



Silver State Health Insurance Exchange

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Silver State Health Insurance Exchange (SSHIX) Board Meeting Approved Minutes Thursday, February 24, 2022

Meeting Location:

Zoom and Teleconference, or 2310 South Carson St., Suite 3A, Carson City, NV 89701

Members Present

Zoom:

Florence Jameson, MD
Valerie Clark
E. Lavonne Lewis
Dr. Sarah Friedman
Jonathan Johnson
Jose Melendrez
Kelli Anderson (for Susan Brown, Non-Voting Ex Officio)

Members Absent

Quincy Branch
Suzanne Bierman
Commissioner
Barbara D.
Richardson, Non-Voting Ex Officio

Staff Members Assisting

Janel Davis, SSHIX
Katie Charleson, SSHIX
Tiffany Davis, SSHIX
Kaitlyn Blagen, SSHIX
Gina Castaneda, SSHIX
Michelle Briggs, DAG
Michelle Garton, DHRM
Rhonda Vivor, AHRS

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

Chair Dr. Jameson called the meeting to order. Tiffany Davis performed roll call and quorum was established.

II. Public Comment

Barry Gold, Director of Government Relations for AARP, Nevada, strongly urged the Board on behalf of AARP to select a candidate who is a consumer advocate because a consumer advocate understands the market as well as the people who buy the insurance. Mr. Gold thanked the Board for including the 50-plus group in the marketing and outreach.

Tiffany Davis read a written public comment from Mindy Pretner (phonetic), broker with Nevada Health Link and previously healthcare.gov, provided her support on behalf of Affordable Health Insurance LV for the hiring of Mr. Ryan High to the Executive Director position of Nevada Health Link. Ms. Pretner indicated that she had written a letter in the past

suggesting improvements to the Nevada Health Link website when it was first launched. Ms. Pretner commended Ryan High for his multiple follow-ups regarding Ms. Pretner's letter, as well as his updates to her concerns as well as for the strategic plans he developed to resolve the issues. Ms. Pretner indicated that directly as a result of Mr. High's leadership, the enrollment process became considerably more efficient and effective. Ms. Pretner further indicated that Mr. High has already begun to address her input for this year and has already begun to follow through on these requests. Ms. Pretner concluded her letter by opining that if Mr. High were hired for Executive Director's position, the brokers of Nevada consumers would directly benefit.

There was no further public comment.

III. Approval of the minutes of the October 14, 2021 and February 3, 2022 Board Meeting. For Possible Action.

The following action was taken:

MOTION To approve the minutes of the October 14, 2021 and February 3, 2022 Board meetings.

BY: Ms. Lewis

SECOND: Mr. Melendrez

PASS: Unanimously

IV. Interview Candidates for SSHIX Executive Director (listed in alphabetical order) Ryan High and Troy Johns

Tiffany Davis informed the Board that both candidates are both being held in waiting rooms and are unable to hear or see the meeting. Ms. Davis indicated that the candidates would be brought in one at a time for the interview process and then returned to the waiting room. As such, Ms. Davis asked the Board to wait for confirmation of the candidate's return to the waiting room prior to the Board beginning discussion. Ms. Davis indicated that once the Board had voted on the candidate of choice for the position, the candidate would be brought back into the meeting and if the candidate accepted the Board's offer, the candidate not selected would be called offline to be informed of the Board's decision. Ms. Davis further indicated that should the Board have questions on the process, Michelle Garton, Deputy Administrator with the Division of Human Resources, was available as well as DAG, Michelle Briggs, to assist.

Chair Jameson reminded the Board that the plan was to interview the candidates back to back without discussion in between unless something needed to urgently be addressed. Chair Jameson further invited the Board to raise any potential concerns prior to the beginning of the interview process.

Mr. Ryan High was the first candidate for interview.

Dr. Sarah Friedman asked Mr. High about his qualifications for the position.

Mr. Ryan High explained that he has served as the COO for the Exchange since 2016 and is currently serving as the Interim Executive Director. Mr. High indicated that he had also worked for the city of Reno in strategic planning and budgeting, for the Nevada Secretary of State's Office as Director of Operations, and as the administrator for the Help America Vote Act. Mr. High informed the Board that he has experience in state budgeting, working with Legislature and the interim Finance Committee, as well as with the Board of Examiners and fiscal notes during session.

Dr. Friedman asked Mr. High to define the most important professional principles he uses to conduct himself as an executive director.

Ryan High explained the importance of setting clear expectations for the team which one is leading as well as informing the team of metrics by which they'll be measured to perform to those expectations. Mr. High indicated his belief in the importance of communication, as well as being firm, fair, and friendly when conducting oneself in all manners. Mr. High further indicated his belief that responsiveness is critical to success.

