



## **Advisory Board & Expert Advisory Council**

HealthSource RI  
One Weybosset Hill / 33 Broad Street  
2<sup>nd</sup> Floor, Conference Room A  
10:00 to 11:30 am  
Friday, November 7, 2014  
Meeting Minutes

I. Call to Order Members present:

Advisory Board members: Mike Gerhardt, Geoff Grove, Advisory Board Chair, Margaret Holland McDuff, Peter Howland

Expert Committee Members present: Abbe Garcia Lou Giancola Rebecca Kislak Beth Lange, Jessica Mulligan, Monica Neronha Cecelia Pelkey, Sam Salganik, Don Wineberg, Expert Committee Chair Ed Wing, Amy Zimmerman

Staff Members present: Director Christine Ferguson, Amy Black, Marti Rosenberg

II. Approve minutes from September 16<sup>th</sup>, 2014 Exchange Advisory Board Meeting – Minutes approved.

III. Preparation for Open Enrollment:

- Renewal update - Publicity, Screen changes, and Outreach Plans

HealthSource RI staff members provided an update on preparation for renewals – including communications and public relations, changes in the screens, and outreach events.

A Board member asked how the difficulty with the federal system and SHOP system has impacted Rhode Island's system. Matt Stark, HSRI staff noted that the issues on the federal level, relate to the HUB and verification issues but the RI system has manual work arounds. For example, Contact Center specialists will take in documentation to move customers through the system.

*Outreach update*

Marti Rosenberg, HSRI staff announced that there are 25 events planned, customers have received a “watch the mail” letter for renewals and will be receiving renewal packets early next week. There is a coordinated effort to reach customers via mail, email and calls.

Director Ferguson discussed how the interagency efforts around contingency planning for open enrollment has been aimed at having enough staff for what is needed (i.e., high call volumes and walk in customers). Based on the experience from last year, she noted that there will be long waits but staff are prepared to make corrections and adjustments to decrease the wait times for customers.

For example, she announced that HSRI is close to signing a lease in Warwick for more walk in traffic. The building will have a sign visible from the road, will be located on Post Road, with ample parking. HSRI is responding to issues experiences during last open enrollment and making improvements.

A member of the Expert Committee asked if HSRI will track the length of time to renew and if people drop off of coverage. Amy Black, HSRI data and analytics, confirmed that renewals will be tracked in this way.

Melissa Travis, a member of HSRI small business sales team noted that the renewal packets for small employers have also been sent out.

#### *Application Screen Improvements*

Marti Rosenberg reviewed the process of changing and improving the screens to make them more user-friendly and the language more accessible. In addition to making the process run more smoothly, we have added a “ton” of help text.

#### IV. Health Plan Offerings and Comparisons – Review New Rate Sheets

- Director Ferguson reviewed the new rate sheets. These can be found at: <http://www.healthsourceri.com/individuals-and-families/?resource=plan-rate-sheets#>
- The high level take away
  - i. SHOP: 20 plans now which is up from 16 last year. NHPRI has come in for this year with lower cost plans. Oct was our biggest month for SHOP enrollment with close to 2500 lives and over 350 employers enrolled.
  - ii. Launching ALEX a decision support tool; we now have agents in house working with brokers; brokers “love it”; Small business majority came into RI and were pleased with what they saw
- Director Ferguson went over the rate sheets in more details. Now using the rate sheet consumers can see pricing of the plans by age, this is actual price – does not show with tax credit. Contact Center staff have been trained to use the rate sheets with customers.
  - i. Possible Revisions – Director Ferguson described potential revisions that would describe the different types of provider networks linked to the plans The idea would be to support the work within the provider and carrier communities, and helping to define the choice for
  - ii. In the small group piece – we are putting out the rates for the year; based on business current census.

The rates will be available on line. Consumers can put your information into a calculator to determine their estimated tax credit. The integrated UHIP system cannot support the type of decision support needed for small business and consumers so the update for the HSRI website is designed to help consumers make their choice before they enter into the UHIP system.

An Expert Committee member of the provider community noted that there is a need materials and effort within provider offices to encourage re-enrollment. Ms. Rosenberg noted that she is working with the Hospital Association of RI to discuss and materials will be distributed to providers via the RI Medical Society.

*Advertising update, Lisa Monti, HSRI marketing team*

Ads started airing yesterday on social media, print, TV and radio. Ms. Monti showed the television ads to members. The simplistic design of the ads were purposeful - to reduce the “noise.” The purpose is to make the point that health insurance is not as complicated as it may seem.

Demo of the ALEX tool that will be used with small employers – their employees (in full employee choice plans) to help them choose the appropriate plan – the process takes about 15 minutes and the information about networks can be tailored for RI.

#### V. Director’s Report

Director Ferguson reviewed the transmittal letter for the Budget submission for 2015-2016. The letter was written in the spirit of the Executive Order

Director walked the members through the sections which address CMS guidance and implementation challenges. The use of federal funds will continue for development through half of fiscal year 2015 and 2016. The total state funds would be 12.5 million for fiscal year 2016. The budget submission assumes EOHHS funds 80/20 of the contact center costs and their matching rate is 75/25 (i.e., state has to pay 25% to get the total amount). But at time of meeting, that cost is not included in EOHHS submission – so that is still being worked through. Finally, HSRI budget will assume state funds, federal funds and revenue sources from services.

In closing the meeting, Director Ferguson explained that for the upcoming open enrollment period HSRI does expect to have problems with the system and we have developed contingency plans to address them. A discussion ensued about how HSRI has worked with carriers to overcome technical issues and prevent consumers from experiencing some of those problems. Carriers and HSRI have worked together and expended resources to make sure customers are able to get through the system. They have done this because they share the end goal of wanting to get people covered. This is hard to explain to the Budget office.

#### VI. Public Comment

Lauretta Converse from the Senate Fiscal office asked for a more detailed breakdown of the 9.6 million in the budget submission? She also asked the budget difference between last year and this years’ marketing plan. **Director Ferguson agreed to follow-up on both items.**

VII. The meeting was adjourned at 11:30.

Next Meeting – November 18, 2014, 1 -2:30pm.