



Silver State Health Insurance Exchange

2310 S. Carson Street, Suite 2, Carson City, NV 89701 • T: 775-687-9939 F: 775-687-9932

exchange.nv.gov

MEETING NOTICE AND AGENDA

Date and Time of Meeting: Thursday, September 10, 2015, 1:30 p.m.

Place of Meeting: Silver State Health Insurance Exchange
2310 South Carson Street, Suite 3A
Carson City, NV 89701

Videoconference Location: Silver State Health Insurance Exchange
150 N. Stephanie St, Ste. 100
Henderson, NV 89074

Call in Number: No call in number will be available for public comment.
The public may call in at (877) 402-9753 access code
2459998, which line will be available in listen only.

Web Broadcast Available at: http://exchange.nv.gov/Meetings/Watch_Live/

Meeting Materials Available at: www.exchange.nv.gov

AGENDA

For Possible Action

- I. Call to Order, Welcome, Roll Call, Announcements
- II. Public Comment
- III. Approval of the minutes of the August 13, 2015 Board Meeting
- IV. Executive Director's Report
- V. SSHIX Strategic Initiatives 2015-2016
- VI. Consumer Assistance Center Update
- VII. Open Enrollment Preparation & Marketing Update
- VIII. FY 2015 Budget Status

Silver State Health Insurance Exchange
Meeting Notice and Agenda
September 10, 2015

IX. CMS Site Visit Update

**For Possible
Action**

X. Discussion and possible action regarding dates, times, and agenda items for future meetings

XI. Public Comment

XII. Adjournment

Unless noted as an action item, discussion of any item raised during a report or public comment is limited to that necessary for clarification or necessary to decide whether to place the item on a future agenda.

Public comment at the beginning and end of the agenda may be limited to three minutes per person at the discretion of the chairperson. Members of the public may comment on matters not appearing on this agenda or may offer comment on specific agenda items. Comments may be discussed by the Board but no action may be taken. The matter may be placed on a future agenda for action.

Additional comment periods may be allowed on individual agenda items at the discretion of the chairperson. These comment periods may be limited to three minutes per person at the discretion of the chairperson. These additional comment periods shall be limited to comments relevant to the agenda item under consideration by the Board.

Prior to the commencement and conclusion of a contested case or quasi-judicial proceeding that may affect the due process rights of an individual the board may refuse to consider public comment. See NRS 233B.126.

All times are approximate. The Board reserves the right to take items in a different order or to combine two or more agenda items for consideration to accomplish business in the most efficient manner. The Board may remove an item from the agenda or delay discussion relating to an item on the agenda at any time. Pursuant to NRS 241.030 the Board may close a meeting to consider the character, professional competence, alleged misconduct or physical or mental health of a person. The Board may limit the internet broadcasting while in closed session but may not deliberate or take action.

We are pleased to make reasonable accommodations for members of the public who are disabled and wish to attend the meeting. If special arrangements for the meeting are necessary, please notify the Silver State Health Insurance Exchange, 2310 S. Carson St., Suite 2, Carson City, NV 89701, or call Melissa Martinez at (775) 687-9939 as soon as possible, and no later than 24 hours prior to the time of the meeting.

Silver State Health Insurance Exchange
Meeting Notice and Agenda
September 10, 2015

Notice of this meeting was posted in the following locations:

Silver State Health Insurance Exchange, 2310 S. Carson St., Suite 2 Carson City, NV Fax (775) 687-9932
NV State Library and Archives, 100 North Stewart Street, Carson City, NV Fax (775) 684-3311
NV State Division of Health Care Financing & Policy, 1210 S. Valley View, Las Vegas, NV Fax (702) 668-4280
NV State Department of Health and Human Services, 4126 Technology Way, Carson City, NV Fax (775) 684-4010
Southern Nevada Health District 330 S. Valley View Blvd., Las Vegas, NV Fax (702) 759-1417
State Welfare Ely District, 725 Avenue K, Ely, NV Fax (775) 289-1645
State Welfare Reno District Office, 3697-D Kinds Row Avenue, Reno, NV Fax (775) 448-5094
State Welfare Flamingo District Office, 3330 Flamingo Road, Las Vegas, NV Fax (702) 486-9401
Clark County Social Services Department, 1600 Pinto Lane, Las Vegas, NV Fax (702) 455-5950
NV State Health Division, 4150 Technology Way, Carson City, NV Fax (775) 684-4211
Legislative Counsel Bureau, 401 S. Carson St., Carson City, NV Fax (775) 684-6705
Grant Sawyer Building, 555 E. Washington Ave., Las Vegas, NV Fax (702) 486-2012
Washoe County Social Services, 350 South Center Street, Reno, NV Fax (775) 785-8648
Washoe County Library, 301 South Center Street, Reno, NV Fax (775) 327-8390
Las Vegas Urban League, 930 W. Owens, Las Vegas, NV Fax: (702) 636-9240

Notice of this meeting and supporting materials are available on or after the date of this notice at www.exchange.nv.gov or you may contact Melissa Martinez at (775) 687-9939.

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Call to Order

Welcome

Roll Call

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Brian Sandoval
Governor

Leslie A. Johnstone
Chair

Bruce Gilbert
Executive Director

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Board Meeting September 10, 2015

<u>Roll Call</u>		LV	CC	Phone	Absent
Chair	Ms. Leslie Johnstone	___	___	___	___
Vice-Chair	Dr. Florence Jameson, MD	___	___	___	___
	Ms. Lavonne Lewis	___	___	___	___
	Ms. Angie Wilson	___	___	___	___
	Ms. Erin Grinshteyn	___	___	___	___
	Ms. Valerie Clark	___	___	___	___
Ex-Officio	Betsy Aiello	___	___	___	___
Ex-Officio	Acting Commissioner Amy Parks	___	___	___	___
Ex-Officio	James R. Wells, CPA Interim	___	___	___	___

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Public Comment

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Approval of the minutes of the August 13, 2015 Board Meeting

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Silver State Health Insurance Exchange (SSHIX) Board Meeting (DRAFT) Minutes Thursday, August 13, 2015

Meeting Location:

Silver State Health Insurance Exchange
2310 South Carson Street, Suite 3A
Carson City, NV 89701

Videoconference Location:

Silver State Health Insurance Exchange
150 N. Stephanie St., Suite 100
Henderson, NV 89074

Members Present

Henderson:

Leslie Johnstone
E. Lavonne Lewis
Florence Jameson, MD

Carson City:

Erin Grinshteyn
Valerie Clark
Betsy Aiello (for Richard
Whitley, Non-Voting Ex-
Officio)
Cliff King (for Acting
Commissioner Amy Parks,
Non-Voting Ex-Officio)
Janet Murphy (for James R.
Wells, Non-Voting Ex-Officio)

Members Absent

Angie Wilson

Staff Members Assisting

Bruce Gilbert, SSHIX
Damon Haycock, SSHIX
Laura Rich, SSHIX
Athena Cox, SSHIX
Melissa Martinez, SSHIX
Janel Davis, SSHIX
Ian Knight, SSHIX
Dennis Belcourt, DAG

I. Call to Order, Welcome, Roll Call, Announcements

Chair Leslie Johnstone called the 1:30 p.m. meeting to order. She welcomed the new Board members. Upon request by Ms. Johnstone, Ms. Clark gave some information

about herself. Roll call was taken by Executive Director Bruce Gilbert; a quorum was noted. There were no announcements.

II. Public Comment

Barry Gold, AARP Nevada

III. Approval of the minutes of the June 11, 2015 Board meeting

The following action was taken:

MOTION **To approve the minutes of the June 11, 2015 Board meeting.**
BY: **Ms. Lewis**
SECOND: **Dr. Jameson**
PASS: **Unanimously**

IV. Elections for Vice Chair per statute NRS 695L.320

Mr. Gilbert described how he reached out to the various members and asked for expression of interest and that only Ms. Jameson stepped forward. The following action was taken:

MOTION **For the nomination of Dr. Florence Jameson for Vice Chair.**
BY: **Ms. Lewis**
SECOND: **(Ms. Johnstone stated that we can just call for a vote of the Board.)**
PASS: **Unanimously**

V. Executive Director's Report

Mr. Gilbert began by stating he appreciates Mr. Gold's remarks during public comment and that they're certainly something we'll talk about with our marketing firm. He then presented his report. There were no Board questions or comments.

VI. Exchange Sustainability Workshop Report

Mr. Gilbert presented the report. There was one Board question and comment.

VII. Consumer Assistance Center Update

Ms. Rich presented the update report. There were Board questions, comments, suggestions and requests for month-to-month longitudinal information so that we can see trends regarding calls, and also categorizing issues and whether they get resolved. Mr. Haycock provided additional input.

