

# NC Get Covered Coalition Meeting – OEP3 Debrief with HHS Meeting Notes

Wednesday, March 23, 2016, 10:00 a.m. to 12:00 p.m. NC Hospital Association, 2400 Weston Parkway, Cary

#### **Marketplace Debriefing 3.0**

## 1. Please describe your <u>overall experience</u> with Marketplace enrollment/outreach efforts.

Sorien Schmidt, Enroll America

- Very positive
- Incredibly coordinated
- Huge consumer demand
- Challenges:
  - Not new anymore
  - Changes in leadership
  - Volunteer base is declining
- Identified more uninsured people during 3<sup>rd</sup> open enrollment period but made more calls
  - o Have been able to adjust
  - o IPAs and agents helping out
  - More systematic

Walker Wilson, Blue Cross Blue Shield of NC

- Updating subsidy information
- Data matching issues
- Improve affordability

Lance Goller, Blue Ridge Community Health Services

- December 15<sup>th</sup> was the craziest day/ had the most trouble with the website and call center
- Used the Connector and was able to share appointments with those who had less demand

# 2. Think about the <u>consumer's experience</u> with Marketplace enrollment. What policy or operational changes would you recommend to enhance the consumer's experience?

Cheryl Hallock, Access East

• If call center staff are not sure about an answer, they should be encouraged to say so instead of giving misinformation.

Arden Root, Access East

 Ability for assisters to bind policies/accept payment when the consumer is there

#### Walker Wilson, Blue Cross Blue Shield of NC

 Make it clear to consumers that they must pay for coverage in order for it to be effectuated.

#### Linda Cecarelli, Aetna

- Individual mandate and enrollment periods must be enforced
- Need network transparency
- Do not agree that a broad network is necessarily a better network
- Provider search tool
- Plan design simple plans standardization prohibits innovation;
  Marketplace should be promoting
- Customize plans

## Liz Gallops, NC Association of Health Underwriters

- Proof of SEP helpful for integrity
- Sign off on disclosure streamline
- Add information at beginning and end/ not able to attach an agent at the end so they don't get credit for helping the consumer
- Allow SEP changes without having to go through the entire application

# 3. Think about the <u>assister's experience</u> with Marketplace enrollment. What policy or operational changes would you recommend to enhance the assister's experience?

Alice Pollard, NC Community Health Center Association

- Mirrors the consumer's experience
- Provided 12 recommendations to Marketplace staff on how to improve the process
- Need more transparency and coordination among all Marketplace collaborators
- Give assisters greater access to the information
- Concerned about new SEP requirements may discourage people who are healthy

### Jennifer Simmons, Legal Aid of NC

- Assisters are the face of the Marketplace/ consumers assume they can do more
- Increased transparency with the escalation process
- Access to an application that's more efficient
- Access to dummy training system/ simulation
- Find Local Help tool is still lacking

#### Scott Edmonds. MDC

 Secure coverage for LPRs under 100% FPL / documentation is nothing short of a nightmare • Push back on SEPs – think the argument is overblown/ call center will be reluctant to issue SEPS (change in income)

#### 4. What was most helpful in your education and outreach efforts?

Jennifer Simmons, Legal Aid of NC

- What we know works, works.
- Enrollment events are very important gets media attention/ earned media
- Direct calls to consumers/ re-touching base
- Partner agencies/ referrals
- Consistent face/ presence
- Individual contacts for hard-to-reach communities/ find that one trusted leader/fulcrum of access particularly important for special populations
- Use talking points/ messages that resonate with people/ NCGC helps with messaging
- Integration of screening/intake processes institutionalizing outreach

### Sorien Schmidt, Enroll America

- 4 primary sources to drive enrollment:
  - Direct phone calls
  - o Media
  - o Partner referrals
  - Word of mouth/ media training for partners

#### Cheryl Hallock, Access East

• Success due to collaboration

Lafayette Jones, Segmented Marketing Services, Inc.

