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## **AGENDA ITEM**

**For Possible Action** 

X	Information	Only
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Date: September 19, 2019 **Item Number:** IV Title: Executive Director's Report

#### PURPOSE

The purpose of this report is to provide information to the Board and public regarding the status of the Exchange's implementation of a state based health insurance exchange and other operational matters of the Exchange.

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## **GENERAL COMMENTS**

The Silver State Health Insurance Exchange (Exchange) is positioned for a successful launch of Nevada's State Based Exchange (SBE). Through extensive coordination and collaboration with Exchange carriers, brokers, Centers for Medicare & Medicaid Services (CMS), and GetInsured (GI) the Exchange has navigated a first-ofits-kind transition away from HealthCare.gov establishing a path for other states interested in following Nevada's model. Exchange staff have been focused on implementing and operationalizing a SBE while also coordinating with carriers and the Division of Insurance (DOI) for plan year 2020 (PY20), soliciting and awarding Navigator and broker grants, developing comprehensive marketing and outreach plans, and monitoring federal actions related to the Affordable Care Act (ACA).

## **State Based Exchange Transition Project**

Transitioning the Exchange off of the federal technology platform, HealthCare.gov to Nevada's own SBE has required an enormous amount of strategic coordination and collaboration with carriers who have implemented necessary business process changes to accommodate and work with the Exchange. Carriers have tested electronic data interface (EDI), coordinated consumer messaging, conducted plan preview in the GI system, provided insight and information about current complaint processes, and provided feedback about policies specific to the transition and those that will guide the operations of the Exchange. Exchange carriers have proven to be a vital resource and have collaborated with the Exchange aligned around a shared goal: to minimize disruption for Nevada consumers.

The Exchange continues to coordinate with the Division of Welfare and Supportive Services (DWSS) who holds the state's primary connection to the federal data services hub (FDSH). The Exchange will leverage DWSS' FDSH connection to collect necessary eligibility information while also transferring account information between agencies to connect potentially eligible consumers to the most appropriate agency based on their reported income. The partnership between DWSS and the Exchange was established prior to the transition project, and has strengthened as both organizations work toward technical and policy solutions to efficiently connect Nevadans to health insurance.

The Exchange has worked closely with CMS and the Internal Revenue Services (IRS) to demonstrate security and privacy compliance in order to connect to both organizations' data services. The IRS approved of the Exchange's security plan on September 7, 2019, and the Exchange continues to wait for CMS approval for Authority to Connect. The Exchange has been assured the approval is forthcoming and has worked carefully to provide all necessary documentation while following up on each request for additional information. In addition to the security and privacy work, the Exchange has provided detailed insight to CMS staff regarding operational readiness and Deputy Director for the Center for Consumer Information and Insurance Oversight (CCIIO), Randy Pate, provided a letter to the Exchange on August 9, 2019 recognizing that the Exchange will no longer be on the federally facilitated exchange (FFE) platform and will operate as a SBE for PY20.

The Exchange oversees the online health insurance marketplace in Nevada, which is known as Nevada Health Link (NVHL). Nevada Health Link soft-launched partial SBE functionality and a new Consumer Assistance Call Center on September 4, 2019. Existing Nevada consumers, or consumers whose data was migrated from HealthCare.gov, were sent an email, or letter, with a unique access code inviting them to claim their accounts at <a href="https://enroll.NevadaHealthLink.com">https://enroll.NevadaHealthLink.com</a>. Once accounts have been claimed, consumers who have not yet opted in to auto-renewal are invited to change their preferences to allow for auto-renewal in PY20. Consumers who do not already have a designated broker are invited to select a broker from the list of NVHL certified brokers to assist with PY20 enrollments. Consumers will be encouraged to claim their accounts throughout the month of September and October, however they will be limited to making changes only to their auto-renewal and broker preferences, and will not be able to modify any other area of their applications until November 1, 2019. Over the next several weeks the Exchange will be sending reminder emails to consumers who have not yet activated their accounts, encouraging them to do so.

One of the biggest challenges of the transition project is the migration of consumer data from HealthCare.gov to Nevada Health Link. Months of complicated technical discussions between GI, the Exchange, CMS and their vendor, Accenture, resulted in a satisfactory format, delivery method, and successful testing. This data was used to not only populate consumer accounts in the GI system, but also to populate broker books of business. Consumers have been invited to claim their accounts and brokers who completed necessary training and certification have been invited to verify their book of business. The data the Exchange received is only as good as the data that CMS provided therefore it will require clean-up and reconciliation efforts for carriers, brokers, and consumers, however the Exchange is committed to providing customer support and technical guidance and resources as necessary to rectify inconsistencies.

