



The Commonwealth of Massachusetts
Commonwealth Health Insurance Connector Authority
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KIMBERLEY DRISCOLL
Lieutenant Governor

AUDREY MORSE GASTEIER
Executive Director

Board of the Commonwealth Health Insurance Connector Authority
Meeting Minutes

Thursday, September 12, 2024
9:00 AM to 11:00 AM

Live Stream

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

Attendees: Audrey Gasteier, Secretary Kate Walsh, Nancy Turnbull, Eric Gulko, Rebecca Butler, Martha Kwasnik (who was sitting by designation on behalf of Secretary of Administration and Finance Matthew Gorzkowicz), Robyn Olson, Dimitry Petion, Michael Chernew, and Bela Gorman

The meeting was called to order at 9:01 AM.

Before beginning the official agenda of the meeting, Ms. Turnbull requested a motion for her to serve as the Chair Pro Tem given the absence of Secretary Walsh and Vice Chair Deronnette. The Board voted unanimously, and the motion carried.

- I. **Minutes:** The meeting minutes of the July 11, 2024 Board meeting were approved through roll call vote. Ms. Gorman abstained from the vote.
- II. **Executive Director's Report:** Ms. Gasteier began her remarks by sharing that the Health Connector was supporting those impacted by the closures of Steward Healthcare facilities and monitoring member concerns about losing access to local hospitals. She then shared that the Health Connector for the first time hosted the Chief Executive Officer and executive leadership team from the Colorado state-based Marketplace, Connect for Colorado. The experience allowed for deep discussions and learnings from one another, and she noted that the Health Connector hoped to engage in similar meetings with other states in the future.

In preparation for Open Enrollment 2025, Ms. Gasteier shared that the preliminary eligibility and notification process was coming to an end and provided information about the multilingual Navigator organizations, community-based organizations, and others helping individuals with their enrollment. She announced that starting in November, federal regulatory changes would allow Deferred Action on Childhood Arrivals, or DACA, recipients new access to Health Connector coverage.

Ms. Gasteier informed the Board that staff would be asking for their final vote on the Seal of Approval for 2025 and that they would be discussing two carriers—WellSense and Harvard

Pilgrim—that were not given reaccreditation by the National Committee for Quality Assurance (NCQA). Ms. Gasteier noted that removal of those carriers from the 2025 offerings would create significant negative impacts for over 100,000 members, and therefore, requested the Board’s support in including them in the product shelf. Ms. Gasteier reviewed the remainder of the agenda, which included a request to approve support for business process documentation, and a request to approve a new call center vendor while maintaining Accenture as the vendor for customer service technology. Lastly, Ms. Gasteier thanked the Health Connector Board of Directors for their insight and guidance.

Ms. Turnbull was interested in learning how we decided to host Colorado as well as any key takeaways from their visit. Ms. Gasteier responded that they were approached by the Colorado leadership team and that one of the most notable differences was that they have an in-house contact center. Additionally, Colorado has a coverage program for undocumented individuals. Ms. Gasteier shared that Colorado was impressed by the ConnectorCare Program and its expansion and the work the Health Connector is doing to reduce administrative burdens.

- III. Final Seal of Approval for Plan Year 2025 (VOTE):** The presentation “Final Award of the 2025 Seal of Approval (VOTE)” was presented by Kris Harackiewicz and Marissa Woltmann. Mr. Harackiewicz began by reminding everyone of the high-level timeline of the Seal of Approval (SOA) process that began in February 2024 and was now on its third installment. In his refresher, Mr. Harackiewicz stated that the 2025 SOA required carrier progress on health equity, while maintaining a stable product shelf. Mr. Harackiewicz then explained that the Division of Insurance (DOI), which leads the annual rate review process, approved 7.9 percent merged market rate increases for medical plans before aging, which was higher than last year’s at 3.2 percent. He noted that these increases were consistent with national trends. Mr. Harackiewicz then reviewed the unsubsidized and advance premium tax credits (APTCs)-only premium changes by metallic tier noting the average of an 8.1 percent increase before aging.

In response to Mr. Harackiewicz’s comment about GLP-1 drugs being one of the high healthcare cost drivers, Mr. Gulko asked if carriers planned to change their coverage levels for those types of drugs. Mr. Harackiewicz stated that there wasn’t a universal approach. Ms. Gorman explained one of the reasons why there might be a higher increase on a bronze plan versus a platinum one is leverage. Ms. Butler commented that the DOI was monitoring GLP-1 drugs and speaking with carriers about the possibilities of changing their availability given their benefits beyond supporting weight loss.