VIII. Introduction of Penna Powers, Marketing Vendor

Ms. Davis presented the report, then introduced the marketing vendor team: Patty Helvick, Chris Menges, Melissa Deitz and Nicholas Giustino, all from Penna Powers, and Andres Ramirez and Janet Quintero, both from Ramirez Group. The marketing vendor team as a group then presented the various parts of the marketing plan. There were Board questions, comments, suggestions and discussion, with input from Ms. Davis, Mr. Gilbert and Mr. Haycock. Ms. Johnstone invited Mr. Ramirez back every month for the Board meetings. She asked Mr. Gilbert to put on the next meeting agenda an item to focus on the navigator work and the plan.

IX. Xerox Closeout Update - Data Transition Activity

Mr. Haycock presented the update report. There were Board questions.

X. Discussion and possible action regarding dates, times, and agenda items for future meetings

Ms. Johnstone requested that next meeting agenda have an item to focus on the navigator work and the marketing and outreach plan.

XI. Public Comment

Elisa Cafferata, NAPPA
Barry Gold, AARP Nevada

XII. Adjournment

Ms. Johnstone thanked everyone and adjourned the meeting.

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Executive Director's Report

(Verbal)

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V

**SSHIX Strategic
Initiatives 2015 -2016**

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Brian Sandoval
Governor

Leslie A. Johnstone
Chair

Bruce Gilbert
Executive Director

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For Possible Action

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Information Only

Date: September 10, 2015
Item Number: V
Title: Strategic Initiatives 2015-2016

PURPOSE

The purpose of this document is to provide information to the Board and public regarding the Silver State Health Insurance Exchange's (Exchange) setting of organizational priorities, the focusing of energy and resources, and ensuring that employees and other stakeholders are working toward common goals. It is intended to establish agreement around intended outcomes/results and assure the organization's operations achieve our primary mission: to increase the number of insured Nevadans by facilitating the purchase and sale of health insurance that provides quality health care through the creation of a transparent, simplified marketplace of qualified health plans.

BACKGROUND

The Exchange was created in 2011 pursuant to Senate Bill 440 of the 76th Legislative Session. The Exchange was charged with creating and administering a state-based health insurance exchange to facilitate the purchase and sale of qualified health plans in Nevada.

The Exchange developed a strategic plan in 2013 to identify goals and measure progress/success. A number of challenges have kept our attention and prevented us from revising and updating our plan. With a successful 2015 Plan Year open enrollment, the time has come to revisit and recalibrate.

THE STRATEGIC INITIATIVE PROCESS

Business leaders started adopting formal strategic planning practices after World War II, creating written documents which set out strategic objectives over a multi-year period and included a mission statement, expression of a long-range vision, and core values.

By the 1980's companies recognized that changing circumstances—regulatory, economic, and competitive—often made sticking to a long-term plan impossible. There were constant battles between managers wanting to adhere to the plan and those that believed the appropriate course was to adjust to the changing environment.

Companies eventually learned that there is a very real difference between strategy and planning. Strategy implies change and results: you stop doing some things and start doing others or reprioritize, then assess organizational outcomes.

Strategic plans are generally linear and based on “more of the same” however the Exchange exists in a post-linear world. The continuous rollout and refinement of federal regulations and the ongoing development of the State Supported Based Marketplace (SSBM) model make traditional strategic planning impractical. Our efforts must be directed to ‘adaptive planning,’ focusing on actions which push us toward our desired future and reflective of our turbulent and unpredictable environment.

In developing our plan, it is important that structure not be abandoned; we still must utilize a process which requires us to define and articulate our goals and describe the path we believe offers the best opportunity to achieve them.

TWO GUIDING PRINCIPLES

In creating our strategic or adaptive plan, we have been guided by two principles:

- ✓ Our plan will place an emphasis on practical initiatives which provide the greatest opportunity for present and future success rather than on operational metrics.
- ✓ Our plan will set priorities, identify available resources, and focus on the capabilities needed to assure sustainability and value.

We believe that, by following these principles, we have been able to avoid many of the pitfalls which can make the planning process little more than a reflection of internal biases and organizational groupthink.

GOALS

Goals are a fundamental component of long-term success. They encourage an enterprise to allocate time and resources efficiently, focusing on specific desired outcomes. When goals have been defined, it is possible to develop a deeper understanding of the effects of tactical decisions and reinforce organizational culture and values. Our goals are:

- ✓ Continued restoration of consumer confidence

- ✓ Implementing programmatic outreach and education
- ✓ Increasing our market focus
- ✓ Conceptualizing/designing SSHIX 3.0

Each of these goals are intended to enhance the ability of the Exchange to increase the number of insured Nevadans by facilitating the purchase and sale of health insurance that provides quality health care through the creation of a transparent, simplified marketplace of qualified health plans, both today and in the future.

GOAL 1: CONTINUED RESTORATION OF CONSUMER CONFIDENCE

There can be little doubt that the Exchange and Nevada Health Link sustained significant damage as the result of the difficulties experienced during the 2014 Open Enrollment period. Our chosen technology platform failed, leading to an avalanche of issues that affected Nevada's consumers, producers, and carriers. The Exchange underperformed in every functional area: enrollment, billing, premium collection and remittance, customer service—and did so in the public spotlight.

Other state-based marketplaces (and even healthcare.gov to a lesser extent) experienced many of these same problems; some were never able to recover. In contrast, the Exchange was able to more than double the number of consumers purchasing health plans through Nevada Health Link for Plan Year 2015.

We believe that the success of the 2015 Open Enrollment was predicated upon the Exchange's response to the failures of 2014. The Exchange acknowledged the issues raised, considered all relevant circumstances, made reasoned decisions, and took prompt and decisive action to address those failures and prevent any possible recurrence. This course of conduct, coupled with a changeover to more robust application and enrollment technology, and the institution of direct premium billing by the carriers allowed both the Exchange and the Nevada Health Link brand to survive the type of injury that led to closure of other exchanges.

While the Exchange has successfully begun the process of recovery, there is clearly more work to be done. Consumer and producer confidence must be fully restored if we are to realize our mission. The best tools for such an effort are transparency and accountability.

Transparency

The Exchange has a demonstrated history of freely sharing knowledge. Access to our information has been historically facilitated through our public meetings and the Exchange and Nevada Health Link website. We are in the process of reviewing and revising the Exchange website, making it more consumer-friendly and intuitive to navigate, implicitly recognizing that transparency does not mean simply providing access to data that has no context. Our commitment is to take concrete steps to allow greater understanding of our actions by the public.

Accountability

Accountability enables the public and our stakeholders to ensure that the Exchange and its representatives fulfill our responsibilities to those we serve. Accountability not only protects those who are served, but also helps the Exchange identify better ways to operate and meet our functional and financial commitments.

To date, assessments of the Exchange and its operations and internal controls have been performed by the Centers for Medicare & Medicaid Services, the Office of the Inspector General, the Internal Revenue Service, and Nevada's Division of Internal Audits. Our expenditures of grant funds have been monitored by designated federal agencies. Our data transition and retention plans have been reviewed and determined to be satisfactory. Our procurement processes and agency accounting have been found to comply with all applicable state requirements.

The challenge faced is to better communicate our acceptance of accountability and our performance. We will meet that challenge, in part, by making this information more widely available through the revised Exchange website. We will also work to develop additional channels for the dissemination of this material in order to underline the extent of our accountability.

GOAL 2: TARGETED OUTREACH AND EDUCATION

The primary mission of the Exchange has always been clear: to increase the number of insured Nevadans. Over the past two years, our efforts, in conjunction with an expansion of Medicaid eligibility, have substantially reduced the state's uninsured population.

During those first two years of operation, the Exchange developed and executed outreach and education strategies directed toward a general audience. An important initial task was to communicate requirements under the new health reform law and explain how the Exchange could assist consumers in accessing and selecting among health coverage options. Our focus was understandably upon providing informational support and assistance to all of Nevada's consumers, employers, and businesses.

While it is important that we continue to provide some generalized outreach and support, the time has come for the Exchange to identify access disparities and underserved populations, developing strategies to specifically engage and enroll hard-to-reach populations. We have begun that process by initiating a target market validation and analysis, and will use the data from that process to better focus our outreach and education efforts. Initial expectations are that the information provided may lead to increased emphasis on:

- ✓ Rural populations, which tend to be disproportionately older, chronically ill, lower income, and uninsured compared to people living in urban areas.

Silver State Health Insurance Exchange
Strategic Initiatives 2015-2016

- ✓ Younger workers in jobs and industries which historically do not offer employer sponsored insurance or, when it is offered, find they cannot afford it given their low incomes.
- ✓ Hispanics, who represent a significant portion of the nonelderly uninsured population and have historically faced numerous barriers to enrolling in health insurance including difficulty completing the application, confusion about eligibility, and language challenges.
- ✓ Tribal community members, who may be eligible for free or low-cost health insurance options through the Exchange that enhance the health care services available through existing health programs.
- ✓ The self-employed such as freelancers, consultants, realtors, estheticians, and others who often do not recognize that they can enroll in individual coverage offering income-driven subsidies or tax-advantaged small group coverage under the Exchange's SHOP program.
- ✓ Other underserved populations which meet the demographic profile of consumers benefiting from the income-driven subsidies available through the Exchange, particularly seniors and communities of color.