- "Fish where the big fish are"
- African Americans and Latinos
  - Beauty salons/barbershops
  - o Goodwill
  - Beauty supply stores
  - Churches/ Last Chance Sunday
- Drive word of mouth through paid media and community newspapers

#### 5. What were the challenges or barriers to education/enrollment?

Lance Goller, Blue Ridge Community Health Services

Affordability

Liz Gallops, NC Association of Health Underwriters

- Spouses having access to employer plans/spouses less likely to pay for dependent coverage
- Kids that are declined "I don't want this plan if my kid can't get on the plan."

#### Jennifer Simmons, Legal Aid of NC

 Lack of clarity for assisters on what we can and cannot do to assist consumers over the phone

#### **Andy Landes**

- Better definition and opportunity to cooperate in situations where agents, brokers, and advisors don't know how much they can participate in public meetings
- Complexity of the Marketplace

#### Sorien Schmidt, Enroll America

- Family glitch (for example, state employees are covered but not their dependents)
- Medicaid gap
- Hard to reach people a lot of suspicion
- Marketplace didn't come up with a broad solution to BCBS issues
- Commissions being eliminated

## 6. What partnerships were the most effective with education/enrollment?

**Andy Landes** 

• Lincoln Community Health Center in Durham

Sorien Schmidt, Enroll America

- Bilingual staff
- Partnering with a community organization engaged, making referrals
- Hospitals like Wayne Memorial, Wake Med and UNC are very engaged; others could do more.

#### Kellan Moore, Care Share Health Alliance

 Funders that stepped up to support the work when there was a gap, like KBR and Cone Health

# 7. Did you do outreach to special groups and populations? If so, what tactics did you utilize to reach out to them?

Mackenzie Mann, NC Farmworkers Project

- Face-to-face contact with H2A farmworkers outreach workers, clinic staff, tax people who serve that population
- Outreach at night and on weekends
- Provide enabling services like transportation or interpretation
- Challenges: Marketplace representatives sometimes give misinformation, finding people to help enroll, identity and income verification, exemption processing

#### Jennifer Simmons, Legal Aid of NC

- Face-to-face engagement
- Trusted partners
- Well-timed outreach (e.g., going to soccer games to reach Latinos)

#### Walker Wilson, Blue Cross Blue Shield of NC

- Worked with Lafayette Jones of Segmented Marketing Services, Inc.
- Retail stores
- Mobile enrollment van
- Mall kiosks

8. What are your recommendations/suggestions in planning for the next enrollment period?

Jennifer Simmons, Legal Aid of NC

 December 15<sup>th</sup> felt like the deadline this year/ will be the main push moving forward

#### Deborah Owens

- Digital ground game is excellent, but folks get lots of emails and it's confusing
- Match when 834 goes to carrier and send a message to consumers thanking them for enrolling

Alana, Get Covered Meck

Last opportunity messages are confusing

Alice Pollard, NC Community Health Center Association

- Take a close look at the Marketplace call center and find concrete ways to improve it/ provide an online feedback form
- Doctor and drug search tools helpful

Lance Goller, Blue Ridge Community Health Services

- Use English and Spanish versions align resources with demand
- 9. Facing an uncertain political future and inconclusive level of support for the ACA during the next administration, please consider contingency outreach and marketing plans that may possibly be based on lesser funding. If, for instance, staffing and funding were to be cut over the next few years, how would that impact your plans and projections for sustainability?

N/A – Did not have an opportunity to address during coalition meeting

10. Given the issues surrounding unscrupulous activities to lure consumers to agents and brokers outside of the Health Insurance Marketplace, what steps/measures do you believe should be taken to increase consumer protections?

Liz Gallops, NC Association of Health Underwriters

- Oversight with Department of Insurance control/regulate agents
- Conscience efforts to intentionally partner with IPAs/ do not want to be adversarial
- Commissions being cut may decrease enrollment numbers as agents account for 50% of enrollments