

RI Health Benefits Exchange Advisory Board
Wednesday, February 27, 2013
Brown Continuing Education
200 Dyer Street, Providence RI

Meeting Minutes

Attendees: Chair Meg Curran, Mike Gerhardt, Peter Howland, Linda Katz, Amy Zimmerman, Director Christy Ferguson

Absent (Excused): Vice-Chair Geoff Grove, Secretary Steven Costantino, Insurance Commissioner Chris Koller, Director of Administration Richard Licht, Pamela Holland McDuff, Marta Martinez, Dwight McMillan, Tim Melia

- I. The Chair called the meeting to order
- II. Welcome and Introductions
- III. Rhode Island's Health Benefits Exchange Messaging and Communications Development; Presented by Michele Levy, The Boston Group
 - a. Presentation is available upon request:
<http://www.gov.ri.gov/healthcare/contactus/>
 - b. Director Ferguson pointed out that she made a change to the mission statement to read "it [the Exchange] will negotiate for high quality affordable health insurance options on behalf of small businesses and individuals."
 - c. Board members and Director Ferguson discussed branding and messaging and emphasized the following points:
 - i. The Exchange should be careful about how it delivers on its brand promise and be transparent about its timeline.
 - ii. Some proof points should be aspirational so that they Exchange can grow into them (ex. No fine print).
 - iii. Brand promise links health outcomes to insurance products because this reflects state leadership objectives and Exchange Board goals and vision.
 - iv. The mission statement should reflect Medicaid access in addition to the tax credits.
 - v. Marketing and branding focus presented here is broad to ensure its accessibility to all Rhode Islanders regardless of eligibility
 - vi. It is equally important for the Exchange's branding and messaging to highlight good outcomes and affordable care.
 - d. Exchange Naming Options: Ms. Levy presented an overview of potential names and asked the board to indicate their preference. The Board members discussed

their thoughts on their most and least preferred choices of name. Key points included:

- i. Health Source RI:
 1. “Source” can be good because it indicates a place to get information.
 2. Health Source RI has a more government-like connotation than RI Health Source (sounds like a non-profit/NGO).
 - ii. Ocean State Health Plan was the predecessor to United, so the use of *Ocean State Health* may be confusing to some
 - iii. Having health in the name seems like a good message as opposed to just obtaining coverage.
- e. Staff agreed to tally the results of the Board member ratings and most favored names will be further tested in focus groups with Rhode Island consumers, small employers, and providers in early March.

IV. Public Comment

- a. Caring360 could be an option that speaks about access more generally
- b. “Exchange” hasn’t tested well nationally which is why the federal government has moved away from Exchange to “marketplace.” “Exchange” doesn’t resonate well with people. Marketing firm was asked to stay away from using the word “marketplace”.
 - i. “Source” can get at the marketplace concept.
 - ii. Previous research found that people don’t like the word “health” as much as they like the word “care.”
- c. Marketing ramp-up will start in late summer.

V. Adjourn