



Silver State Health Insurance Exchange

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AGENDA ITEM

For Possible Action

Information Only

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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

EXECUTIVE SUMMARY

The Silver State Health Insurance Exchange (Exchange) spent the second half of 2020 operationalizing year-round functions of a State Based Exchange (SBE) while adjusting to remote work as a result of the COVID-19 pandemic. Throughout the time period from July – December, 2020 the Exchange managed and oversaw the Maintenance of the GetInsured technology platform and call center, built the agency’s 2022-2023 budget, successfully planned and executed the second open enrollment period (OEP) as an SBE, and strengthened working relations with state agencies include the Department of Employment, Training and Rehabilitation, the Division of Welfare and Supportive Services (DWSS) and the Division of Health Care Finance and Policy (DHCFP). While the SBE learning curve has been steep, the

flexibility, autonomy, and economic certitude have been valuable rewards. This information, and that to follow, has also been highlighted in the Fiscal and Operational Report.

Vendor Management

Successful operation of an SBE requires a fully functioning enrollment technology platform and a scalable call center. The Exchange has worked closely with GetInsured to monitor performance of the enrollment system and assists with the prioritization of system defects and system enhancements. The Exchange's Quality Assurance team has been coordinating with the GetInsured call center management and staff to ensure consumer satisfaction and issue resolution.

In July of 2020 the Exchange's Board of Directors voted to extend the Nevada Health Link OEP for an additional month. The Exchange's OEP ran from November 1, 2020 through January 15, 2021. Consumers who enrolled by December 31, 2020 had policies that began on January 1, 2021, consumers who enrolled between January 1st and the 15th had policies that start on February 1, 2021. Programming the Nevada Health Link policies into the GetInsured platform and operationalizing call center functionality for the extended period required Exchange project management resources to ensure accurate deliverables.

The GetInsured technology platform successfully managed Nevada Health Link's Exceptional Circumstance Special Enrollment Period related to the COVID-19 pandemic. The Exchange worked with GetInsured to improve backend functionality during the general Special Enrollment Period including enhancing Administrator, Reconciliation Specialist, and Quality Assurance Specialist access and experience navigating the platform. The Exchange certified qualified health and dental plans and tested plan preview functionality while also overseeing and testing the OEP functionality prior to deployment on November 1, 2020.

In March of 2020, the consumer assistance call center began working remotely. As a result, call monitoring increased to ensure service levels were maintained through the transition to the remote work model. This includes live call monitoring and 27 scorecard categories to evaluate phone calls for each individual call center representative. The goal of meeting 85% of service levels has been met, however the Exchange identified opportunities to improve the hold time experience and build rapport with the consumer, thus GetInsured implementing the Exchange's directives and staff were able to implementation. Exchange staff and call center leadership have collaborated to make the consumer and broker/enrollment assister Interactive Voice Response (IVR) experience better, faster, and more efficient for callers' initial interaction with the Exchange and call center.

Transitioning the call center to working remotely allowed GetInsured to recruit and hire 16 Nevada residents for the OEP to work in the call center. During OEP the Nevada Health Link call center was staffed with 50 full time customer service representatives, and fielded calls seven days a week from 9:00am-5:00pm PST, excluding observed holidays.

State Fiscal Year 2022-2023 Agency Budget

The Exchange submitted the Agency Request budget to the Governor's Finance Office (GFO) on September 4, 2020 and presented the requested budget to the GFO and Legislative Counsel Bureau on September 23, 2020. Building a biennial budget in such a distinct time of uncertainty was complex. A combination of the continued scrutiny of the Affordable Care Act's legality, the shifting of newly

unemployed Nevadans to the Exchange vs. Medicaid, a worldwide pandemic and the related urgency for Nevadans to have access to comprehensive health insurance all impacted the budget building process. The Exchange included as many “known” and “unknown” factors into budget development and projects as conservatively as possible to ensure adequate resources to meet Nevada’s needs.

