Solution 2: SHOP

Background

MNsure's Small Business Health Options Program (SHOP) opened in 2013 as part of Minnesota's state-based health exchange. SHOP is for Minnesota-based small employers with 1-50 eligible employees who want to provide health and dental insurance to their employees. By enrolling in SHOP group coverage, employers can:

- Streamline their budget management process by controlling how much they contribute toward employee premiums.
- Offer employees multiple health and dental options, allowing them to select their own plans.
- Receive expert help and guidance from specially trained brokers.
- Qualify to receive tax credits, available exclusively through MNsure.

Despite the existence of a variety of manual processes, SHOP enrollment has increased each year since its inception. As of April 2017, MNsure serves 429 employers in the small group market, representing over 3,000 covered lives. We expect that growth will continue, particularly with improved consumer-friendly tools as well as the efficiencies associated with increased backend automation. It is critical that the replacement IT system is robust and scalable enough to support current as well as future enrollees.

The systems currently used by MNsure SHOP are a combination of automated and manual tools/processes. These systems are not equipped to handle continued increases in enrollment activity over time. MNsure SHOP's current functionality includes:

- Excel-based tool allowing for comparison of available plans and pricing (same tool for employers and employees)
- One-time online employer and employee applications
- Transmitting data from employer and employee applications into system of record
- Storing account details along with eligibility review and verification documents, plan selections and waivers
- Receiving PDF applications via email for manual entry
- Creation of monthly employer invoices
- Storing account payment and delinquency information
- Storing employer and employee renewal documents
- Transmitting enrollment, maintenance, termination, payment and reconciliation files to carriers via csv
- Storing of employer and employee change information

Vendor Tasks and Responsibilities — Project Approach and Technical Requirements

The selected Responder will provide a SHOP Solution that allows for the end-to-end account creation, eligibility, shopping, enrollment, maintenance and renewal for SHOP groups and their enrollees. The Solution will be utilized on the front end by employers, employees and brokers. The Solution will be used on the backend by MNsure staff who will serve as business administrators. The Responder's proposal must include details about how it will address each of the deliverables outlined below.

Deliverables

Shopping and Enrollment

Deliverable One: Employer Shopping and Enrollment

Create an online portal that allows employers an easy-to-use tool to generate quotes and select qualified health plans (QHP) and qualified dental plans (QDP) to offer their employees.

A. Demonstrate utilization of existing employer shopping and enrollment tools in at least one other state-based SHOP insurance marketplace or similar enterprise.

B. Allow employers to enter basic information to create an account that can be accessed and/or modified at any time by the employer and MNsure. Examples of information include demographic information, employee roster data and contribution rate.

C. Use employer's demographic information, roster and contribution rate to provide a customized list of carrier plans, benefits and rates available to the employer as well as the costs of the plans given the inputs given by the employer.

D. Allow the employer to generate, print and save customized quotes based on a variety of different scenarios. (For example, plan costs to the employer and employees if an employer selects a 50% vs. a 75% contribution rates, selects a platinum vs. a gold reference plan, provides coverage to dependents or not, etc.)

E. Quotation tool must allow contents of tool to be saved for the consumer to continue at a later date.

F. Provide links to additional supporting information (such as Summaries of Benefits and Coverage (SBCs), links to carrier sites).

G. Allow employers to complete an application for group coverage. This includes transferring demographic data from original quotation into the enrollment, thereby obviating duplicate data entry.

H. As part of employer enrollment, allow data entry of basic eligibility questions as required by MNsure, including capture of wage and tax forms.

I. Allow data entry of all other fields required by MNsure to apply for coverage. This includes but is not limited to selecting one or more QHPs and QDPs as offered to SHOP by participating carriers. (See the [PDF application](#) at https://edocs.dhs.state.mn.us/lfserver/Public/DHS-6740-ENG to view required fields.)

J. Allow employers to easily access their account during and after enrolling in coverage, with capability to report employer changes such as address/primary contact changes, change in broker, new hires, etc.

