



The Commonwealth of Massachusetts
Commonwealth Health Insurance Connector Authority
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Executive Director

Board of the Commonwealth Health Insurance Connector Authority
Meeting Minutes

Thursday, January 11, 2024
9:05 AM to 10:00 AM

Live Stream

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

Attendees: Audrey Gasteier, Secretary Kate Walsh, Nancy Turnbull, Eric Gulko, Matthew Veno, Bela Gorman, Rebecca Butler (who was sitting by designation on behalf of the Commissioner of the Division of Insurance, Gary Anderson), Martha Kwasnik (who was sitting by designation on behalf of Secretary of Administration and Finance Matthew Gorzkowicz), Filaine Deronnette, Dimitry Petion, and Robyn Olson

The meeting was called to order at 9:05 AM.

- I. Minutes:** The minutes of the meeting on November 9th were approved by roll call vote.

Before moving onto the next agenda item, Secretary Walsh welcomed Dr. Robyn Olson to the Health Connector Board of Directors.

- II. Executive Director's Report:** Ms. Gasteier began by welcoming everyone to the first Board meeting of the year. She welcomed and introduced Dr. Olson who was recently appointed by Attorney General Campbell to serve as the employee benefits specialist on the Health Connector Board of Directors. Dr. Olson thanked Ms. Gasteier for the warm welcome. Ms. Gasteier shared that the Health Connector (CCA) was close to the end of Open Enrollment and that the total member enrollment had grown by 27 percent since January 2023 with nearly 50,000 new enrollments—the most ever seen at this point during an Open Enrollment period. She stated that more than 44,000 individuals were enrolled in a ConnectorCare program due to the two-year pilot eligibility expansion program. In addition to Open Enrollment updates, Ms. Gasteier shared that CCA continues, in partnership with MassHealth and Health Care For All, to reach residents who are no longer eligible for MassHealth coverage as part of the redetermination process; 75,000 individuals had transitioned to the Health Connector.

Ms. Gasteier then shared excitement for the review and vote of the proposed five-year Health Connector Strategic Plan that was created with feedback from staff, external stakeholders, and Board members. She stated that the purpose of the plan was to help CCA work towards upholding

the goal of ensuring Massachusetts residents have access to affordable and meaningful health coverage. She outlined the four focus areas of the strategic plan, while noting that equity remains at the center of CCA's work. She thanked the Board members for their engagement, Health Connector staff for leading internal efforts to develop the plan, and the 65 stakeholder groups that provided their input.

Ms. Gasteier then shared a few brief anecdotes from CCA members gathered at a recent event of how CCA has affected their lives, energizing, and centering the work of CCA staff to fulfill the mission and serve the residents. Lastly, Ms. Gasteier noted that two staff members, Kirsten Blocker and Nury Herrera, would be presenting to the Board for the first time and thanked Board members for their continued support and dedication.

III. Update on MassHealth Redeterminations and Open Enrollment: The presentation "Update on MassHealth Redeterminations and Open Enrollment" was presented by Kirsten Blocker, Patricia Grant, Marissa Woltmann, and Elizabeth LaMontagne. Ms. Woltmann began by giving an update on CCA's enrollment which had grown by 27 percent in the last year, with nearly 272,000 non-group health plan members in January 2024. She revisited the significant changes to this Open Enrollment period which included the ConnectorCare pilot expansion program and the addition of three new carriers.

Ms. LaMontagne then presented MassHealth updates stating that renewals had initiated for about 1.25 million members from April through the end of November 2023, resulting in an overall case load decrease of about 203,000 members. She shared that in November, there were about 129 members who departed from MassHealth because of the redetermination process. She explained that some of the reasons for why members lost their coverage was because MassHealth confirmed that some (~38 percent) were ineligible and other departures (~59 percent) were because MassHealth had insufficient information to confirm their eligibility. She reminded the audience that the monthly redeterminations information is available on the public dashboard.

Ms. LaMontagne noted that there are national concerns about the loss of coverage for kids in many states, but that this was not an issue in Massachusetts. She described coverage for MassHealth kids as being generally very stable, with about a 6,000 decrease as of November 2023. In terms of outreach, Ms. LaMontagne shared that health plans had made over 1.1 million outreach attempts through text messages, emails, and calls to provide support to members. She added that MassHealth continues their partnership with Health Care For All in the 15 communities with the most members at risk of coverage loss, knocking on over 428,000 doors. Additional MassHealth updates included the launching of its Health Plan Assister initiative, allowing health plan staff to directly assist members with their renewals, and the availability of eligibility notices in 6 new languages for members under 65. Lastly, Ms. LaMontagne shared that MassHealth customer service support continues to manage increased volume.

Secretary Walsh recognized MassHealth for the work done with the support of the Health Connector, Health Care For All, and others.

