



*The Commonwealth of Massachusetts  
Commonwealth Health Insurance Connector Authority  
100 City Hall Plaza, 6<sup>th</sup> floor  
Boston, MA 02108*

DEVAL PATRICK  
Governor

GLEN SHOR  
Board Chair

JEAN YANG  
Executive Director

**Board of the Commonwealth Health Insurance Connector Authority**

**Minutes**

Thursday, September 12, 2013  
9:00 AM to 12:00 PM  
One Ashburton Place  
Boston, MA 02108  
21<sup>st</sup> Floor Conference Room

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**Attendees:** Glen Shor, Jean Yang, Nancy Turnbull, Louis Malzone, Ian Duncan, Dolores Mitchell, Kristin Thorn, George Gonser, Celia Wcislo and Jonathan Gruber. Kevin Beagan attended in place of Joseph Murphy. Andres Lopez was absent.

The meeting was called to order at 9:08 AM.

- I. Minutes:** The minutes of the July 11, 2013 meeting were approved by unanimous vote.
  
- II. Executive Director's Report:** Jean Yang began by reporting on membership. She stated that both programs experienced growth. She then discussed Commonwealth Care annual open enrollment, stating that 2.8 percent of members switched health plans in the past year. She also mentioned that nearly 6,000 members enrolled during the Commonwealth Choice open enrollment period and that this was a notable increase from last year. She stated that both programs were at an all-time high with 256,581 members enrolled in the Health Connector (CCA). Ms. Yang then discussed preparations being done in advance of federal open enrollment. She stated that CCA had undergone a federal Operational Readiness Review (ORR), a required step before open enrollment. She also mentioned that CCA had opened its customer service contact center on September 3<sup>rd</sup> and that customer service representatives were already taking calls and getting individuals ready for open enrollment. Ms. Yang further discussed the series of outreach activities being done by CCA, including employer roadshows in partnership with the Associated Industries of Massachusetts (AIM) as well as a Navigator roll-out tour. Ms. Yang also mentioned the development of

collateral materials put together by CCA staff. Ms. Yang then introduced Kristin McCarthy and Ashley Hague to present a recently developed video on Wellness Track, CCA's small business wellness program.

**III. Final Award of 2014 Seal of Approval (VOTE):** The PowerPoint presentation "Final Award of 2014 Seal of Approval (VOTE)" was presented by Ashley Hague, Allison Kean and Michael Norton. Ashley Hague began the presentation by explaining that Sarah Bushold, who has been a key player, was unable to present and that she would be presenting in her stead. Ms. Hague provided a brief introduction, explaining that these plans are for the advent of federal open enrollment for 2014 and that CCA evaluated its own shelf and the broader market when making plan design decisions. Ms. Hague then discussed the development of ConnectorCare plans, a key focus of the Seal of Approval (SoA) process. She stated that this has been a lot of hard work not only for CCA staff, but also for CCA's carrier partners and the Division of Insurance (DOI). Ms. Mitchell asked why other state Marketplaces have not been as successful as CCA in partnering with many carriers. Ms. Hague stated that CCA has a strong relationship with the carriers they work with and that the carriers in Massachusetts have a strong commitment to serving the people of the Commonwealth. Mr. Beagan also added that some national carriers have left the Massachusetts market and that this may be due to the fact that it is a very different market than exists in other states. Ms. Kean noted that there are national dental carriers that are participating in the Massachusetts Marketplace. Ms. Hague continued by reminding the Board of the SoA process and the importance of the day's presentation in that CCA is now able to present rates, which are especially important for ConnectorCare plan selection.

