beWellnm Board Meeting

Friday, November 15, 2019

CNM Workforce Training Center





THE PLACE TO SHOP, COMPARE AND BUY HEALTH INSURANCE. Affordably.



1. Welcome, Roll Call, & Confirmation of Quorum





2. Approval of Agenda





3. Approval of Minutes of the September 20, 2019, beWellnm Board Meeting





4. Chairman's Remarks





5. Matters from the CEO

Mr. Jeffery Bustamante, Interim CEO





Interim CEO Update

- Fraudulent beWellnm Plans
- **Analytics Update**
- Today's Meeting
 - Enrollment Projections
 - Open Enrollment Update
- January Meeting
 - Open Enrollment 2022 Decisions
 - SHOP Analysis
 - Post-Open Enrollment 2020 Review
 - Data Presentation
- Recognitions



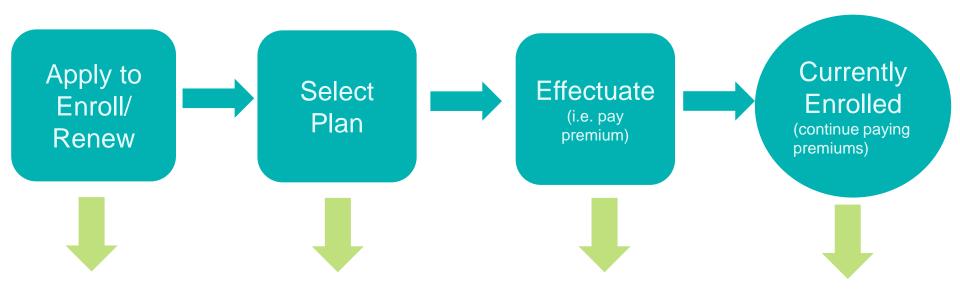


Enrollment Projections





Exchange Enrollment Definitions



Leave Enrollment Process





Considerations for 2020 Projections National

- CMS is no longer doing projections. Historically they have done national projections on plan selections and effectuation, which included Congressional Budget Office (CBO) projections.
- The lack of fine associated with being uninsured impacting people's decision-making.
- Texas v Azar
- Public Charge





Considerations for 2020 Projections New Mexico

Plan Discontinuance

- CHRISTUS will no longer be offering plans on the individual exchange.
 - Their enrollment was approximately 1,000-1,400 members.
- Effect on re-enrollment is unknown.
- beWellnm has been, and continues to be, proactive to educate and encourage these individuals to take action to remain covered.

Our projection is based on multiple data sources:

- National Projections from the Congressional Budget Office.
- Correspondence with New Mexico on-Exchange carriers about their projections.
- Quantitative analysis of national and local projections. Qualitative analysis of our current environment and factors that may impact enrollment (Plan Discontinuance).

The average enrollment projection accounts for effectuation, and the month-to-month fluctuations in enrollment. It is the median point between an entire range of what is most likely to happen. The number aligns with both national and local projections.





2020 NM Plan Selection & Effectuation Projection

2019 New Mexico OE Plan Selections 45,001

2020 Projected Renewals 32,500-35,500

2020 Projected New Plan Selections 12,000-14,000

Average 71.5% renewals over past 3 vears



2020 NM Plan Selection Projection 44,500-49,500

~15% drop off between plan selection and effectuation 2020 NM Effectuation Projection 38,000-42,000

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6. Committee Reports





a. Matters from the Native **American Committee**

Director Teresa Gomez, Committee Chair





Native American Program Update

Native American Advisory Committee

 BeWellnm Native American Advisory Committee meeting will be held December 3, 2019

Open Enrollment 2020 Media Road Show

- Radio Interviews Albuquerque, Santa Fe, Gallup,
 Farmington, Taos, Alamogordo, Los Alamos, Las Vegas,
 Roswell, Clovis and Hobbs
- Print Ad Interviews Alamogordo, Farmington, Hobbs and Albuquerque