Dr. Sarah Friedman asked Ryan High to describe his leadership style and for examples of how he has used this style to change organizational culture, lead successful teams, and resolve conflicts.

Ryan High discussed the Quality Assurance Team he led as well as his partnership with the broker liaison and Navigator Manager. Mr. High indicated his belief that it is his responsibility to help make those that he manages successful as this in turn makes the whole team successful. As such, Mr. High explained that he tries to actively listen to team members' concerns and issues and attempts to provide solutions. Mr. High further discussed the importance of utilizing subject matter experts for their perspectives and opinions. Mr. High reiterated the importance of performance metrics and the use of key performance indicators that could be consistently tracked. Mr. High also discussed the importance of revisiting the vision and mission, indicating that it could need refreshing. Mr. High indicated that in order

to resolve serious conflicts, the first step is to identify and recognize them and then to try and come to a consensus with the involved parties through the use of active listening, empathy, and fair solutions with a consumer focus in mind.

Mr. Johnson asked how he would balance pressure from the competing forces of different stakeholders.

Ryan High explained that providing a stable, user-friendly platform is critical, as well as performing regular updates to the enrollment and eligibility platforms in addition to taking into consideration the thoughts of the broker and enrollment facilitator community to streamline the processes. Mr. High further discussed the importance of improving the Exchange through the legislative process, explaining that all of these things together provide a layered approach to meshing the different competing interests.

Mr. Johnson asked Mr. High to describe his legislative and budget planning experience, as well as asked about his familiarity with the state of Nevada's legislative process for submitting budgets. Mr. Johnson also asked Mr. High about his media and public relations experience, specifically his handling of potential negative or difficult questioning from the media.

Ryan High explained that he was involved in both federal and statewide budgets in his work with both the Secretary of State's office and the City of Reno. Mr. High further indicated that his current work at the Exchange has been primarily on fiscal notes during the legislative session. Mr. High next discussed his work with the communications director at the Exchange, indicating that these communications have been primarily written. In terms of handling negative or difficult questions, Mr. High explained that he has completed a Certified Public Manager Course, in which the teachings included the importance of honesty when unsure of an answer. Mr. High indicated the importance of being prepared, but conceded that sometimes not knowing the answer to a question and explained that his philosophy is to answer questions directly and following up with answers that he may not have at the time of the questioning.

Mr. Johnson asked Mr. High what he sees as his role in managing the Exchange's vendors as well as about his approach to problem escalation.

Ryan High explained that he would treat the Exchange almost as though it were one of his children and as such, have a deep, vested interest with the vendors while maintaining a protective relationship of the Exchange.

Ms. Clark asked Mr. High to provide the Board with his specific experience in the field of individual health insurance as well to describe his working knowledge of insurance rating principles and processes.

Ryan High explained that his specific experience in health insurance has been at the Exchange as prior to that, his background included more operations and strategic planning. Mr. High explained that he has learned a lot regarding health insurance since he began work at the Exchange in 2016, including how the Exchange operates as state-based, and using the federal platform as the technology. Mr. High next discussed the insurance rating principles and processes, explaining that the process begins with the draft letter to issuers in order for insurance companies to know what to expect come filing season. Mr. High explained that they work closely with the Division of Insurance, with whom the Exchange is partners, as well as with the carriers to set the rates for finalization by early fall. Mr. High indicated that he was part of the Exchange back when there were only two carriers and now there are seven, providing a more positive, encouraging landscape for Nevadans.

Ms. Clark asked Mr. High if he works with the carriers in asking them how they justify their rates and actuarial formulas.

Ryan High explained that the rate setting is done more by the Division of Insurance than the Exchange.

Ms. Clark asked Mr. High to provide a synopsis of his goals and objectives for the Exchange as well as a general outline of how he intends to accomplish these goals as executive director.

Ryan High explained that the overarching goal since the inception of the Exchange is to increase consumer enrollment, to lower the uninsured rate in the state, and to make sure that all residents have tremendous access to good quality, subsidized healthcare plans. Mr. High reiterated the idea of revisiting the vision, mission, and strategic priorities to ensure alignment as well to include additional performance measures. Mr. High further indicated his goal as executive director to immediately begin recruitment for another COO and to work collaboratively with each of the division heads to ensure that needs are met. Mr. High additionally discussed the importance of setting clear expectations and giving department heads and staff greater decision-making power to provide them with more latitude.

Ms. Clark asked Mr. High to inform the Board of what it is he loves about healthcare and the health insurance industry.

Ryan High indicated that this is a very altruistic industry, explaining that the majority of his career has been in public service, and what drew him to healthcare was the sense of helping people in a time of need.

Ms. Lewis asked Mr. High to tell the Board a bit about himself and his background that has not already been addressed in the interview.