The Exchange requested \$18.8 million dollars for state fiscal year (SFY) 2022 and \$17.2 million dollars budget for SFY 2023. As has always been the case, the Exchange is self-funded, and operates solely from carrier premium fees and reserves.

The agency requested four additional full time employees to assist in the management of the duties absorbed as a result of the transition away from HealthCare.gov. A Health Resource Analyst, to act as a lead librarian for all reports and data management and analysis; a second Business Process Analyst 1 in the Reconciliation Unit, which is currently operating at a deficit and will require another employee in order to manage the increase in carriers; a Health Program Specialist to coordinate the Exchange’s outreach efforts, thus bringing this functionality in-house (preference for an individual who is bilingual); and finally an additional Program Officer in the Consumer Assistance Unit to assist with complex consumer cases by coordinating resolution with Exchange carriers. In addition to the new positions, the Exchange has requested the reclassification of several executive positions to commensurate the additional duties absorbed as a result of the transition, and to align with comparable positions in similar state agencies.

Plan Year 2021 Open Enrollment

Window shopping for plan year (PY) 2021 went live October 1, 2020. The Exchange was proud to announce the participation of two (2) additional QHP carriers, for a total of five (5) QHP carriers, for PY21. Nevada consumers were able to choose from a combined total of 50 health plans from returning carriers: Anthem, Health Plan of Nevada (HPN), and SilverSummit, and new carriers Friday Health Plans and SelectHealth. Six returning dental carriers have submitted a total of 21 standalone dental plans. Nevadans living in Clark and Nye County were able to select health plans from all five carriers; Washoe county residents were able to select health plans from Anthem, HPN, Friday Health Plans, and SilverSummit. The 14 remaining counties were able to select health plans from Anthem, Friday Health Plans and SilverSummit. Lastly, the Exchange was able to offer consumers for PY 2021 optional and separate vision coverage through links to VSP, a national vision coverage provider.

The average rate increase in PY 21 was 4.2% for on-exchange plans. The Exchange continues to remind consumers that when rates increase, subsidies also increase to offset the change. Consumers who received subsidies will see little to no impact resulting from rate increases.

Nevada Health Link enrolled a total of 81,903 consumer in plan year 2021. 25,297 of these consumers are new to the Exchange and 56,606 are consumers who returned.

Every facet of the Exchange quickly adapted to the COVID landscape, none more so than the Exchange’s marketing and outreach efforts. As a small standalone agency, the Exchange has always been nimble. That ability has proven extraordinarily useful throughout the pandemic, and especially as the agency entered the Open Enrollment advertising season. The Exchange, in partnership with Penna Powers, developed a comprehensive advertising campaign that spoke to the reasons for getting coverage and highlighted people living within the realities of COVID. The campaign targeted newly unemployed Nevadans, gig employees, culturally diverse populations, parents, and others. PY 21 campaign strategy

took from the previous season's successes and built a robust digital and social campaign that all Nevadans were bound to encounter throughout their daily lives.

The Exchange and outreach partners throughout the state were forced to think creatively when it came to meaningful outreach and engagement. Early in the pandemic in-person events and conferences were canceled and online conferences and events do not easily lend themselves to meaningful engagement with potential consumers. In response, Exchange staff delivered promotional and educational material to schools, churches, health centers, and other entities who are directly interacting with Nevadans throughout the pandemic.

To accommodate social distancing requirements to prevent transmission of COVID, Exchange Navigators provided virtual assistance to consumers via ZOOM meetings and FaceTime. Navigators used these technologies to provide face-to-face advice and walk consumers through the application process while remaining safely at home. While this proved to be a preferred method of assistance, Navigators scheduled in-office appointments if requested, however limited the number of consumers and staff in Navigator offices. In-office appointments followed all Centers for Disease Control and Prevention (CDC) and state COVID safety recommendations and requirements.

In addition to new processes for individual assistance, new procedures for outreach events were developed. Navigators are the primary event staff representing Nevada Health Link at community events. While public gatherings were drastically reduced, some still took place. To ensure the safety of both navigators and consumers, navigators complied with and employed all CDC and state transmission safety measures, including the use of PPE, social distancing guidelines, gathering limits, and table/booth disinfecting.