Mr. Harackiewicz then shared that for 2025, the Health Connector would be highlighting plans within the healthcare for business space that are better than market average premiums and offering them to small businesses as “premium value plans.” In response to a question from Ms. Gorman regarding premium savings, Mr. Harackiewicz clarified that the intention of this was to make brokers and small employers aware of what is already available in the market, is of high value, and more affordable than market average premiums. In response to a question from Mr. Gulko regarding plan comparisons, Mr. Harackiewicz clarified that the Health Connector would be highlighting plans that had premiums below the market average. Mr. Veno commented on provider unit costs and the prices that are negotiated between plans and providers. Ms. Butler agreed with Mr. Veno about the difficulties in contracting with providers.

Mr. Harackiewicz then walked through the design of the ConnectorCare program, which offers quality coverage to individuals at various income levels. He noted that Fallon Health was expanding their coverage to additional zip codes in the Bristol, Hampton, and Plymouth counties. Ms. Gorman asked for clarification on enrollee contributions. Mr. Harackiewicz

explained that the minimum enrollee contributions are established as part of their affordability schedule.

At this time, 9:33 a.m., Secretary Walsh joined and assumed the role of chair of the Board meeting.

Before moving onto the next section, Mr. Harackiewicz noted that the cap for premium smoothing in 2025 would be reduced to \$250, meaning that any plan that is \$250 more expensive than the lowest cost plan in a subregion would not receive any premium smoothing dollars.

Ms. Woltmann then shared updates on an issue regarding WellSense's accreditation from the National Committee for Quality Assurance (NCQA). She stated that in addition to WellSense, Harvard Pilgrim Health Plan (HPHC) had also failed to renew their accreditation status, but assured that members were not harmed by these issues. She reviewed the next steps, which included a corrective action plan for both issuers. Health Connector staff recommended that the Board of Directors award both carriers the 2025 Seal of Approval as they continue to complete their corrective actions with NCQA and DOI and return to accredited status. Ms. Butler shared that DOI was working very closely with NCQA and the carriers. Mr. Gulko commended the work of the staff on such a serious issue and supported the staff recommendations. In response to a question from Ms. Turnbull regarding prevention of these issues, Ms. Butler explained that communication and engagement between the carriers and NCQA needed to be enhanced moving forward. In conclusion, Ms. Woltmann shared that staff would continue to monitor the NCQA reaccreditation for WellSense and HPHC and that Open Enrollment preparations were underway, meaning that approved plans would be available for 2025 coverage.

With no further questions or comments, the Board then voted and unanimously approved the Health Connector's recommendation to award the Final Seal of Approval for 2025 to Qualified Health and Dental Plans reviewed during the presentation.

IV. Health Connector Business Process Documentation Project (VOTE): The following presentation, "Business Process Documentation Development Support (VOTE) was presented by Patricia Grant and Marissa Woltmann. Ms. Woltmann began by sharing that they would provide a review of a procurement to engage vendor support for a project strengthening the Health Connector's approach to business process documentation. The project aligned with the Health Connector's strategic priority of "Maintain and strengthen organizational structure and system reliability." Ms. Woltmann explained that the Health Connector currently had varying levels of documentation for its full array of business functions and hoped to shift to a centralized system for standard operating procedures with the help of a vendor.

Ms. Grant stated that a Request for Quotes was issued in April 2024 to find a vendor that could support the Health Connector's documentation initiative as well as optional technology solution and configuration services. The Health Connector received four responses to the Request for Quotes, each of which was scored by staff. The evaluation process involved a review of the proposals, oral presentation by two selected bidders, and the submission of best and final offers. The evaluation team scored Zelus Consulting Group as the highest of all Bidders given their demonstrated transparency and responsiveness to the Health Connector and proven experience completing projects with comparable size, scope, and business requirements. Ms. Grant explained that the project would involve several phases beginning with an assessment of standardized operating procedures and have a total contract amount of \$1,645,000.

With no additional questions or comments, the Board then voted and unanimously approved the Health Connector's recommendation to enter into an agreement with Zelus Consulting Group for business process documentation support services through June 30, 2025 in a total amount not to exceed \$1,645,000.

