

NMHIX	Board Meeting June 7 th , 2013 from 9 am to 5 pm Albuquerque Convention Center 401 2nd St NW, Albuquerque, NM 87102			
Facilitator:	Dr. J.R. Damron			
Appointees Required by State Statutes:	Superintendent of Insurance John Franchini, Santa Fe NM Human Services Department, Cabinet Secretary Sidonie Squier, Santa Fe			
Governor Appointees:	Dr. J.R. Damron, Santa Fe Terriane Everhart, Las Cruces Gabriel Parra, Albuquerque Ben Slocum, Albuquerque Dr. J. Deane Waldman, Albuquerque			
Legislative Appointees:	Teresa Gomez, Albuquerque (via Conference Call) Dr. Martin Hickey, Albuquerque Dr. Larry Leaming, Portales Patsy Romero, Santa Fe Jason Sandel, Aztec David Shaw, Lovington			
Absentees:				
Attachments:	1. Agenda			
Quorum	YES			
Agenda Topics:	Call To Order; Review Minutes and Chairman's Remarks- Dr. J.R. Damron			
Discussion:	Conclusions:	Action Items:	Responsibility:	Due:
Meeting called to order at 9:15 am by Dr. J.R. Damron. Enrollment day is October 1, 2013 we've got a lot to do in 116 days. The board has met 4 1/2 days in just five weeks. Many of the meetings have occurred in committees. This is a policymaking board we decide the goals and the objectives for the exchange and we leave it to the CEO and his staff to accomplish the set goals. Very proud of this group of directors for their unselfish contribution of time and talents to bring us to where we are today.		Motion to approved May 16 th and 17 th Board minutes, motion made by Mr. Shaw. Seconded: by Mr. Slocum		
Agenda Topics:	Standing Committees Reports			
Discussion:	Conclusions:	Action Items:	Responsibility:	Due:
<u>Finance, Operations and Benefits Committee by Patsy Romero:</u> We allowed Mr. Nuñez to contract with an attorney. On Board we have Long, Pound & Komer, P. A. We were able to get an RFP out to receive permanent legal services for the Alliance/ Exchange. The committee approved a transition plan to move Alliance to				

<p>NMHIX; that transition plan will be presented to you later on the agenda. The committee has looked at the plan of operation; we've gotten some legal opinions about the current plan of operations, we hope to have a final document for you on June 28th. Also, the committee spent an extensive amount of time looking at the proposed budget, it is not finalized at this point. Depends upon our meeting with the chairman of the Marketing Committee and the Native American Committee. Those committees have done a lot of work and we need to determine what their needs are and going to be, before we put numbers to that project. So we will be meeting on June 20th in Santa Fe, and we will present a final budget for approval to the board on June 28th. We had several discussions about a strategic planning; in order to determine a sustainability plan as we move forward financially.</p> <p><u>IT Committee by Mr. Ben Slocum:</u> IT committee met yesterday. The purpose of the meeting was to visit with the selected vendors; IT solutions "GetInsured" as well as the "Public Consulting Group" (PCG), the objective was to understand where they are at this point. Discussed with committee contracting with both of those entities. We will be using an extra law firm that specializes in legal review of IT contracting as we need to get those contracts executed effectively. GetInsured and PCG are actively engaged with us at this point.</p> <p>In the interim, both organizations will be reporting to the IT committee. We welcome participation from the IT Committee for updates on a regular basis to all board members so they can be aware of day-to-day activity. PCG or GetInsured are here in the room; could you please stand and introduced yourselves.</p> <p>Closing comments; the committee will engage with Ms. Romero and the Finance Committee on any open issues we may have on expense line items regarding these two vendors; we do know we need to cover the interface costs, it has to happen ultimately with the state and we have to understand the costs associated with building out that interface and make sure that it's accounted for properly as part of the overall IT cost. We will work very closely with HSD and their technology team to map out both timing and responsibilities and ultimately get to negotiate a cost structure with our vendors.</p> <p><u>Presentation showing high-level overview of NMHIX roadmap and timeline; broken out on different phases of the project, by Mike Nunez and Chad Kirkpatrick (GetInsured).</u> 30-75-120 days plan</p>	<p>Any major policy making decisions regarding the IT system is going to be brought to board members.</p> <p>Process for enrollment should be set up in an effective and seamless way, so people actually enroll.</p>			