Ryan High informed the Board that he is originally from Maryland, completed his undergrad studies at Loyola College, and that his first job out of college was in graphic design for Maryland Family Magazine. Mr. High indicated he then spent some time as a corporate recruiter in the Maryland/Washington DC areas prior to moving to Nevada for a year in 2002. In 2006, Mr. High moved to Nevada permanently and has been working in public service ever since. Mr. High indicated that he enjoys hiking, camping, and snowboarding up in Lake Tahoe.

Ms. Lewis asked how Mr. High would work to increase diversity among the staff and state employees if named executive director, and asked Mr. High to share any initiatives he has directed to engage the diverse communities in Nevada.

Ryan High explained that in order to increase diversity among staff, the Exchange uses the state's Department of Human Resource Management for recruitment, which is a very standard process. However, Mr. High discussed possible ways to increase diversity such as posting on varied job boards and getting the word out by using different navigating communities. In terms of initiatives to engage diverse communities, Mr. High explained that in working with the communications manager and the agency of record, the Exchange has begun to dig deeper into enrollment and application data of consumers and attempting to use that data to make more actionable decisions. Mr. High further explained that he works closely with tribal liaison, Tiffany Davis, in order to keep the tribal communities updating.

Ms. Lewis asked Mr. High to address his approach in following and responding to federal and state healthcare policies with implications for the Exchange, and asked how he intends to ensure that the Exchange's messages reach underserved populations and provide health equity to the state.

Ryan High explained that in terms of federal and state legislative changes, these are oftentimes opportunities for the Exchange to improve its technology as well as its policies and compliance. Mr. High explained that the Exchange, for the most part, welcomes these changes, and works with federal and state agencies to enact and operationalize things that come about. Mr. High informed the Board that working with the Abbi Agency and Marketing for Change allows the Exchange to see how its messaging is reaching different segments or

populations. Mr. High indicated that they have learned through this process that the Exchange's messaging to Hispanics and Latinos is very effective. Mr. High informed the Board that the Exchange does have strong partnerships in the Asian community, as well. Mr. High further indicated that the best way to provide health equity is to build trust in communities that may not have trust in government services, which can be achieved by building messaging and consumer education around the benefits themselves, the potential low cost of the benefits, and the healthcare services. In addition, Mr. High discussed the importance of providing this messaging in diverse languages in order to decrease the uninsured rate and increase healthcare usage.

Dr. Jameson asked, if selected, when Mr. High would be able to begin working in the position in the Carson City office.

Ryan High indicated that he could begin working right away.

Dr. Jameson invited the Board members and Mr. High to ask any questions.

Ryan High inquired about the most important skills and qualities required to succeed in this job.

Ms. Clark explained that the job is multifaceted and requires that type of leader that has to be very big-picture, have a lot of vision, and who can effectively juggle and collaborate with many different and strong entities as well as maintain control over all the moving parts of the job.

Ms. Lewis concurred with Ms. Clark and added the importance of managing the outreach to the list of critical qualities.

Mr. Melendrez added the importance of understanding the diversity of the different communities and income levels in the state. In addition, Mr. Melendrez indicated the importance of having an open mind to the process of meeting different challenges and engaging with the diverse communities.

Dr. Jameson discussed the importance of teamwork and the job of the leader to incorporate all team members as well as the importance of fairness, firmness, and friendliness, and the ability to define and evaluate metrics.

Ryan High asked the Board to define the biggest challenge that this position faces as well as the biggest challenge the Exchange faces.

Mr. Johnson explained that the constant changing regulations in healthcare continue to be a challenge and that these changes continue to need to be collectively navigated, as well as the challenge of always putting the consumer first.

Dr. Jameson concurred with Mr. Johnson and added that negotiating the external forces tends to be a challenge for the Exchange as a whole. Dr. Jameson further added her belief that the greatest challenge for the individual is reaching the goal of the Exchange's mission and vision as well as the upcoming challenge of the public option.

Ryan High next asked how performance is evaluated and measured for the position of executive director.

Ms. Clark explained the importance of the executive director's monthly report to the Board as the major performance evaluation tool as well as the overall performance of the Exchange during open enrollment.

Dr. Jameson added the importance of the executive director fitting in and working with the team, and indicated that this will likely be reflected in the functioning and quality of the performance.

Ryan High concluded his interview by informing the Board that this is a position that he wishes to hold as part of a career. Mr. High commended the previous executive director for his creation of a tremendous culture, agency, and organization and informed the Board that he wishes to take the best parts of that and add to it moving forward.

Tiffany Davis reread the first three questions from Dr. Friedman for clarity given the technical difficulties while Dr. Friedman was reading them.

Mr. Troy Johns was the second candidate for interview.

Dr. Sarah Friedman asked Troy Johns about his qualifications for the position.

