigate the situation is simply to be prepared. The Board had no questions
- **Medicaid/CHIP Call Center Handoffs**
 - **Discussion:** continuing with the theme of customer service, Sherman continued the discussion with the handoff and interagency partnership with the Department of Human Services, Office of Income Maintenance. As in the previous one, our efforts here are all about planning and being prepared,

making sure that there has been sufficient training we have written out processes. The Board had no questions.

- **Pennie Appeals**

- **Discussion:** after a brief break, Sherman continued the conversation with the appeals process, consistent with the slide. We have worked to bring in the independent support necessary to administer and hear these appeals and, after ongoing conversation and deliberation, we have decided to go with the Department of State Independent Hearing Examiners Office. They will provide hearing officers/examiners to oversee and administer appeals. The officers will go through some training around program eligibility to ensure they understand the complexity of the application process. They will be ready to start hearing appeals in November. The risk around this is more on the internal side of things with our Office of Chief Counsel that consists of 2 attorneys who will play a role in representing the agency in hearings. We have a goal of making sure that as many appeals as we can informally resolve as possible gets done. **Tia** asked if there are timeframes around them? Currently there are not, and folks are told there's no timeframe and it's hard for consumers to understand and Navigators to work with the consumers. Jon Koltash (Chief Counsel) explained that once the appeal is filed, we have 90 days from day of receipt to process it and either resolve it through informal resolution or take it a hearing for a hearing examiner to issue an opinion. The Federal timeframe is 90 days and we're required to hit it. It was part of the discussion when we determined the group of examiners we were going with and we fully anticipate hitting it as close to 100% as we can. What will be flexible is if the consumer is requesting an extension of time, we're not going to oppose those, but that could theoretically make a handful of cases fall outside the 90 days. But the objective is every case that can be handled in the 90 days will be done. **Tia** asked if consumer APTCs will remain in place automatically during those 90 days? Koltash explained that they need to request it. There's a place to request your coverage remain as it is, but there are risks with that. If they lose their appeal, there could be tax consequences. But there are some mechanisms to leave that in place and it is located on the appeals form we are developing. **Laval** commented that his legal aid office has long been interested in the performance of the Federally facilitated marketplace and it's been a bit of a black hole understanding that system. One of the benefits of going to a state-based exchange is that we have a better understanding of the volume and types of appeals and appreciates the work the team has done in connecting with stakeholders.

- **Certified and Trained Assisters**

- **Discussion:** The meeting continued with Sherman talking about the certification and training process for Assisters. He did also indicate that the work as just begun with the Cognasante Impact Team so some of this is still a work in progress. Key milestones around this process is to get individual agreements finalized and available for Assister signatures by October 1st which is also the timeframe in which we want training available for Assisters. The risks associated with that is not moving quickly enough in getting correct permissions and access levels, getting Assisters in and signed up and trained on the system. And again, the mitigation around this is planning and working extremely closely with our partners at Cognasante Impact to be sure we are working this out and staying on track with the Assister program. The Board had no questions.

- **Certified and Trained Producers**

- **Discussion:** We have an all hands-on deck push to get as many existing and new producers pre-registered by August 31st. For existing Producers, that will make the process of migrating the data into the Pennie platform from Healthcard.gov easier as their book of business will be associated with them

once they are certified. It is more difficult if this is not done by pre-registration deadline, but still possible. We have already had great success, as was mentioned earlier, we have over 1,800 Producers signed up and registered. Hannah added that for the Producers who are not able to meet the pre-registration deadline, the biggest issue is the data migration and we will not be able to pull over that connection with their customer information. **Antoinette** asked a question about the Assister training – is the process for community-based organizations who want to be Assisters the same as the Cognasante process and the other question is meeting the state certification of background checks and fingerprinting are usually good for 2 years. Will we have to have our folks start over or will it carry over? More concerned with the timeline. Kyrie explained that if an Assister has their certification, they do not need to renew. However, we do ask that they take the new training. If an organization wants to become an Assister organization, they would reach out to Cognasante.

- **Release in Production**
 - **Discussion:** Sherman related that we are driving towards standing up and launching the platform on September 24th and we are in many different stages of testing including the end to end user acceptance testing of the Pennie platform consistent with the slide. The risk here is we don't have the functionality needed. The mitigation is, we have some "bumper" time worked in so that all test cases could be executed and passed, address known issues and/or define operation workarounds. But again, these are not the reality, but are our contingency plan if needed. Duane added that right now we are seeing less defects and failed test cases so those are positive indications. The Board had no questions.
- **Customer Automatic Renewals**
 - **Discussion:** Sherman explained that after we take the platform into production, we will be executing on our renewal process. There has been a lot of planning that has gone into the work associated with this from the data migration of existing customers from Healthcare.gov to the Pennie platform which includes testing and dry runs and is ongoing. The Board had no questions.
- **Authority to Connect (ATC) Granted**
 - **Discussion:** On the last slide, Sherman explained that without an ATC we would not be able to function. This work is on track and all the information the Federal government needs from us has been submitted. It's important to note that we would not have received the letter earlier stating we ok to move forward with the launch of Pennie if this was not coming from the Federal government. We are confident this is well in hand but wanted to highlight as an important milestone in the coming weeks. The Board had no questions.

3.0 Executive Session

4.0 Resume Public Session

4.01 Vote on Hearing Officer Authority

- *Discussion: None*
- **Motion:** *To designate the Chief Hearing Officer at the Pennsylvania Department of State, or her designees, as presiding officer for all administrative proceedings involving appeals from orders or decisions issued by PHIEA. The Chief Hearing Officer or her designee will have the authorities provided by 1 Pa. Code § 35.185 and shall issue final decisions on behalf of PHIEA. Furthermore, to the extent decisions must be made by an agency head regarding administrative appeals, we authorize the Executive Director to exercise those powers.*
- **Motion:**
 - Aji Abraham

- Second:
 - Laval Miller-Wilson
- Yays:
 - All Board Members
- Nays:
 - None

4.02 Vote on Media Services RFP

- *Discussion: None*
- **Motion:** *To adopt the recommendation of the Evaluation Committee regarding Media Buying Services RFP No. PHIEA 20.04 and permit PHIEA to negotiate and, if appropriate, execute a contract with Harmelin & Associates, Inc.. We further authorize the Executive Director to sign a contract on behalf of PHIEA, should an agreement be reached.*
- Motion:
 - Aji Abraham
- Second:
 - Paula Sunshine
- Yays:
 - All Board Members
- Nays:
 - None

5.0 Adjournment