Michael Norton then presented on the ConnectorCare program. He began by thanking the carriers and DOI for their rate review and network adequacy process. Mr. Norton then proceeded by providing a background on the ConnectorCare program, stating that CCA wanted to replicate the success of Commonwealth Care by providing additional state "wrap" dollars for non-Medicaid eligible individuals who fell between 0-300 percent of the federal poverty level (FPL). He further stated that in order to maximize the affordability of this program CCA took elements of previous procurements to select a subset of carriers with competitive pricing. Mr. Norton announced the following ConnectorCare carriers: Boston Medical Center HealthNet Plan, CeltiCare, Fallon Community Health Plan, Health New England, Neighborhood Health Plan, Network Health and Minuteman Health. Mr. Norton explained that issuers were chosen based on their rates, their network, their ability to serve this population and overall value. Mr. Norton continued by stating that in addition to the comparable rates for enrollees, enrollees will by and large have much greater choice in selecting carriers in their region for ConnectorCare. Ms. Hague clarified that in each zip code there were a maximum of five carriers available. Ms. Turnbull asked whether individuals currently enrolled in Commonwealth Care would have their current carrier in their zip code for ConnectorCare. Mr. Norton stated that there is a great amount of overlap and complementary networks, which also ensures that individuals have a good chance of keeping their providers. Mr. Norton then showed a comparison between Fiscal Year 2013 (FY13) Commonwealth Care premiums and 2014 ConnectorCare premiums,

illustrating the similarities in premiums achieved. Ms. Turnbull commented that it is wonderful to be able to preserve affordable coverage in Massachusetts since 2006 and congratulated those who were able to figure out this design to keep us at the forefront of the nation. Secretary Shor also lauded MassHealth for their work in conceptualizing this approach with CCA. Ms. Hague thanked the carriers and the Legislature stressing that, had it not been for the rates submitted by the carriers, the state would have been unable to reinvest the dollars appropriated in order to get comparable premiums to Commonwealth Care.

Ms. Hague then provided an overview of the rest of the Qualified Health Plan (QHP) product shelf, stating that all existing carriers have returned and that a new entrant, Minuteman Health, has joined. She also stated that in addition to standardized plan designs, there will also be non-standardized plans to offer diversity and products that have market popularity. Ms. Hague announced that the average base rate increase was held at 1.9 percent, which is a testament to work done by DOI and the carriers, and will be a great advantage to members. Mr. Beagan explained further that this was a very condensed process and that the average of 1.9 percent shows the benefits of the risk adjustment program as well as cost containment efforts by the Patrick Administration. Ms. Hague then showed the standardized plan premium ranges for each of the metallic tiers based on a 40-year-old in central Massachusetts where all plans are represented. Ms. Hague emphasized that populations under 300 percent FPL will be eligible for ConnectorCare and that those 300-400 percent FPL will be eligible for advanced premium tax credits (APTCs). Further, she stated that small businesses may be eligible for the small business health care tax credit as well as the Wellness Track rebate through CCA.

Ms. Kean began her presentation on Qualified Dental Plans (QDPs) by thanking DOI for their assistance throughout the process. She continued by announcing that CCA is recommending the award of final SoA to 24 of the 31 plans that received the conditional SoA and that these plans will provide a meaningful choice for consumers. Ms. Kean then showed an overview of sample premiums for small and non-group plans, reminding the Board that there is no merged market for dental insurance so the rates differ based upon rating factors and risk pools. Ms. Kean explained that of the final product shelf for QDPs, there will be 12 small group products and 12 non-group products. She thanked the dental carriers for their hard work and for being a pleasure to work with. Mr. Gruber asked whether the pediatric dental requirement was met simply by being offered by CCA. Ms. Kean answered that this was true. Mr. Duncan asked whether the pediatric dental rates were per child. Ms. Kean answered that this was correct.

The Board voted unanimously to award the final Seal of Approval for 2014 for qualified health plans and qualified dental plans to ten medical issuers and five dental carriers, as outlined by staff, subject to final agreement on contract.