K. Provide a display or communication mechanism for eligibility and enrollment status changes, such as displaying or communicating via email when eligibility has/hasn't been achieved.

Deliverable Two: Employee Shopping and Enrollment

Provide a portal that allows employees an easy-to-use tool to shop for and select qualified health plans (QHP) and qualified dental plans (QDP) for themselves and their dependents, depending on the offerings as made available by their employer.

A. Display the QHPs and/or QDPs that are being made available by their specific employer.

B. Display the employer's contribution rate to employees and, if applicable, dependents.

C. Incorporate the employer's contribution rate and the employees' demographics to allow employees to view and compare the costs of the plans being offered to them by their employer.

D. Arrange plan options that can be sorted (e.g., by cost, plan name, carrier).

E. Allow the results of employee shopping and plan comparison to be saved, printed and stored for future access.

F. Provide links to additional supporting information (such as SBCs, links to carrier sites).

G. Allow employees to apply for coverage for themselves and, if applicable, dependents, by selecting from the plans that the employer has made available to them.

H. Allow data entry of all fields required by MNsure employee application (see PDF employee application: https://edocs.dhs.state.mn.us/lfserver/Public/DHS-6740A-ENG).

I. Provide mechanism for employees to report life events and other changes throughout the year.

Deliverable Three: Broker-Supported Enrollment

Allow brokers to serve their SHOP customers and manage their SHOP client accounts from the initial quotation/shopping experience through enrollment, account administration and renewal.

A. Allow employers to search for and select a MNsure-certified broker.

B. Provide mechanism to notify a certified broker of a new SHOP group assigned to the broker.

C. Allow brokers to access and update employer and employee account information (see Deliverables One and Two above for broker capabilities that should be supported).

D. Provide brokers with a notification when an employer or employee has made a change to their account, such as address change, new hire, etc.

E. Allow brokers to view and update information that is specific to their agency (such as broker contact information).

F. Allow only authorized (i.e., MNsure-certified) brokers to have access to broker setup and group displays.

G. Broker name and contact information should be visible to employers and MNsure administrators and customer service representatives, with changes available immediately upon entry/saving.

H. Allow brokers to assist their clients with the enrollment process for employers and employees, providing the functionality to brokers listed in Deliverables One and Two so that they can access quotation and shopping tools and complete employer/employee/dependent enrollment, report changes, etc.

Deliverable Four: Employer and Employee Renewal

Create mechanism to provide annual renewal functionality for employers and their employees.

A. Provide mechanism to create an annual offer of renewal that allows employers to update their group account information.

B. Provide mechanism to allow renew, auto-renew and cancel coverage options.

C. Capture updates to the employer's demographic information, employee roster and contribution rate.

D. Allow updates to basic eligibility questions as required by MNsure, including capture of wage and tax forms.

E. Provide an updated customized list of plans, benefits and rates available to the employer as well as the costs of the plans given the inputs given by the employer.

F. Allow the employer to create and view the costs of different scenarios. (For example, plan costs to the employer and employees if an employer selects a 50% vs. a 75% contribution rates, selects a platinum vs. a gold reference plan, provides coverage to dependents or not, etc.)

G. Provide links to additional supporting information (such as SBCs, links to carrier sites).

H. Provide mechanism to create an annual offer of renewal for employees, and allow the update of employee demographics and plan selections.

I. Provide administration of discrepancy reporting for data inconsistencies in information provided (for example, mismatched data, missing data, etc.).

J. Allow MNsure administrators to edit/update group or employee account information when discrepancies are found.

Managing QHP and QDP Data

Deliverable Five: SERFF and CCIIO Plan Management Templates and Data

Provide the capability to integrate with the System for Rate and Form Filings (SERFF) for purposes of consuming SHOP QHP and QDP plan filings submitted by carriers via the Center for Consumer Information and Insurance Oversight (CCIIO) Plan Management templates or alternative data required by the State of Minnesota.

A. Demonstrate utilization of existing SERFF integration in at least one other state-based health insurance marketplace or similar enterprise.

