

Arkansas Health Benefits Exchange Planning

Small Business/Community Leaders/Legislators	July 18, 2011	Arkansas Studies Institute Rm. 204	10:00AM – 12:00PM
<p>Consumers</p> <p>Members Present: David Boling Richard Eden Harold Simpson Vic Snyder Karen Sullivan Annabelle Imber Tuck Kenny Whitlock</p> <p>Guests: Russell Green-Connecture Rep. David Meeks</p> <p>Staff: Cindy Crone</p> <p>Consultants: David Deere, UAMS Debbie Hopkins, AFMC</p>		<p>Members Absent: Ron Boyeskie Jason Brady Rep. John Burris Jay Chessir Ray Hanley Alan Hughes Rep. Jeremy Hutchison Rep. Barry Hyde Jimmy Langston Rep. Gregory Leding Rep. Federick Love John Morris Rep. Tracy Pennartz Jody Purifoy Amanda Rose Sen. Mary Anne Salmon Rep. Jon Woods</p>	

Meeting Summary:

I. CCIIO Update

- Proposed Exchange regulations were released by DHHS on Monday, July 11, 2011. The regulations consist of two sections and about 350 pages. There is a 75 day period from the posting date allowed for comments.

Areas of Emphasis

- Desire for Flexibility
- There is an option of Conditional Exchange approval- It is a one time option and it is reserved for states that will be ready for enrollment by October 1, 2013 and completely set up by January 1, 2014 but cannot meet all certification requirements by January 1, 2013.
- There will be either a State or Federal exchange in place in all states by January 1, 2014.
- Transition from a Federal to State exchange or vice versa will be allowed, however there will be a minimum transition period of one full calendar year.
- There will be no Federal funding for state exchanges after December 31, 2014. Only with State authorization for a state exchange, can Arkansas obtain Level Two Establishment funding that would last through December 31, 2014. *Last date to apply is June, 2012.*

Comments

Looks as though the regulations for state reinsurance program are substantially restrictive with regards to what the state can do to meet the federal requirements. Commenter would like to see the states given more flexibility in developing this program. For example, regulations addressing Federally Certified Risk Adjustment

Methodology say the feds are not mandating the use of the Federal system and that the states can develop their own; however, what's developed has to be equal to or better than the Federal system and approved by CMS before it will be accepted.

- Planning Grant Quarterly Report for the third quarter has been posted to the website for review.

Requests presented to CCIIO:

1. Meeting to discuss rules alignment with regard to ONC, Medicaid and the Exchange.
2. Waiver of June 2012 application deadline for Level Two Planning Grant.

We will also be requesting a No Cost Extension to go through the end of 2011 and a budget revision for meeting planning grant "deliverables".

- A tentative date of October 11, 2011 has been set for the Exchange Planning Stakeholder's Summit. There will also be public hearings held in November and December.
- The Federal Project Officer is moving within CMS from CCIIO to CHIP. We are awaiting announcement of Arkansas's new project officer. Amanda Crowley has been named the new CCIIO lead for all Exchange Planning grants.

II. Steering Committee Discussion and Updates

Governance planning

1. What is a Public Trust? Is there a model of a Public Trust in AR?
2. How would people on the Commission (trustees) be chosen?
3. Who would be the rule makers verses the policy setters?
4. Would the Insurance Department be the rule maker?
5. How do we go about educating the public?

- The majority opinion has been that there will be a publicly operated exchange, but not as part of an existing state entity. As a result, the First Data survey showed a Public Trust as the option of choice
- Bob Alexander, an attorney at AID in the Rate Review Division, is looking for examples of Public Trust entities in Arkansas to provide to the workgroups.

Exchange Educational Efforts

- Should the educational effort about an Arkansas Exchange be through a campaign utilizing existing professional associations such as the Medical Association, Nurses Associations or various Brokers Associations, or should it be a public campaign? At the end, consensus was that an educational campaign should focus on small business owners. Meeting with Associations could also be efficient and should be considered.
- The Self Chartered Industry group is exploring ways to raise funds for public messaging separate from the Steering Committee effort.

Marketplace Study

- Dr. Lars Powell presented a micro-simulation model to be used to predict consumer insurance purchasing behavior based on historical observed behavior related to price elasticity in a sample of Arkansans or others demographically similar to Arkansans. Initial findings will be a major part of August workgroup discussions. Workgroup members are invited to submit data sources and specific questions for these

studies that will guide marketplace and financial projections relative to the Arkansas Health Benefits Exchange.

First Data

- Dave Sodergren is the Project Manager. The firm has been conducting Key Informant Interviews since the week of July 4th and has a few left to conduct. First Data has subcontracted with three firms, two of which are Arkansas based (AFMC and Powell and Associated). The third subcontractor is Solucia, an actuarial firm that will be helping predict the Arkansas marketplace and HBE financials. Arkansas Foundation for Medical Care is one of the Arkansas based firms.

AFMC Projects

1. Recommendation of an evaluation plan for the exchange.
2. Recommendation of communications, outreach and education plan.
(This includes serving as team leader for the User Exchange for 2014 project—developing a Prototype for user face of exchange that will be developed by September)

Governance Survey

There is a requirement that the state have legal authority defined by the state. The Workgroup discussed First Data survey results and believe the sentiments of this group align with those results—Public Trust (Quasi-Governmental) governance with regulatory tie to Arkansas Insurance Department.

