



*The Commonwealth of Massachusetts
Commonwealth Health Insurance Connector Authority
100 City Hall Plaza
Boston, MA 02108*

CHARLES BAKER
Governor

MARYLOU SUDDERS
Board Chair

KARYN POLITO
Lieutenant Governor

LOUIS GUTIERREZ
Executive Director

**Board of the Commonwealth Health Insurance Connector Authority
Minutes**

Thursday, October 14, 2021
9:00 AM to 11:00 PM

Live Stream

<https://www.youtube.com/user/TheMAHealthConnector>

Attendees: Louis Gutierrez, Marylou Sudders, Nancy Turnbull, Michael Chernew, Mark Gaunya, Matthew Veno, Rina Vertes, Dimitry Petion, FayeRuth Fisher, Keisha O'Marde-Jack, Cassandra Roeder (who was sitting by designation on behalf of Secretary of Administration and Finance Michael Heffernan), Kevin Began (who was sitting by designation on behalf of Commissioner of the Division of Insurance Gary Anderson)

The meeting was called to order at 9:03 AM.

Secretary Sudders began the meeting by welcoming and introducing new Board member, Keisha O'Marde-Jack, who is an appointee of the Attorney General, and Chief Human Resources Officer of Upstream USA. Ms. O'Marde-Jack thanked Secretary Sudders for her welcome and expressed her excitement to join the Board. She added that over the history of her career she has worked in a variety of industries and looks forward to providing a diverse perspective derived not only from the varied industries, but from the point of view of both an employer and consumer. She shared that she looks forward to getting involved and learning from the Board.

- I. Minutes:** The minutes of the September 9, 2021 meeting were approved by roll call vote, with Secretary Sudders and Ms. O'Marde-Jack abstaining because they were not in attendance during the September meeting.
- II. Executive Director's Report:** Mr. Gutierrez began the meeting by sharing that the Health Connector (CCA) is excited to note that Open Enrollment (OE) 2022 will begin soon, on November 1st.

He informed the Board that the final steps of the contact center vendor transition had occurred earlier that week, with stabilization efforts continuing. He shared that there were system technical difficulties in the first few days that caused member disruption. He stated that inbound calling issues had since been diagnosed and addressed, and that greater detail would be provided as part of the first agenda item.

He informed the Board that CCA is also working to operationalize changes that will reduce the loss of subsidy dangers that were shared at the previous Board meeting and is a result of unintended federal tax changes. He stated that more details on this would be included as part of the Open Enrollment update which will also include our outreach approach for the upcoming annual enrollment period. He continued to note that as the federal health care discussion continues, the Board will be presented with an update on policy activity on the national level and how it impacts CCA's members and mission.

He concluded noting that enrollment on the Health Connector for Business (HCB) platform has surpassed 10,000 members, reminding the Board that just over three years prior, when the new platform was launched there were fewer than 6,000 members. He provided additional context noting that in the past year, the small group market has decreased membership while HCB has grown, further solidifying its mission to provide affordable choice options for employers and their employees.

He thanked the Board for their ongoing support as CCA continues into its Open Enrollment period.

III. Contact Center Update: The Presentation "Contact Center Update" was presented by Vicki Coates, and Louis Gutierrez. Ms. Coates began the presentation by informing the Board that she would review the project timeline and scope with the Board, in addition to the details of the system cut-over and go-live. She reminded that this transition is a necessary step in providing CCA members with best-in-class customer service experience.

Ms. Coates provided a review of the implementation timeline and scope for the vendor transition, reminding members of the many functions that the vendor was responsible for standing up in a compressed timeframe. The kick-off began in June with many steps along the way before reaching the go-live date of October 12, 2021.