- V. **Contact Center Procurement (VOTE) and Contact Center Technology Procurement (VOTE):** The presentation "Contact Center and Support Services RFR Salesforce and AWS-Based Contact Center Solution RFQ (VOTE)" was presented by Patricia Grant and Michael Piantanida. This presentation included a review of a Request for Responses (RFR) for Contact Center and Support Services and a Request for Quotes (RFQ) for a Salesforce and Amazon Web Services (AWS)-Based Contact Center Technology Solution. Ms. Grant explained that this work supported two pillars of their strategic plan, "Improve and modernize the applicant and enrollee experience" and "Maintain and strengthen organizational structure and system reliability." The full scope of the Contact Center contract was held by Accenture State Health Care Services, Inc (Accenture) and Ms. Grant explained that the vision of what a contact center should be and how it should function had changed over time. In terms of procurement strategy, the Health Connector divided the existing contract into two distinct pieces—contact center and technology. The Health Connector preferred a vendor that could perform the initial contact center and support services as well as additional contingent scope, which included member appeals tracking, Health Connector for Business customer calls, and Salesforce marketing module.

In terms of the technology procurement's scope of work, the Health Connector sought a qualified vendor to support the integrated contact center technology solution, implement multiple releases to deliver system enhancements among other capabilities. The procurement process began with a Request for Information (RFI) in April 2023 to learn more about best practices, operational and technical capabilities, and sustainable cost. The initial phase also included speaking with other agencies as well as reviewing member survey data. Following this phase, two separate procurements were released in April 2024—an RFR for the Contact Center and a RFQ for the technology solution. Scoring sheets were developed to evaluate bidder responses; scores were done by individual team members and then as a collective team. Select bidders were invited to give oral presentations based on their scores and then asked to submit best and final offers. In response to a question from Ms. Turnbull regarding payments and membership, Ms. Grant explained that costs would remain the same even if Health Connector membership increases. Mr. Gulko asked a question about metrics, to which Ms. Grant stated that there would be tighter service level agreements.

Ms. Grant then shared that they received six responses to the contact center procurement and that the evaluation team chose Automated Health Systems, Inc. (AHS) as the apparent successful bidder. They believed AHS will help the Health Connector realize its future vision as a provider of best-in-class customer service given their experience supporting Medicaid and other contact centers, competitive pricing, and other distinguishing factors. Additionally, Ms. Grant stated that transition and implementation of AHS would take about 11 months and that there were some implementation risks including staffing challenges and dependencies on third parties for cooperating and project participation. She noted that the Health Connector was already transition planning with their internal Program Management Office to address the risks. In response to a question from Mr. Gulko regarding staff transitioning from Accenture to AHS, Ms. Grant stated that they would be discussing that at an upcoming meeting. Mr. Gulko noted the importance of having experienced agents at the contact center. In response to a question from Mr. Veno, Ms. Grant confirmed that the procurement included a section about supplier diversity.

Mr. Piantanida then reviewed the technology side of the procurement and began by sharing that the Health Connector issued the RFQ to five protentional bidders under a state blanket contract and received one response to the procurement from Accenture LLP. He noted that Accenture was the incumbent vendor currently providing technology services for the Contact Center. He explained that the evaluation team felt that Accenture could provide the best overall value and chose it as the apparent successful bidder. He then reviewed Accenture's proposed cost structure, which included a fixed price agreement. In response to a question from Ms. Turnbull regarding cost assessment, Mr. Piantanida stated that it was evaluated against general industry standards. Mr. Piantanida then clarified the licenses owned and managed by the Health Connector in response to a question from Mr. Petion. Mr. Gulko asked to do a cost analysis across other states for comparison. Ms. Grant confirmed that there was some cost savings associated with the new contracts. In response to a question from Secretary Walsh, Mr. Piantanida confirmed that AWS was used in other parts of the state, but that the licensing being used was separate from the rest of the Commonwealth. Mr. Veno noted that if a contract cannot be reached, re-procurement could occur. Mr. Piantanida confirmed that the number of bidders was never disclosed.

Mr. Piantanida stated that they were continuing to work with the incumbent vendor to provide stability to core contact center technology services during the transition to AWS. He highlighted the integration of the new contact center and support services vendor—AHS as well as the maintenance of dual contact center connectivity through the staged transition approach. He noted that the Health Connector was also monitoring key implementation risks, including personnel changes and staff bandwidth.

The Board then voted and unanimously approved the Health Connector's recommendation to enter into an agreement with Automated Health Systems, Inc. for services in a total amount not to exceed \$100,100,000.

The Board then voted and unanimously approved the Health Connector's recommendation to enter into an agreement with Accenture, LLP. for services in a total amount not to exceed \$16,570,000.

With no further agenda items before the Board, the Board of Directors motioned and voted through roll call to adjourn the meeting at 10:33 AM.

Respectfully submitted,

Nuryelis Herrera