

The logo features the word "pennie" in a white, lowercase, serif font. A dark blue semi-circle is positioned above the dot of the final "i". Below the word "pennie" is the tagline "connecting Pennsylvanians to health coverage" in a dark blue, lowercase, sans-serif font. Both the word and the tagline are followed by a small "TM" trademark symbol.

**pennie**<sup>TM</sup>  
connecting Pennsylvanians to health coverage<sup>TM</sup>

A large, dark blue, curved graphic element, resembling a thick arc or a stylized 'P', is positioned in the upper left quadrant of the slide.

# Pennie Board of Directors Meeting

June 17, 2021

# Agenda

- **Preliminary Matters**
- **Action/Discussion Items by the Board**
  - **Administrative Matters**
  - **Update on Pennie and the American Rescue Plan**
  - **OEP End Date**
  - **Easy Enrollment**
  - **Health Equity**
- **Adjournment**



# Administrative Matters



# Administrative Matters

Commonwealth telework policies will change at the close of the emergency declaration, with some agency employees returning to the office full-time starting in July.

- Pennie does not intend to have employees return to the office full-time and needs to adopt a **permanent policy** related to its work environment
- The Commonwealth has adopted a permanent telework policy.

## Telework makes sense.

- Most Pennie staff have **only experienced a remote environment**
- Policies and processes have been created with only a remote workforce in mind
- Pennie has routinely surveyed staff and **0%** of the respondents wish to return to an office full-time
- Respondents feel they can reach colleagues when they need while working remotely and they have the right mix of tools, services and training to be productive from home

Delegated authority to establish a permanent policy is requested from the Board of Directors. The details of the established policy as well as periodic updates on the its efficacy will be shared in future meetings.



# Updates on Pennie and the American Rescue Plan



June 2021

## Timeline Review



**Customer Redetermination** – Eligibility for current customers will be redetermined by Pennie. The enhanced subsidies will be automatically updated in their plans.

# ARP Status Updates

## Technology and Call Center

- All eligibility and enrollment processing completed on time between 6/2-6/4
- No system-wide issues currently identified; a few minor defects are being worked for small subsets of the customer population
- Call center volumes have been steady, building throughout the month and peaking in the lead-up to the end of month deadline
- ARP Phase 2 driven traffic was significant in the first two days following the updates to eligibility and financial assistance

## Insurer Coordination

- Transmission of updated enrollment files to insurers is on schedule and insurers are expecting to complete processing before generation of next regular monthly customer invoices
- The transition of off exchange customers includes all major medical insurers offering some form of benefit accumulator carryover for current off exchange customers moving to Pennie midyear to take advantage of new savings



# ARP Status Updates

## Marketing and Communications

- Ongoing email campaigns are running for: 1) customer leads 2) customers that need to act, 3) customers whose accounts have been updated, 4) those eligible for unemployment compensation and 5) potential customers who have started an application but not enrolled
- ARP/Rebalancing talking points, factsheets and collateral materials are available for stakeholders at [agency.pennie.com](https://agency.pennie.com)
- Advertising and media relations continues including an upcoming press conference on June 24 in partnership with the YMCA, PID and the Dept. of Health promoting Pennie, ARP and the YMCA Health Equity Tour
- The YMCA Health Equity Tour, for which Pennie is the lead sponsor, is in full swing, with ~70 events planned from May '21 – Feb '22 hitting all 67 counties across PA with some aligning with vaccination events.