Troy Johns explained that he has worked directly with boards and executive management in different healthcare organizations over the last 30 years. Mr. Johns indicated that during that process, he's had the privilege of working with stakeholders that are similar to the ones in the Exchange. Mr. Johns explained how through that process, he has designed and obtained ratings for an application for deployed healthcare coverage which was then supported through the enrollment processes, customer service, and functionality. Mr. Johns further explained that he personally has a passion for ensuring that every possible Nevadan have quality healthcare coverage as uninsured or underinsured folks do create a burden on the healthcare providers.

Dr. Friedman asked Troy Johns to define the most important professional principles he uses to conduct himself as an executive director.

Troy Johns explained the importance of honesty, integrity, accountability, and reliability as guiding principles to which he ascribes and would bring to the position.

Dr. Sarah Friedman asked Troy Johns to describe his leadership style and for examples of how he has used this style to change organizational culture, lead successful teams, and resolve conflicts.

Troy Johns explained that his leadership style is an alignment of interests, which includes, focus upon individuals' goals and objectives with the duties of an individual's particular position and the goals of the organization. Mr. Johns further discussed the stylistic importance of listening as everyone needs to be heard and understood. Mr. Johns also indicated the importance for the Exchange to work to help advance team members in the direction the team member desires to go. Mr. Johns informed the Board that he has built multiple sales and marketing departments for healthcare coverage, one of which was in Denver, Colorado, citing the importance of successful development of a department and team. Mr. Johns further cited an example of his conflict resolution by telling the story of two Board members of an organization for which he worked developing a serious issue between them and his setup of independent meetings with the Board members, key employees, and stakeholders, following which a program was put in place that demonstrated that everyone was in this together. Mr. Johns explained that the end result was the ability to see a way to reconcile the issues that separated people by focusing on the organization's objectives.

Mr. Johnson asked how Troy Johns would balance pressure from the competing forces of different stakeholders.

Troy Johns indicated his belief that making a case where increasing the number of Nevadans covered by quality health insurance solves a lot of the state's problems and challenges. Mr.

Johns commended the Exchange and the Board on the incredible work that has already been done, indicating that this makes for an easier starting place in that the Exchange is reliable, cost-effective, covering people and helping them to be more productive, which helps employers and the economy. Mr. Johns discussed the importance of developing relationships by meeting with all stakeholders as frequently as possible in order for the stakeholders to have a good sense of the Exchange's commitment to resolving issues in a way that's accountable and reliable and effective. Mr. Johns further indicated the importance of being open and honest and communicative about issues that do arise.

Mr. Johnson asked Mr. Johns to describe his legislative and budget planning experience, as well as asked about his familiarity with the state of Nevada's legislative process for submitting budgets. Mr. Johnson also asked Mr. Johns about his media and public relations experience, specifically his handling of potential negative or difficult questioning from the media.

Troy Johns explained that he has been working with budgets, both small and large, for his entire career and worked with the State of Arizona on their budgeting. As such, Mr. Johns explained that in terms of the legislative process, he is familiar with how assembly and Senate and executive works. Mr. Johns further indicated that because the budgets for the Exchange have been done so well and so effectively up to now, it is easier to work from that basis than to create them from scratch. Mr. Johns explained that he has had limited exposure to national media, but he indicated the importance of communicating key points quickly and as such, believes in the responsibility of an executive director to be attuned to what is likely to be asked as well as to be on the ready to represent the Exchange in a clear, concise way.

Mr. Johnson asked Mr. Johns what he sees as his role in managing the Exchange's vendors as well as about his approach to problem escalation.

Mr. Johns explained that these relationships are vital and that it is the responsibility of the executive director to be a support system for these vendors in any way they need. In addition, Mr. Johns indicated the importance of being proactive in making introductions as early as possible. In terms of escalation, Mr. Johns indicated his belief that whomever is primarily responsible for the relationship, from a staff perspective, should handle the issues that arise to the best of their capability prior to escalating in accordance with the management system in place, potentially landing ultimately at the executive director level for intervention. Mr. Johns next discussed the importance of post-incident analysis in order to determine where the breakdown happened and how to address this should the same type of issue arise in the future.

Ms. Clark asked Mr. Johns to provide the Board with his specific experience in the field of individual health insurance as well to describe his working knowledge of insurance rating principles and processes.