Mr. Gutierrez informed the Board of the new vendor's bad stumble on opening day which had a negative impact on members. He noted that while this has been resolved, there will be settling period that will occur over the course of the next few weeks. He provided the Board with additional details of the transition, beginning with the system cut-over that began on the Friday evening which included removing the previous vendor from the system and migrating all of the data to the new vendor. He stated that after a series of long days working on the transition, the system was given the go-ahead to be deployed into production. He explained that early on Tuesday, shortly after having entered into production, the contact center started experiencing difficulty receiving inbound member calls, which continued into the next day. He stated that the new vendor, Accenture, worked continuously with their vendor partners and by noon on the second day had identified the

root cause and a resolution. He explained the complex series of interactions that led to the inbound calling issue, noting that despite acceptable testing, the testing in this high-volume area had been missed. He informed the Board that as of the prior day, inbound calling operations had been stabilized. In response to a question from Ms. Turnbull regarding the circumstances that led to the testing oversight, Mr. Gutierrez stated that what occurred on the opening day is never acceptable. He continued to note that this is a very complex interplay of systems and that in retrospect, the connection should be tested, but this was not something that was omitted rather was due to a lack of knowledge of the interaction between the two systems. Mr. Gutierrez stated that in his role he took full responsibility for the oversight.

Secretary Sudders confirmed that throughout the numerous rounds of testing nothing suggested that this was an area that should be evaluated. She noted that it is encouraging that the vendor and their partners were able to, in a relatively short amount of time, identify and find a resolution to the problem. She stressed that member disruption is never acceptable, but did recognize the attention that this issue was given and quick resolution that was achieved. Mr. Gutierrez agreed and elaborated further on the extensive testing that occurred throughout this process, but nonetheless there was an area that was missed. He shared that though the contact center is back, there is a long queue of callbacks that will need to be addressed, but reaffirmed that this is what CCA is about, and this is what CCA will do to make sure it serves its customers and is prepared for Open Enrollment.

Mr. Petion recognized that as a systems person he appreciates that putting a major system into production is never an easy task and sometimes situations surface that were not planned for during testing. He commented on the quick speed at which the issue was able to be turned around. In response to a question from Mr. Petion regarding the lessons learned with respect to the many different systems that need to communicate in order to avoid future system outages, Mr. Gutierrez stated that he has a new and deep understanding and appreciation of how the systems interact. He informed the Board of the metrics that are continuously being monitored and shared that there are regular check-ins that are occurring between all parties to ensure stable operations and maintain clear channels of communication.

Ms. Coates then informed the Board of the areas of focus going forward for the call center, explaining the various areas where CCA and Accenture will work to continue to improve operations. She stated that customer satisfaction metrics and call handling times will be used to reshape training in the future. She noted that the Board will continue to be updated on the stabilization and progress of the contact center as CCA heads into Open Enrollment.

In response to a question from Mr. Petion regarding the dynamics of the labor market and impacts on the contact center and staffing, Mr. Gutierrez responded that CCA is seeing retention challenges and that there are contact center staff who make it through training and then for whatever reason decide to move on. He continued that different retention approaches are being used, and eventually staffing requirements will be met, but that this is something that is being monitored to make sure the contact center is staffed to capacity. In response to a question from Secretary Sudders, Mr. Gutierrez confirmed that the staff at

the contact centers, while not CCA staff, also receive benefits. In response to a question from Ms. O'Marde-Jack, Mr. Gutierrez confirmed that the Open Enrollment period runs from November 1st to January 23, 2022.

Prior to moving forward with the Open Enrollment update, Secretary Sudders requested regular updates regarding the contact center progress and metrics.

- IV. 2022 OPEN ENROLLMENT READINESS PREVIEW:** The Presentation "Open Enrollment Readiness Preview" was presented by Marissa Woltmann. Ms. Woltmann began the presentation by reminding the Board that Open Enrollment (OE) runs through January 23rd and is the time when members can change health plans and unenrolled individuals can join coverage through CCA. She then outlined the key considerations for the upcoming year that would be shared with the Board during the presentation. She reviewed the OE timeline, highlighting that noticing to members began in August and sharing key dates to come, including when members can expect to receive their bill for January 1st coverage. She reviewed contact center hours of operation, including special extended hours and special weekend hours leading up to critical payment dates.