We will work more closely with community groups, hospitals, community health centers and other entities as well as create integrated marketing plans designed to target and reach specific audiences through multiple channels, including social media. Attention will be specifically directed to providing linguistically and culturally appropriate information and services, and engaging 'trusted sources' in our messaging efforts.

GOAL 3: INCREASED MARKET FOCUS

Health insurance marketplace successes in Kentucky, California, and Connecticut have demonstrated that insurance brokers and agents play an important role in helping consumers understand, shop for and enroll in health coverage.

Improved Consumer Assistance

Few consumers understand the impact of deductibles, co-pays, cost sharing, and coinsurance. Obtaining professional advice when applying for and selecting a qualified health plan assures access to the tools and knowledge necessary to make a decision that best suits an individual's circumstances and needs.

As noted in the recent article entitled "Can Consumers Make Affordable Care Affordable? The Value of Choice Architecture," the success of an Exchange requires that consumers be able to select the best policy for their needs. However, the authors found that, without assistance, consumers perform at near chance levels and show a significant bias, overweighting out-of-pocket costs and deductibles.

The complex, evolving nature of the health reform regulations has left many confused. Better engaging our consumers assures that we provide meaningful assistance, helping them make informed choices.

Our navigator groups, with their community ties, are the key to these efforts. With a broader group of navigator entities than the Exchange has ever had before, we look to them to help communicate the importance of being insured, assess eligibility for coverage, and assist consumers in understanding the enrollment process. Navigators will be crucial to the Exchange's efforts to provide face-to-face contact and assure technology does not become a barrier to our customers.

To that end, we will:

- ✓ Identify and attend events that offer opportunities to interact with and influence our consumer base.
- ✓ Provide culturally appropriate services to underserved communities, messaging the importance of coverage and ways to access enrollment and informational assistance.

Marketplace Production

According to an issue brief published by Georgetown University's Health Policy Institute, health insurance agents and brokers drove a significant proportion of enrollment into the Affordable Care Act (ACA) health insurance marketplaces in 2014 and are expected to play an increasingly important role in meeting the law's goal of expanding coverage.

In Kentucky's marketplace, which had a true partnership with brokers, more than 40 percent of those enrolling were assisted by a broker. In California, the number was 39 percent. Other states such as Minnesota and Illinois coordinated campaigns with producers including offering co-branded enrollment events and marketing materials to broaden market reach and the participant pool, mitigate risk, and keeping prices and premiums stable.

To foster our partnership with Nevada's agent and broker communities, we will:

- ✓ Reach out to the professional associations representing the agent and broker communities to determine how best to advance Exchange-producer cooperation.
- ✓ Develop criteria/processes for co-branding marketing efforts and events.

- ✓ Work with our marketing consultant and Nevada's agent and broker communities to identify opportunities and develop strategies to engage and enroll hard-to-reach populations.

Issuer Marketing Partnerships

In addition to the activities of the broker and agent communities, participating health plans have worked to leverage their online shopping presence to promote clarity, transparency, and education to drive consumer interest and plan adoption.

While the Exchange has worked closely with carriers to develop direct enrollment integrations to and from the federal health insurance marketplace that delivered a seamless consumer-facing experience, we have not historically coordinated our marketing and outreach efforts although our goals are the same: providing Nevada's consumers with the resources needed to select appropriate, affordable, and quality health plans for themselves and their families and getting as many people enrolled in coverage as possible.

To foster our partnership with our issuers, we will:

- ✓ Reach out to each of our participating carriers to determine how best to advance Exchange-insurer cooperation.
- ✓ Develop criteria/processes for cooperative marketing efforts and events.

GOAL 4: ENVISION AND DESIGN SSHIX 3.0

The passage of the ACA and the establishment of the Exchange were moments of profound change in Nevada's health insurance market. With time and a bit of perspective, we now see that those moments did not herald the end of change but only the beginning.

The Silver State Health Insurance Exchange began life as a State-Based Marketplace, established by statute and managing both operations and enrollment technology. In the course of dealing with operational problems and in an attempt to resolve a critical issue—the failure of the application and enrollment technology created by Xerox—the Board made a practical and fiscally prudent decision in May of 2014 to end dependence on the Xerox system and adopt the federal application and enrollment platform.

With this decision, the Exchange became a unique hybrid—a state managed marketplace utilizing federal technology. The Board's actions that day had far reaching and unforeseen consequences. We had transformed; Nevada was no longer either a purely state-based exchange or a federally facilitated marketplace, but something new and different, a supported state-based marketplace or SSHIX 2.0.

It is unlikely that our transformation is finished. Lessons learned over the past two years, coupled with the flexibility offered by the State Innovation Waivers program, provide an opportunity to continue to work toward extending coverage to every Nevadan while giving us greater autonomy in deciding how best to accomplish that goal.

The State Innovation Waivers offer wide latitude to states for transforming their health insurance and health care delivery systems. Vermont signaled its intention to apply for a waiver to try to implement a single-payer system within the state. In Hawaii, the legislature created a task force to explore how the state could better provide individual insurance coverage through a waiver, while Minnesota expressed interest in using a waiver to expand the state's Basic Health Plan to smooth out the coverage continuum for low-income residents and support the state's broader delivery system reforms. Arkansas has discussed using a waiver to create an exchange which serves as the gateway to both subsidized and unsubsidized individual plans and offer consumers the opportunity to purchase additional products such as life and auto insurance in order to assure marketplace sustainability.

The Exchange should and must be a leader in the State Innovation Waiver discussion. We can be proactive, open the door, and work to design something that works for Nevada rather than just follow what Washington thinks we ought to do.

A dialogue should be initiated with our stakeholders, elected officials, fellow state agencies, carriers, agents and brokers, and consumer groups to consider state goals and determine the ways in which a State Innovation Waiver might benefit Nevadans. If it appears that a waiver would benefit our consumers and state authority is granted to pursue the process, the Exchange can move forward to begin to develop the waiver application and work to create a marketplace that truly is designed, controlled, and managed by Nevadans for Nevadans.

CONCLUSION

This document should be viewed as the first step in a long-term process. Systematic periodic review of our efforts is necessary to ensure the effective and responsible management of the Exchange.

Our plan allows us to align our resources to meet the goals identified and make adjustments as needed to achieve desired results. The plan does not reflect everything that we hope to do nor does it represent an irrevocably fixed set of directives, since the planning process must be dynamic and adaptable. It will, however, serve as the framework for our decision-making and resource allocation going forward.

VI

**Consumer Assistance
Center Update**

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Brian Sandoval
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For Possible Action

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Information Only

Date: September 10, 2015
Item Number: VI
Title: Update on Exchange Consumer Assistance Center

PURPOSE

The purpose of this report is to provide information to the Board and public on updates to the Exchange Consumer Assistance Center (ECAC) metrics and activities.

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METRICS

Metrics are tracked and logged using a compilation of data gathered from both the Call Management (CM) System and the Customer Relations Management (CRM) tool. The CM System provides the Exchange with information on call volume, wait times and specific staff activity while the CRM is a case management tool used by the ECAC staff to log detailed case and consumer information.

Table 1 below illustrates CM System call statistics of all calls and all abandoned calls from April 16, 2015 through August 31, 2015. Data from August 4, 2015 has been excluded due to a power outage.

Table 1:

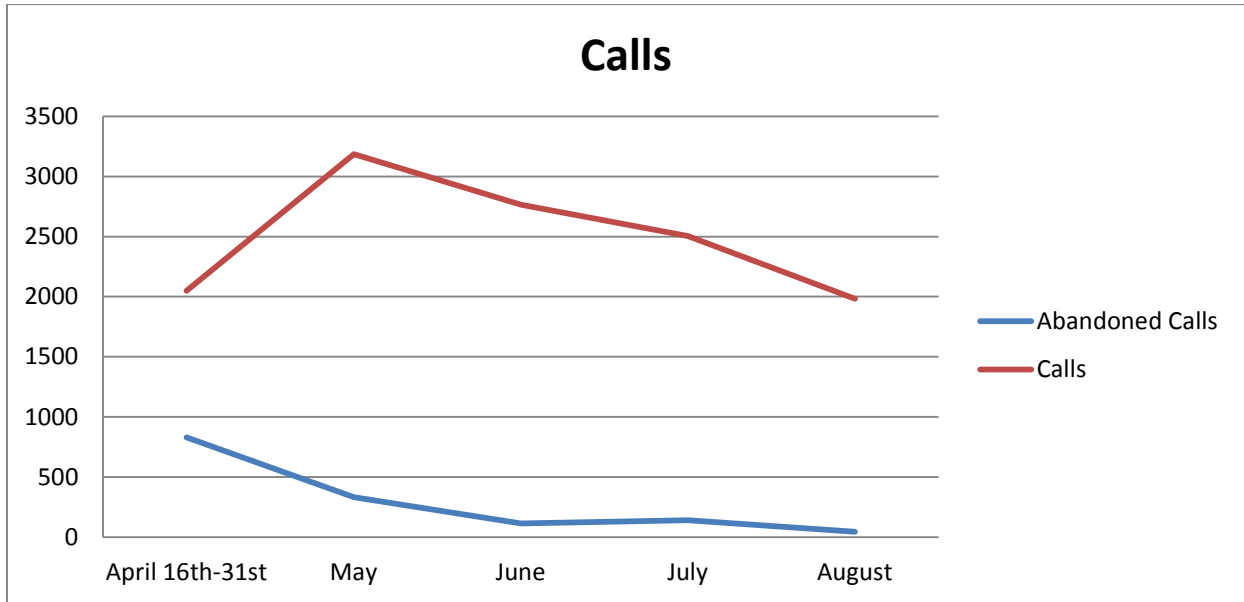


Table 2 illustrates CM System data and shows the percentage of abandoned calls and percentage of answered calls from April 16, 2015 through August 31, 2015. Data from August 4, 2015 has been excluded due to a power outage.