## Brokers/Assisters

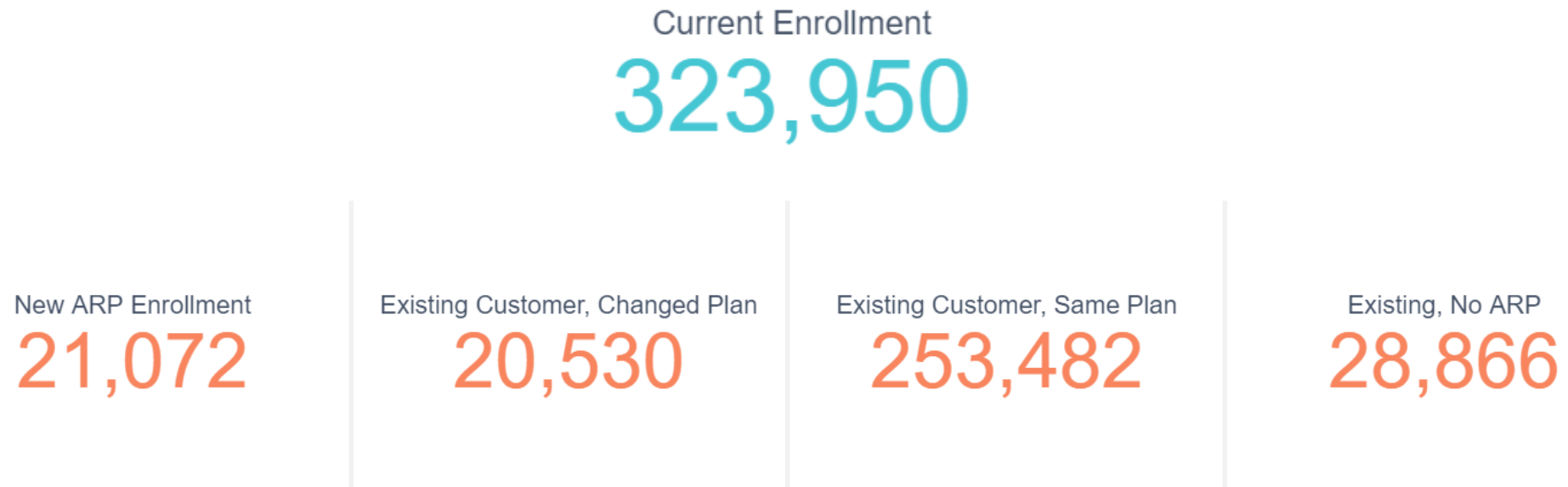
- Brokers and Assisters have received talking points, factsheets and other information to help them help their customers throughout the remainder of ARP
- Brokers and Assisters have regular, separate Lunch & Learn sessions to help them with their better acclimate to technical topics
- Both brokers and Assisters have been invited to participate in the YMCA Health Equity Tour stops



# Executive Dashboard



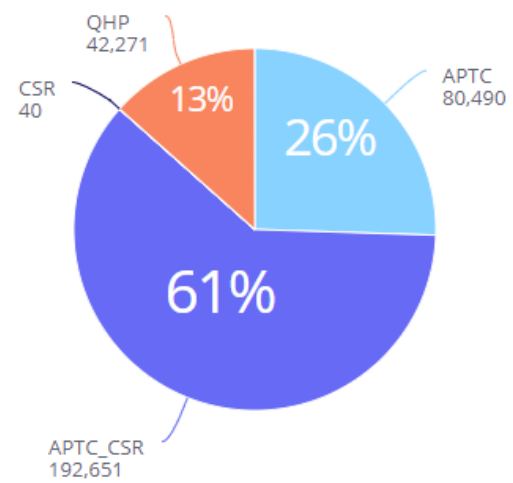
# Platform (Exchange) Metrics for 06/08/2021



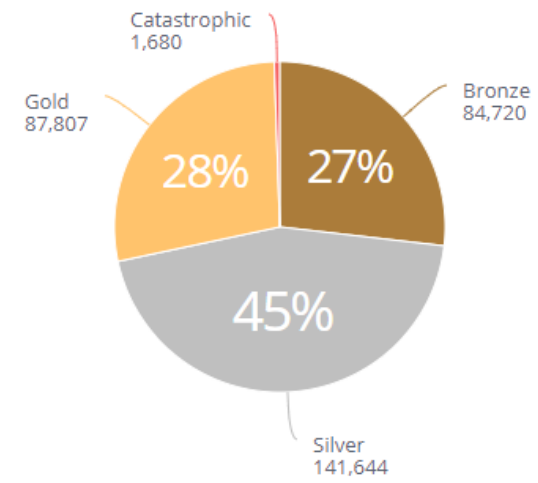
**Note:** Excluding "Current Enrollment", data shown is for enrollments that have application eligibility received since 4/16/21 and thus affected by ARP.