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<p>14 Days; Workspace ; Sign Contract; Establish PMO; Establish Guiding Principles; Project Team Structure; Schedule recurring project meetings; Determine project tools and templates.</p> <p>30 Days: Identify key dependencies; Monitor project issues / risks; Identify external stakeholders; Schedule and Conduct Product Review sessions for Phase I; Plan needs and resources for Gate reviews.</p> <p>75 Days; Finalize Integrated Project Management Plan; Infrastructure live; Product release alignment; Broker and Plan Management modules in the Test Environment; Prepare UAT environment; Prepare training materials, hold broker and carrier training; Support Gate Review deliverables.</p> <p>120 Days; Broker and Plan Management In-Production; Client acceptance of SHOP modules; SHOP Employer module in go-live prep; Prepare training materials, hold customer support training; Deliver and plan for product maintenance and support.</p> <p><u>Native American Committee by Jason Sandel:</u></p> <p>There was a meeting on Wednesday, June 4th of the Native American stakeholders who were invited to attend a meeting at the request of Sen. Benny Shendo; he was representing the Pueblo Insurance Agency (PIA) at the time. PIA wishes to inform the group about their intention to pursue some of the components of the American Indian Service Center which may be established under the New Mexico Insurance Exchange. At that meeting were director Teresa Gomez, our Chairman Dr. Damron, and Executive Director, Nuñez. Also attended that meeting The Coalition of Indian Aging Center for the Native American, Women's Law Center as well as the PIA. This meeting was not an official Health Insurance Exchange Native American Committee meeting; it was a meeting called by the PIA.</p> <p>At the June 4th meeting a concern about access to adequate health care to current and most vulnerable citizens was discussed. It's important that we ensure to keep the issues clearly delineated between PIA and HIX.</p> <p>This board, state tribes and federal government have been engaged in a wide variety of policy initiatives including healthcare reform, Medicaid expansion, Centennial Care and Health Insurance Exchange for several years and their agency is having an active voice, looking at to how we can work together and how we can integrate the efforts already done. The Native American Advisory Committee has not yet formed, it's been a bit slower on coming together than we had anticipated, but it's not for any other reason than just trying to make logistics work. We will be focusing on reviewing and approving a job description for the Native American Liaison.</p>	<p>Chairwoman Gomez has called for the first meeting of the Native American Affairs Committee to be on June 11th at 3:00 PM at the Futures for Children Learning Center located at 9600 Tennyson St. NE in Albuquerque.</p>			
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<p>Also, we will bring to this board for final approval a plan for the implementation of the American Indian Service Center.</p> <p><u>Marketing PR and Outreach Committee by Dr. Martin Hickey:</u> The committee met this morning at 7:30. I would like to thank committee members Sec. Squire Gabe Parra, Terri Lynn, Celia Ameline and David Shaw. We have some proposals for the board on how to move forward and get this important process executed in a timely way so we can get navigators trained and we can have the public informed about the exchange and their opportunities.</p> <p>The committee was essentially charged to come up with an RFP for marketing and to develop an outreach program process. We put together a group of experts to look at the RFP that Mike had originally constructed when HIA was putting together activities for the exchange. We came up with essentially three areas of focus; Actual Marketing of information and the whole marketing process; the product, price and place; includes new logo, maybe a new name and maybe some taglines. Media production for ads to go on television, radio, social media even app store, twitter and so forth.</p> <p>Second - construction of educational materials. Single marketing firms that might or might not have that; decided to construct another RFP which certainly a marketing firm could bid on or combine with another group.</p> <p>Third - public relations; getting to the media, setting up meetings, editorial, and handling potentially negative publicity or crises.</p> <p>Gabriel Parra put together the marketing oversight contract, for a marketing oversight individual; a contract for at least six months. This is a second position apart from the Outreach Director.</p> <p>Last Thursday we held a two-hour open meeting for anyone who wanted to comment on any aspect of marketing and outreach. The meeting was attended by about 60 or 70 individuals; it was essentially all comments. I have the transcription of all of their comments. We learned about existence of various organizations community health charities, health representatives from the different pueblos and particularly from the Navajo nation. We learned that many hospitals particularly the rural hospitals are already doing outreach to get people signed up. On behalf of the board our appreciation for all of you who were at that meeting.</p> <p>On June 3rd we met with Mike and some other management; we decided that we would extend the application for the director of outreach for one more week and actually change it from a managerial position to a director title because it is going to be</p>				