In response to a question from Secretary Sudders regarding language availability, Ms. Woltmann noted that the contact center does have the language line to provide translation services to non-English speakers quickly. Ms. Coates added that Accenture has bilingual agents who can speak Spanish and members can select to conduct their entire call in Spanish during the interactive voice recognition (IVR) process. In response to a question from Ms. O'Marde-Jack regarding language availability at the contact center, Mr. Gutierrez shared that the Navigator program offers assistance in a broad range of languages to residents who need assistance. In response to a follow up question regarding the differences between the contact center and Navigators, Mr. Gutierrez noted that both can assist with enrollment and other questions, but that Navigators do offer more in-person assistance and do have a wider range of language abilities. Secretary Sudders added that Navigators also have a strong community presence, giving them a better understanding of the cultural needs of the residents they serve. She confirmed that the contact center is staffed with bilingual agents who can provide full assistance in English and Spanish, while also having the language line that can offer assistance in about 100 languages.

Ms. Woltmann then provided a review of how current dynamics of the public health emergency (PHE) factor into the upcoming OE. She noted that many individuals who would normally enroll through CCA are currently protected in MassHealth and are not expected to transition back until the enrollment protections are lifted. In response to a question from Ms. Turnbull regarding the timeline for the end of the PHE and redeterminations of eligibility, Ms. Woltmann noted that at this time it is still unknown. Secretary Sudders added that there are conversations on the federal level about the possibility of extending the PHE through to the end of the year, but the date by which that extension might be issued is not known yet.

Ms. Woltmann informed the Board that when conducting redeterminations for OE, CCA found that a higher number of individuals than in years past would be expected to lose

subsidies for the upcoming year if they did not take action. After further examination and consulting with the Internal Revenue Service (IRS), CCA learned that as a result of provisions of the American Rescue Plan a higher number of tax returns were automatically amended and CCA was not receiving the necessary information to verify members' income amounts. CCA received authorization from the Centers for Medicare and Medicaid Services (CMS) to use the income information received and was able to work with its vendors to implement this solution that will restore subsidies to about 50,000 eligible enrollees. Ms. Woltmann then provided a comparison of the percentage of individuals expected to lose subsidies in prior years compared to the expectation for the upcoming plan year. She noted that the subsidy loss projections are expected to realign more closely with previous years as members begin to take action with respect to making changes to their own applications and following CCA's implementation of the solution identified and authorized by CMS.

In response to a question from Dr. Chernew regarding the subsidy loss projections, Mr. Gutierrez stated that the forecasts are not an aspiration rather and will be the result of additional work that will be conducted by CCA to restore subsidy to members who are eligible based on their Adjusted Gross Income (AGI), a population that is known to CCA. CCA is very confident with this projection based on the level of information it has access to. He continued to note that part of the downward trend does include action being taken by members to update their own accounts, which has occurred in years past, but that a large majority of this population is known to CCA. Ms. Woltmann continued with the presentation, noting that in addition to the technical workaround, CCA will be conducting messaging to members through a variety of channels, including, emails, calls, and notices, to encourage action to update their income information.

She then provided a review of the subsidy enhancements made available through the American Rescue Plan (ARP) which will make coverage more affordable than ever for members and Massachusetts residents for plan year 2022. She noted that the new "Get an Estimate" tool will be helpful to potential members in understanding what financial help might be available to them for this OE, sharing metrics about the tools popularity since it became available. She noted that while ARP provides more cost savings for individuals, the recently unemployed is a specific group that CCA will be monitoring given that their unemployment status in 2021 provided them with access to \$0 cost premium plans which is expected to end for plan year 2022. Ms. Turnbull commented that the new "Get an Estimate" tool is excellent and a great addition to the website. With respect to the unemployed population that CCA will be monitoring, Ms. Turnbull asked if CCA has insight into where this population might land following the end of these benefits.

Ms. Woltmann then provided a review of the outreach and education approach for OE 2022, noting that there will be a return to some in-person activities. She reminded the Board of new tailored messaging and policies that have emerged as a result of the pandemic. She shared findings that making a one-on-one connection with an individual at an event can really make a difference in driving enrollment. She reviewed the outreach approach going into OE22 which will continue to focus on the state's uninsured while also focusing on individuals who may be newly eligible for subsidies available through the expanded ARP.