Table 2:

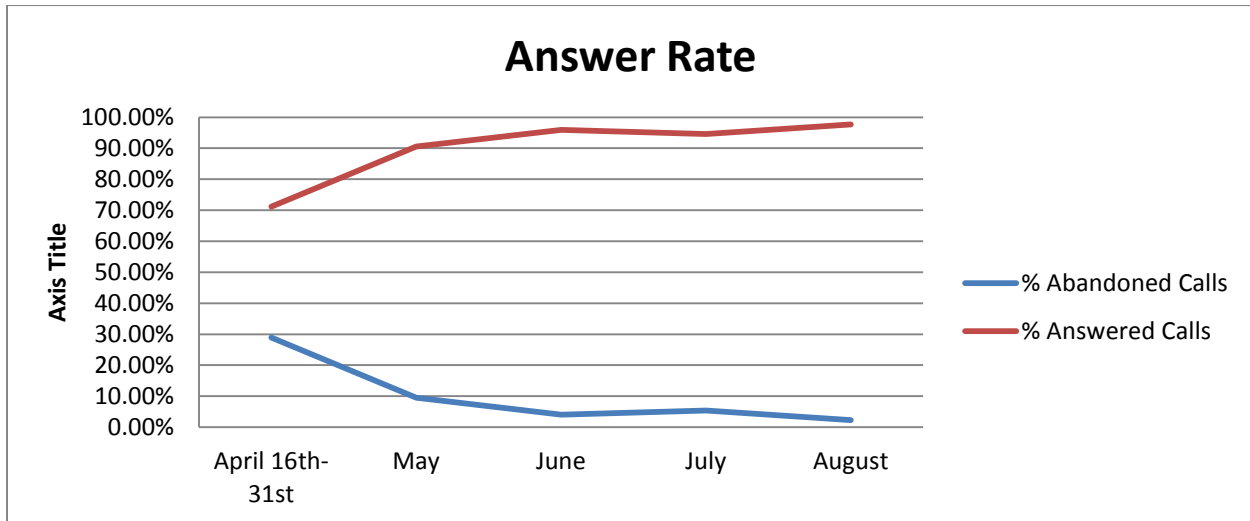


Table 3 illustrates CM System data and shows average abandoned call times, average hold times, and average time spent on calls from April 16, 2015 through August 31, 2015. Data from August 4, 2015 has been excluded due to a power outage. The Exchange tested the CM System in the month of July to determine why calls were being abandoned, thus the increase in abandoned calls in July. The testing was to replicate calls that were coming in before 5:00 pm that would then

stay on the line for long periods of time. New procedures were put into place to ensure that no consumer will be left on hold after hours.

Table 3:

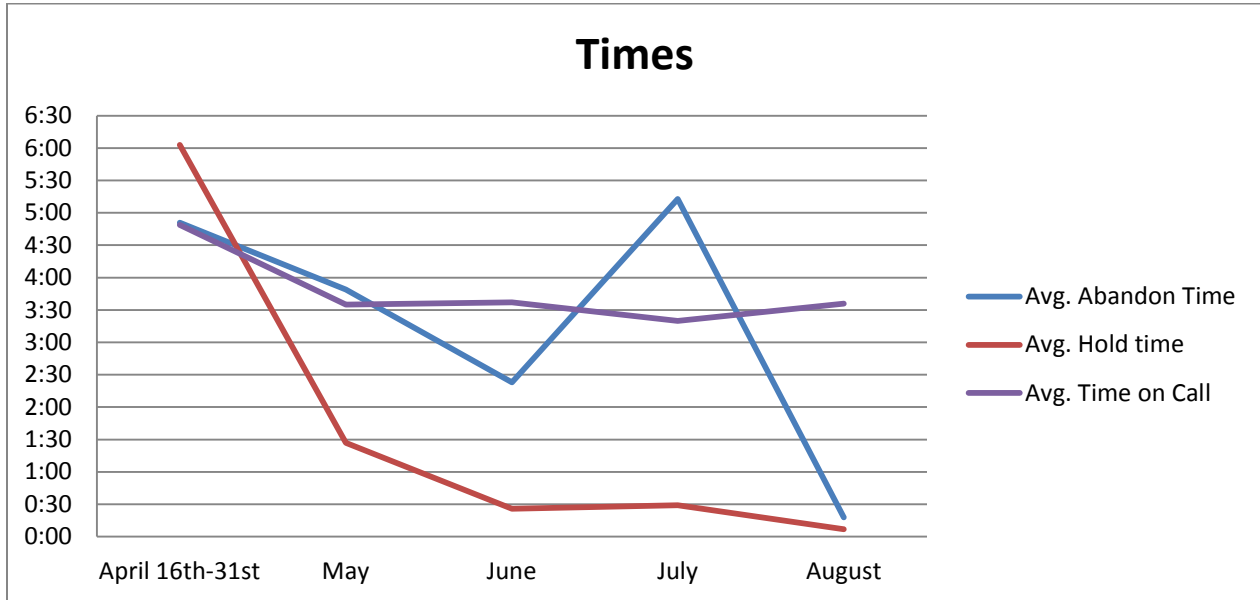


Table 4 is information gathered directly from the CRM. The data illustrates all of the consumer calls that the ECAC has received from inception on April 16th through August 2015. The majority of the calls that come into the center are either Medicaid or Healthcare.gov related. While Medicaid calls are redirected (in many cases with assistance from ECAC staff) to the Division of Welfare and Supportive Services (DWSS) call center, the majority of Healthcare.gov calls receive a Nevada centric layer of assistance from the ECAC staff.

Due to Nevada's unique situation as an SSBM state, consumers have found it helpful to be assisted by the call staff in the expediting and resolution of issues in the marketplace. Additionally, it has enabled the Exchange staff to identify and analyze new or potential concerns that have affected or may affect Nevada consumers.

Table 4:

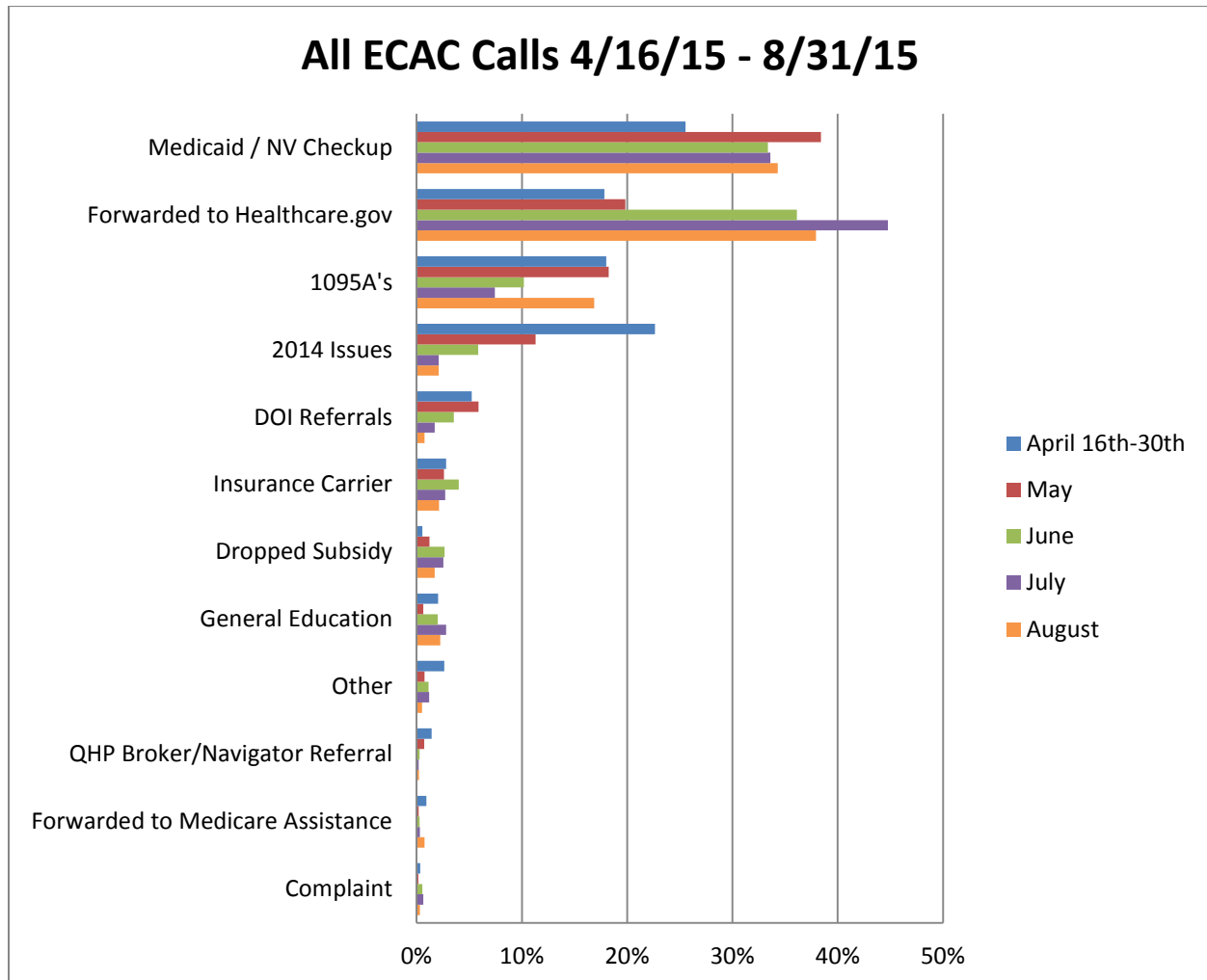
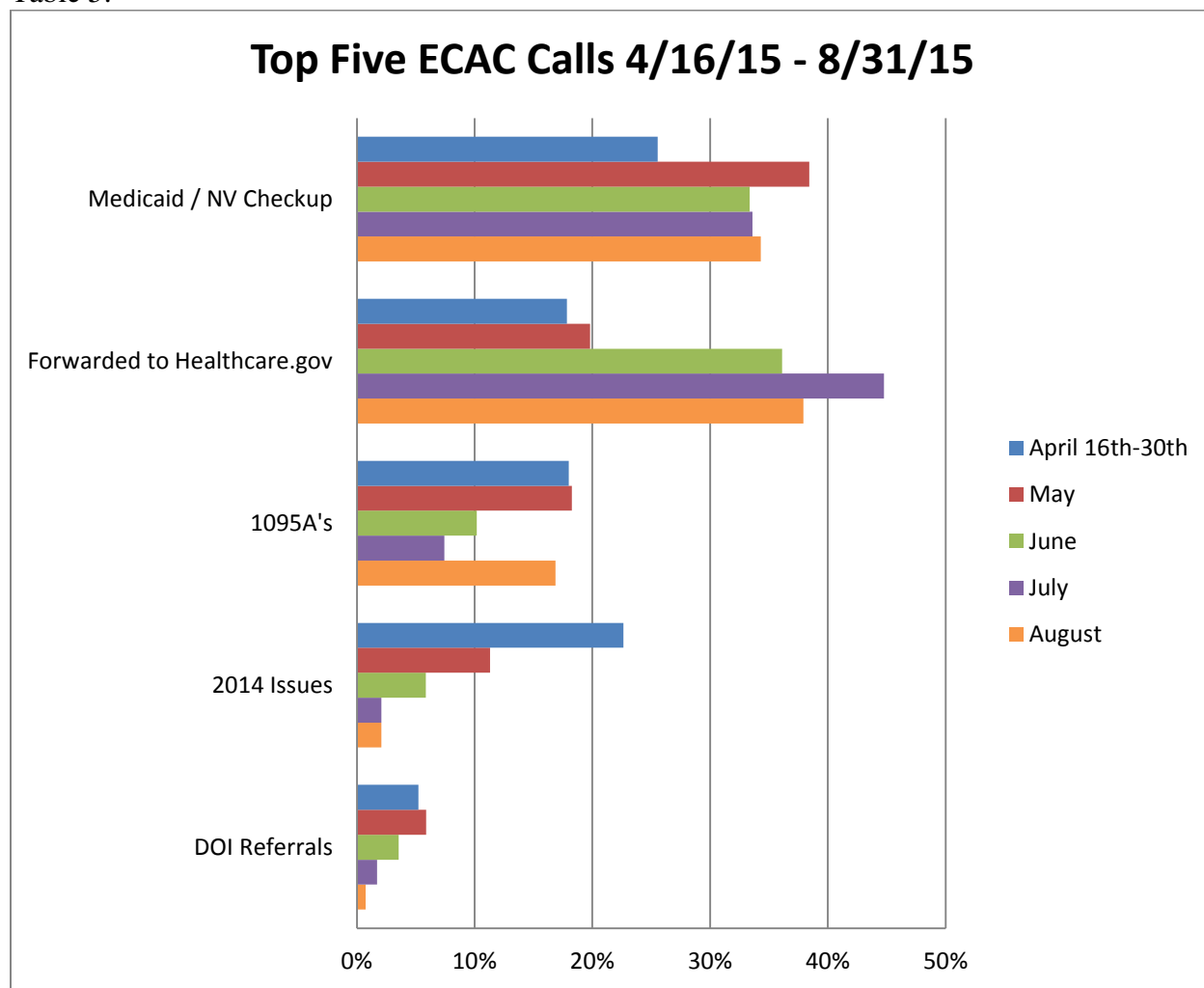


Table 5 illustrates data from the CRM and shows the top five (5) topics of calls received by ECAC staff from April 16, 2015 through August 31, 2015.

Table 5:



OTHER ITEMS

The Exchange continues to work with the Division of Insurance (DOI) to resolve outstanding consumer complaints related to 2014 plans which were managed by Xerox.

The Exchange has resolved almost all of the 1095A corrections. Four (4) remain in process between The Exchange and IRS.

The Exchange continues to work closely with CMS regarding consumers who experienced documentation submission issues and thus lost their subsidies or who were disenrolled for non-payment.

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Open Enrollment Preparation & Marketing Update

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AGENDA ITEM

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Date: September 10, 2015

Item Number: VII

Title: Open Enrollment Preparation & Marketing Update

PURPOSE

The purpose of this report is to provide the Board and public with an overview on the Open Enrollment preparation plan and to hear from our marketing firm, Penna Powers in regard to how they will be assisting the Exchange leading up to and during open enrollment events via a marketing update.

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BACKGROUND

Open Enrollment for Plan Year 2016 begins November 1, 2015 and ends January 31, 2016. In preparation for Open Enrollment, Penna Powers developed a marketing plan that was showcased at the August 13, 2015 Board Meeting. This plan has been further detailed with operational benchmarks. Penna Powers will be presenting an update today as well as answer any questions.

OPEN ENROLLMENT SUMMARY

For the 2016 Plan Year, Penna Powers has chosen various media allocations to meet demographics by matching the percentage of insurance-eligible Nevadans through zip code targeting to reach new enrollees for this upcoming enrollment. There will be two events: a kick-off (Nov. 1) and close-out (Jan. 31) designed to increase awareness of Nevada Health Link, gather information from potential consumers, and begin the enrollment process. Moreover, in recognition of the importance of our partnership with Nevada's agent and broker communities, the Exchange has committed to providing marketing assistance through Nevada Association of Health Underwriters (NAHU), National Association of Insurance Financial Advisors (NAIFA) and Nevada Independent Insurance Agents (NIIA). We will work together to coordinate agent and broker participation in large events throughout the enrollment period sponsored by the Exchange. Penna Powers and the Ramirez Group will provide marketing assistance for these co-branding events. Creative messaging will be used through media channels in order to reach our target population. The marketing campaign will provide:

- Paid Media: Includes print and television advertisements as well as billboards
- Earned Media: Public service announcements and Community Leader interviews
- Public Relations: Event publicity for community events, maintain momentum, and publicize outreach
- Social Media: Twitter and Facebook along with a Youtube channel
- Outreach: Co-branding events, outreach events, kick-off and close-out events

Penna Powers' Account Manager, Patty Halabuk, will provide additional details about the marketing update as well as answer any questions.

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2015/2016 Marketing Update

September 10, 2015

Follow-up From August Board Meeting

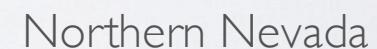
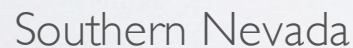
Consideration and Inclusion of varying ethnicities, including African Americans, within the marketing plan...