**IV. National Health Care Reform Implementation Update:** The PowerPoint presentation “Fiscal Year 2013 Year in Review & Fiscal Year 2014 Goals” was

presented by Ashley Hague, Jen Bullock and Roni Mansur. Mr. Mansur began the presentation by providing an update on the HIX/IES project. He explained that this project allows CCA not only to meet the requirements of the ACA, but also to revamp the eligibility process and shopping experience for individuals seeking health insurance. He explained that CCA is also looking to leverage the HIX/IES platform to determine eligibility for other government programs in the future. Mr. Mansur stated that HIX/IES is now in the final stages of testing code, that connectivity testing has been completed as well as end-to-end testing. Ms. Wcislo asked what end-to-end testing was. Mr. Mansur explained that testing often happens in components first and then once those have been tested, you test all of the components together. Mr. Mansur stated that performance testing is ongoing. Ms. Turnbull asked whether the federal hub was up and running. Mr. Mansur answered that it was and that CCA had successfully connected to the federal systems as part of their testing.

Ms. Bullock began her presentation by stating that Health Connector 2.0 will be ready on October 1, 2013 and that new products will be sold at that time. Ms. Wcislo asked what products people will be able to enroll in. Ms. Hague explained that CCA's doors are always open and that 1.0 products and 2.0 products will be sold simultaneously for a period of time, depending on when coverage is needed. Ms. Wcislo then asked about transition for Commonwealth Care members. Ms. Hague explained that some individuals will be automatically mapped into MassHealth and some will have to re-apply for coverage through CCA. Ms. Bullock then provided a customer service and operations overview. She discussed the recent launch of the new contact center, stating that CCA has been working on implementation since March. She explained that CCA has the ability to add staff during open enrollment so that CCA is always able to serve members and applicants. Ms. Bullock stated that, in addition to the Boston walk-in center, CCA has also set up a new Worcester walk-in center. Ms. Bullock then explained that CCA will continue to manage existing programs throughout the transition period and that there will be a management process in place to ensure that everything runs smoothly and receives proper attention. She then provided a brief update on appeals and risk management. Mr. Gruber asked whether CCA was receiving data from the All Payer Claims Database (APCD) for risk adjustment. Ms. Yang answered that carriers have submitted data and the Center for Health Information and Analysis (CHIA) will have to aggregate the data but that the process was in a good place.

Ms. Hague then proceeded to discuss outreach and member transitions. She stated that CCA has been working diligently with staff, MassHealth and other partners on an outreach and education campaign. She explained that this campaign is meant to target the entire Commonwealth to educate them about the ACA and to effectuate member transitions. Ms. Hague then discussed two of the channels for this campaign – outbound calling and direct mail and e-mail. She stated that scripts have been recorded for the calling campaign and have been tailored to the various transitioning populations including Medical Security Program (MSP), Children's Medical Security Plan (CMSP), Insurance Partnership (IP), Commonwealth Care, as well as individuals who are in Health Safety Net (HSN) or who are eligible but unenrolled. Ms. Hague further stated

that CCA is undergoing a rebranding effort so that people realize that changes are taking place at CCA. She mentioned that rebranding postcards had been sent to current members and that calls have already been received to ask about changes. Ms. Hague discussed the development of open enrollment packets that will be sent to eligible individuals during open enrollment. Ms. Hague then discussed work being done with enrollment assisters including Navigators, Certified Application Counselors and Brokers. Ms. Turnbull asked whether there was a way in which outreach could target the uninsured. Ms. Hague explained that data is not available to target those individuals through the Department of Revenue (DOR), but that the Navigator and Certified Application Counselor programs were structured to target those areas where the uninsured may reside. Ms. Hague then gave a brief overview of the Navigator tours and Employer roadshows bring done throughout the state as well as the fall media campaign. Ms. Hague also explained that CCA has set up a Public Information Unit (PIU) and has created a collection of collateral materials for a variety of populations. Finally, Ms. Hague discussed CCA's partnership with Health Care for All (HCFA) in performing outreach and education. Mr. Gruber asked whether work could be done with HCFA to outreach the uninsured. Ms. Hague explained that is very much in the interest of both CCA and HCFA. Mr. Mansur finished the presentation by providing an overview of recent federal milestones including the ORR and Authority to Connect (ATC) with the federal hub.