# Enrollment Data: As of 04/15/2021

Financial Assistance (Medical) - 4/15/2021 Total

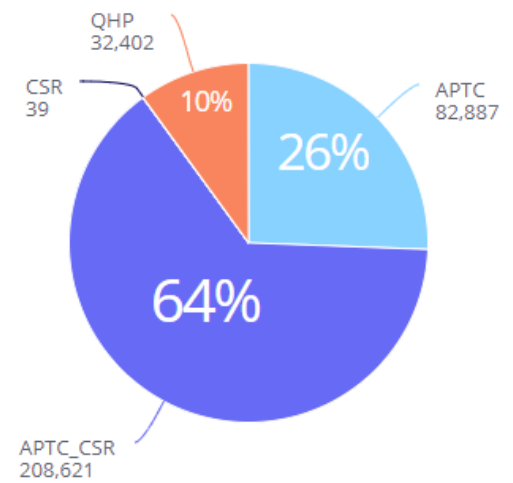


Metal Tier (Medical) - 4/15/2021 Total

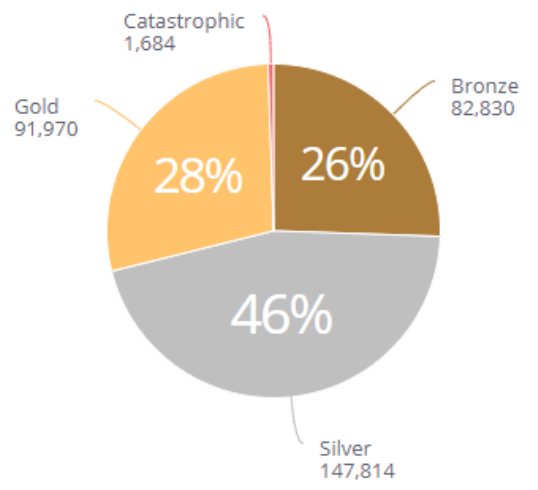


# Enrollment Data: As of 06/08/2021

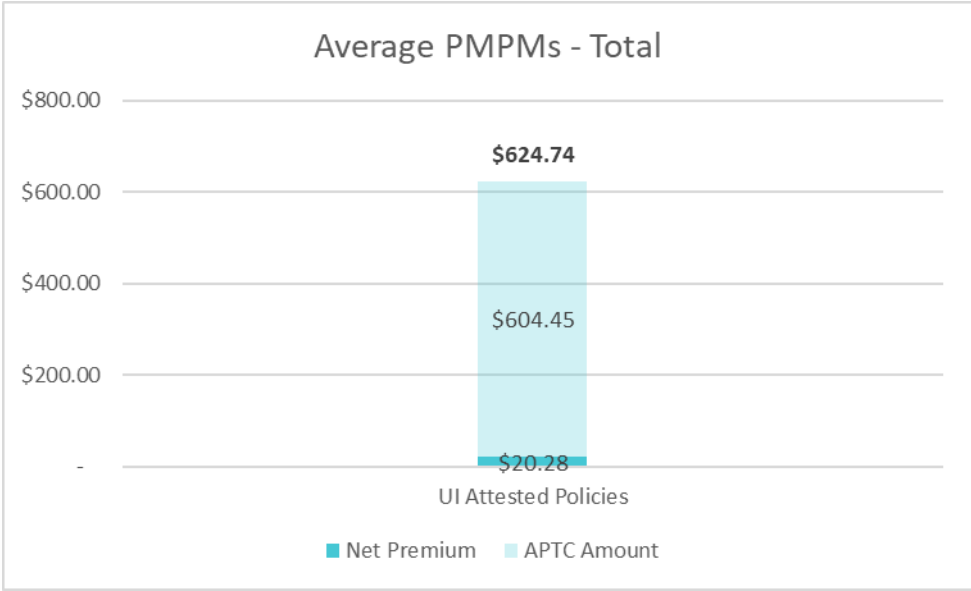
Financial Assistance (Medical) - All



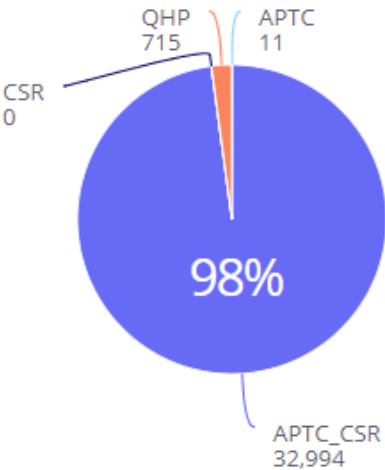
Metal Tier (Medical) - All



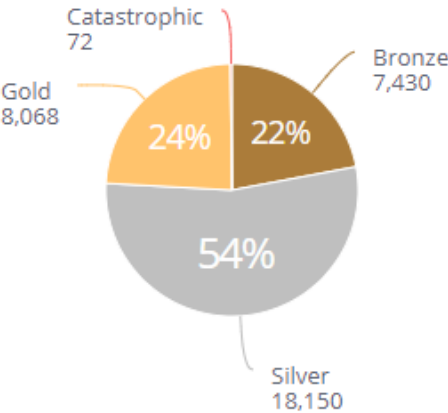
Policies  
33,720



UI-Attested Policies - Financial Assistance (Medical)



UI-Attested Policies - Metal Tier (Medical)