- Advertising Media
 - Based on the June/July 2014 Applied Analysis study and 2015 Scarborough income profile model data, African American, Asian and Other ethnic groups each represented only 5-7% of the target audience while Hispanic represented approximately 45%. As a result, mainstream mass media (i.e., TV, radio, outdoor and digital) will be utilized to reach these groups. Due to percentage of target market, Hispanic radio and TV will be utilized to reach Hispanics.
- Media Relations
 - In conjunction with Outreach and Social Media, Penna Powers Media Relations will consider and engage all relevant, ethnic-specific niche media opportunities such as: *The Urban Voice*, *Our Own Voices*, *Las Vegas Black Image*, *El Mundo*, *Ahora Latino*, *Las Vegas Asian Journal* *Las Vegas Chinese Daily News* and others.

Target areas for new and ongoing growth...

- Penna Powers has cross-checked its data against the 2015 Health Insurance Marketplace Plan selections by zip code and the latest DMS Southern Nevada enrollments by zip code map to pinpoint these top 10 zip codes for mining new qualified enrollees (represents 80/20 Southern and Northern Nevada breakdown)

89117 89147 89502 89123 89129 89103 89148 89074 89509 89436



CREATIVE REFINEMENTS

- Incorporate models of varied ethnicity, age and representative target groups
- Use 4 colors
- Avoid financial references in the messaging
- Communicate the positive outcome of having health insurance

Creative Example #1 – Storyboard

“SWEET FREEDOM”

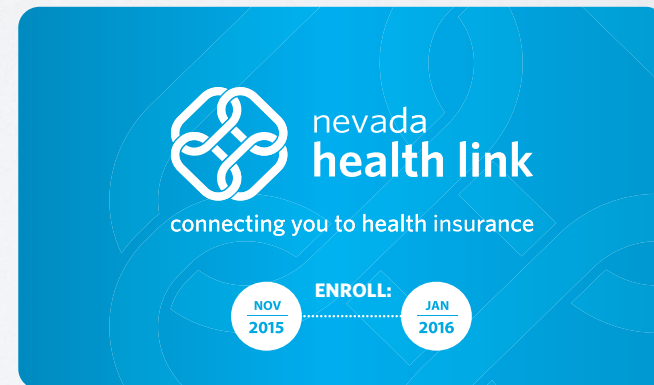
Nevada Health Link TV Spot :30



Creative Example #1 – Storyboard

“SWEET FREEDOM”

Nevada Health Link TV Spot :30



Creative Example #1 - Script



CLIENT: SSHIX
JOB NO.: 6983
DATE: SEPTEMBER 3, 2015
TITLE: SWEET FREEDOM
LENGTH: 30
ISCI CODE:

VIDEO

Open on b-roll of a young Hispanic man working in a small coffee shop. We see tight, stylized shots of him in the process of roasting beans.

We cut to him grinding beans, steaming milk, pouring espresso shots, etc.

We cut to him making latte art with the steamed milk.

We cut to a shot of her smiling at camera, then fade to our end screen.

END SCREEN:
Nevada Health Link logo
Get connected to affordable healthcare.
NevadaHealthLink.com
VERSION 1: Enroll November 1–January 31
VERSION 2: Enrollment ends January 31

AUDIO

VO: Life's a little different now that I'm on my own. I've got more freedom than I've ever had. I'd like to start my own thing. But I also have my own responsibilities.

That includes taking care of health coverage. But Nevada Health Link made that part easy. Now it's something I can afford to do.

I'm still trying to perfect my latte art. But my healthcare is looking pretty sweet.

ANNCR: Get connected to affordable healthcare with Nevada Health Link.

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+ LAS VEGAS | 2470 St. Rose Pkwy, Suite 208, Las Vegas, NV 89074 • 702.901.7233

PennaPowers.com

Creative Example #2 – Storyboard

“REALITY CHECK”

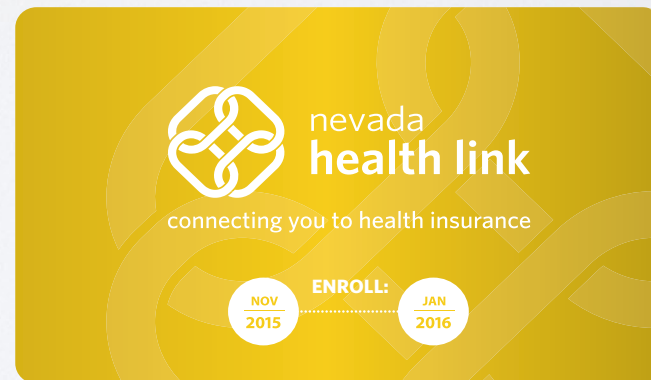
Nevada Health Link TV Spot :30



Creative Example #2 – Storyboard

“REALITY CHECK”

Nevada Health Link TV Spot :30



Creative Example #2 - Script



PENNA POWERS

CLIENT: SSHIX
JOB NO.: 6983
DATE: SEPTEMBER 3, 2015
TITLE: REALITY CHECK
LENGTH: 30
ISCI CODE:

VIDEO

Open on b-roll of a 50-something man doing
woodwork in a small shop.

We see him using a table saw, sanding a
rocking chair, etc.

We see the man playing with his young
grandkids.

We cut to a shot of him smiling at camera,
then fade to our end screen.

END SCREEN:
Nevada Health Link logo
Get connected to affordable healthcare.
NevadaHealthLink.com
VERSION 1: Enroll November 1–January 31
VERSION 2: Enrollment ends January 31

AUDIO

VO: Back when I was young, I thought I was
invincible. But, like all things, I'm getting
older. And health issues are now a reality.

When I started looking, I was afraid
healthcare would be way too expensive. But
with Nevada Health Link, I found it was
something I could afford to do.

I've still got plenty of life to live. And my
healthcare will help me do it.

ANNCR: Get connected to affordable
healthcare with Nevada Health Link.

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PennaPowers.com

Creative Example #3 – Storyboard

“LITTLE ANGELS”

Nevada Health Link TV Spot :30



Creative Example #3 – Storyboard

“LITTLE ANGELS”

Nevada Health Link TV Spot :30



Creative Example #3- Script



PENNA POWERS

CLIENT: SSHIX
JOB NO.: 6983
DATE: SEPTEMBER 3, 2015
TITLE: LITTLE ANGELS
LENGTH: 30
ISCI CODE:

VIDEO

Open on b-roll of a middle-aged mom playing with her two young children.

We see the mom and her girls playing dress-up, having a princess party.

We cut to the mom pulling something smoking out of the oven as the girls laugh.

We cut to a shot of the mom and girls smiling at camera, then fade to our end screen.

END SCREEN:
Nevada Health Link logo
Get connected to affordable healthcare.
NevadaHealthLink.com
VERSION 1: Enroll November 1–January 31
VERSION 2: Enrollment ends January 31

AUDIO

VO: My girls are the best thing that ever happened to me. I'd do anything for them. But that's part of being a mom. You have to take care of your little angels.

That means taking care of health coverage. And now with Nevada Health Link, it's something I can afford to do

Life's not always easy. But with healthcare, I feel like I got that part right.

ANNCR: Get connected to affordable healthcare with Nevada Health Link.

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+ LAS VEGAS | 2470 St. Rose Pkwy, Suite 208, Las Vegas, NV 89074 • 702.901.7233

PennaPowers.com

Media

- TV, Radio and Print placements will launch the week of October 26. Digital and Outdoor will launch enrollment week, November 1.
- TV/Radio Station Partnerships
 - The media team met with eleven potential broadcast partners the week of 8/31/15 in Las Vegas to discuss Southern Nevada media buy and brainstorm value-add opportunities for the 2015/16 enrollment campaign. Andres Ramirez was in attendance to help ensure the opportunities will align with his team's ongoing outreach strategy and events.
 - Eleven additional meetings to discuss the same for Northern Nevada will take place in Reno the week of 9/7/15.
 - Finalized media partners and value-add opportunities will be detailed in October's update.

Media - Continued

o Digital Planning

- Penna Powers is finalizing the roster of technology partners who can integrate with Ramirez Group's lead database (generated from outreach activities).
- Finalized digital media partners will be detailed in October's update.
- Tracking pixels have been placed on both NevadaHealthLink.com and EnlaceDeSeguroMedicoNevada.com to track which digital media the target consumer is responding from. This information will enable us to continually align the digital placements in conjunction with where we are receiving the best response from target consumers.