Troy Johns explained that he has been designing employee benefit plans for the past 40 years, first as a sales rep, sales manager, and ultimately as a vice president for MetLife HMO. As such, Mr. Johns informed the Board that he has an in-depth knowledge of the rating principles and underwriting principles in place, primarily for group insurance. Mr. Johns explained that he has not been an individual underwriter, but the group underwriting experience that he has is highly applicable to the accountable care coverage and the distribution and underwriting and actuarial principles that are used. Mr. Johns informed the Board that he has been involved in multiple rate filings, working with actuaries and underwriters in submitting rates to departments of insurance in multiple states. Mr. Johns indicated that he has also had the privilege of working with medical directors, chief executives, medical management teams, underwriters, and actuaries to go out to work with hospitals and physicians for discussions about care arrangements and discussing how sales and marketing, through benefit design and rating, can help manage the risk and provide a more predictable experience. Mr. Johns informed the group of his work in the Denver market in helping to pivot an organization to be willing to offer a Chamber of Commerce plan and structure it in a way that could handle the changes in risk profiles that can occur with age swings.

Ms. Clark asked Mr. Johns to provide a synopsis of his goals and objectives for the Exchange as well as a general outline of how he intends to accomplish these goals as executive director.

Troy Johns explained the benchmark is to move the needed on how many people remain uninsured in the state, and is looking to find a way to address whatever is causing the barrier for those people who have not yet enrolled. Mr. Johns further indicated the importance of being prepared for the future, particularly as some of the ARPA benefits and subsidies disappear and how that will affect people who are already covered as it could potentially put pressure on holding onto the current enrollees. Mr. Johns next discussed the cost of housing and the enormous economic pressure this could place upon enrollees. Mr. Johns indicated that the public option could potentially play a positive role in all of this. Mr. Johns further indicated his belief that his skillset is a great compliment to the existing skillset at the Exchange and expressed hope that with this wide range of expertise, some new ideas, recommendations, and ways to implement them could be discovered.

Ms. Clark asked Mr. Johns to inform the Board of what it is he loves about healthcare and the health insurance industry.

Troy Johns explained that healthcare is a cornerstone and the blessing of not having to restrict activities for fear of illness or accident is one he wants for everyone. As such, Mr. Johns informed the Board of his joy in helping individuals to obtain these benefits with the realization that they can afford it. Mr. Johns further discussed the focus of healthcare

providers on preventative care and chronic disease management and indicated that it is an exciting time to be able to bring healthcare coverage to people.

Ms. Lewis asked Mr. Johns to tell the Board a bit about himself and his background that has not already been addressed in the interview.

Troy Johns reiterated his passion for this position and for healthcare. Mr. Johns explained that for approximately 20 years he has served as a trustee for Friends in the Desert, which was initiated in part by former Henderson Mayor Gibson when Henderson was the second-fastest growing in the nation. Mr. Johns indicated that through approximately 3,000 volunteers a year, the organization has been able to serve 25,000 hot, sit-down meals over the past 20 years to the homeless and insecure. Mr. Johns further indicated that the meal-service program was something that the organization was able to maintain through the pandemic. Mr. Johns further discussed the importance of business leaders to ensure that the community is taken care of, as well, and that this needs to be done by addressing root causes.

Ms. Lewis asked how Mr. Johns would work to increase diversity among the staff and state employees if named executive director, and asked Mr. Johns to share any initiatives he has directed to engage the diverse communities in Nevada.

Troy Johns explained that all of the organizations with which he works are happy to work with, employ, and volunteer alongside anyone who has a passion and interest. Mr. Johns further indicated that most of his work for diversity has been a focus on ensuring that Board representation at Friends in the Desert includes female participation in addition to ensuring that anyone in need is served. Mr. Johns further indicated that there are many programs available to ensure that mentorship can be provided, that positions can be made attractive, and that anyone with an interest has the ability to serve alongside in a way that increases diversity. Moreover, Mr. Johns explained the importance of these diverse relationships in allowing people to see things differently and potentially approach problems in a new and constructive way as well as to potentially help to address the underrepresentation of some of the Exchange's covered lives in some of the underserved communities.

Ms. Lewis asked Mr. Johns to address his approach in following and responding to federal and state healthcare policies with implications for the Exchange, and asked how he intends to ensure that the Exchange's messages reach underserved populations and provide health equity to the state.

Troy Johns explained that in terms of following legislation at the federal and state level, it is important to be attuned to that 100 percent of the time as well as check all potential sources and subscribe to the notices that would bring those to the attention of the company and then

work with policy experts across the state who are also in tune to these things. Mr. Johns indicated the importance of looking at coverage gaps and the coverage areas where the equity needs are most difficult to meet. Mr. Johns further indicated that the Abbi people are very effective at understanding marketing messages and the communities to which they need to go. Mr. Johns explained the importance of explaining to underserved communities exactly what the Exchange can do for them as well as the importance of supplying this information in a language that the community can understand. Mr. Johns discussed the importance of spending time with people, working on the barriers they are facing, and showing them how those barriers can be overcome through the Exchange. Mr. Johns further indicated the importance of being mindful of the financial expectations on people and offering something affordable even when the subsidy is not there. Mr. Johns then stressed the importance of ensuring that the message is specific to the targeted underserved community and includes a compelling price and product combination.