Native American Program

Outreach and Enrollment Events			
Name of Event	Date	City	
2019 NB3 Healthy Kids! Healthy Futures National Conference	September 9 -10, 2019	Albuquerque	
Tesuque Health and Safety Fair	September 12, 2019	Santa Fe	
EPICS Conference	September 16 – 17, 2019	Albuquerque	
Enrollment Day in Gallup	October 2, 2019	Gallup	
Catch the Wellness Wave	October 3, 2019	Bernalillo	





Native American Program

Outreach and Enrollment Events Name of Event City **Date** Metropolitan Court's **Community Outreach** October 3, 2019 Albuquerque Day **Enrollment Day in** October 8, 2019 **Farmington** Farmington Enrollment Day in October 17, 2019 Ruidoso Mescalero/Ruidoso Native American Community Academy October 18, 2019 Albuquerque **Annual Feast Day**

October 19, 2019

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Mescalero

Stepping Into a Better
You! Health and

Wellness Day



Native American Program

Outreach and Enrollment Events			
Name of Event	Date	City	
2019 Navajo Technical University Red Ribbon Resource Fair	October 23, 2019	Crownpoint	
Alamo Wellness Fair	October 24, 2019	Alamo	
To'hajiilee Community School Bus Transportation Day	October 25, 2019	To'hajiilee	
Trick or Treat Fall Event	October 29, 2019	Crownpoint	





Native American Program Marketing

 6 panel handout that includes side by side piece that shows Indian Health Service covered benefits VS. Marketplace covered benefits.

Why is health insurance important for Native Americans?

Here are just a few reasons why it makes sense for you, your family and your community.

- Expanded access to care! You can get services such as doctor visits, preventative care, emergency room care and prescriptions.
 You may also continue to receive services at Indian Health Service.
- Health insurance covers emergency and specialty care outside of Indian health care systems.
- Native Americans may qualify for no-cost or low cost health insurance. Native Americans may not have to pay certain out-of-pocket costs.
- Native Americans can enroll right now.
 The sconer you enroll, the sconer you can have peace of mind knowing you and your family have access to quality health care.
- It supports Indian Health Service systems because health insurance can pay for care received at an IHS facility.

Everyoue who eurolls in a Cutalified Health Plan (CHP) through beWellim has access to a core set of benefits, called Essential Health Benefits (EHBs).

Fifs mus include lene and services while a lease the following 10 casperies:

Emergency Services

Emergency Services

Emergency Services

Macratin Jestination

Miserrity and newborn care

Miserrity and new care and decrease devices and devices

Miserrity and new care and chronic disease management

Need help getting started? We're here for you.

Call us at 833-ToBeWell [1-833-862-3935] to talk to a Native American Eurollment Counselor or vieit us online to locate a Cortified Eurollment Counselor near you. We'll take you through the process step-by-step, and our services are completely free.

HE PLACE TO SHOP, COMPARE AND BUY HEALTH BUSURANCE. Affordable





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Improving the health of our Native American communities.



Even with the uncertainty about healthcare, health insurance coverage is still a smart choice for every Native American, their family and their community.

However, many Native Americans do not have adequate healthous coverage, 1/2 not bocuses there is a lack of options, but rather because they may not be fully aware of their options. That's where bewelliam comes in Through bewellam, Native Americans have access to affordable health insurance plans that could complement their coverage through Indian Health Service. That means they may have access to comprehensive once which include benefits like emergency services, behavioral health services and proventive ourse.

If more Native Americans enroll in health insurance, the entire native population will benefit. Since Indian Health Service (IES) can bill private insurance for the clinical services provided, revenue is created within IES that can help preserve and/or surport exonasion. Native Americane also have access to premium assistance and cost-sharing plane that can greatly reduce or even eliminate monthly premiums, copeys, and deductibles. There's no reason to wait to earcell, because Native Americans can enroll in coverage throughout the year. Most importantly, earciling in coverage through bo Wellam provides peace of mind.

We need your help in spreading the word and educating the members of your Tribe, Pueblo or Nation about their health insurance options. Together, we can make sure no one in your community goes without health insurance.