Coordination with State Agencies

The Exchange is committed to working closely with statewide organizations, state agencies, and stakeholders to not only communicate about the importance of comprehensive health insurance, but to also educate, improve, and streamline the existing systems and programs throughout the state.

The Exchange's efforts to ensure cross agency partnership and collaboration have grown throughout the pandemic and in response to the significant increase in unemployment and Medicaid enrollment. The Exchange partnered with the Department of Employment Training and Rehabilitation (DETR) to extend outreach of Nevada Health Link services to the hundreds of thousands of Nevadans filing claims with the Department. DETR shared the Exchange's open enrollment content on their social media and web pages and the Exchange and DETR continue to work to insert Nevada Health Link material into each piece of mail sent out to unemployed Nevadans from the Department. The Exchange also worked with the communications team with the Department of Health and Human Services to cross promote important information via social media, web pages, and email communications.

The Division of Welfare and Supportive Services (DWSS) is the state agency that determines Medicaid eligibility and a close partner with the Exchange. The two agencies share critical eligibility functionality through connections to the federal data services hub along with important consumer information as mandated by federal law, to ensure that Nevada consumers are routed to the appropriate program for health insurance coverage. DWSS has processed tens of thousands of Medicaid enrollments throughout the pandemic. The Exchange has partnered with DWSS to include Nevada Health Link informational inserts in the redetermination notices they sent out in October. This insert notices Nevadans about open

enrollment and the affordable options available through the Exchange. It is intended to reach Nevadans who will no longer be eligible for Medicaid as a result of their income putting them over Medicaid asset thresholds.

During the reporting period the Exchange began meeting with staff at DWSS to explore a partnership between the Exchange's Navigator program and the state's Medicaid program to provide outreach and education services to Medicaid and Nevada Check Up (NCU) recipients. According to historical program records, roughly 25% of a Navigator entity's time is spent assisting Medicaid and NCU recipients with post-eligibility activities as part of the normal activities that occur under the Navigator program. As such, the Exchange may be able to obtain a 50% federal match from CMS to provide these services to Medicaid recipients. A proposal was drafted and submitted as part of Medicaid's Eligibility and Enrollment Implementation Advanced Planning Document (IAPD) in July 2020. If the proposal is accepted, the Exchange could receive up to \$633,644 over the course of two years to fund and expand the outreach and education services provided to some of Nevada's most vulnerable populations. The Exchange expects an update in the near future and will keep the Board apprised of the outcome.

The Executive Director of the Silver State Health Insurance Exchange is also an ex-officio member of the Patient Protection Commission. The commission met several times over the reporting period and submitted requests for two of the three allocated bill draft requests – the first would expand telehealth services and the second would establish a state medical claims database.

The Executive Director of the Silver State Health Insurance Exchange is also appointed to the Advisory Committee on Medicaid Innovation. This committee focuses on the creation or expansion of public and/or private prescription purchasing coalitions, encourages coordination of private and public health care coverage, and explores waiver opportunities related to the U.S. Department of Health and Human Services.

Finally, the Exchange's Executive Director provided information and guidance to Mannat Health and Wakely Consulting, two private organizations responsible for producing the report outlined in [Senate Concurrent Resolution No. 10](#), a bill passed in the 2019 legislative session. SCR10 directs the Legislative Commission on Health Care to study the feasibility, viability, and design of a public health care insurance plan that may be offered to residents of Nevada.

The team at the Exchange is preparing for another year servicing Nevada consumers during a pandemic. While the team can't predict the future, leadership at the Exchange has to come to expect the need to be flexible and agile in response to this new "normal" that we are in with COVID-19. Layer on top of COVID-19 that fact that there is a new administration at the White House, new leadership structure in Congress, and a Nevada Legislative session through June, and the Exchange can only brace itself for the changes, requirements, and new frontiers ahead of it as it continues through calendar year 2021.