Dr. Jameson asked, if selected, when Mr. Johns would be able to begin working in the position in the Carson City office.

Troy Johns informed the Board that he would be able to start in the position as of March 21. Mr. Johns further indicated that if he was needed prior to that, he was open to being available but did need a bit of time to relocate.

Dr. Jameson invited the Board members and Mr. Johns to ask any questions.

Ms. Lewis asked Mr. Johns what prompted him to leave his current job of 21 years as president of his company.

Troy Johns indicated that one of the things that has prompted his career change is the pandemic given that the need for his software service solution has diminished given the increase in remote work. Mr. Johns further indicated that when this position was brought to his attention, it addressed the needs of things which he loves and in which he has great interest such as employee benefits, healthcare, and making a difference. Mr. Johns next commended the culture of the Exchange for finding a way to do things and overcome issues in an exemplary way, and informed the Board that this is the type of culture of which he'd like to be a part. Mr. Johns next asked the Board about the issues on its radar and its expectations regarding the role an executive director would play.

Ms. Clark explained that the Board has transitioned over time from its beginnings in building the infrastructure and technology and indicated her belief in the importance of becoming more visionary on the role that the Exchange plays within the state as well as being more proactive in finding the people that need services.

Dr. Jameson concurred with Ms. Clark, reiterating the importance of decreasing the uninsured in the state and the role of the executive director being able to think outside the box to accomplish this goal.

Troy Johns concluded his interview by informing the Board that he is inspired by the position and looks forward to its decision.

V. Selection of SSHIX Executive Director

Mr. Johnson indicated that he was impressed by both candidates who each have unique attributes and characteristics that would be of tremendous benefit to the Exchange.

Dr. Jameson informed the Board of her belief that the Board had the ability to ask a few more questions of the candidates if so desired.

Ms. Garton indicated that this would be appropriate.

Dr. Jameson asked Ms. Briggs how this should be implemented--if it could be done today or would it need to be tabled and set for another meeting.

Ms. Briggs explained that the decision to question further now or at another meeting is within the discretion of the Board.

Ms. Lewis indicated her belief that additional questions would not be necessary as the answers provided to the existing questions have given the Board a good feel for each candidate. As such, Ms. Lewis asked what the Board would hope to ascertain by asking additional questions.

MOTION **To vote on the candidates interviewed in hopes of reaching a decision**

BY: **Ms. Lewis**

SECOND: **Dr. Friedman**

PASS: **Unanimously**

MOTION **To offer Ryan High the position of executive director**

BY: **Dr. Friedman**

SECOND: **Mr. Johnson**

PASS: **Unanimously**

Dr. Jameson offered the position of Chief Executive Director to Ryan High and thanked him for his incredible years of service to the Exchange.

Ryan High accepted the position, thanked the Board, and expressed his appreciation for the opportunity.

VI. Executive Director's Report

Ryan High indicated that the Silver State Health Insurance Exchange spent the second half of 2021 preparing for and executing on the Exchange's third open enrollment period as a state-based Exchange. Mr. High further indicated that the Exchange continued providing a special enrollment period through August 15, 2021, where the Exchange implemented increased subsidies, expanded the federal poverty level for subsidies, and provided zero-dollar plans for those who claimed unemployment insurance as a result of benefits provided in ARPA. Mr. High informed the Board that the Exchange's third open-enrollment period proved highly successful and broke previous enrollment records with a total enrollment of 101, 408 consumers. Mr. High noted that during this record-breaking year, the call center continued to maintain expected and contract service levels for Nevada consumers, brokers and navigators seven days a week during the open-enrollment period. Mr. High indicated that in addition, the call center had extended hours until 11:59 PM on January 14, 15, and 20 to accommodate the end of open-enrollment enrollments. Mr. High next recognized the contributions of the Abbi Agency's marketing and outreach strategies and campaigns.

Mr. High informed the Board that in preparation for the end of the Public Health Emergency (PHE), the Exchange has been working in coordination with the Department of Welfare and Supportive Services and the Division of Healthcare, Financing, and Policy to adequately plan how to best service state residents in need of health insurance coverage in the event they transition off of Medicaid. Mr. High explained that as the end of the PHE has yet to be determined, the Exchange is actively planning with the state agencies and vendor Get Insured to assure that Nevadans in need will be properly and efficiently transferred when appropriate to the Exchange for seamless coverage. Mr. High explained that the Exchange intends to enhance its contracted call center through funding from the Center for Medicare and Medicaid Services as well as through a State Exchange grant. Mr. High further indicated that upon the definitive end of the PHE, the Exchange will stand up through Get insured to determine

Medicaid clients deemed ineligible to continue on Medicaid but that may have opportunities on the Exchange.