# ARP Phase 2 Impact



## Enrollment Premiums: Before Phase 2

All Plans - To 6/2 Evening ⓘ ✎ ⋮

Net Premium Under \$1  
**13.5%**

Net Premium Under \$10  
**16.3%**

Net Premium Under \$50  
**25.0%**

Net Premium Under \$100  
**39.3%**

## Enrollment Premiums: After Phase 2

All Plans - To 6/7 Morning ⓘ ✎ ⋮

Net Premium Under \$1  
**53.4%**

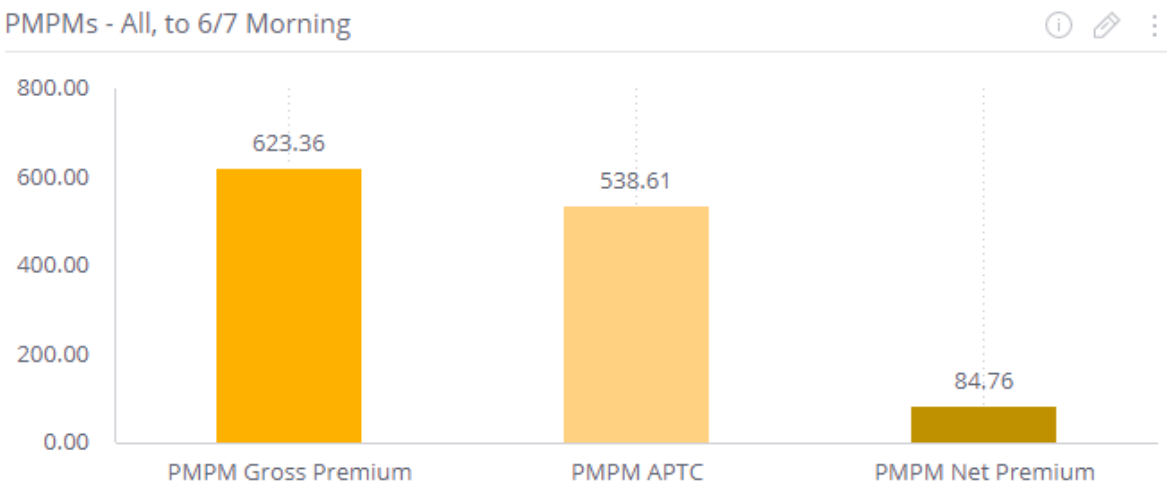
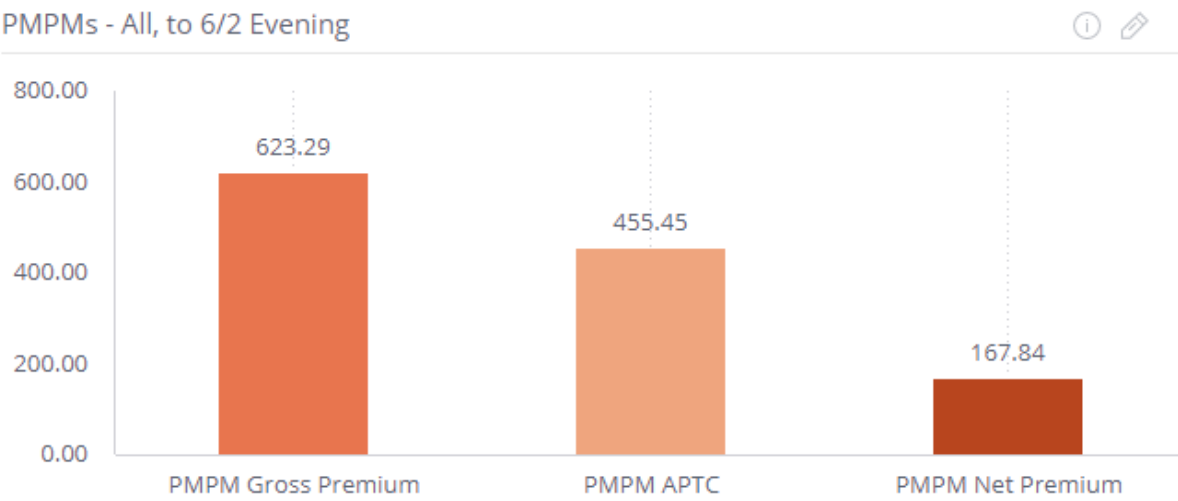
Net Premium Under \$10  
**65.5%**

Net Premium Under \$50  
**71.2%**

Net Premium Under \$100  
**75.9%**

# Enrollment Premiums: Before Phase 2

# Enrollment Premiums: After Phase 2







# OEP End Date



## OEP End Date - Stakeholder Feedback

- As a state-based exchange, Pennie™ has flexibility of federal rules to determine the end date of the annual open enrollment period that best meets its needs
- Pennie™ is considering a recommendation to its Board of Directors (Board) to extend open enrollment (OE) for plan year (PY) 2022 to January 15 and then each year thereafter (unless changed by federal or state law or by an action of the Board).
- In considering this recommendation, we would like you feedback on the following:
  - 1) What are your thoughts about this permanent extension of OE?
  - 2) What are your thoughts if Pennie extended it to January 31 for OE 2022? and
  - 3) What are your thoughts if Pennie extended it to January 31 for each year thereafter?