UAMS Stakeholder Inclusion Report

- A six-week long web-based survey on the Arkansas Exchange Planning is “live” and can be accessed through the Exchange Planning website: www.hbe.arkansas.gov. At the request of community meeting participants opposed to development of an Exchange, the survey provides an option for those who are completely opposed to exchange development to answer only one question and skip to a comments section. The survey will be live until August 25, 2011; however, for maximum impact, participants are encouraged to complete the survey by July 25, 2011. There will be a preliminary, interim report with responses received by July 25, and the findings will be made available to the Steering Committee and workgroups.

- Most of the community “listening” meetings have been completed. There will be an additional meeting in Fayetteville on July 28, 2011. There will be meetings with Latino populations in Central Arkansas on July 26, 2011 and in Northwest Arkansas (Springdale) on July 28th. There will also be a meeting with Marshallese in Springdale on July 28th. Suggestions on how to outreach to other minority populations are welcomed.

- UAMS will provide a report of community meetings and initial web-survey results July 31, 2011. A final report of the Web Survey will be ready August 31, 2011.

III. Outreach Education and Enrollment Questions were posed to the group by Debbie Hopkins of AFMC. The data collected will be used in formulating recommendations for Arkansas exchange.

1. What is the best way to promote public education about the exchange? And should public education target certain groups or the public as a whole?

- o Be clear on the facts regarding the Exchange. (Be able to show that for an Arkansas Exchange, the State has control and flexibility)
- Separate from ACA—stress free market aspects of exchange.
 - o Target the groups that currently have no insurance—individuals/families and small businesses. (Show how the exchange will be beneficial to them)
 - o Promote awareness of the exchange and how to use it: computer-based, other options like walk-in, brochures, telephone, mail, social media, trusted organizations—example: AARP helps with taxes; how do we employ stakeholders in messages?
 - o Look at previous outreach models for insight (Example: AR Kids)
- 2. How can we make the exchange user friendly for the consumer?
 - o Keep it simple. (Language and function should be on a fifth grade level)
 - o Create many types of accessible entry methods. (Ways to sign up could use zip code to make community specific)
 - o Call Centers should not be located in foreign countries.
- First 5 minutes are critical.
 - o Do not implement multiple option automated phone system.
- 3. How would you like to contact the exchange for assistance or questions?
 - o Website
 - o Chat Option
 - o Telephone – live person
- 4. How should consumers gain access to the exchange if they do not have internet access?
 - o Public Libraries – other places where people are
 - o DHS Offices with Kiosk and Navigator
 - o Public Health Departments with Kiosk and Navigators
 - o Hospitals and Physician Offices – how would this work with open enrollment periods?
 - o Public areas such as Walgreens, CVS, Wal-Mart
- 5. How does the exchange promote Healthcare quality and efficiency?

- o Extensive Provider Network
 - o Number of plan options. Quality is about choice. The more plans the better.
 - Could provide education about preventive services/wellness plans—chat with nurse; what about telemedicine to help with healthcare?
6. What consumer protections and rights should be protected in creation of the exchange?
- o Security and Privacy of personal information, “who can see my information?”
 - o Federal regulations and standards will help to dictate protection and rights
 - Consumers should get understandable information about plans through the exchange.
 - o External complaint and appeal process with objective review; recommend no duplicative system for complaints.
7. Are there particular forms of communications that would be best to promote the exchange?
- o Social Media
 - Variety of media: radio/TV/Billboards/pamphlets
 - Chambers of Commerce, small employer connections (many small employers like doctor’s offices, beauty shops are not part of Chamber)
 - o Use of sports teams and local celebrities
 - Use Navigators – trusted by particular groups to get the word out
 - o Methods should vary depending on targeted group
8. What should be the criteria for credentialing Navigators in Arkansas?
- o Should have an understanding of health insurance-- both private and Medicaid—and be able to explain policies where user can understand. (Licensing and/or certification)
 - Should have some type of education—but don’t interfere with good advice given by employers, attorneys, etc.
9. What group or categories of entities could best serve as Navigators?
- o Agents – Can Farm Bureau or AARP be impartial since they sell products?
 - o Non-Profit Groups (ex. AAA)
 - o Look to Massachusetts and Utah for input
 - What about liability of Navigators? Should they have errors and omission insurance?

- Who will oversee Navigators?

10. Should the Navigator be able to enroll for Private Plans, CHIP, Medicaid and Medicare all at the same time?

o No, the rules and regulations for Medicaid and Medicare change on a yearly basis.

- Are Navigators enrollers?
- o Yes, it will be very important that Navigators (and producers/agents) are knowledgeable about private plans and Medicaid/CHIP.
- Check what Kansas has done.

IV. Future Exchange Planning Discussions

- The next meeting will be held August 15, 2011. The major topic of discussion will be Marketplace and Financial Model.
- If you know of anyone who may be interested in assisting with the outreach campaign at the Arkansas State Fair in October, please let us know.