

Silver State Health Insurance Exchange


Presentation to
Brokers and EEFs

October 22, 2019



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Agenda

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- SSHIX Introductions
 - Progress-to-Date on SBE Transition Project
 - Technology
 - Call Center
 - Designated Agent/Broker & EEF/CEC Service Line Active
 - Mindflash Training Curriculum/Certification Process/Account Profile Setup
 - Broker/EEF Resources
 - Key Dates - Soft Launch, Window Shopping, etc.
 - BrokerConnect
 - Dental-Only Purchases
 - Redetermination Notices
 - Data Matching Issues
 - Consumer Communication – Key Dates
 - Q&A
 - Contact Information



SSHIX Introductions

Heather Korbolic

Executive Director

Ryan High

Chief Operations Officer

Rosa Alejandre

Navigator (EEF) Program Manager

Rebecca Lomazzo

Broker Liaison

Janel Davis

Communications Officer

Katie Charleson

Information Technology Analyst

Eric Watt

SBE Transition Project Manager

Athena Cox

Quality Assurance Officer

Tracy Reed

Program Officer - Broker & EEF Specialist

Progress-to-Date on Transition

- **Technology**

- Quality Assurance and User Acceptance Testing Continues
- “Window Shopping” Available
- Consumers Can Still Claim Accounts
- October 25 - Last Consumer “Catch-Up Data Transfer” File Imported from CMS (*PY 2019 SEP changes October 25th and on need to be reported to NVHL*)
- Carrier Connector Issue Tracker/Resolution Tool Ready for November 1

- **Call Center**

- Will be Staffed Up to 48 Agents for November 1
- Call Center is Averaging ~ 350 calls per day and ~ 90% First Call Resolution in October
- The Exchange has Considered and Implemented Many IVR Recommendations from Brokers

Broker/EEF Service Lines

- **BROKER & CEC LINE 1- 800 547-8156**
 - Currently servicing GetInsured account profile creation for both Brokers and Enrollment Professionals.
- **BROKER SUPPORT LINE** Call Center Hours during **OEP** are:
 - Monday – Friday 9 am – 7 pm, Sat 10 am – 3 pm
- **BROKER SUPPORT LINE** Call Center Hours during **SEP** are:
 - Monday – Friday 9 am – 5 pm
 - Closed Saturdays and Sundays during SEP

Certification/Training/Account Profile Setup

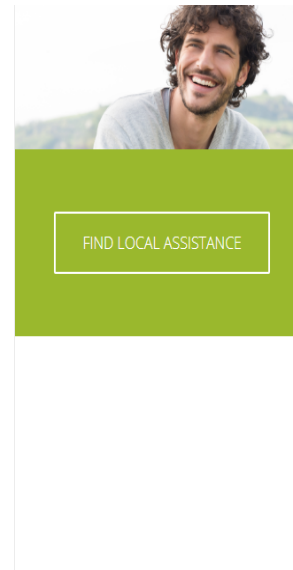
- The window to complete Broker/CEC certification training and account profile or entity profile creation is still open until November 5th, 2019.
- Once training is complete on the Mindflash system, Brokers are required to complete their profile on GetInsured's system. Nevada Health Link's call center can support Brokers with any account creation questions at **1-800-547-8156** (Press 5 for technical account creation assistance, or Press 1 for Mindflash training assistance with Exchange staff).
- Navigator and In Person Assister Points of Contact have established their Entities on GetInsured's system. Certified Enrollment Counselors (CECs) will be able to be listed within their respective Entities after completing Mindflash training. Nevada Health Link's call center can support Entity Points of Contact with any account creation questions at **1-800-547-8156** (Press 5 for technical account creation assistance with GI, or Press 1 for Mindflash training assistance with Exchange staff).

Agent/Broker/CEC Resources

<https://www.nevadahealthlink.com/partners-transition/>

Reference Documents

- SBE Transition Internal Talking Points
- Broker Guidance for Building Book of Business
- Video Tutorial: Broker Guidance for Assisting Consumers with Delegations
- Navigator/CEC/ Stakeholder Talking Points (PDF)
- Video Tutorial: Certified Enrollment Counselor for Assisting Consumer w/Delegations
- Broker Communication Email (PDF)



Coming Soon:

- Broker User Reference Manual
- Broker/CEC/Consumer Application and Enrollment Guide
- EEF/CEC User Reference Manual

Key Dates

- **10/15/2019—10/31/2019:** Auto-renewal batch jobs run; enrollment professional designation and consent for auto-renewal are “frozen” in order to prevent conflicts with auto-renewal job.
- **10/25/2019 – 12/31/2019:** Existing consumers who make a change after 10/25/2019 (e.g. add a dependent) will need to apply that change (e.g. add that dependent) to their application on NevadaHealthLink.com to ensure PY20 coverage.
- **11/1/2019–12/15/2019:** Open Enrollment Period. Migrated consumers can edit/modify application data and submit new enrollments; new consumers can create user accounts, designate enrollment professionals, and submit applications/enrollments.
- **12/16/2019-12/20/2019:** Applications started by 12/15/2019 can be completed these five days for coverage starting 1/1/2020.