Stakeholder feedback sought from variety of stakeholders, including insurers, producers, and assisters.

# OEP End Date - Stakeholder Feedback

## January 15th

- ✓ Unanimous support from insurers
  - “Extending OE beyond December affords consumers an important opportunity to fully evaluate their coverage needs in the new year, which we feel is particularly important given the personal nature of this decision and the many competing demands for consumers’ time and attention during the end-of-year holiday season.”
  - “Members have a good experience when there is adequate time between 15th and month-end”
- ✓ Some brokers supported 1/15 in lieu of 1/31
  - Noting that 11/1 - 1/15 is more time than most employers provide for annual open enrollment

## January 31st

### Medical insurers split: most supported but 2 opposed

- ✓ Support: “End of the month deadline is easier to communicate and easier for customers to remember. May encourage young enrollees who are low risk and therefore beneficial to the risk pool”
- ✗ 2 Medical Insurers Oppose: “Strongly recommend Pennie does NOT extend to end of month. ... raises risk of abrasion for members and delays in members’ access to care on coverage effective date.”
- ✓ Some brokers supported the additional time of 1/31 instead of 1/15
- ✓ Assistors supported 1/31, with 2/1 effective date, citing more time to service customers
  - ✗ if 1/31 end yields 3/1 coverage start, assistors support 1/15