She informed the Board of the newly added Navigator in Lowell, an area that has a disproportionate rate of uninsured but where CCA has struggled to secure a Navigator in recent years. Ms. Woltmann elaborated that the new Navigator, Lowell Community Health Center, will also be subcontracting with the Cambodian Mutual Assistance Association.

She then informed the Board of CCA's planning for the end of the federal public health emergency (PHE). She shared that currently there are about 200,000 individuals in MassHealth who have an underlying eligibility for CCA but are otherwise being protected. She stated that once the PHE ends, CCA expects that enrollment will return to a level that CCA is more familiar with. She then provided a review of the activities ahead for CCA and members, outlining when members can begin to take action and what to expect with respect to communications. She concluded the presentation by reminding members of the importance of providing a smooth OE process for new and returning members, while striving to reach the remaining uninured.

Ms. Vertes noted that as people begin to lose their subsidies or have a smaller amount of subsidies, the high cost of health insurance premiums, which are directly related to the high cost of health care, will be felt more acutely. She stated that it is her hope that we can get out in front of and address the high cost of health care and make decisions that will address the root cause of the high cost of health care.

Ms. Turnbull commented on Mr. Gutierrez's earlier comment regarding the HCB enrollment milestone, and noted that this November 1st CCA will celebrate its 15th OE. She commented on the durability of the law that created CCA and assistance for residents in affording health insurance coverage. Secretary Sudders echoed Ms. Turnbull's recognition of the upcoming 15th anniversary.

In response to a question from Ms. O'Marde-Jack regarding forecasted enrollment for January 2022, Ms. Woltmann noted that CCA is not expecting as robust an enrollment as we typically do, but will confirm the actual forecasted enrollment figure for January 2022. In response to a follow up question from Ms. O'Marde-Jack regarding how any changes to employment may be impacting forecasting of enrollment, Ms. Woltmann provided a high-level review of how different eligibility requirements for certain programs can factor into the fluidity of eligibility and the expected trends.

Mr. Venno commented on the success of the Commonwealth in maintaining CCA's framework and its ability to rebuff destabilizing threats. He noted that it the ability to work together has provided great strength to CCA, but that affordability is a key factor, and it is imperative to address the question of affordability to ensure future success. Secretary Sudders added that, 15 years later there is an opportunity to review legislation and statutory frameworks and identify what can be improved upon, noting the importance of legislation being living documents.

Secretary Sudders noted that it might be helpful to review the enrollment expectations for the upcoming OE more closely with respect to the ending of the PHE and redeterminations. She noted that this will be a very consumer centric process and stressed the importance of

having a glidepath into other coverage opportunities and an openness into this transition. Ms. Woltmann agreed and noted that a benefit of having the shared eligibility system is that it gives really great sightlines into MassHealth enrollments and eligibility and helps with protections related to what CCA might expect.

Ms. Fisher commented that in addition to agreeing with many of the previous comments about Open Enrollment and Navigator presence, the affordability conversation is an equity issue which is central to CCA's framework, and wants to make sure that equity is explicitly stated during conversations regarding affordability.

Mr. Gaunya commented on the affordability conversation, referencing his previous participation in the Merged Market Advisory Council which is expected to release a report in the future which may be a helpful tool in this conversation given some great ideas which were exchanged by Council members.

- V. High-Level Policy Updates:** The Presentation "High-Level Policy Updates" was presented by Audrey Morse Gasteier. Ms. Gasteier began the presentation by providing an overview of the federal policy dynamics that CCA is monitoring and will be providing updates on. She began with a review of the Notice of Benefit and Payment Parameters (NBPP) for 2022, sharing that in a shift from how the rule is typically issued, this year it is being released in smaller segments. She reviewed a number of changes in the NBPP, including the introduction of a new year-round special enrollment period for certain low-income consumers which is similar to how CCA has operated previously, but may require slight adjustments in order to align. She continued with the review of provisions of the 'No Surprises Act' that, while CCA is not charged with any direct responsibilities, will be monitoring to remain aware of consumer facing changes that our members will experience.