PR/Media Relations

Broker Enrollment Event Media Relations Plan Outline

OUTLET	ACTIVITY	TIMEFRAME
N/A	Media material drafts Calendar advisory Letter to editor/Op-Ed Media Advisory/news release Spokespeople talking points	Draft sent week of Sept. 21 Draft sent week of Oct. 5 Draft sent week of Oct. 19 Draft sent week of Oct. 19
Suburban weekly, monthly publications and ethnic e.g. <i>Henderson Press, Desert Valley Times, El Exito, EnSoul, UrbanVoice.com, Our Own Voices, Las Vegas Black Image, etc.</i>	News advisory/calendar listing submission to suburban and ethnic publications	October submissions dependent on publication deadlines
Daily print publications <i>Las Vegas Sun</i> <i>Las Vegas Review Journal</i> <i>Reno Gazette-Journal</i>	Briefing with Editorial Boards	Week of November 2
N/A	Talking points provided to SSHIX and selected broker spokespeople	Week of November 9
Daily print publications <i>Las Vegas Sun</i> <i>Las Vegas Review Journal</i> <i>Reno Gazette-Journal</i>	Letter to the Editor, bylined by Bruce Gilbert	Week of November 9
TV morning news, radio talk shows and daily print outlets	Pre-event publicity "media tour" with Bruce Gilbert	Week of November 9
Broadcast and print outlets in southern and northern Nevada	Event advisory and news release distributed to weekend news assignment managers	November 14
Broadcast and print outlets in southern and northern Nevada	Coordinating media interviews with Bruce, Janel and selected brokers at event	November 15
N/A	Deliver media coverage report	Week of November 16

Social Media

Objective: Build audience, create engagement

Content Messaging: Engage. Educate. Enroll

- Twitter launches Friday September 4th
 - Daily Tweets starting 9/7
- The Facebook channel goes live September 10th
 - Daily Facebook Posts start 9/14



Outreach

Currently finalizing details for the kick-off event to be held on November 1st

- o We are expecting 4,000-6,000 Nevadans (statewide) to attend.

Outreach Events

- o A few events have taken place to date with an increased number of events beginning in September.
- o Andres is scheduled to present at the Southern Nevada Maternal Child Health Coalition meeting on the topic of Access to Care on September 8th.

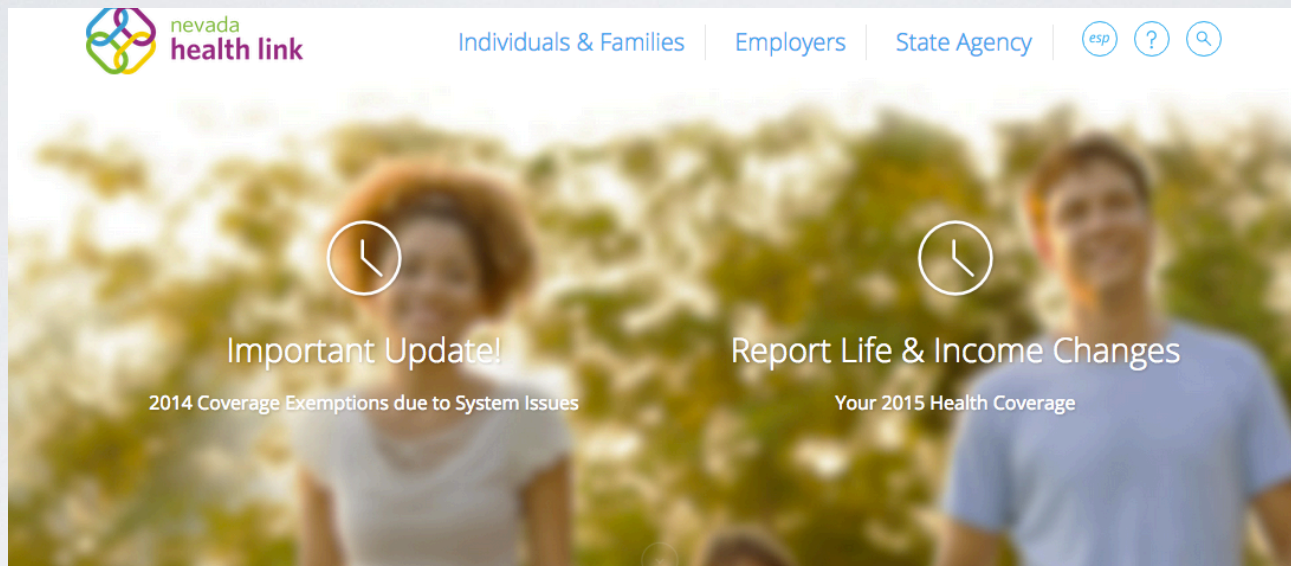
Broker/Agency Marketing Strategy & Support

- Approximately 500 agent offices statewide as designated enrollment locations
- Kick-off Enrollment Events
 - Sunday, Nov. 1, 2015; Health Fair format
 - Held simultaneously in Southern and Northern Nevada
 - PR and Media Relations support state-wide
- Association-Driven 'Pop-up' Enrollment Events (to be held at alternating agencies)
 - Sign-up Saturdays
 - Tuesdays and Thursdays
 - Mid-month special events to be held on the 15th of each month
- Ongoing Outreach Events
 - Lead generation
 - Enrollment assistance
- Tangible Marketing Assets
 - Window Clings
 - Wall Banners
 - Standing Counter Displays
 - Outdoor sandwich board location signage
 - Assorted NHL logo'd giveaways



Broker/Agency Marketing Strategy & Support - Continued

- Use NevadaHealthLink.com as the resource for important consumer target details
 - Prominently located on homepage (replace current 'Important Update' info)
 - Searchable list by zip code of participating agent office locations
 - Information on 'Pop up' enrollment events and ongoing outreach events



- Broker Communication
 - Reference to target consumer as “licensed insurance professional”
 - Promote the benefits of working with a licensed insurance professional
 - Does not cost target consumer anything additional
 - Face-to-face interaction
 - Ensure target consumer gets the best plan for his/her needs

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VIII

FY 2015 Budget

Status

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Brian Sandoval
Governor

Leslie A. Johnstone
Chair

Bruce Gilbert
Executive Director

Silver State Health Insurance Exchange

2310 S. Carson Street, Suite 2, Carson City, NV 89701 • T: 775-687-9939 F: 775-687-9932
exchange.nv.gov

AGENDA ITEM

☐ For Possible Action

☒ Information Only

Date: September 10, 2015
Item Number: VIII
Title: FY2015 Budget Status

PURPOSE

The purpose of this report is to provide the Board and the public with information regarding the budget of the Exchange.

CONTENTS

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STATE FISCAL YEAR 15 (SFY15) OVERVIEW	1
GRANTS UPDATE	2

BUDGET OVERVIEW

The Silver State Health Insurance Exchange (Exchange) is funded by a combination of federal funds (grants) and Qualified Health Plan fees (Per Member Per Month - PMPM). Additionally, the Exchange, per NRS 695I, is authorized a general fund advance each fiscal year to ensure normally recurring expenses (like payroll) are paid timely while federal grant funds are requested on a reimbursable basis. That advance is paid back in full at the end of each fiscal year during the budget closing process.

STATE FISCAL YEAR 15 (SFY15) OVERVIEW

The Exchange ended SFY15 on June 30, 2015. The Exchange received and expended a total of \$36,102,297 in fees and grant funds during SFY15. Of which, \$4,699,646 will be placed into reserves to start the new fiscal year. SFY15 was the last year that the Exchange will pay for the Xerox BOS system as the contract has now concluded. With the end of the BOS contract, the

FY2015 Budget Status
September 10, 2015

need for IV&V services and the cost allocation received by DHCFP for those expenses has ended as well.

Below is an overview of the SFY15 actual budget:

SFY15 Actual Budget	Beginning Cash	3rd Level One Grant	4th Level One Grant	5th Level One Grant	Level Two Grant	QHP / Dental Fees	DHCFP Cost Allocation	Other	TOTAL
<u>Revenue</u>									
YTD Actual Total Receipts / Funding	\$ 524,848	\$ 124,461	\$ 1,886,903	\$ 1,591,253	\$ 25,422,831	\$ 5,162,970	\$ 1,388,771	\$ 259	\$ 36,102,297
<u>Expenditures</u>									
Salaries					\$ 512,310	\$ 542,099	\$ 4,589		\$ 1,058,998
Out of State Travel					\$ 12,535	\$ 1,931			\$ 14,467
In State Travel					\$ 26,154	\$ 16,434			\$ 42,588
Operating			\$ 38,204		\$ 94,248	\$ 110,517			\$ 242,969
Contracts									\$ -
Consulting / Other				\$ 422,257	\$ 2,466,902				\$ 2,889,159
Marketing				\$ 30,859	\$ 4,662,897				\$ 4,693,756
BOS					\$ 12,775,566		\$ 1,343,805		\$ 14,119,371
IV&V					\$ 964,537		\$ 99,573		\$ 1,064,110
Transfer to Welfare		\$ 110,832	\$ 1,848,699	\$ 1,138,137	\$ 1,968,919				\$ 5,066,587
Transfer to GovCha					\$ 154,936				\$ 154,936
Information Technology		\$ 13,629			\$ 6,232	\$ 5,367			\$ 25,229
Training						\$ 1,692			\$ 1,692
Navigators / Assistants					\$ 1,694,267	\$ 229,068			\$ 1,923,335
DHRM Cost Allocation					\$ 2,610	\$ 2,610			\$ 5,219
SWCAP						\$ 19,517			\$ 19,517
Attorney General Cost Allocation					\$ 80,719				\$ 80,719
Reserves	\$ 524,848					\$ 4,233,735	\$ (59,195)	\$ 259	\$ 4,699,646
Total Expenditures	\$ 524,848	\$ 124,461	\$ 1,886,903	\$ 1,591,253	\$ 25,422,831	\$ 5,162,970	\$ 1,388,771	\$ 259	\$ 36,102,297

GRANTS UPDATE

The Exchange currently has four (4) active Federal grants through the end of this calendar year. No cost extensions have been submitted and are pending approval to continue to utilize grant funds for design development and implementation (DD&I) expenses through December 31, 2016 if needed for Sustainability Solutions.