BeWellm has staff roady to most one-on-one with you to talk more about the ways we can partner together in order to get more Native Americans enrolled in health insurance. Please contact Juliet Yazzie, beWellmar Native American Linison Manager, to set up a time to most and discuss how beWellmar can hap your community.

Juliet Yazzie can be reached at 505.314.5261 or wazzie@nmhix.com.



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Native American Program Marketing



Indian Health Service and The Health Insurance Marketplace:

O. Do patients have to do anything related to the Affordable Care Act?

A: Patients with insurance should check to ensure that their coverage meets requirements for minimum essential coverage. Patients who do not have insurance should review their options on healthcare.gov or should check with the Patient Benefits Coordinator at their local Indian Health

O. Do all Indian Health Service (IHS) patients have to enroll in the state or federal Marketplaces and buy

A: No. If individuals are already covered by private insurance that meets the definition of minimal essential coverage through their lob or through Medicare Medicald the Children's Health Insurance Program (CHIP), or other types of health coverage, they don't have to enroll in the Marketplace. THIS olimbia nationts who do not have health coverage can keep using IHS but, should still review coverage options. Or they may be eligible for Medicaid or a plan through the Marketplace.

application process for Native Americans? A: The Marketplace offers a streamlined application

process to help understand what benefits are available and which protections may apply. Certain protections apply to enrolled members of federallyrecognized tribes and Alaska Natives. By filling out one simple, user-friendly application, you will learn if you qualify for financial assistance through:

- 1. Advanced Premium Tax Credits to purchase coverage in the Marketplace,
- Cost Sharing Reductions that will reduce or eliminate out-of-pocket costs for services received through the Health Insurance Marketplace plan, or
- 3. Enrollment in CHIP or Medicald

Native Americans can apply for health insurance online, by phone, in person with an enrollment counselor or by mail. Visit our website to learn more!

O. What are the Special Enrollment Periods for

A: Members of federally recognized tribes are allowed to purchase and enroil in Marketplace health nsurance coverage monthly. If you aren't a member of a federally recognized tribe and don't qualify for a special enrollment period, you must enroll during the annual open enrollment period (November 1 -

O. What are the cost sharing exemptions for

A: If you enroil in a qualified health plan offered through beWellnm, you may qualify for savings on out-ofpocket costs (e.g., copays, coinsurance, deductibles, and other similar charges). If you are a member of a federally recognized tribe and your household income level, you will have no cost sharing for services covered by the health plan you choose.

O. Are there Co-pays for Native Americans when

A: Regardless of your household income, if you enroll in a plan through beWeilinm, there is no cost sharing if you continue to receive services from your Indian health care provider or through Purchased/Referred

There are also cost-sharing exemptions under the Medicald program for individuals who receive care from Indian Health Service or through a Purchased/ Referred Care (PRC) authorized referral.

NOTE: Even if you are not a member of a federallyrecognized tribe and your household income is below 250% of the faderal poverty level, you may be eligible for cost sharing reductions if you enroll in a Sliver Plan through the Health Insurance Marketniane

Marketplace Health **Insurance Plans**

While a Native American is not not exempt from paying monthly premiums for an insurance plan you buy through the Marketplace, like all Americans you may qualify for tax credits that lower your premiums based on your income.

Zero Cost Sharing Plan

A Zero cost sharing plan is a plan available to members of federally recognized tribes and Alaska Native Claims Settlement Act (ANCSA) Corporation shareholders whose income is between 100% and 300% of the federal poverty level and qualify for premium tax credits. People enrolled in this type of plan:

- Don't pay co-payments, deductibles, or coinsurance when getting care from an Indian health care provider or when getting essential health benefits through a Marketplace plan
- Don't need a referral from an Indian health care provider when getting essential health benefits through a
- Can get zero costs sharing with a plan at any metal level on the Marketplace

	Plan Lovel		
Example of Marketplace plans with zero cost sharing	Bronze	Silver	Gold
Plan type	HMO	HMO	HMO
Deductible	\$0 (individual rotal)	\$0 (individual rocal)	\$0 (individual rotal)
Out-of-pocket maximum	\$0 (individual rotal)	\$0 (individual rocal)	\$0 (individual rotal)
Copayments/Coinsurance Emergency Room Carte Generic Drugs Primary Doctor Specialiss	No charge No charge No charge No charge	No charge No charge No charge No charge	No charge No charge No charge No charge

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Services beyond **IHS** coverage



Qualified Health Plan Covered Services

This table shows you what healthcare services you can receive, beyond your IHS coverage, when you sign up for health insurance through beWellnm.