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<p>an incredible amount of work.</p> <p>On June 5th, the group that I initially talked about came together to turn in our RFPs. We are asking Mike, with the assistance of PCG and the comments that you send in, to focus on the three areas. We want to be clear, if any company who are public relations, educational materials or marketing could subcontract work with others or propose all three contracts with one bid, (the key is that we don't duplicate and don't overlap). While there are three RFPs, they certainly can be combined all into one.</p> <p>We also said that we were very interested in New Mexico organizations/ companies bidding but we also want to be sure that if there are national companies in other states who have demonstrated good work, that they have the opportunity to bid but they need to be very cognizant of using New Mexico personnel.</p> <p>We will have a scoring process around these marketing RFPs. We want to be clear, who would be reviewing these contracts; certainly no one with a conflict of interest. We will be asking for one person from the public; if you're interested and you do not have any conflict let myself or Mike know. We want to coordinate with the Native American Committee for a person without a conflict of interest, and I have asked Terri to find marketing leaders who are outside of the health plan process. Any board member who wants to also participate in the interviews for Outreach Director is more than welcome. We will have a standard uniform interview scoring sheet. Ultimately Mike will need to make the final selection. Once that individual is on board that individual along with Mike will set up an RFI, information to get the navigators in place. Mike will explain the process.</p> <p>This committee again would like to thank people for all the work they have done.</p> <p><u>RFI path for Outreach by Mike Nuñez:</u></p> <p>Information to request for a nonprofit profile and managed to get information on company mission statement; how long have they been operating; what population do they serve today; serve statewide, regional or a specific area or specific population; what's the organizational structure. What we are trying to do is find organizations that have experienced people who could supervise lesser experienced people (that's okay as long as we have them within the organization). The end goal is to figure out the projected number of population that they can reach out to; with that estimate, we develop a number that we think will be enrolled. There are about 60 to 70 organizations that do this type of work around the state; we are trying to figure out who they are, and where they are. We believe our processes to find</p>	<p>The Outreach Director and staff will assist Mike to bring alternatives to the board; come up with the several options to review the pros and cons of those options and the viewpoints of non-profits organization vs. profit organization and compensation for assisters.</p>			
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<p>a nonprofit entity or entities matter because we are not trying to take on the management of the 60 or 70 organizations, instead we are trying to find organizations that can help with the process.</p> <p>Chambers of Commerce might be able to offer us office hours or bookstore (brick-and-mortar) that we can use to put brokers, assisters or navigators into those locations in a post office hours. Also, we were thinking about compensation per successful application. Across the country we have numbers of about \$26 per hour for assisters. About \$47 or so dollars for the management of assisters. We can try to come up with a target something between \$35 and \$50 per successful application that comes to the exchange; we also realize that we need to give some for outreach efforts.</p>				
Agenda Topics:	NMMIP Update and Discussion - Jason Sandel			
Discussion:	Conclusions:	Action Items:	Responsibility:	Due:
<p>The federal government has abandoned 1,500 critically ill New Mexicans across the state. Insurance carriers through the assessment process with an amendment have stepped up to ensure care for them. Insurance carriers deserve the gratitude of me, the pool board and others throughout the state, so thank you.</p> <p>As said during last meeting we really have to sit down and have a discussion about what transition is going to look like from the pool to the exchange. Right now we are trying to establish a special meeting, tentatively suggested the 27th.</p> <p>10,000 people in round numbers are about \$200 million in claims and the insurance carriers have been paying through this assessment process about \$150 million over the past couple of years to provide coverage. The state also provides a premium tax credit back to the insurance carriers in variable amount sometimes 50% to 70% based on who the enrollee is, and so the state has an invested interest in this program too.</p> <p>These individuals are going to come into the private market and are going to influence rates settings.</p>	<p>NMMIP transition will be a discussion item after their meeting on June 27th.</p> <p>Encourage the high risk pool potentially to contact Deloitte who probably is the expert in how the reinsurance can work.</p> <p>The transition of the high risk pool and into the exchange dramatically affect the viability of the exchange and the ability to keep what the exchange is all about; a real true competition in the market.</p>			