### Other considerations:

- A couple of insurers noted that it’s important that customers not be able to retroactively change coverage after the coverage start date and after their coverage has been effectuated due to the operational complexity it creates
- Another insurer commented that there be a cohort of members that are auto-renewed and do not pay for January, but could choose a 2/1 product during the 12/15-1/15 OEP window

## OEP End Date - Stakeholder Feedback



### Staff Recommendation:

Annually extend open enrollment period (OEP) end date to January 15<sup>th</sup> each year.

If HealthCare.gov extends their OEP later than January 15, Pennie will adopt HealthCare.gov's OEP end date for that year.



# Easy Enrollment



## Overview and Background

- Uses state income tax filing as an "on-ramp" to health coverage through Pennie or Medicaid/CHIP
- Would allow PA tax filers to indicate they (or their family members) are uninsured and allow them to provide consent for Department of Revenue to transmit information provided on their state tax return to Pennie
- Pennie then creates an application for those identifying as uninsured and notifies tax filer of potential household eligibility for coverage through Pennie or Medicaid/CHIP
- Would open SEP for those determined QHP-eligible who indicate they are uninsured on their tax return
- Informed by [Maryland's Easy Enrollment](#) program implemented for tax year 2019

## Rationale & Authority

- Opportunity to directly reach PA uninsured, most of whom file a tax return and are eligible for subsidized health coverage\*
- Aligns with Pennie's strategic goal to reduce the uninsured population in PA by allowing the uninsured to identify themselves, while providing them with a clear pathway to quality, affordable coverage through Pennie or DHS programs
- Addresses administrative barriers that prevent the uninsured from accessing health coverage despite being eligible for Medicaid/CHIP or APTC\*\*
- Legal authority for Pennie & Department of Revenue (DOR) to implement this program, including changes to the state tax form, already exists

\* SHADAC analysis of PA-uninsured based on Census data

\*\*Urban Institute [https://www.urban.org/sites/default/files/publication/98764/2001914-characteristics-of-the-remaining-uninsured-an-update\\_2.pdf](https://www.urban.org/sites/default/files/publication/98764/2001914-characteristics-of-the-remaining-uninsured-an-update_2.pdf)

# Technology and Operational Considerations

## Technology

- Strategy is to reuse the existing data transfer process leveraged by DHS for Medicaid referrals
- Must establish a new secure connection with DOR
- Modify reporting to account for multiple referral sources
- Modify or Create new customer notices
- Add additional IVR messaging

## Operations

- Ensure Pennie and DHS systems can accommodate additional account transfers from Pennie to MA/CHIP
- Create SEP for QHP-eligible population
- Conduct outreach to those who we need additional information to determine eligibility
- Educate CSRs on new population FAQ's
- Project volume to plan for any staffing considerations



# Timeline of Work with Department of Revenue

## Summer 2021

- Finalize timeline and implementation plan with DOR
- Complete Data Sharing Agreement with DOR; necessary to accommodate data transfer
- Understand data fields that can be shared with Pennie to build eligibility application and whether it's enough to conduct an eligibility determination or if customer action will be required

## Fall/Winter 2021

- Establish secure connection with DOR to accommodate transfer of information from DOR to Pennie
- Leverage existing data transfer process in effect with DHS to accommodate new referral source
- Create SEP for tax filers identifying as uninsured to enroll in coverage
- Develop new notice to inform tax filers of how to claim new Pennie account and potential eligibility

## Jan – Apr 2022

- New schedule included in state tax form and sent out to Pennsylvanians for the 2021 tax filing season
- Build eligibility application & conduct outreach to those who "check the box"
- Generate SEP and new notice in Production

June 2021

## Immediate Next Steps

- Conduct workgroup meetings with DOR IT and Operations teams and GetInsured
- Develop common understanding of data fields Pennie needs to run eligibility determination and what information can be sent over
- Understand whether we can run a full eligibility determination or if customer outreach and action will be required
- Pennie & DOR finalize Easy Enrollment timeline and implementation plan

**BREAK**



# Health Equity

June 2021

# Pennie's Role in Health Equity

As a state-based marketplace, Pennie plays a unique role in the Commonwealth's healthcare ecosystem.