In response to a question from Ms. Turnbull regarding MassHealth's caseload, Ms. LaMontagne stated that the case load is well above the pre-pandemic caseload and the forecasted caseload at the end of the redeterminations process is around two million. In response to a question from Mr. Gulko regarding the reasons for disenrollment, Ms. LaMontagne explained MassHealth believes that individuals who know that they are no longer eligible for coverage, are not going to respond and the same applies to individuals who have access to employer sponsored insurance and transitioned to MassHealth during the public health emergency. She added that MassHealth is focused on those who do not respond because they do not know they need to respond or because they are not able to

complete the renewal form in time. Mr. Gulko asked a clarifying question to which Ms. LaMontagne stated that some individuals may be able to regain their MassHealth coverage during the 90-day grace period and even after that. Secretary Walsh iterated that MassHealth has focused on reducing the member churn rate and that MassHealth is ahead of its enrollment forecast. Ms. LaMontagne confirmed Secretary Walsh's statement but added that MassHealth had a slower start to the redetermination process.

In response to a question from Ms. Deronnette regarding implementation of the Health Plan Assister initiative, Ms. LaMontagne explained that it was launched at the end of 2023 but is still early in its development. In response to a question from Mr. Petion regarding individuals transitioning from MassHealth coverage to CCA, Ms. Woltmann proceeded to provide CCA updates.

Ms. Woltmann stated that about 75,000 individuals had transitioned to CCA and about 23 percent of individuals who had qualified for a CCA plan after being redetermined out of MassHealth had effectuated coverage. She shared that CCA hopes to learn more about those who aren't enrolling in CCA coverage even though they are eligible to do so by fielding a survey, gathering information from enrollment assisters and broader market data. She reviewed data of Massachusetts's performance compared to other state-based marketplaces, concluding that it is comparable despite each state having a different approach. Ms. Turnbull inquired about the lowest performing states, to which Ms. Woltmann explained that Massachusetts has focused more on states with a similar policy environment but that she would follow up with the state-by-state data. Secretary Walsh commented that the lowest performers would be the states not participating in the Medicaid expansion, but Ms. Woltmann believed that all state-based marketplaces have expanded.

Ms. Woltmann presented enrollment data noting the highest enrollment point seen in many years, which compared favorably to other marketplaces. She referenced a press release issued by CMS highlighting a record high of 20 million American that have selected marketplace coverage during the Open Enrollment period. She then reviewed ConnectorCare that currently covers 215,000 members, including 44,000 enrollees in the new pilot expansion program and some of which were previously unsubsidized, already in ConnectorCare, or received advanced premium tax credits only. Lastly, she shared that about 3,500 members are enrolled with the new carriers participating in ConnectorCare. In response to a question from Ms. Turnbull regarding the projections of the pilot expansion program, Ms. Woltmann stated that the expected number of enrollees was around 40-50,000, meaning that CCA was on track.

Ms. Blocker then gave updates on direct communications to members as part of the outreach campaign that continued through the Open Enrollment period to raise awareness of the opportunity to get CCA coverage. She shared that people also received information regarding the Open Enrollment deadline and that redeterminations messaging would continue through the first half of 2024 as MassHealth completes the redetermination process. Regarding the Open Enrollment direct communications, Ms. Blocker stated that outreach to those that are eligible but unenrolled as well as those no longer eligible for MassHealth continued through January 23. She shared that the next goal for member communications would be related to the tax filing season and advising members to wait until they have received their tax documents to file their taxes.

Ms. Blocker also shared that in-community and paid media partnerships were focused on Open Enrollment and delivered visibility through a number of different platforms and in multiple languages. Specifically, she shared that signage at TD Garden and tabling at malls during the holiday season worked for targeting both broad populations and focus groups such as gig economy workers. Lastly, Ms. Blocker shared that interviews in several languages, paid media, and other advertising would continue through the deadline of Open Enrollment.

Regarding contact center performance, Ms. Grant stated that the call volume in December increased by about 15,000 more than November, and there was a total of 119,437 calls. She added that service level had decreased, but that the abandonment rate remained very low. Ms. Grant shared that CCA was working with Accenture to identify areas of improvement and had made changes resulting in a high daily service level. Ms. Grant then gave an overview of the work completed by Maximus, the contact center's second vendor, from July through November 2023. In total, Maximus made outbound calls to over 326,00 contacts and spoke to or left a voicemail to over 71.5 percent of those contacts. Ms. Grant thanked Maximus for their work to reach as many individuals as possible during the redeterminations process and Open Enrollment period.

Secretary Walsh thanked Ms. Grant and in response to a question from Mr. Gulko regarding service level, Ms. Grant explained this number is determined by the total number of calls received and the length of time it takes to answer calls. In response to a follow-up question regarding the abandonment rate, Ms. Grant explained that is based on callers who choose not to wait for assistance. Mr. Petion confirmed that the contact center is calling back the individuals they are unable to interact with in their first attempt and Ms. Grant explained the outreach process in more detail. Mr. Petion commended the team for the work being done at the contact center.

In conclusion, Ms. Woltmann stated that there would be opportunities for continued special enrollments for individuals losing MassHealth because of redeterminations, and that staff would continue to monitor enrollment trends in the market overall and give the Board in-depth Open Enrollment briefing once the period was over. In response to a question and a thought for consideration from Ms. Turnbull regarding advertisements in the MBTA, Ms. Blocker confirmed that advertising is happening in several MBTA stations.