Agenda Topics:	Public Comment			
Discussion:	Conclusions:	Action Items:	Responsibility:	Due:
<p>Comments regarding the Exchange Bill: the laws it passed over several years of debate, negotiations, establishing operating exchanges, a huge challenge and require our best collective efforts no right or wrong approach.</p> <p>Given the numbers of providers and issuers on this initial board is critical that all members individually in the board as a whole state cognizant of your personal and professional interests and conflicts and worked really on behalf of all New Mexicans. In saying that, it is not in any way to imply that you're not, by any</p>				

<p>means, just wanted to reinforce this and get it on the record the absolute importance of this given that this board is a bit different than some of us had envisioned it even after the bill was passed. The final comment, full communication and transparency. I can imagine the amount of work like you and your staff are doing out overwhelming, however, it's critical that we get notified of meetings so we can attend. The minutes are critical; I haven't been able to find the minutes from your last meeting.</p> <p>Mr. Mason with League of Women Voters of New Mexico: About the information, reinforcing previous comments; minutes presentations would really appreciate having those available. Second - because the exchange receives federal funding they are required to offer voter registration to all people who encounter the health insurance exchange. Third - there are or supposed to be, multistate plans available on exchanges, maybe at the next meeting we could have some report on where New Mexico stands.</p> <p>Mr. Blue Horse; we want to know how tribal consultation will be like, when the meetings will occur, who will be at the meetings, who will be invited, and would they be accessible in the Indian country. Native American Committee for this health insurance exchange board would normally be holding meetings in the metropolitan areas for the benefits of urban Native American members but also in tribal communities and with the health directors of health leadership both for the tribal councils as well as the tribal health program directors and program managers to receive comments on exactly how consultation would be developed to identify those issues for consultation. More importantly how urban Native Americans would benefit from the health insurance exchange and from the very complex bill would still be unfolding in the coming years.</p> <p>Second - as far as consultation goes, there is a question because health insurance companies are nongovernmental entities and usually to consultations are between government to government. Third - the marketing component needs to include the Native American component to it so that everything is in line with the unfolding of it and dynamic consultation efforts of the health insurance exchange board.</p>				
Agenda Topics:	Executive Session			
Discussion:	Conclusions:	Action Items:	Responsibility:	Due:
	Board of Director returned from Executive Session with no decision made.	Motion to move to go into executive session it's immediately subsequent to lunch for the purpose of discussing executive		

		compensation and personnel by Jason Sandel. Roll call vote unanimously. Motion to adjourn for lunch Dr. Waldman Second: Mr. Slocum		
Agenda Topics:	Interim CEO Report - Mike Nuñez			
Discussion:	Conclusions:	Action Items:	Responsibility:	Due:
<p>CCIIO requested that NMHIX provide information & updates on our Exchange model and approach.</p> <p>Specifically requested NMHIX outline plans and progress for the following key activities:</p> <p>Consumer and Stakeholder Engagement and Small Business Health Options Program (SHOP)</p> <p>NMHIX will:</p> <p>Establishing various advisory committees for stakeholder input.</p> <p>Establish monthly stakeholder meetings.</p> <p>Stakeholder advisory groups will provide input to the standing committees of the NMHIX who will in turn make recommendations to the full NMHIX board.</p> <p>Informal stakeholder input is being obtained prior to the formal establishment of the groups for items of urgency.</p> <p>For example, key stakeholders met on May 30 to provide input to the marketing RFP being developed and as a result of that meeting multiple RFPs may be issued for marketing activities to reach targeted, specific populations throughout the state.</p> <p>NMHIX will/has:</p> <p>Develop a comprehensive outreach and marketing plan to address a wide range of strategies to reach New Mexico's diverse demographics.</p> <p>Finalize a RFP for marketing/outreach which is anticipated to be released on or about June 15, 2013.</p> <p>Execute a marketing/outreach contract on or about by July 7, 2013</p> <p>Proposed general public marketing channels (in English and Spanish) for the general public and for Native Americans</p> <p>NMHIX is:</p> <p>Awaiting additional federal guidance on the call center function and coordination</p> <p>Working towards a New Mexico "triage" call center to address unresolved federal call center issues during the interim period in which New Mexico will rely on federal platform functions.</p> <p>Investigating the possibility of developing its own SHOP call center or obtaining those services through outsourcing.</p> <p>We intend to leverage and reuse other states' work for Navigators/In-Person Assisters.</p>				