- V. **Outbound Call Campaign (VOTE):** The PowerPoint presentation, "Outbound Call Campaign (VOTE): Dell Services Change Order" was presented by Jen Bullock and Rebekah Diamond. Ms. Diamond opened by providing an overview of the outbound call campaign, which will target existing CCA enrollees and members transitioning from other state health insurance programs. Mr. Gruber asked why Medicaid members are not part of the outbound call campaign. Ms. Diamond replied that Medicaid members will be automatically transitioned to their new plan and will not need to take any action. The goal of this campaign is to target members who need to actively enroll in a new plan. Ms. Turnbull asked if MassHealth will communicate with Commonwealth Care members who are not able to remain with their current Managed Care Organization (MCO). Ms. Thorn responded that MassHealth is conducting a separate outreach effort to contact members who will need to change their MCO due to transitioning from Commonwealth Care to MassHealth to help them understand this transition.

Ms. Diamond continued by reviewing the target populations of the campaign with the Board. During this discussion, the fact that CMSP does not meet Minimum Essential Coverage (MEC) was raised. Mr. Malzone and Ms. Turnbull inquired as to why CMSP will continue as a program if it does not meet MEC and asked what CSMP will be directed to do to obtain MEC. Ms. Bullock informed the Board that CMSP members will be given information about purchasing a Qualified Health Plan through CCA as an option for obtaining MEC through the call campaign. Ms. Bullock said she would return to the Board with more information on the future of CMSP.

Next, discussion transitioned to the features of the outbound call campaign. Ms. Weislo asked if customer service representatives will be making calls as part of the campaign. Ms. Bullock replied that a team, separate from the team of customer service representatives, will be dedicated to the call campaign, and added that this team will be trained in the same way as customer service representatives. Ms. Turnbull asked if CCA knows what percentage of current Commonwealth Care members have accurate phone numbers on file at the CCA. Ms. Bullock responded that this will not be known for sure until the campaign starts. She stated that members who cannot be reached by phone will be sent mailings and that CCA's customer service has been working to verify contact information with current members as they contact customer service. Ms. Weislo asked if the call scripts to be utilized by the outbound automated calls have been tested on the general public. In response, Ms. Bullock said that these scripts have not been tested on the general public. However, CCA will have the ability to adjust later recordings to incorporate feedback from members. Ms. Weislo suggested that CCA test the automated call scripts on twenty people in the general public.

Ms. Bullock continued by reviewing the contract terms and price details of the change order. Mr. Gonser asked why the outbound call campaign is being handled as a change order and was not included in CCA's contract with Dell. Ms. Bullock answered that the original request for responses (RFR) issued to contract a customer service vendor was focused on the ongoing customer service and operations support that would be provided by the selected vendor. The RFR and associated contract did not focus on this one-time activity of conducting an outbound call campaign. Ms. Yang added that originally CCA wanted to be able to transition existing members in a passive way, not requiring them to actively re-enroll. However, after the contract with Dell was signed, it was determined that adopting a passive approach for these members was not permissible, thus making the separate change order a necessity. Ms. Turnbull asked if CCA feels that the penalties associated with the change order are substantial enough to motivate Dell, which Ms. Bullock confirmed. Ms. Hague added that membership is the primary driver of Dell's compensation for providing customer service and operations services. Therefore, it is in Dell's best interest to convert as many existing members as possible to QHPs, which aligns with the goals of the outbound call campaign. Ms. Turnbull expressed her belief that this call campaign is a necessary step to ensure that ground is not lost in insuring the population of Massachusetts. The Board voted unanimously to authorize the Executive Director to execute a change order to the contract with Dell Marketing, L.P. for Dell to perform outbound call center services on the terms outlined by staff.

The meeting was adjourned at 11:42 AM.

Respectfully submitted,  
Rebekah D. Diamond  
Andrew J. Graham