B. Provide mechanisms to support web services necessary to consumer QHP and QDP plan data from SERFF.

C. Provide detailed documentation regarding how the plan data is mapped from the CCIIO templates to the employer quotation and employee shopping experience including but not limited to rates, benefits, service area, formulary, actuarial values, supporting documentation included in plan filings, etc.

Deliverable Six: Plan Preview Capabilities

Provide alternative environments to house plan data for use in testing and validation.

A. Demonstrate utilization of a non-production plan preview activities with at least one other state-based health insurance marketplace or similar enterprise.

B. Provide the capability to allow carriers and MNsure business and technical staff to preview plans, rates and other plan data in a secure non-production environment before the data is made available to the public or loaded in the production environment.

C. Provide the capability to ensure this non-public plan data is secure and segregated from other environments to prevent access by unauthorized personnel, including the ability for carriers to only see plans offered by their particular company.

Enrollment System of Record

Deliverable Seven: Health Insurance Enrollment Transactions and Files (EGF and 834 EDI)

Provide capabilities to support the Employer, Employee and Dependent data required in a SHOP Enrollment and Maintenance transaction.

A. Demonstrate utilization of an existing Employer Group File (EGF) and 834 EDI data transfer system in at least one other state-based SHOP marketplace or similar enterprise.

B. Provide capabilities to support enrollment data input from alternative sources, such as manual entry of enrollment elections, changes to existing elections, etc., via a user interface tool to be utilized by operations staff.

C. Provide capabilities to support the generation of EGF and 834 EDI enrollment transactions and EGF and 834 EDI files containing multiple enrollment transactions, including, but not limited to:

    a. Initial employer and employee enrollment

        i. Communicating basic information about Employer, including group name, contact information, number of employees, reference plan and other QHP/QDP plan selections.

        ii. Communicating demographics of each member of the household, the correct plan effective date based on plan selection date, any subsidy the household has selected to apply towards their premium, and each member's premium as well as a total household premium.

    b. Changes while enrolled in a plan—including, but not limited to, prospective and retroactive employer, employee and dependent changes, rate and subsidy changes, and addition or removal of dependent.

    c. Disenrollment from a plan—terminating an employer's enrollment, or employee's coverage in a plan, supporting both retroactive and prospective term dates.

    d. Cancellation of a plan—terminating group or household coverage as though it never existed or was never in force.

D. Provide the capability to include agent/broker information on EGF including, but not limited to, agency, name, NPN, etc., on 834 EDI enrollment transaction and 834 EDI files.

E. Provide an 834 EDI companion guide documenting outcomes and transactions of input and output enrollment data for use by business staff and MNsure's partner health insurance carriers.

Deliverable Eight: Enrollment Data Storage and Maintenance

Provide a transaction processing and storage database(s) to securely and accurately process, perform maintenance on and store enrollment data from multiple data sources.

A. Provide capabilities to detect and systematically track changes to enrollment history as employers and employees interact with the system.

B. Must record who in employer group is no longer covered by a plan and include coverage start (if appropriate) and coverage end dates.

C. Must be able to process and record an election during an employee special enrollment period for the current plan year without disrupting coverage for open enrollment selection made for next coverage year, and vice versa.

D. Automatically terminate current plan upon the selection of a new employer reference plan and/or individual using correct start and end dates for each plan selection.

E. Must support automated passive/auto enrollment of current groups and enrollees if applicable.

Deliverable Nine: Enrollment Data Migration and Integration

Develop logical mapping and mechanisms to implement necessary enrollment data migration.

A. Demonstrate utilization of enrollment data migration activities with at least one other state-based SHOP marketplace or similar enterprise.

B. Provide mechanisms to migrate existing historical employer, broker and household data from the legacy system to the new database.

C. Provide a back-up record of existing data prior to migration, which can be accessed by appropriate State staff to provide evidence of accuracy and authenticity of imported data.