Secretary Walsh thanked the team for their presentation and introduced the next agenda item.

IV. Health Connector Strategic Plan 2024-2028 (VOTE): The presentation “2024-2028 Health Connector Strategic Plan (Vote)” was presented by Nury Herrera and Erin Ryan. Ms. Herrera began by thanking several contributors, including the Health Connector Board members for their support, insightful conversations, and the feedback provided for the strategic plan. She noted that her and Ms. Ryan would keep the presentation at a high level to allow time for a robust Board conversation. She then gave an overview of the agenda of the presentation which included a request for a vote from Board members on the proposed Health Connector Strategic Plan.

Ms. Herrera then went through a timeline that described the development of the strategic plan over the course of several months beginning in the spring of 2023. She shared that CCA staff had individual conversations with Board members to gather initial feedback, engaged with other state agencies to learn about their processes, and created a cross-functional internal workgroup. She added that the workgroup met for several sessions to analyze member data and feedback and develop the best approach for creating the plan. Ms. Herrera also stated that individual conversations with CCA teams and staff were held, and a staff retreat took place in the fall to allow for additional input and feedback.

In addition to internal conversations, Ms. Herrera shared that CCA staff also distributed surveys to approximately 200 individuals from stakeholder groups including: advocates, navigators, legislative and congressional offices, brokers, employers, carriers, and partner agencies. She mentioned that over 65 individual respondents provided input contributing to the identification of the focus areas, goals, and action items of the strategic plan. Lastly, Ms. Herrera stated that additional feedback from Board members and Health Connector staff was requested and incorporated into the final plan.

Ms. Ryan then began by echoing the Health Connector's appreciation for the input provided and the engagement of stakeholder partners. She introduced a visual roadmap of the strategic plan that is intended to be a reference tool for the agency and staff to ensure that the key themes of the plan remain at the core of the ongoing day-to-day work. The first focus area presented by Ms. Ryan was "improve and modernize the applicant and enrollee experience." She explained that there is a need for critical improvements to the resident and CCA member experience, so the intent is to minimize administrative burdens and ensure that individuals can easily and independently navigate and access CCA tools and resources.

The second strategic area presented by Ms. Ryan was focused on ensuring that CCA staff and systems can adapt and grow to reliably meet the needs of Massachusetts residents, as well as the changes of the health coverage, technology, and business landscape. She added that this area focuses on the well-being of staff and CCA's relationships with its stakeholders and vendors. The following area of focus was related to affordability and the need to work towards equitable access to affordable coverage, as it was a consistent theme throughout the feedback received. Ms. Ryan explained that CCA can use available policy, operational, and communication tools to reduce and remove barriers that prevent residents from accessing affordable health insurance coverage.

The final strategic focus area that was critically expressed in the stakeholder feedback was access to health care services. Ms. Ryan shared that the pillar specifically focuses on enhancing affordability for members and those within the merged market to ensure individuals can use their health insurance coverage to access health care services. This would include collaborating with stakeholder partners and sister agencies to work towards innovative solutions and promoting healthcare cost containment.

In response to a question from Mr. Petion regarding an additional internal plan to track progress, Ms. Gasteier stated that the goal is to return to the Board with more detailed work plans. She also noted that CCA had recently reorganized some of its internal staffing and resourcing with respect to internal data in efforts to bring forward a more modernized ability to utilize data. Ms. Gasteier added that addressing the deficits in the Health Connector's data capacity has been an area of focus over the last year.

Ms. Ryan then presented the discussion questions for the Board, beginning with one centered on prioritization. Secretary Walsh shared that she was struck by "putting the customer first" and believed it was a very important statement. To address all the focus areas in parallel, Mr. Gulko suggested setting up workgroups among the Board members to create goals and timelines for each of the areas. Mr. Petion shared a need for identifying the tools CCA currently has and those that are needed in order to achieve the goals. Ms. Gasteier appreciated the great ideas and engagement and agreed that the intention was not to prioritize one focus area or goal over the other.

In response to the next discussion question relating to measuring progress, Mr. Petion asked staff to develop a set of key performance indicators starting at the department level to report progress to the Board. Mr. Veno acknowledged the excellent work by the Health Connector staff on the strategic plan and recognized the importance of the Board's support for making decisions in a fluid healthcare environment. Secretary Walsh reiterated the Board's role in supporting leadership and their interest in making the strategic plan a frequent reference tool. Mr. Gulko shared that if needed, affordability could be prioritized. Ms. Deronnette thanked staff for the opportunity to engage in the strategic planning process, noted what is being offered to customers as also being very important, and suggested having a Board retreat to provide updates on the strategic plan. Ms. Turnbull noted that she would share some comments offline.

The Board voted unanimously through roll call to finalize the 2024-2028 Health Connector Strategic Plan.

Mr. Petion then noted that the Health Connector should prioritize the needs of its internal staff, in addition to prioritizing its members. With appreciation, Ms. Gasteier confirmed that it is reflected in the plan and is top of mind.

With no further agenda items before the Board, the Board motioned and unanimously voted through roll call to adjourn the meeting at 10:06 AM.

Respectfully submitted,

Nuryelis Herrera