Part of the Exchange's transition project requires the development of a collaborative case management system modeled after the CMS HICS application. The Exchange will use a proprietary system, which will be called "Carrier Connector," to manage monthly reconciliation and consumer complaint resolution. The Exchange has obtained a license for the Salesforce Enterprise Service Cloud to develop a collaborative case management system and has engaged with carriers to understand how they each operate with the HICS system and where the Exchange can improve their experiences with case management. The Exchange intends to have the product available for carrier access in October 2019.

Window shopping is the next consumer-facing milestone in the transition project and is set to begin on October 3, 2019. This will allow consumers and enrollment professionals the opportunity to preview all of the PY20 plans, while exploring details about premiums, deductibles, out-of-pocket costs, co-payments and coinsurance amounts. Consumers will also be able to get a general idea of how much financial assistance they may be eligible to receive once enrollment begins. This time period will also provide an opportunity for consumers to view and explore our updated website where they can learn more about Nevada's new SBE functionality at NevadaHealthLink.com.

The transition project is reaching its peak, but work will likely continue into next year as the Exchange builds agency operability to manage SBE functions. The Exchange staff and stakeholders have approached this project with an intense focus on strategizing success, identifying risks, and working to resolve or mitigate issues. Even the most perfectly laid plans have flaws, and it is likely the SBE rollout will have imperfections that require immediate solutions and others that will require long term policy solutions. The Exchange looks forward to counting our successes and addressing flaws with a focus on the agency's mission to reduce the number of uninsured Nevadans.

## **Enrollment Partner Summary**

The Exchange began monthly meetings with brokers and Exchange Enrollment Facilitators (EEFs) in February 2019. The goal of each meeting is to provide enrollment professionals with updates on the transition project and information about PY20. During the month of July and early August, the Exchange focused broker outreach efforts on "returning" brokers, those individuals who enrolled consumers on HealthCare.gov during open enrollment for plan year 2019, because these were the only brokers who had the opportunity to have their book of business migrated from HealthCare.gov to the GI platform. The Exchange created an abbreviated certification training for "returning" brokers and launched a comprehensive and persistent campaign to engage returning brokers to both complete the training and set up their broker profile on the GI platform by August 9, 2019 in order to ensure their book of business would be migrated. Over 300 brokers were certified in time for the migration.

The Exchange also invited thousands of "new" brokers, or individuals who did not sell on the Exchange in PY20, who have licenses to sell life and health insurance in the state of Nevada to partner on the Exchange for PY20. Outreach efforts resulted in hundreds of interested "new" brokers who completed intent to sell forms and who have been invited to complete a comprehensive training in order to receive certification.

Brokers and EEFs will be listed in the online enrollment assistance look up directory. This feature is available to consumers looking for free enrollment assistance and can be found by visiting NevadaHealthLink.com/find-assistance. Consumers calling the Consumer Assistance Center will be offered enrollment assistance through a BrokerConnect tool. Consumers will connect to the BrokerConnect tool through the Interactive Voice Response (IVR) system over the phone. BrokerConnect will ask the consumer to enter their zip code and will then

automatically call out to a randomized list of brokers in that area who have about ten seconds to answer their phone before the tool calls the next broker on the list. Consumers will be put directly in touch with a broker who can set up an appointment for enrollment, or can enroll the consumer by phone.

As in past years, the Exchange's public relations and marketing efforts will again focus on connecting consumers to licensed enrollment professionals when it comes time to make health insurance purchases. Insurance is complicated and the Exchange is committed to connecting Nevadans to trusted free enrollment assisters who can provide expert guidance specific to individual needs.

## **Human Resources Summary**

Exchange staff and the Nevada Division of Human Resources Management (DHRM) have undergone an intense amount of work to classify the nine (9) new classified positions approved by the Nevada State Legislature in the Exchange's FY 20-21 biennial budget.

Beginning in late February, Exchange staff began the process of drafting the classification requests (NPD-19s) for each of the new positions, which were submitted to DHRM in the beginning of April. DHRM issued Legislative Studies in response, which, unfortunately, recommended position series and titles that were very different from what the Exchange had requested. For instance, an Administrative Assistant (AA) 4 classification was recommended by DHRM for the position of Policy and Compliance Coordinator, which the Exchange had requested be classified as a Management Analyst (MA) 1.