Deliverable Ten: Ongoing Effectuated Employer and Employee Enrollment Maintenance

Provide the capability to systematically communicate employer and employee enrollment status and demographic information between MNsure and carriers.

A. Provide capabilities to exchange employer level and member level enrollment data with carriers to maintain information related to effectuated vs. non-effectuated members.

B. Provide capabilities to receive and store reason codes provided by carriers that provide details explaining why a transaction is being made.

C. Provide capabilities to generate reporting metrics regarding effectuated vs. non-effectuated groups and members.

Deliverable Eleven: Payment Order/Remittance Advice Data Exchange (820 EDI)

Provide the capability to systematically communicate payment information between MNsure and carriers.

    A. Provide capabilities to exchange premium payment information between MNsure and carriers in 820 EDI format.

    B. Provide capabilities to generate reporting metrics regarding member payment vs. non-payment.

Deliverable Twelve: Business Intelligence

Provide infrastructure and data mapping that facilitates detailed and efficient reporting on historical and current population by business staff.

    A. Provide mechanism to create daily, weekly, monthly, quarterly, yearly and ad hoc reporting for key metrics, including, but not limited to, enrollment of new employers, employees and total lives, total enrolled groups, employees and total lives, renewals, non-renewals/terms, demographics, geographic details, etc., which can be extracted in multiple formats (MS Excel, etc.), saved, printed and manipulated as needed by MNsure employees.

    B. Preference for a dashboard-style reporting tool that provides an online display of key metric data that updates in real-time, which can be customized by MNsure administrators, and which could allow use of system permissions in order to display varying levels of data.

    C. Preference for the capability to integrate with other MNsure systems for purposes of data merging and performing comparisons between sets of data.

    D. Provide real-time user interface into enrollment system of record for operations and other state staff as appropriate including, but not limited to, the ability for staff to search and view current and historic household plan elections and coverage dates, co-pays, deductibles, premium amounts, APTC applied, etc.

Financial Management

Deliverable Thirteen: Invoicing and Payment

Provide invoicing, payment, delinquency and collections services, including but not limited to the following:

    A. Create and send employers monthly invoices based on employer and employee premium data.

    B. Receive payments from employers via credit card, check or ACH, preferably with an automatic monthly deduction option on employer/broker request.

    C. Process payments and provide timely financial reporting to MNsure on payment status.

    D. Establish delinquency notification and collections processes in accordance with MNsure requirements.

    E. Timely transmit payments and 820 files to SHOP carriers on a weekly basis.

    F. Notify MNsure and/or carriers of employer invoicing disputes or discrepancies.

    G. Hosted Service.

Deliverable Fourteen (Preferred): Hosted SHOP Exchange Service

Provide infrastructure, software and administrative oversight necessary to make a complete SHOP solution available to MNsure SHOP consumers.

A. Demonstrate provision of a hosted SHOP exchange service to at least one other state-based SHOP insurance marketplace or similar enterprise.

B. Must offer all of the core SHOP exchange functions described in the required Deliverables sections of this document, including: Shopping and Enrollment, QHP and QDP Data Management, Enrollment System of Record, Financial Management and Technical Requirements.

C. Provide for review and certification of employer and employee applications and application process as they will be presented during the application process in a non-production and production environment.

D. Provide for review and certification of plan data, plan information and rates as they will be presented during the plan shopping and enrollment process in a non-production and production environment.

E. Support integration with MNsure tools or processes for determining eligibility.

F. Provide full auditing and reporting capability of consumer information access.

G. Provide reasonable reporting as requested by MNsure.

Customer Service

Deliverable Fifteen (Preferred): Contact Center Support

A. Provide Contact Center services for broker, employer, employee and general public.

B. Establish a Contact Center to handle questions and other service inquiries from brokers, employers, employees and the general public.

C. Provide operating hours of Monday through Friday from 8 a.m. to 6 p.m. Central Time with flexibility for possible extension hours during peak enrollment periods.

D. Prefer that customer service staff are dedicated to MNsure and have at least one year of health insurance knowledge and experience.