<p>PCG, has been engaged by RI, DE and AK over the last year to develop similar programs. NMHIX will review Navigator/Assister programs, training and collateral material from other states and modify and adapt these programs to meet the needs in New Mexico.</p> <p>This work is now underway and an in-person assister RFP is being developed for release projected for June 15, 2013.</p> <p>Agents and brokers who wish to sell NMHIX products will be required to meet licensing requirements and take additional training on NMHIX protocols.</p> <p>Agents and brokers will register with NMHIX as required by rule, receive training on QHP options and other publicly subsidized insurance programs, and comply with NMHIX privacy and security standards.</p> <p>NMHIX will coordinate with DOI to create training and licensure requirements that are ACA-compliant.</p> <p>Web brokers will be delayed until the 2015 operational year.</p> <p>NMHIX will provide premium calculator and employer decision tool</p> <p>Use of Other States Artifacts: Most of GetInsured artifacts have been previously accepted by CMS.</p> <p>Website: The New Mexico front-facing website will route member information to either the SHOP or the federal individual exchange.</p> <p><u>NMHIA Transition Plan:</u></p> <p>To offer new or renew policies through December 1, 2013. Continue policies to their 2014 anniversary date or members terminate 12/31/13 to enroll in Exchange 1/1/2014.</p> <p>Billing, collection and assessment functions continue.</p> <p>NMHIA staff:</p> <p>To undergo assister, navigator, and federal call center training</p> <p>To become - Triage Center Representatives (TCRs) for escalated Federal call center calls. Federal call center guidelines not yet released.</p> <p>Trained on new NMHIX SHOP enrollment, billing & collection, and carrier remittance functions.</p> <p>Responsible for carrier and federal subsidy reconciliations.</p> <p>NMHIA Santa Fe office lease terminates on 2/28/14. Will relocate to new office space that will accommodate existing staff and public facing capability.</p> <p>Remaining NMHIA cash reserves and existing equipment will transfer to NMHIX effective January 1, 2015. Working on transition language and document with Finance Committee.</p> <p><u>NMHIX Staffing Discussion; Organization Chart</u></p> <p><u>June, 2013; Locations in Santa Fe and Albuquerque.</u></p> <p><u>NMHIX Advisory Committees:</u></p>				
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<p>Suggestion as to how advisory committees could work: Provide forum for feedback, suggestions and comments. Meet Monthly and will align with Board meeting schedule. Outreach & Stakeholder Manager will coordinate meetings & agendas and communicate board actions.</p> <p>Focus for coming months: Outreach and awareness coordination. Identification of In-person assisters. Coordination of training and distribution of educational and enrollment collateral.</p> <p>Advisory Committees consist of 6-8 members nominated by the Advisory groups. Committee members will be conduit by which larger stakeholder audience will provide feedback, input and comments to committee.</p> <p>Outreach and Stakeholder Manager will communicate Advisory Committee feedback, suggestions and comments to Board The outreach director manager is critical for this process to move forward so that's high on my priority list to get done; will address that in the coming days. Report or briefing of those committees to be in writing too. Advisory committees to be around New Mexico.</p> <p><u>Level 1 Grant Update:</u> It was Submitted May 15th Grant negotiations call with Feds to be held June 14, 2013 Expect CCIO questions and clarification letter by June 10th Grant funding expected on or about July 1, 2013 This is \$20M for Outreach and Education.</p> <p><u>Proposed Open Meeting Resolution by Nancy Long, Consulting Attorney with Long, Pound and Komer P. A. for NMHIX :</u> Open meetings act: There is a recent change this last legislative session that now requires agendas be made available three days prior to a meeting or 72 hours (it was previously 24 hours). That change was made in your resolution and goes into effect this month. The only change that I would recommend is that we amend it (it appears in three places in paragraph 1). Your agenda and your notice of meetings; regular meeting, special meetings, and notice of any emergency meetings be posted but also posted physically at the administrative office. Also, on the exchange tab of the New Mexico Health Insurance Alliance website, until your exchange website is up and running. Until we have the exchange website up and going will post the meeting materials including notice of meetings and the agenda. The notices are specifically for the board meetings and not committee meetings unless a committee is delegated authority</p>	<p>To have NMHIX website</p>	<p>Motion for approval of what will be resolution number 2013 – 001 so it is to reference the health insurance alliance as well as the health insurance exchange website and all references by Mr. Sandel, Second: by Mrs. Romero</p>		