Exchange staff met internally, then with DHRM staff to get additional clarity and guidance to get positions classified in line with the knowledge, skills and abilities needed for the new positions. Several phone calls, memos, requests for clarification ensued, and DHRM agreed the Legislative Studies didn't match the duties and responsibilities of the new positions.

To get a clearer understanding, DHRM staff scheduled two separate 3 hour-long desk audits with the Compliance Officer and the Information Systems Manager. After these desk audits were completed, DHRM issued recommendations that again, were not in line with the Exchange's needs.

This resulted in the Executive Director directly calling the Administrator at DHRM to explain our frustration and disappointment in the process. He was sympathetic, and was able to assist the Exchange in getting more appropriate classifications. As of today, the positions are approved and the final classifications are as follows:

- Policy and Compliance Manager, MA 3 Classification
- 3 Quality Assurance Analysts, Program Officer (PO) 1 Classifications
- Reconciliation Specialist Lead, Business Process Analyst (BPA) 2 Classification
- Reconciliation Specialist, BPA 1 Classification
- Policy and Compliance Coordinator, MA 1 Classification
- Appeals Coordinator, MA 1 Classification
- Audit Manager, MA 2 Classification

The Policy and Compliance Manager position was filled August 26th. Interviews for the three Quality Assurance Analyst positions took place the week of September 3<sup>rd</sup>. The Reconciliation Specialist Lead position was posted and closed on September 5<sup>th</sup>. The Policy and Compliance Coordinator, Appeals Coordinator, and Audit Manager positions will start recruitment the week of September 9<sup>th</sup>.

#### **Overview of Plan Year 2020**

Carriers planning to participate on the Exchange for PY20 must sign carrier agreements by September 20, 2019, as participation is not final until said contracts are submitted and fully executed by both the carrier and the Exchange on September 25, 2019.

Three qualified health plan (QHP) carriers, Anthem, Health Plan of Nevada, and SilverSummit have submitted a total of 27 health plans. Six dental carriers have submitted a total of 17 standalone dental plans. As it currently stands, Nevada will have statewide coverage for PY20 with 14 counties having the option of two QHP carriers, and three counties will have the choice between all three QHP carriers. The proposed average rate increase is 0.5% for on-exchange plans. The DOI will release final rates to the public on October 1, 2019 in time for Nevada Health Link to open window shopping functionality to the public.

## Marketing and Outreach Update

The Exchange staff and marketing partner, Penna Powers, spent months strategizing communications designed for consumers and enrollment partners about the transition project at the same time as developing a general awareness campaign for open enrollment for PY20. Transition specific messaging primarily focuses on engaging with existing consumers to encourage them to claim their accounts while also sending the message that all enrollments must be done on Nevada Health Link. Penna Powers produced a transition specific video highlighting information about the SBE and steps consumers must take to claim their accounts. This video is embedded on the Nevada Health Link website and went live on September 4, 2019 to coincide with the Exchange's soft-launch. Social media posts, emails, and other transition focused messaging will continue through October.

This year's Open Enrollment campaign theme is "Peace of Mind" and focuses on the sense that Nevadans can have peace of mind because having coverage through Nevada Health Link can provide a sense of ease and reassurance for individuals and their families. Penna Powers has developed a dynamic advertising campaign leveraging traditional and non-traditional media mediums targeting the uninsured populations. This Open Enrollment Period offers the Exchange and Penna Powers a trial run at marketing both to consumers who are returning versus marketing to recruit new consumers.

The Exchange will be hosting our third annual Open Enrollment Prep Sessions with a different format than the past two years. This year Nevada Health Link will host multiple 90 minute sessions in Las Vegas on September 17<sup>th</sup> and Reno on September 24<sup>th</sup>. Attendees will be provided with information about the Exchange's transition to an SBE and details about PY20 offerings.

## Grants

In late June of this year, the Exchange completed the grant award process for both the Navigator and In Person Assister Entities and the Broker Storefront Program for Fiscal Year (FY) 20. Several applications from well-qualified community partners and resident brokers were received.

Exchange staff is happy to report partnership with eight (8) navigator entities, with combined awarded funding totaling just over \$1.1M. A total of 27 EEFs will be distributed across the state, including EEFs newly placed in Carson City, Elko, and Pahrump, serving rural Nevada populations.