## Goals for Today

- Learn about the Board's perspectives and experiences related to health equity
- Consider how Pennie fits into conversations and initiatives aimed at overcoming issues of equity



# Adjourn



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# Appendix



# Dashboard Definitions

Platform (Exchange) Metrics		
	All Accounts	Count of unique households
	All Applications	Count of all household applications: HC.GOV (created before 11/1/2020) and new (created since 11/1/2020)
	Medicaid Inbound	Count of unique application referrals from the Medicaid system to Pennie
	Medicaid Outbound	Count of unique applications that had at least one individual assessed as potentially Medicaid eligible and were therefore transferred to the Medicaid system for determination
	New Enrollment	Count of unique enrollees on enrollment records created after 11/1/2020 by accounts that do not have external applicant IDs (indicate they came from HC.GOV)
	Brand New	Count of unique enrollees on enrollment records with eligibility received after 4/16/2021, that did not have a Pennie enrollment before 4/16/2021.

# Dashboard Definitions

Platform (Exchange) Metrics		
	Enrollment by Financial Assistance- Total	Display of enrollment by financial assistance breakdown. Limited to Enrollees & Subscribers, to enrollees with coverage ending 12/31/21, and removing those with canceled enrollment
	Enrollment by Metal Tier- Total	Display of enrollment by application metal tier. Limited to Enrollees & Subscribers, to enrollees with coverage ending 12/31/21, and removing those with canceled enrollment
	Average PMPMs - Total	Display of per-member-per-month metrics. Limited to Enrollee & Subscribers, to enrollees with coverage ending 12/31/21, and removing those with canceled enrollment
	PMPM APTC	Sum of Enrollment record level of the <i>used</i> Advanced Premium Tax Credit (“APTC”) Amount, divided by Count of Unique Enrollees. Split to 3 groups: All enrollees, those who had APTCs applied to their gross premiums, and those who had no APTCs applied to their gross premiums (*this last group includes members who were ineligible for any APTCs and members who were eligible for APTCs but elected to not use them)
	PMPM Net Premium	Sum of Enrollment record level Net Premium Amount, divided by Count of Unique Enrollees. Split to 3 groups: All enrollees, those who had APTCs applied to their gross premiums, and those who had no APTCs applied to their gross premiums (*this last group includes members who were ineligible for any APTCs and members who were eligible for APTCs but elected to not use them)
	Unemployment Income (UI) Attestation	The customer has indicated on their application that they received unemployment income sometime during 2020

# Dashboard Definitions

## Customer Service Metrics

All calls	Total number of calls received. Note: the calls handled will not sum to this number as they don't include abandons or transfers. Only calls started during call center business hours have been included	
Calls Handled by IVR	Number of calls handled by the interactive voice response	
Calls Handled by CSR	Number of calls handled by a call center representative	
IVR Call Transfers	Number of calls transferred by the interactive voice response to the reported destination (HC.GOV, Medicaid, Insurers, other)	
ASA	Average speed to answer measured in seconds	
AHT	Average handle time measured in minutes	
Call Abandonment Rate	Percentage of total calls that a customer dropped before a CSR picked up the call to provide service	
Number of abandoned calls	Number of calls that a customer dropped before a CSR picked up the call to provide service	

# 2021 Strategic Goals

- Execute New Federal ACA requirements through:
  - Leveraging these opportunities to maximize affordability and access;
  - Minimize disruption to market participants; and
  - Fiscal responsibility that ensures stability.
- Increase Health Coverage for Underinsured/Underserved Communities
- Achieve operational excellence through improved customer service and ease of doing business with Pennie