** Please Note: In order to be “certified” Brokers and EEFs must have completed both the online certification curriculum (Mindflash) and the user account registration process (SBE Platform), as defined in their respective On-Boarding and Certification guides*



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BrokerConnect

- BrokerConnect is the program for Brokers who have opted in on their GetInsured profile setup to receive referral calls via the telephonic BrokerConnect platform (i.e., checking “Clients Served”).
- The call will always come from **1-800-547-2927**. Please add this number to your contacts.
- Each Broker’s phone will ring for 10 seconds (3-4 rings) before it gets transferred to the next Broker. When receiving a call from BrokerConnect, please pick up the call as fast as possible to not lose the lead to the next Broker.
- We encourage you to use your mobile number for BrokerConnect so the lead call is not directed to an office IVR system, and possible causing the caller to drop off the call.
- To be included in the program, the Brokers need to make sure that they:
 - Sign up for the Program by making sure that “Clients Served” is checked in their Account Profile, and
 - Hours of availability for each day is noted.

Please Note: BrokerConnect is only available to certified agents/brokers, not EEFs/CECs or CACs.

Dental Only Purchases

Dental coverage is offered two ways: embedded as part of a health plan, or by itself through a separate, stand-alone dental plan (SADP).

- SADPs that are not embedded in a health plan are offered and can be purchased through Nevada Health Link.
- Under the Affordable Care Act (ACA), dental insurance is treated differently for adults versus children 19 and under.
 - **Dental coverage is an essential health benefit for children.** This means if you're getting health coverage for someone age 19 or younger, dental coverage must be available for your child either as part of a health plan or as a stand-alone plan.

***Note:** While dental coverage for children must be available to you, you do not have to purchase it.*
 - **Dental coverage is not an essential health benefit for adults.** Insurers do not have to offer adult dental coverage.

Dental Only Purchases

Splitting APTC between Health Insurance and Dental Insurance.

- Applicants who enroll in a QHP plan and are given APTC must use the APTC first for the QHP, and if there is any remaining amount of APTC, the applicant can then apply the remaining APTC to a SADP pediatric dental plan only.
- Please see Nevada Health Link's Policy Manual for additional information:
https://d1q4hslcl8rmbx.cloudfront.net/assets/uploads/2019/09/NVHL_Policy_Manual_Final.pdf

Redetermination Notices

- Nevada Health Link will be running the eligibility redetermination processing as part of 2020 renewals.
- Before redeterminations can run, we have to call the Renewal and Redetermination Verification (RRV) service to re-verify that the consumer:
 - Is not deceased,
 - Have filed and reconciled their taxes,
 - Their income is within an acceptable threshold, and
 - Is not enrolled in Medicare.
- Based on this verification, the redetermination process will provide the eligibility results that are then used by the renewal process.
- Notices Sent to Consumers Include:
 - Eligibility Summary by Member
 - Household Members Assessed to be Medicaid Eligible
 - Action Needed to Get or Remain Covered
 - Conditional Issues
 - Next Steps
 - Direction to Assistance, Resources and Contact Information

Data Matching Issue (DMI) Verification

Why are DMIs Generated?

- A consumer's data may not match information at our trusted data sources
- A trusted data source may not have data for a consumer
- Information is missing or incorrect on the application, such as:
 - A consumer failed to provide a Social Security Number (SSN) on their application
 - A consumer failed to provide all household income on the application
 - A consumer's name used for their application differs from how it appears on their citizenship document or other document
 - A consumer failed to provide their immigration document numbers and ID numbers

Data Matching Issue (DMI) Verification

Tips for Preventing DMIs

- Complete all possible fields in the application
- Ensure consumer's name exactly matches documents such as their social security card
- Non-applicants in the household are strongly encouraged to provide SSN if they have one
- Double check that the information on the application is complete and there are no errors or typos

Steps to Help Resolve DMIs

1. Help confirm if the consumer has a DMI through their Nevada Health Link account and/or eligibility notification they received
2. Help the consumer go back to the application to confirm the information that is included is correct
3. Help consumer submit document(s) online or by mail to resolve their DMI

Data Matching Issue (DMI) Verification

Submitting Supporting Documents:

The *preferred* method to submit documentation is to upload through Nevada Health Link:

- Consumer can upload themselves through their account online
- You can assist consumers and upload documents on their behalf

If uploading electronically is not possible, documents can be sent by mail to:

Nevada Health Link Processing Center
PO Box 2128
Birmingham, AL 35201

NOTE: Mailed documents may take several weeks to process

Consumer Communications

- **October** - Nevada Health Link sending weekly reminder emails to those NV consumers who received an access code to claim their account, but have not yet claimed their account, for example:
 - **It's time to renew your Peace of Mind! Get Started by Claiming Your User Account:**
 1. Visit enroll.nevadahealthlink.com
 2. Enter your access code – you should have received this access code via email from noreply@exchange.nv.gov. If you did not receive an email, please contact the call center for assistance: 1-800-547-2927
 3. Answer the security questions to confirm your identity
 4. Set up your unique username and password for your account
- **October 3** - Consumers can preview plans and prices on the SBE platform, i.e., “Window Shop.”
- **November 1 – December 15** – Open Enrollment begins on NevadaHealthLink.com. New ad campaign running, theme: “Peace of Mind.” Check out our transition video located on our homepage: <https://www.nevadahealthlink.com/> Social media toolkits and assets available for use: <https://www.nevadahealthlink.com/media/media-assets/>
- **November 1** – OEP announcement email to all consumers. Press Conference in Las Vegas at the Grant Sawyer Building w/ Gov. Sisolak @ 11 AM.
- **November 7** – Press Conference for OEP in Carson City TBD w/ Gov Sisolak
- **November & December** – Targeted weekly email reminders for existing consumers, targeted email reminders to complete application and enroll for new consumers.
- **December 1 – December 15** – Countdown targeted email reminders for consumers who have not yet completed applications.
- **Messaging focus:** 1) NVHL is the only place to enroll for PY 20; 2) Financial Assistance; 3) Enrollment assistance

Q & A

Q: Will we be able to make the first premium payment for our clients through the broker portal?

A: Brokers may assist consumers make their first premium payment through the Consumer Portal by clicking on My Application → Plan Summary button → Pay for Health Insurance.

Q: A couple declared ~\$23,000 in income in 2019. When that number is used for the 2020 window shopping, it says Medicaid eligible (presumably because thresholds increased as they do every year). If that couple does nothing will they auto renew into a subsidized plan based upon the \$22,992 or will the system kick them out, cancel their plan, and push them to Medicaid?

A: The consumer will be renewed into a QHP without APTC, however their account will be transferred to DWSS to confirm eligibility of Medicaid. Once DWSS confirms Medicaid eligibility they will be disenrolled from a QHP and receive notification from Nevada Health Link.

Q: What happens to people when they set to auto renew and whose income is below the threshold for an on-exchange QHP plan, but who DO NOT proactively go in and update their application even if they DID claim their account?

A: Same as above answer.

Q & A

Q: Is there a way, from my book of business, to know which of those folks are set to auto renew and if they have claimed their account or not?

A: As a broker you will not be able to see who is auto enrolled but you can review who is listed in your book of business. There is currently no list or explicit designation as to which consumer has claimed their account or not.

Q: If you have a \$0.00 plan will you have to register a credit card with the carrier?

A: No, you will not have to register a credit card with the carrier.

Q: Will brokers receive electronic updates as to the activities of consumers in their book of business?

A: Yes, brokers will receive a daily email update summarizing the activities of the consumers in their book of business.

Q & A

Q: If a person MAY qualify for Medicaid, is that information being sent automatically to Nevada DWSS like it did from HealthCare.gov regardless of whether the consumer goes with that eligibility?

A: *Yes, that information is being sent automatically to Nevada DWSS.*

Q: What if they take a QHP in the meantime while it's being reviewed?

A: *We don't deny someone from signing up for a QHP. However, if a consumer is possibly eligible for Medicaid, they won't get APTC if they push ahead with a QHP, which will make the QHP more expensive to the point of possibly being unaffordable. It should be noted that Medicaid is backdated to the date of application pending approval, so any expenses incurred would be covered to whatever level Medicaid covers so it's not necessary to sign up with a QHP while waiting for eligibility determination.*

Q & A

Q: Why are we noticing the APTC went down and the premiums went up considerably?

A: *While situations vary dependent upon the individual's unique needs and their geographic location, it is likely that the federal rule change related to premium indexing is playing a part what you're seeing with lowered APTCs and increased premium costs. To learn more about the rule change you can read the analysis done by the Centers on Budget and Policy Priorities here:*

<https://www.cbpp.org/research/health/change-to-insurance-payment-formulas-would-raise-costs-for-millions-with-marketplace>.

Q: Will a new customer I helped enroll (special enrollment effective 11-1-19) be automatically added onto my NV Health Link broker portal for 2020 or do I need to do something special?

A: *If the application and enrollment is with CMS prior to 10/25/2019, that consumer's information will be included in the catchup file being provided to the Exchange on 10/25/2019. Please work with that consumer to 1) claim their account on Nevada Health Link, 2) verify that their information is correct, and 3) shop for a plan for PY 2020.*

Q & A

Q: How is DMI documentation going to be submitted?

A: The preferred method is to upload the supporting documents through the enrollment portal. The consumer can upload these documents themselves through their Nevada Health Link account, or you as their broker can upload the documents on their behalf. If uploading the documents electronically is not possible, there is also an option to send in by mail. This information is listed on the Eligibility Notification that is sent to consumer, which includes the following FAQ link:
<https://help.nevadahealthlink.com/hc/en-us/articles/360030282931>

Q & A

New Questions?



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Contacting the Exchange

Navigator (EEF) Program Manager

Rosa Alejandre

ralejandre@exchange.nv.gov

702-486-5266

Broker Liaison

Rebecca Lomazzo

rlomazzo@exchange.nv.gov

702-486-5264

Program Officer

Tracy Reed

treed@exchange.nv.gov

775-687-9708

Chief Operations Officer

Ryan High

rhigh@exchange.nv.gov

775-687-9926



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