She informed the Board of the status of legislation pending before Congress and the provisions of the 'Build Back Better' budget reconciliation bill and its very real impacts on CCA, its members and residents of the state. She noted that in the current bill there is a proposal to permanently extend the enhanced premium tax credits and permanently eliminate the 400 percent affordability cap. She also noted the proposal to extend the unemployment provision that would provide access to a \$0 premium plan for any individual who receives unemployment during a plan year through 2025. She continued to provide review of pending provisions that again, may not have a direct impact on the operations of CCA but are of interest given CCA's involvement and interest in the broader health coverage landscape around and adjacent to CCA.

Ms. Gasteier then shared with the Board that as a result of the Special Enrollment Period that the federal marketplace and state marketplaces participated in for the first half of 2021, 2.8 million people newly gained access to affordable health care. She informed the Board of CCA's receipt of a federal grant, made available through the ARP, to state-based marketplaces to encourage access to affordable health care coverage. She noted that state-based marketplaces continue to be built across the country, noting that three new states have recently adopted the SBM platform. Ms. Turnbull commented on the positive nature of the federal policy updates and her appreciation for the on-going work.

In response to a question from Dr. Chernew regarding how new SBMs are looking to Massachusetts and where they may adopt similar policies or diverge, Mr. Gutierrez explained that there are regular meetings among SBMs and it is a great opportunity to learn a lot from other states. He stated that often CCA looks to California for the opportunity to adopt some of their marketing policies, given their breadth of funding, but it really is a beneficial learning opportunity for all states. He added that Massachusetts does appear to remain a leader and is well-respected within the group.

Ms. Turnbull commented that her students engage in an exercise where they explore the plan benefits of other states, and while California does do a better job at standardizing their plans, by the end of the class the students overwhelmingly vote to have coverage in Massachusetts given its comprehensive coverage. Ms. Gasteier concluded that while Massachusetts continues to provide technical assistance to new SBMs, more states are adopting practices that were once unique to Massachusetts and innovating in new ways that Massachusetts can also learn and gain inspiration from.

Prior to adjourning, Secretary Sudders commented that as CCA heads into the Open Enrollment period, and though the state continues to have a high rate of insurance, there remains the population of uninsured that continue to evade messaging and engagement. She encouraged CCA to really think outside of the box in how to reach the remaining uninsured and remove perceived barriers and bring those individuals into health insurance coverage. She noted that it is important to build upon the prior successes of CCA, but to also pursue new approaches and opportunities for reducing uninsurance.

Mr. Gutierrez agreed with Secretary Sudders and noted that in just the last month he requested that staff review the current outreach and engagement approach, including media and messaging as well as walk-in center and community presence. He stated that there is an opportunity to reexamine where CCA is now and revamp its approach and take the opportunity to build from the bottom up. He stated that CCA intends to touch on this topic before the Board during the annual strategic meeting in December.

Mr. Petion applauded CCA on their extensive work learning about the remaining uninsured over the past few years and asked if it is possible to use any insight CCA may have gained about the remaining three percent to revise CCA's marketing approach to be laser focused in reaching those individuals. He noted that he is very proud of the state's high rate of insurance, but supports a reexamination on how we approach the remaining uninsured.

Mr. Gutierrez revised that for the strategic meeting in December CCA will plan to bring updates to the Board that combine what is known about the remaining uninsured along with the new tools that CCA has to engage with these individuals, including an update about the new Department of Revenue / CCA information transfer and outreach initiative.

In response to a comment from Mr. Gaunya regarding an interest in having someone from the Center for Health Information and Analysis (CHIA) speak to the Board about their new

report on state mandated benefits in the future, Mr. Gutierrez stated that as a first step he would familiarize himself with that report.

Ms. Turnbull agreed that affordability continues to be the holy grail, but commented further on the remaining uninsured population. She noted that the people who are still uninsured look exactly like the people who were uninsured in 2010 and an interesting characteristic of this group is that many of them should actually be eligible for free coverage, a troubling and hopeful characteristic.

Secretary Sudders welcomed additional comments and discussion from Board members and upon hearing none, the Board motioned and unanimously voted through roll call to adjourn at 10:29 AM.

Respectfully submitted,

Erin E. Ryan