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<p>to make a final decision. The law provides, your resolution that affects a committee is in the final decision-making capacity rather than recommending or advising; then that committee meeting would be noticed just as your board meetings are noticed, however, that's not your practice. <u>Inspection of Public Records Act:</u> Inspection of public records act requires that a notice be posted at your place of business one that provides for the procedures that someone would follow, which are consistent with the law on the inspection of public records act. We have prepared a notice that indicates to the records custodian is and how a person may go about requesting any public records from this board from the exchange. The notices in your packet are asking for your approval; we have reviewed it with Mr. Nuñez for the interim contact information accuracy and it will just be a notice posted at the office.</p>	<p>up and running as soon as possible. It's better to have that designation be general as long as the address is correct we've included an email address which had to be Mr. Nuñez's email but other than that we have it generally designated as records custodian and then the exchange can take care of it as they're able to in any given time.</p>	<p>Motion move for approval of Inspection of Public Records Act document. I would remove in that motion any reference to the name of a person and I would ask that the email address of record is in effect by Mr. Sandel. Second: by Dr. Learning.</p>		
<p>Agenda Topics:</p>	<p>HSD Update - Sean Pearson Chief Information Officer for HSD</p>			
<p>Discussion:</p>	<p>Conclusions:</p>	<p>Action Items:</p>	<p>Responsibility:</p>	<p>Due:</p>
<p>Aspen is an integrated case management system that we are currently implementing at Human Services Department. That system will be used to determine eligibility not only for Medicaid and CHIP but also for a variety of other human services programs that we operate at the agency. As part of that project we're also implemented or enhanced our online portal known as Yes New Mexico currently used by people who are interested to determine what benefits they could be eligible for, but we are enhancing that portal to actually allow people to apply for benefits. This will go live for folks to apply for benefits and MI eligibility functions October 1, 2013. Then February 1, 2014 we fully deployed the Aspen System. To simplified HIX eligibility process; someone who shows up at the exchange front door, whether online or application or whether by in person assister. Then there be some intake process that the exchange will go through; they would verify citizenship, legal status or lawful status, social security number, residency and possibly Native American verification. Then after the applicant has successfully passed there would be a Medicaid assessment. New Mexico made a decision that we are going to assess eligibility for Medicaid within the exchange not conduct a full determination; what that means is that anyone who is potentially eligible for Medicaid would be referred over to us through our Aspen system to determine full eligibility for Medicaid. Assuming that the person is not assessed Medicaid eligible then they would be assessed relatively for the subsidies known as</p>				

<p>advance premium tax credits or the cost-sharing reductions and based on that their eligibility be allowed to shop and compare and apply that information to the shop, and compare function within the website.</p> <p>Aspen is the record authority for determining Medicaid eligibility and will be responsible for referring folks over to the exchange once determined ineligible for Medicaid.</p> <p>Three triggers that would refer someone out to the exchange; one if they are ineligible, two if their case was closed for any reason and sometimes cases could be closed to someone who chooses not to recertify for Medicaid or three, could be because their application has exceeded the 45 day or 90 day time period that Medicaid has to determine eligibility. On the other side, if the exchange assesses someone that is potentially eligible for Medicaid we will send them over to us for a full determination for Medicaid. This is Aspen/ Federal relationship; on the individual side.</p> <p>There will be no direct link or interface to the shop.</p> <p><u>Exchange with Aspen:</u></p> <p>The board has decided to pursue a federally facilitated marketplace for the individual market; what will happen is our communications and our interfaces will go through the federal data services hub; (being able to refer people to the FFM), as well as, being able to receive referrals from them to our Aspen system).</p> <p>That federal data services hub also serves another purpose to allow health insurance exchanges as well as Medicaid agencies to utilize their verification sources to determine, as part of the eligibility process, verification of SSN, legal status or residency; those services actually are going to be offered up through the federal data services hub. Aspen project is in a user acceptance testing project phase until the end of this month and then will go to pilot mode in Rio Arriba County office in July 22nd. CMS has not released final documents for what they call the electronic account transfer service. That document tells us how we're supposed to connect with the federal data services hub and actually share information back and forth.