The Navigator entities are:

- Nevada Health Centers, with 2 EEFs in Southern Nevada and 1 in Northern Nevada (Carson City)
- Asian Community Resource Center with 5 EEFs in Southern Nevada

- CARE Nevada with 5 in Southern Nevada
- Asian Community Development Council with 2 EEFs in Southern Nevada
- Community Health Alliance with 4 EEFs in Northern Nevada
- The Office of Consumer Health Assistance with 1 EEF in Elko and 3 in Southern Nevada
- St. Rose Dignity Health with 3 EEFs in Southern Nevada
- Nevada Outreach Training Organization with 1 EFF in Pahrump

Five (5) brokers each received awards of \$10,000 as part of the Resident Broker Storefront Program, for a total of \$50,000. The applications were impressive and included many innovative strategies for promoting Nevada Health Link and Open Enrollment both through traditional and digital venues. The awarded brokers are:

- Nathan Kamo with the Kamo Insurance Agency in Henderson, NV
- Brent Leavitt with Battle Born Financial Advisors in Pahrump, NV
- Brian Douglas with Protect Health in Las Vegas, NV
- Chris Carothers with Chris Carothers Insurance Agency, in Las Vegas NV
- Alberto Ochoa with Smart Buy Insurance in Las Vegas NV

## **Federal Updates**

The Exchange continues to monitor action from federal lawmakers and federal agencies. There are several policy changes that may have an impact on PY20 enrollment and costs including the finalized Health Reimbursement Arrangements (HRA) rule, final Public Charge rule, and the changes made to consumer price indexing.

On June 13, 2019, the Departments of Health and Human Services, Labor, and Treasury issued a new final rule to expand the use of HRAs by employers to fund premiums for their employees in the individual health insurance market. The final rule makes two major changes to the regulations of HRAs: 1) the rule allows employers to provide an HRA to an employee to purchase an individual market plan rather than the employer-sponsored plan 2) the rule allows employers to offer up to \$1,800 that can be used to pay premiums for excepted benefits, short term limited duration plans and COBRA. The Exchange responded to the proposed rule in February 2019 requesting a delay in finalization related to the technicalities of implementation and the potential consumer confusion the rule could create for consumers.

The rule was finalized as proposed, however by CMS' admission, HealthCare.gov will not be ready for implementation and will post workflows and Frequently Asked Questions on their website. The final rule allows for SBE states to implement technical changes at the convenience of the state and requests that SBE states provide information and education to consumers and enrollment professionals in time for PY20. The Exchange is working closely with national SBE work groups to determine best practices for providing education and resources to consumers which will be available on NevadaHealthLink.com in time for PY20 open enrollment.

In August of 2019 the Department of Homeland Security published a final rule related to public charge, the rule is set to take effect October 2019. Many organizations and states have filed lawsuits challenging the legality of the rule which could delay implementation. The rule interprets a provision of the Immigration and Nationality Act pertaining to inadmissibility. The inadmissibility ground at issue says a person is inadmissible if they are likely to become a public charge. This law only applies to individuals seeking admission into the United States or applying for adjustment of status, it does not apply to all immigrants. The rule expands the list of publicly-funded programs that immigration officers may consider when deciding whether someone is likely to become a public charge – defined as a person who receives any number of public benefits for more than an aggregate of 12 months over any 36-month period of time. Under the new rule Medicaid, Supplemental Nutrition Assistance

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Program (SNAP) and Section 8 housing assistance will be used as evidence that a green card or visa applicant is inadmissible under the public charge ground. Exchange subsidies are not included in the list of publicly-funded programs that will be used to determine individuals who are determined to be a public charge, however consumers are concerned about accepting any public benefits for fear it may impact their residency. The Exchange is working closely with outreach partners throughout the state to spread the word that Exchange subsidies are not included in the public charge consideration while encouraging consumers to protect themselves and their families by staying insured, or getting insured during open enrollment PY20.

## Conclusion

The upcoming open enrollment period is the most important and watched in Nevada Health Link's history. Supporters, critics, and other states are looking to Nevada to see what can be achieved and learned. The pressure is intense, and the stakes are high - Nevadans are depending on the Exchange and GetInsured to get this right. There will be snags, no project is without issue, but the Board can be assured that the Exchange and stakeholders have done everything possible to foresee issues, mitigate risks, and respond quickly and accordingly to every matter brought to our attention.