Mr. High next discussed federal and state legislation updates, explaining that from June through December of 2021, the Exchange tracked a number of federal and state legislative priorities that continue to impact the Exchange, including: ARPA; the Build Back Better Act; CMS's plan year 2023 notice of benefit and payment parameters; Nevada Senate Bill 420 from the 2021 session; and Nevada Assembly Bill 432 from the 2021 session. Mr. High explained that on December 28, 2021, CMS's annual draft notice of benefit pivot parameters was released, a release that welcomes and solicits public and State Exchange Comment, which can be found on nevadahealthy.com on the Exchange's public notices page. Mr. High indicated that Exchange is continuing to closely follow AB 432, which will designate the Exchange as an automatic voter registration agency, and SB 420, a public option bill. Mr. High explained that the Exchange has been participating in public listening sessions where stakeholders can provide input and ask questions. Mr. High informed the Board that work on both of these bills will continue throughout calendar year 2022.

Mr. High concluded his presentation with the announcement that three of the four new positions approved by the 2021 legislature within the Exchange's Governor's recommended budget have been filled. Mr. High explained that these positions absorbed functions and responsibilities previously provided by CMS. Mr. High informed the Board that Nivida Kesareadi (phonetic), a business process analyst at the reconciliation unit, will support increased workloads due to additional insurance carriers anticipated to join the marketplace or that have joined the marketplace for the 2022 season. Mr. High next indicated that Griselda Chappa (phonetic), has been hired as the Exchange's newest health program specialist in the communications unit in the Henderson Office and that the position will entail in-house responsibility for outreach planning, coordination, and statewide community relations and partnership building as well as assisting in streamlining the Exchange's efforts to conduct outreach to targeted, at-risk uninsured and underinsured populations to increase enrolment in the Exchange's QHPs. Mr. High informed the Board that Kayla Yost (phonetic) has been hired as a classified program officer in the Quality Assurance Consumer Assistance unit and will administer carrier support in partnership with an existing program officer as well as provide timely investigation and resolution of carrier complaints related to eligibility, enrollment, and coverage. Mr. High indicated that this critical position ensures positive outcomes for both carriers and consumers. Mr. High informed the Board that the data analyst position remains open and that the Exchange is hopeful that the position will be filled prior to the next Board meeting.

VII. Marketing and Outreach Update

Ms. Davis, Communications Officer for Nevada Health Link, informed the Board that this open enrollment was the most successful in the history of the Exchange. Ms. Davis further indicated that Nevada Health Link ranked 17th in the country and the highest among all state-based Exchanges in terms of new enrollees. Ms. Davis identified some of the contributing factors to the success: a large market of uninsured in the state; strong PR efforts; a call-to-

action website that was easily navigated. Ms. Davis indicated that the Exchange prides itself on having reached the target audience of Nevadans that meet federal requirements of low income as well as the fact that this open enrollment period saw a greater impact on Hispanic and Latino communities in the state, with 9.1 percent of new enrollees identifying as Hispanic/Latino. Ms. Davis explained that Spanish campaigns outperformed English on almost every paid media platform, including service announcements, filmings, community partnerships, and radio remotes. Ms. Davis informed the Board that a lot of research and surveying was done with subcontractor, Marketing for Change, and the website performance data showed an increased awareness in the rural regions of the state. Ms. Davis further indicated that the Exchange was also able to reach a significant portion of the younger audience in the state with new enrollment of approximately 74 percent from one-person households, the highest percentage of which were in Washoe and Clark Counties, 19 percent of whom were in the 19 to 30 year age range and 25 percent of whom were in the 31 to 45 year age range. Ms. Davis explained that African-American and API populations were reached through Google campaigns and connected TV such as streaming services and digital and mobile billboards.

Ms. Lewis congratulated Ms. Davis on the outreach accomplishments for this enrollment period.

Dr. Jameson asked for the official number of uninsured Nevadans in addition to the number eligible for the program through the Exchange out of that total number. Dr. Jameson also asked what comprised the 17th overall rank in the country.

Ms. Davis explained that the 17th overall rank was federally in terms of new enrollees, number one for state-based Exchanges.

Dr. Jameson asked if Ms. Davis was aware of what brought in new enrollees and why they joined. Dr. Jameson further inquired if Ms. Davis knew why the state had such great numbers and what was deemed to be the most successful.

Ms. Davis explained that there are multiple reasons why Nevada has been so successful: re-enrollment of enrollees; COVID; ARPA increasing and expanding subsidy assistance; marketing and messaging.

Dr. Jameson asked if there was any kind of survey sent to enrollees.

Ms. Davis indicated that the Abbi Agency would likely have an answer to that.