Work programs have been submitted for approval at the October 21, 2015 Interim Finance Committee (IFC) meeting to balance forward all remaining grant authority to SFY 2016. The Exchange does not intend to spend much of this remaining authority unless needed as a way to find a sustainability solution for the future of the Exchange.

Below is an overview of the complete grant history of the Exchange:

FY2015 Budget Status
September 10, 2015

<u>GRANT</u>	<u>AWARDED</u>	<u>EXCHANGE EXPENDED</u>	<u>DWSS / GOVCHA EXPENDED</u>	<u>RETURNED</u>	<u>REMAINING</u>
Planning	\$ 1,000,000	\$ 695,180	\$ 304,820	\$ -	\$ -
1st Level One	\$ 4,045,076	\$ 1,269,249	\$ 2,763,827	\$ 12,000	\$ -
2nd Level One	\$ 15,295,271	\$ -	\$ 15,295,271	\$ -	\$ -
3rd Level One	\$ 4,397,926	\$ 2,914,253	\$ 846,168	\$ -	\$ 637,505
4th Level One	\$ 9,020,798	\$ 3,208,439	\$ 2,988,090	\$ 770,744	\$ 2,053,525
5th Level One	\$ 6,998,685	\$ 473,279	\$ 2,219,076	\$ 1,417,608	\$ 2,888,722
Level Two	\$ 60,243,313	\$ 43,498,574	\$ 5,144,540	\$ -	\$ 11,600,199
TOTALS	\$ 101,001,069	\$ 52,058,974	\$ 29,561,792	\$ 2,200,352	\$ 17,179,951

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CMS Site Visit

Update

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Nevada Site Visit Agenda

August 17-19, 2015

**2310 S Carson St #2
Carson City, NV 89701**

The purpose of the Exchange/Marketplace site visit is to conduct a business operational readiness assessment of the Marketplace's financial and business management systems and internal controls prior to full approval of the Marketplace Blueprint. Interviews with the Marketplace's key staff will occur simultaneously during some of the general discussions. We have included tentative interview times, but please let us know if there is a conflict and we can adjust them. Please note some interviews are conducted simultaneously.

Day 1: Monday, August 17			
TOPIC	TOPIC DETAILS	PARTICIPANTS	TIME
Entrance Conference	<ul style="list-style-type: none"> • Introductions • Purpose of visit • Overview of the Marketplace operations 	SSHIE: Bruce Gilbert (Executive Director), Damon Haycock (COO), Tyler Klimas (Communications Officer) Laura Rich (Project Management Officer) Cari Eaton (Finance Officer) Nicholas Cranston (IT Officer) Nikolaus Proper (Plan Management Coordinator) Additional Staff as requested by state CMS: Karen Mercer, Gina Hambrick, Deborah Palmer, Sum Mehrnama, Akin Oyekan, Cassandra Cacace	9:00 – 10:00
Governance	<ul style="list-style-type: none"> • Governance structure • Governance policies and processes 	SSHIE: CMS: Karen Mercer, Gina Hambrick, Deborah Palmer, Sum Mehrnama, Akin Oyekan, Cassandra Cacace, Jim Scott	10:00 – 10:30
Break			10:30 – 10:45
Tour of Facilities	<ul style="list-style-type: none"> • Office tour • Location for CMS Team and Interviews 	SSHIE: CMS: Karen Mercer, Gina Hambrick, Deborah Palmer, Sum Mehrnama, Akin Oyekan, Cassandra Cacace, Jim Scott	10:45 – 11:15
Key Management and Staff	<i>Interview with HR Director</i> <ul style="list-style-type: none"> • Staff onboarding (roles/responsibilities) • Training and related policies and procedures 	SSHIE: HR Director CMS: Akin Oyekan, Cassandra Cacace, Jim Scott	11:15 – 12:15
Lunch			12:15 – 1:00

Day 1: Monday, August 17

TOPIC	TOPIC DETAILS	PARTICIPANTS	TIME
Procurement Process and Contractual Agreements	<i>Interview with Procurement Manager</i> <ul style="list-style-type: none"> Review of policies and procedures Walk through of the procurement process SSHIE contracts and agreements IPA/Navigators/Agents, Brokers/IT 	SSHIE: Procurement Manager CMS: Karen Mercer, Gina Hambrick, Deborah Palmer, Sum Mehrnama, Akin Oyekan, Cassandra Cacace, Jim Scott	1:00 – 3:00
Break			3:00 – 3:15 pm
Financial Management	<i>Interview with Chief Financial Officer (CFO)</i> <ul style="list-style-type: none"> SSHIE financial management process <ul style="list-style-type: none"> Policies and Procedures Budgeting Financial Analysis Financial Oversight 	SSHIE: Cari Eaton CMS: Akin Oyekan, Jim Scott	3:15 – 4:15
Sustainability	<i>Interview with Sustainability Manager</i> <ul style="list-style-type: none"> Sustainability plan & status Risk Analysis Long-term forecasting 	SSHIE: CMS: Sarah Grantham, Karen Mercer, Gina Hambrick, Deborah Palmer, Sum Mehrnama, Akin Oyekan, Cassandra Cacace, Jim Scott, Shivi Malhotra, Anika Vartan	4:30 – 5:45

Day 2: Tuesday, August 18

TOPIC	TOPIC DETAILS	PARTICIPANTS	TIME
Call Center Tour (Located at the Marketplace: 2310 S. Carson St. Suite 2, Carson City, NV 89701)	<ul style="list-style-type: none"> Call Center tour Policies and Procedures Metrics reports tracked Staff training 	SSHIE: Call Center Staff CMS: Karen Mercer, Gina Hambrick, Deborah Palmer, Cassandra Cacace, Sum Mehrnama	9:00 – 10:30
IPA Tour (755 N. Roop St. #211 Carson City, Nevada 89701)	<ul style="list-style-type: none"> Policies and Procedures Certifications/Training 	SSHIE: IPA Staff CMS: Karen Mercer, Gina Hambrick, Cassandra Cacace, Sum Mehrnama	11:00 – 12:00
DSWW Tour	<ul style="list-style-type: none"> Policies Procedures Privacy and Security 	SSHIE: DSWW Staff CMS: Deborah Palmer	11:00 – 12:00
Accounting Process	<i>Interview with Lead Accountant</i> <ul style="list-style-type: none"> Accounting policies and procedures Demo of accounting system Accountability for property and equipment 	SSHIE: Lead Accountant CMS: Akin Oyekan, Jim Scott	10:00 – 11:00

Payroll Process	<i>Interview with Payroll Manager</i> <ul style="list-style-type: none"> Review of policies and procedures Walk through of the payroll process 	SSHIE: Payroll Manager CMS: Akin Oyekan, Jim Scott	11:15 – 12:15
Lunch			12:15 – 1:30
Privacy Discussion	<i>Interview with Privacy and Security Officer</i> <ul style="list-style-type: none"> Incident response Consumer disputes/corrections Corrections from non-marketplace entities Notification and consent to/from consumers in the event of major system change Agreements executed with other entities that share data Consumer protection laws that govern the protection of consumer PII Training and education Data retention and destruction procedures 	SSHIE: Chief Information Security Officer CMS: Deborah Palmer, Jessica Nicol, Shampy Narula	1:30 – 2:30
Document Inventory	<ul style="list-style-type: none"> High level discussion of outstanding documentation for the Blueprint requirements and full approval Review of specific Blueprint sections, pending completion 	SSHIE: CMS: Gina Hambrick, Sum Mehrnama	1:30 – 2:30
Board	<i>Interview with selected Board member</i> <ul style="list-style-type: none"> Board roles and responsibilities 	SSHIE: Board member CMS: Karen Mercer, Gina Hambrick, Deborah Palmer, Cassandra Cacace, Sum Mehrnama	3:00 – 4:00

Day 3: Wednesday, August 19

TOPIC	TOPIC DETAILS	PARTICIPANTS	TIME
Follow up on any outstanding items	<ul style="list-style-type: none"> Follow up interviews Additional document requests and system(s) testing Process demos 	SSHIE: Requested Marketplace Staff CMS Team, as applicable	8:30 – 10:30
Exit Conference	<ul style="list-style-type: none"> Follow up questions Outstanding items Next steps 	SSHIE: CMS: Karen Mercer, Gina Hambrick, Akin Oyekan, Jim Scott, Sandra Tasic, Susan Li	11:00 – 12:00

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