Services Covered:	Indian Health Service	Qualified Health Plans
Acupuncture		
Bartauric Surgery 1		
Chiropracsic Care		
Colonoscopy		
Diaberes Care		
Diagnoseic Test (X-Ray/bloodwork)		
Durable Medical Equipmene ²		
Emergency Care ³		
Emergency Medical Transponation ²		
Emergency Room ²		
Home Health Care		
Hospital Stay (Facility lee/physician/surgeon lees) ²		
Imaging (Cv/PET/MRI scars)		
Lab Services		
Menial/Behavioral Health Services (Duspation/Impatient) ²		
Nurrision		
Openmerry ²		•
Ourparient Surgery (ambularory surgery center/physician/surgeon lees)		
Pediarrics		
Ouside Pharmacy (Walmary/Walgreens/ CVS etc.)		•
Pregnancy Services (Office visits/Childbirnh classes/delivery services)		
Prenaual Care (Delivery not covered at most facilities) 3		
Preventive Care/Screening/Immunizations		
Primary Care		
Public Health Nursing		
Radiology (Not available at all facilities) ²		
Rehabilitation/Habilitation Services		
Skilled Nursing Care		•
Specialist Visits		
Substance Abuse Services (Outpations/Inpations)		
Urgenii Care		•
Women's Health		•





New for 2020 Open Enrollment

- Bridging a Native American Marketing Campaign with the overall beWellnm 2020 Open Enrollment Marketing campaign.
 - During Open Enrollment there is added focus on enrollment throughout New Mexico. We are leveraging that energy to supplement our Native American campaign.





Native American Open Enrollment Campaign

- Digital Online Advertisement
 - **Ads will run** *Nov. 1 Dec. 15, 2019
- Print Advertisement
 - **−Digital Online Ads** will run *Nov. 1 − Dec. 15, 2019
 - -Radio Ads will run *Nov. 1 Dec. 15, 2019
- Radio Advertisement
 - -Radio Ads will run *Nov. 1 Dec. 15, 2019
- Outdoor Advertisement
 - -Billboards will run *Nov. 1 Dec. 15, 2019





Partnerships

- Continuous Native American Partnership Locations
 - Mescalero Apache Tribe Village of Ruidoso Community Center
 - Farmington, NM San Juan Center for Independence
 - Gallup, NM Gallup McKinley County Chamber of Commerce
 - Jicarilla Apache Nation As Needed

*All Enrollment Days available on beWellnm.com





beWellnm Enrollment Activities

Month	September	October	Year to Date
Total Visits	71	58	1052
Completed Appointments	27	51	725
QHP's	9 (0 NA)	9 (3 NA)	193 (27 NA)
Medicaid	7 (0 NA)	4 (0 NA)	83 (8 NA)





beWellnm Open Enrollment Activities

Month	November 1 – 10, 2018	November 1 – 9, 2019
Total Visits	221	145
Completed Appointments	207	85
QHP Enrollments	175 (8 Native American)	153 (2 Native American)
Medicaid	22 (0 NA)	4 (0 NA)





b. Matters from the Operations Committee

David Leachman, Committee Chair





Individual Exchange Build Update

- October 10th, 2019 the Exchange kicked off the individual exchange project!
 - Kick-off meeting was well received
 - Thanks to Secretary Scrase his opening remarks
- Individual Exchange Build Update
- Discussion of Map & Gap Sessions





How will we keep stakeholders informed?