</p> <p>Once we receive that information are several things that need to be done: Need to determine how our systems will talk to each other and then there's a rigorous process for testing with the feds on the connections with the federal data services hub.</p> <p>The different between Medicaid assessment and Medicaid eligibility is; that the feds are using older income information that is provided through the Internal Revenue Service to determine eligibility; where in New Mexico we are more concerned with current income information and we have electronic sources that</p>				
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<p>are available to us but not available to the feds; this is one thing that will be looking for; however, things such as verification of SSN, residency those sorts of things we will not be doing, this will be taken based on the information that they've provided us. Medicaid will take uploads from HIX and vice versa; What does the electronic referral looks like? That piece still unknown, waiting on the feds to provide this information. What they're contemplating is a real-time web service so that immediately once we determine someone is not eligible we would electronically refer that person's information or their application over to the federal exchange real-time format.</p> <p><u>NM and Medicaid Expansion by Mr. Brent Earnest</u></p> <p>On January 9, Governor Martinez announced that New Mexico would expand the Medicaid program under the Affordable Care Act.</p> <p>About 170,000 New Mexicans will be eligible for Medicaid under this expansion.</p> <p>About 130,000 projected to enroll in 2014 (combination of new adults, current SCI enrollees and other current enrollees in limited benefit programs).</p> <p>Total enrollment by the end of fiscal year 2014 estimated to be about 660,000.</p> <p>By 2020, we project up to 800,000 New Mexicans will be enrolled in the Medicaid program.</p> <p>Medicaid Spending and Enrollment FY14 Budget = \$4.35 billion total \$3.16 billion federal funds \$1.19 billion state funds (HSD General fund = \$921.2 million) 609,000 enrolled (avg); 660,000 (year end enrollment projection updated May 2013).</p> <p>General Fund appropriations for Medicaid have almost doubled since FY05.</p> <p>Medicaid makes up 18% of the state's general fund budget (FY14).</p> <p>Key Fiscal Issues for NM; NM's State Coverage Insurance Program, which provides a more commercial-like benefit package to about 40,000 adults who are not eligible for regular Medicaid. With expansion, the state receives higher FMAP for this population. Without expansion, NM would likely be required to discontinue coverage.</p> <p>Potential revenue impacts of expansion, in particular the state's health care insurance premium tax. Like all health insurers in the state.</p> <p>Medicaid managed care organizations pay a tax on premium revenue.</p>	<p>Making New Mexico financially attractive to</p>			
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Some of the high risks from a budget perspective are: High take up rate (rising near 80% by 2020) for woodwork effect and new enrollees. Also, Benchmark package (aka Alternative Benefit Plan) for expansion enrollees assumed to cost as much as current Medicaid benefit. Centennial Care will start education and Communication advertising beginning June/July.	providers, to resolve access to care which is a current problem will be a topic for future discussion.			
Agenda Topics	New Business			
Discussion:	Conclusions:	Action Items:	Responsibility:	Due:
-Next meeting June 28 th in Santa Fe -Other meeting dates are July 19 th ; August 16 th and September 13 th locations – TBD. -Plan of Operations; will be ready for approval June 28 th -There are media perspectives that need to be addressed. We need to start a series of communication about the exchange. Board needs to have some level of public relations guidance to have ongoing series (oriented types) of communications with the public.				
Agenda Topics	Public Comments			
Discussion:	Conclusions:	Action Items:	Responsibility:	Due:
Evelyn Blanchard: I am a member of the Pueblo of Laguna and I live here in Albuquerque; my comments are to request that the work of the Native American standing committee, slowdown to assure the participation of the Navajo and Apache people is assured on these deliberations. Also, I'm concerned that meeting on Tuesday which is being held at Chairwoman Gomez's place has no relationship to the exchange. The only connection between the content of that meeting and the exchange is Eric Lujan. The most important thing is that the committee called together all the tribes for a meeting; it will save you a whole lot of headache and time.	A request to Mr. Blue Horse to begin to build a list of contacts information so chairwoman of the committee can begin to share information with the tribes.			
Agenda Topics	Adjourned			
Discussion:	Conclusions:	Action Items:	Responsibility:	Due:
Adjourned 3:43 PM		Motion to Adjourned Dr. Waldman; Second: Mrs. Romero.		