

**State Health Reform Assistance Network
QHP/IAP Renewals – Small Group Convening
July 10-11, 2014
Boston, MA**

Conducted by:
State Coverage Initiatives/AcademyHealth
Technical Expertise provided by:
Georgetown University, GMMB, Manatt Health Solutions, and Wakely Consulting Group
Sponsored by:
The Robert Wood Johnson Foundation

AGENDA

Thursday, July 10

- 7:30–8:30 a.m. Registration and Breakfast** **5th Floor Rotunda**
- 8:30–9:00 a.m. Welcome, Introductions, and Overview of Meeting** **Esplanade (5th Floor)**
Heather Howard, Director, State Network
Andy Hyman, Senior Program Officer, Robert Wood Johnson Foundation
- Goal:** Retain customers who remain QHP/IAP eligible and while growing enrollment.
- 9:00–10:45 a.m. Eligibility and Enrollment Business Process** **Esplanade**
Lead: Manatt
- This session will walk through the eligibility and enrollment process flow, identifying policy issues, options and ambiguities, and operational and implementation challenges for discussion. Potential topics include:
- What information is the Marketplace reviewing to re-determine eligibility for QHP enrollment and APTC/CSR? What are the Marketplace's obligations with respect to verification?
 - To what extent are Marketplaces applying information learned for renewal to coverage in the current year?
 - How will the Marketplace assign APTC level for the next coverage year if the consumer does not respond?
 - How will Marketplace systems meet the demand for those renewing as well as those newly applying?
 - How are Marketplaces handling those consumers who were determined eligible for coverage but are not currently enrolled?
 - What types of volume mitigation strategies are Marketplaces employing? Are Marketplaces segmenting populations?
 - How are you translating policy decisions into your IT planning?
- 10:45-11:00 a.m. Break** **5th Floor Rotunda**

11:00 a.m. –
12:30 p.m.

Qualified Health Plan Enrollment

Esplanade

Leads: Manatt and Wakely

- How are states coordinating roles and responsibilities across Marketplaces, Departments of Insurance, and plan issuers?
- What level of changes – Essential Health Benefits (EHBs), benefit designs, pricing – are Marketplaces anticipating in their offerings? How do changes influence consumers and renewal processes? Are states using consumer impact analyses to inform consumer messaging?
- How will Marketplaces effectuate plan enrollment when the consumer does not respond? What does it mean to “remain in same plan”? Will states leverage the guaranteed renewability framework?
- How will plan differences be conveyed? How will changes in consumer’s subsidy eligibility as well as interaction between subsidy and plan differences be conveyed?
- To what extent are Marketplaces encouraging consumers to shop?
- What changes in functionality and/or business rules are required for your IT systems/website/consumer portal? Will there be new features or functionality in the shopping experience for those renewing coverage (e.g., comparisons to existing coverage)?

12:30–1:45 p.m.

Lunch/Move to Breakout Rooms

5th Floor Rotunda

1:45–2:45 p.m.

Breakout Sessions

Medicaid Renewals

West Cedar (4th Floor)

Lead: Manatt

- How are states tackling Medicaid administrative renewals in 2014? Using pre-populated forms? Delaying Medicaid renewals? Seeking other federal flexibilities?
- How are states managing the transition from legacy systems to new integrated eligibility systems?

Coordination between Insurance Departments and Marketplaces

Esplanade

Lead: Georgetown

- How are states managing the interdependencies between Insurance Department issuer oversight and Marketplace QHP management and renewal administration?

2:45–3:00 p.m.

Move back to Plenary Room

3:00–4:00 p.m. Marketplace and Medicaid Intersections *Esplanade*
Lead: Manatt

- How are the Marketplace and Medicaid addressing transitions in coverage? To what extent is the process integrated? How are handoffs handled?
- What are approaches to coordinating or aligning renewal processes for mixed program families?

4:00–4:15 p.m. Break *5th Floor Rotunda*

4:15–5:15 p.m. Planning and Mitigation *Esplanade*
Leads: Manatt, Wakely, Georgetown, and GMMB

- What best practices can leverage to maximize coverage renewals and minimize disenrollment?
- What contingency plans have been contemplated?
- How are states navigating open questions?

5:15–6:30 p.m. Networking Reception *5th Floor Rotunda*

Friday, July 11

7:00–8:00 a.m. Breakfast *5th Floor Rotunda*

8:00–9:00 a.m. Consumer Impact Analysis *Esplanade*
Leads: Wakely and GMMB

Learn how modeling the impact of premium rate changes (before and after subsidies) and plan changes on QHP consumers can inform consumer and assistor education and messaging.

9:00–10:30 a.m. Consumer Notices *Esplanade*
Leads: Manatt and Georgetown

- What are potential approaches for messaging around complex topics, such as distinguishing between subsidy eligibility, QHP enrollment eligibility and coverage renewal, and interaction between subsidy level and plan changes?
- To what extent will Marketplaces be able to target messaging for various constituencies (e.g., individuals who do not have a valid tax authorization, individuals who received an eligibility determination but did not remain enrolled, individuals in mixed program families)?

- To what extent may communications be coordinated across Marketplaces, Departments of Insurance, and plan issuers? What does an ideal issuer notice look like and to what extent can DOI influence those messages?
- How can engagement with eligibility portals facilitate consumer education and choice?
- What changes/updates in functionality will be required for your noticing systems? To what extent will systems be able to tailor content?

10:30–10:45 a.m. Break *5th Floor Rotunda*

10:45 a.m. – Outreach and Communications *Esplanade*
12:10 p.m. *Lead: GMMB*

- States are faced with the dual challenge of reaching new customers during the open enrollment period while re-engaging existing enrollees on renewal. How are states managing the development and deployment of these dual messages?
- What tactics are you considering for direct outreach (e.g., mailing, outbound calls, etc.) to take advantage of knowing your target population?
- How are Marketplaces planning to leverage existing communication channels? (e.g., assisters, brokers/agents, DOI consumer assistance divisions)
- What training is necessary for the call center, eligibility workers and assisters?
- How will you stage communication to get a head start on renewal messages (versus outreach to new enrollees)?

12:10–12:15 p.m. Wrap-up and Closing *Esplanade*

- What are the next steps for broad-based or state-specific technical assistance?