- Stakeholder Advisory Group meets regularly and is open to anyone wishing to attend.
- When necessary, functional work groups will be created, e.g., carriers and brokers
- General communication: Board Meetings, Newsletter, Website FAQs, or emails from the beWellnm project team providing a status of highlevel milestones
- Kick-Off Presentation posted on beWellnm website

beWellnm.com

For additional information, you may contact:

Kevin Swinson, Director of Technology Operations kswinson@nmhix.com

Office direct: (505) 314-5301

Mobile: (505) 313-1680





Individual Exchange Build Update



Weekly Status Dashboard



Project Start

initiation/Planning

Execution

Testing, Training

Go-live

Jan 15, 2019

June 5, 2019

Sept 17, 2019

Soft 9/1/2021

10/1/2021

Schedule		Risks		Launch Reso	urces
Status	Trending	Status	Trending	Status	Trending
G	\iff	G	\iff	G	\iff

Key Milestones	Due Date	Status
External Stakeholder Kickoff Meeting	10/10/19	C
Draft of updated Project Schedule	10/11/19	C
First Map & Gap Analysis Session	10/15/19	C
Receive hCentive Project Schedule	10/29/19	C
First IV&V Health Check Start	11/18/19	G
Project Schedule Baseline	12/20/19	G

Summary

- hCentive reviews of PMP documents under way.
 Comments received for all.
- Fourth week of Map & Gap Analysis completed
- hCentive project schedule draft reviewed.

Trending Scale:

Improving

No Change

Worsening





1+ Week Behind Schedule



On Track – No Major Issues



Major Risk





Status

Accomplishments

- hCentive Staffing Plan approved
- Final comments received on remaining PMP documents
- Map & Gap Analysis Sessions underway, no major issues to note
- Map & Gap Sessions with HSD participation setup
- PMO and Be Well reviewed Deliverables Tracker and assigned review team members to each deliverable

Highlights for next six weeks

- Obtain signoff on all PMO documents
- Align and baseline Project Schedule with hCentive, PMO, IV&V tasks
- Continue Map & Gap Analysis sessions
- IV&V conducts first health-check review starting, 11/18
- hCentive analyzes notes/concerns from January 2019 stakeholder meetings
- Coordinate Carrier and other stakeholders outreach plan including Premium Billing

NMHIX Escalation Needed

- None at this time





Map & Gap Sessions





Status

Deliverables for 2019

On Track

hC Deliverables - 3

- Approved 1
- Submitted (Under Review) 1
- To be submitted 1

hC review of PMO Deliverables - 6

- Under Review 2
- Approved 4

Map & Gap Sessions

On Track

Scheduled Sessions - 27

Completed - 11

- Migration sessions to be scheduled
- Acc Transfer sessions to be rescheduled

Requirements Status

On Track

Total 715

Reviewed 230

Pending 485

Gap 1

Map 207

On Hold 22











c. Matters from the Outreach & Education Committee

Director Martin Hickey, Committee Chair





Open Enrollment Update





Advertising











HEALTH INSURANCE FOR SMALL BUSINESS





Collaboration with Human Services Department

• Preliminary discussions have begun in support of collaborative efforts related to Outreach, Education and enrolling in coverage.





Contact Center Update





Contact Center Update

THIS YEAR

2020 Open Enrollment Activity at Menual	Nov. 1-2	Nov. 4-9	Totals
Week	1st	2nd	
Total Call Center Calls	167	583	750
Contact Center Answered Calls	123	354	477
IVR Transfer to Medicaid	22	137	159
IVR Transfer to Marketplace	19	90	109
Abandon Calls	3	2	5
SHOP Calls	15	28	43
CHATS	8	27	35

LAST YEAR

2019 Open Enrollment Activity at Menual	Nov. 1-3	Nov. 5-10	Totals
Week	1st	2nd	
Total Call Center Calls	153	451	604
Contact Center Answered Calls	88	216	304
IVR Transfer to Medicaid	45	127	172
IVR Transfer to Marketplace	20	108	128