E. SLAs (service level agreement) and performance metrics are required.

F. Call tracking and case management tools are required.

G. Documentation of standard call center operating procedures is required.

Project Oversight

Deliverable Sixteen (Preferred): Project Management

A. Responder must proactively manage contract and make MNsure staff aware of risks related to timely and successful completion of deliverables as they are identified. Responder must use a standard project management template reporting tool provided by MNsure.

B. Responder must participate in a regularly scheduled weekly call, produce meeting minutes from those weekly calls, and respond to inquiries and calls from MNsure promptly.

C. Responder will follow project management methodologies, establishing and meeting milestones.
D. Responder will identify in the proposal a project manager as a lead contract person to oversee the project; serve as a liaison with other contractor staff; and serve as a point of contact for the identified MNsure staff contact.
E. Responder will provide ad hoc progress reports, data or information in writing as requested by MNsure.

Deliverable Seventeen: General Contract Responsibilities

A. Key Responder staff must be readily accessible by telephone and email to consult with MNsure staff as needed and/or requested by MNsure.
B. Before conclusion of the contract and in the event that the contract is terminated and/or the contract is awarded to another contractor, Responder must develop a transition plan, if applicable, for continued operations that shall assist MNsure in accomplishing the tasks described in this RFP.
C. At the conclusion of the contract, Responder must turn over to MNsure all materials, studies, reports and technical documentation developed for this MNsure project. Materials, studies, reports and technical documentation developed for this project are presumed to be the property of the State.

Technical Requirements

Technical Requirement One:

Responder will propose information on the technical design and functionality to show how the system will work. This proposal will also include any corresponding duties of MNsure and/or State technical staff in implementing the application.

- Responder will supply MNsure with any technical documentation required to implement the Solution, outlining Responder's existing technical and hosting capabilities.
- Responder will also document and maintain requirements and technical specifications particular to this implementation in an agreed-upon format.

Technical Requirement Two:

Responder will supply MNsure with recurring status reports, indicating usage statistics and analytics in an agreed-upon format. Usage statistics should include number of successful and failed attempts to set up an account, as well as number of employers that initiate but do not complete enrollment.

Technical Requirement Three:

If Responder is proposing a hosted solution, the Solution must be implementation-ready. Responder will propose hosting options so MNsure can evaluate the options available and associated costs of a Responder-hosted Solution.

Technical Requirement Four:

The Responder must submit a completed response to the Voluntary Product/Service Accessibility Template(s) (VPATs), which are attached to this RFP. The response must contain

adequate information to evaluate the responsiveness to the accessibility standards (i.e., a completed VPAT or equivalent). This Technical Requirement is addressed and scored as outlined in Section 6 of the overall proposal submission.

Technical Requirement Five:

Create and supply to MNsure user guides for the following end users:

- Employers, describing the enrollment process and tools available to them.
- MNsure administrators, describing additional features and tools available to them along with instructions on using them.
- Brokers, describing any additional features or tools available to them.
- Carriers, describing any additional features available to them.

Technical Requirement Six:

Provide scheduled periods of pre-implementation system testing using MNsure employees and administrators and other users as designated by MNsure. MNsure will work with the selected Responder to design test requirements and plans, and will require the system to pass acceptance tests by MNsure employees, brokers, employers, carriers and other users as designated by MNsure.

Technical Requirement Seven:

Responder must demonstrate ability to provide trace data access logging to identify who has viewed and/or edited records in the system and to identify suspect behavior.

Technical Requirement Eight:

Support the ability to change the system date for quality assurance purposes.

Technical Requirement Nine:

Responder must demonstrate the ability to meet the Data Security requirements outlined in the attached contract template and make the Solution and other functionality available to testing procedures to be completed by the State as needed. Responder must also demonstrate experience with secure coding and application security fundamentals. Further, any of Responder's staff accessing MNsure data must complete the required security and privacy training. This requirement is applicable to both State-hosted and Responder-hosted solutions.