



Expert Advisory Committee
HealthSource RI
33 Broad Street, 2nd floor, Providence, RI
August 12, 2014, 8:00am – 9:30am
Meeting Minutes

Attendees: Don Wineberg (Chair), Abbe Garcia, PhD, Jessica Mulligan, PhD, Monica Neronha, Sam Salganik

Staff: Amy Black, Dara Chadwick Marti Rosenberg

I. Welcome and Introductions

Don Wineberg, the Chair of the Committee welcomed everyone to the meeting. The minutes of the July meeting were approved, following a minor revision on the list of attendees.

II. Open Enrollment – Messaging Discussion

In preparation for Open Enrollment which starts in November (for plans effective January 2015), Marti Rosenberg asked the committee members for feedback regarding HSRI that would be useful when forming the open enrollment outreach and marketing messages. Specifically she asked what the members had *heard about HSRI and what it means to interact with HSRI*. A discussion ensued. The key points are summarized below:

Lack of trust and Confusion

One committee member described hearing from her patients or other consumers that they fear change, feel being overwhelmed about the new system; feeling like the changes under ACA will not be around long enough and worried about the changes in coverage and benefits (i.e., number of visits) all of which are driven by “Anti-Obamacare” rhetoric and misinformation.

Thus, a barrier for some could be a trust issue in general rather than inability to understand the plans being offered on HSRI

Ms. Neronha provided feedback from the carrier perspective. She noted that system issues have added to a lack of trust for consumers.

Dr. Mulligan has been conducting research around the implementation of the ACA in both Rhode Island and Florida. In general, she has found that consumers are often confused about where they got their coverage and what plan they are on, and may actually not understand the connection with the ACA. Those enrolled in a commercial plan (QHP), however, seem to understand more as many have had experience with employer sponsored insurance. She noted that the experience for consumers in Rhode Island is much more positive than in Florida where they have not chosen to expand Medicaid or implement a state-based exchange.

Dara Chadwick, HSRI Director of Communications asked the committee to provide input regarding the amount of communications we should be sending to consumers.

Ms. Neronha noted that there is a fine balance between wanting to let people know what's coming and not over-communicating and over-spending.

In a discussion about how the election might have an impact on how HealthSource RI's paid and earned media reach, Mr. Wineberg suggested HealthSource look into mobile-focused advertising – making it quick and to the point.

Communication around the Renewal Process

Discussion ensued regarding the renewal process and the impact that may have on the enrollment and how we communicate to consumers.

Because consumers will need to renew by choosing a new plan or keeping their existing plan (i.e., they will not be automatically renewed), committee members voiced concern about “inertia” of some consumers. Thus, members noted the need to make it clear that consumers “must act” to remain enrolled, increase the phone outreach to consumers, and allow them to enroll during those calls.

Ms. Chadwick clarified that consumers will receive a letter, a renewal packet and HSRI will be reaching out to them with outbound calls and emails.

Ms. Chadwick also clarified that this decision on auto-renewals would be in effect for 2014-2015, and that HSRI will determine the appropriate ongoing renewal process in future years.

In answer to a question about Medicaid renewals, Ms. Rosenberg noted that recertifications for Medicaid are happening now and will coincide with Open Enrollment. The Contact Center is helping to renew existing Medicaid customers as well so the issue of volume and clear messaging is a coordinated effort.

In general, committee members voiced concern that this process may be too much for some consumers, although agreed that there is a desire for more choice and more information.

Ms. Chadwick noted that a key goal of HSRI is to help consumers be as informed and educated as possible, with all the options of choosing a different plan if it better meets their needs. This renewal process is aimed at balancing those needs.

Regarding HSRI outreach for open enrollment, Ms. Rosenberg noted that outreach team has been planning its 2014-2015 work for weeks. There will be certified application counselors and Navigators at providers who will help enroll at point of care. Last year, HSRI conducted ongoing outreach events during first open enrollment over a 9-month period. This year, the outreach team will match up outreach events with media even more effectively, with more promotion than last year. Finally, there are plans to implement a regional staffing plan, in order to build stronger relationships with community leaders throughout the state.

Committee members urged HSRI to have a continued focus on small employers, and suggested presenting at Rotary Clubs, working with hairdressers and churches, and having clearly delineated messages for SHOP. Ms. Chadwick agreed that both components need attention and a plan.

Ms. Neronha noted the need the consumers to understand the distinction between coverage on HSRI and Medicare coverage as there is now “OneExchange.” “OneExchange” is an online shopping tool for “Medicare related coverage” which may lead to some confusion.

Suggestions for specific words to use in messages

Ms. Rosenberg asked Committee members how they felt about the words: price, fits your budget, within your reach, choice and comparison. Members suggested adding or revising the language to include ability to find “your provider” to point to the provider directory functionality and to highlight the importance of knowing this information. Members also suggested adding in “assistance,” as the process can be intimidating. The Committee discussed the application process and how assistance and upfront education truly lessens the “burden” of application process.

Finally, the Chair suggested the Expert committee members go through the application process to offer suggestions for improvement. Following a discussion, the committee and staff agreed to set up usability testing for individual and SHOP once the current changes have been completed. The results the testing and committee feedback can be incorporated into the post open enrollment releases in preparation for 2016.

The Chair asked if there were any public comment, hearing none the meeting was adjourned.