Consumer's Checkbook





Consumer's Checkbook

- In early 2018, the Office of Superintendent of Insurance fostered a new partnership opportunity for beWellnm by way of Consumer's Checkbook. This tool allows New Mexicans to compare and rate plans in the Exchange.
- In September 2018, beWellnm Board passed a budget that included funding for this item. In October 2018, the Board supported \$65,000 in funding based off of the assumption that it would fund 3 months of the project.
- In contract negotiations with Consumer's Checkbook, it has become clear that the majority of their expenses are during the Open Enrollment time period and \$65,000 was insufficient for them to cover their expenses.
- To gain coverage for this Open Enrollment through August of 2020, the project needs an additional \$25,000. This would create a total of \$90,000.
- BeWellnm has supported the tool in the past with outreach & education efforts and would continue.
- BeWellnm is currently identifying the most transparent and potentially expedient path forward. OSI had previously conduced a sole source procurement.
- This would not require an increase to beWellnm's 2019 budget.

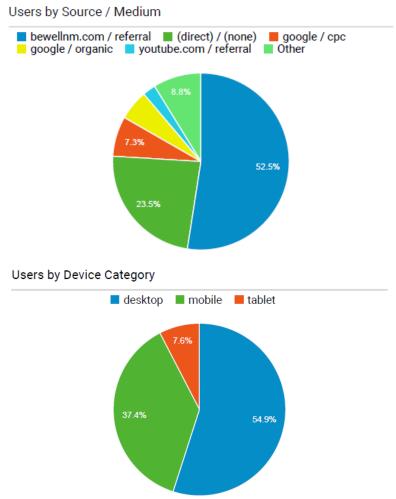




Consumer's Checkbook Utilization

NM Plan Comparison Tool Dashboard

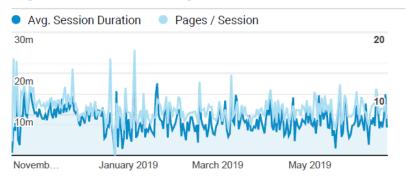






Consumer's Checkbook Utilization

Avg. Session Duration and Pages / Session



Users and Sessions by Full Referrer

Full Referrer	Users	Sessions
bewellnm.com/	3,216	4,564
(direct)	2,440	4,178
google	1,331	2,846
bewellnm.com/choose-health-insurance	659	857
bewellnm.com/enroll-now-1	521	664
youtube.com/mobile	250	446
facebook	231	280
m.facebook.com/	212	224
bewellnm.com/special-enrollment-life-changes	195	223
bewellnm.com/Special-Enrollment/How-To-Enroll	165	233

Users by User Type ■ New Visitor ■ Returning Visitor 18.7% 81.3%



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Outreach & Education Services

Motion: Move that the Board authorize staff to proceed with the procurement and contracting for a plan comparison tool for individua health insurance plans for the plan year 2020, in an amount not to exceed \$90,000. Staff may procure the services by the most reasonable means, determined after consultation with the state purchasing division.





d. Matters from the Finance Committee

Treasurer Brandon Fryar, Committee Chair





SB-294 Implementation Update

Requirement	Status
Sunshine Transparency Portal	 Moving forward with a solution to add a sunshine portal on our website pending assistance from DoIT.
Surety Bond for Board Members & Staff	 Applied for coverage and waiting for response from surety bond insurer.
Budget to DFA/LFC	• Completed
Performance Based Budgeting	• Still on track to propose performance based budget for 2021.
State Procurement Code	 State Procurement Code processes implemented: 2019 contract extensions to Contract Review Bureau (CRB) – in process. Determination of professional/general services to CRB – implemented process.





e. Matters from the Stakeholder **Advisory Committee**

Committee Chair, Mike Wallace





f. Matters from the CEO Search Committee

Director Martin Hickey, Committee Chair





g. Matters from the Legislative Committee

Director Dan Foley, Committee Chair





7. Agency Reports





Agency Reports

- Matters from the Office of the Superintendent of Insurance (OSI)
 - Superintendent John Franchini
- Matters from the New Mexico Medical Insurance Pool (NMMIP)
 - Superintendent John Franchini
- Matters from New Mexico Human Service Department (HSD)
 - Secretary David Scrase





8. Public Comment





9. Executive Session





10. Other Board Business





11. Next beWellnm Board Meeting

Friday January 24, 2020

Location: TBD





12. Adjournment