Ashley Behre, Brand Manager for The Abbi Agency, informed the Board that the open enrollment period contained a variety of creative outlets that were authentic and engaging to each target audience. Ms. Behre indicated that the talent was diverse in ethnicity and age as well as relative to different family types. Ms. Behre explained that the goal was for customers to see this as an actionable journey for purchasing health insurance through the vehicle of the Exchange. Ms. Behre informed the Board that some of the early surveys done in June 2021 helped to inform and develop the campaign both in terms of creativity and messaging. Ms. Behre further indicated that the entire campaign was developed in both English and Spanish and opined that this was one of the most effective measures used to engage the Hispanic and Latino audience. Ms. Behre also credited the tagline utilized for Nevada Health Link.

Ms. Behre discussed the statistics, indicating that Nevada Health Link had a 24 percent increase in new enrollees whereas the average state had a 17 percent increase and the average state marketplace was an 8 percent increase in new enrollees. Ms. Behre discussed the deeper dive the Abbi Agency took into these statistics following open enrollment, asking questions like: was this an anomaly because of COVID; was there a larger uninsured population in the state of Nevada; and how is Nevada comparing across the united states. Ms. Behre reiterated the idea that the success is owed to a variety of factors, but praised the outreach and marketing efforts, explaining that they were in-depth and well-tailored to Nevada's needs at the time. Ms. Behre indicated that the Abbi Agency was able to attend over 40 community events and engage with more than 20,000 Nevadans at these events directly, which provided a strong community presence in an uncertain time. Ms. Behre further discussed the press conference that kicked off open enrollment and over 200 pieces of coverage, which translated into 2 million coverage views and explained that this was a strong tactic in a time when there was little in-person interviewing taking place. Ms. Behre indicated that from the digital paid media tactics, there were over 13 million impressions on paid social media such as Facebook, TikTok, Pinterest, and Spotify as well as more traditional paid media tactics such as Google display and search. Ms. Behre explained that Google display helped significantly in reaching the lower-income audiences. Ms. Behre further explained that in terms of LinkedIn, the Abbi Group was able to see that in addition to small business owners, Hispanic small business owners were being reached, which is an audience that previously had not been well reached.

In terms of the website, Ms. Behre reiterated that there had been more than 15 million page views over the course of the open-enrollment period with a median time on that site at Over 11 minutes whereas typical time on a website is two to four minutes. Ms. Behre explained that because of the in-depth work with the Exchange, the website was designed and in some cases, pages were redesigned, with clear and communicative navigation being the focus. Ms. Behre informed the Board that four main audiences were reached: low income; Hispanic and Latino; rural; and younger Nevadans. Ms. Behre explained that the results indicate that the platform that had been developed was creative and resonated with audiences. Ms. Behre indicated that the most surprising audience was the rural regions of Nevada, particularly because the Delta and Omicron variants put a stop to some of the intended marketing for the rural regions. Ms. Behre reiterated that in the larger Counties, like Washoe and Clark, showed the largest

increase in single households featuring younger Nevadans. Ms. Behre further indicated that several surveys were done at the onset of the campaign to ensure that development was on par with key stakeholders, explaining that brokers and navigators were surveyed to solicit their feedback. In addition, the call center was polled to ensure that all content developed was meeting the general needs of the consumer. Ms. Behre informed the Board that post open enrollment, the Abbi Group is engaging in surveys with the enrollees and then some additional larger surveys as well so as to gauge the impact of Nevada Health Link in the marketplace over time.

VIII. Adoption of 2023 Carrier Premium Fees to be charged to insurers. See attached Notice of Hearing of Fees to be Charged to Insurers.

MOTION To adopt the 2023 carrier premium fees to be charged to insurers
BY: Mr. Melendrez
SECOND: Ms. Clark
PASS: Unanimously

IX. Approval of the semi-annual Fiscal and Operational Report pursuant to NRS 6955I.370(1)(b) to the Governor and Legislature.

MOTION To approve the semi-annual fiscal and operational report pursuant to NRS 6955I.370(1)(b) to the Governor and Legislature
BY: Ms. Lewis
SECOND: Inaudible
PASS: Unanimously

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

Tiffany Davis informed the Board that the next Board meeting is scheduled for June 23 at 12:30 unless the Board determines the need for another meeting prior to that date.

XI. Public Comment

Troy Johns thanked the Board for allowing him to participate in the interview process for the executive director position and congratulated Ryan High. In addition, Mr. Johns praised the organization.

Dr. Jameson informed Mr. Johns that the decision for executive director was very difficult for the Board and informed him of the Board's appreciation for him. Dr. Jameson further wished Mr. Johns luck in his future endeavors.

XII. Adjournment

Dr. Jameson adjourned the February 24, 2022 Silver State Health Insurance Exchange meeting.