

Grant Progress Report

July, 2013

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CORE AREA: LEGAL AUTHORITY AND GOVERNANCE

What are the primary strategies your Program has used to approach this Core Area?

- > Hire full-time staff within the Department of Commerce dedicated to building on activities accomplished under earlier grants to develop detailed work plans, timelines and budget estimates.
- > Pass a bill through the MN legislature that includes language for ongoing governance of the MN Exchange. (SF1 and HF5 introduced in January 2013.)
- Establish Advisory Task Force to provide guidance on the design and development of a Minnesota Exchange and create Technical Work Groups to provide stakeholder input on the design and development of a Minnesota Exchange.
- > Task Force recommendations were referenced in process of drafting Exchange legislation.
- > Coordinate efforts and resources with core state agencies including the Minnesota Departments of Human Services, Health, MN.IT (consolidated IT) and Management and Budget.

- On October 31, 2011, Governor Dayton issued an Executive Order directing the Commerce Commissioner, in partnership with the Minnesota Departments of Human Services and Health, to "Design and develop a Minnesota health insurance exchange to ensure access to affordable, high-quality health coverage that maximizes consumer choice and minimizes adverse selection."
- In September 2012, Governor Dayton announced the transfer of Exchange design and development activities from the Department of Commerce to Minnesota Management and Budget. In the same letter, Governor Dayton noted his intention to work with state legislators early in the upcoming 2013 legislative session on policy decisions related to governance, financing and navigators and brokers.
- > A Governance work group was created to provide technical assistance and information on options related to the permanent governance of a Minnesota Health Insurance Exchange. The Governance work group met publicly in late November and early December 2011 and presented options for consideration by the Exchange Task Force in late December 2011. The Exchange Task Force included recommendations related to the ongoing governance of the Exchange in their January 2012 report, suggesting a public-private partnership model would best meet the goal of providing health insurance choices to individuals and businesses while also integrating public health care coverage, like Medicaid into the Exchange.
- MNsure enabling legislation was signed into law on March 20, 2013 by Governor Mark Dayton. The legislation touches on several key points that guide the operations, governance, and funding of MNsure. Per the legislation, MNsure is constituted as a state board governed by a seven member board who are appointed by the Governor with advice and consent of both the Minnesota House of Representatives and the Minnesota Senate. The board is vested with various powers. In addition to the basic authority to conduct day-to-day operations, the board may also engage in an expedited rulemaking process, select which health plans are sold on MNsure beginning in 2015, and determine how much percentage of premium will be collected on each policy sold on MNsure up to



3.5% with some caps in place. In 2014, 1.5% of premiums sold through MNsure will be collected to establish an operating reserve. MNsure may also seek a loan up to \$20 million from the state for cash flow purposes. The enabling legislation also requires that MNsure establish a navigator program and other customer assistance functions as required by the Affordable Care Act.

What are some of the significant barriers your Program has encountered? N/A

What strategies has your Program employed to deal with these barriers? N/A

CORE AREA: CONSUMER AND STAKEHOLDER ENGAGEMENT AND SUPPORT

What are the primary strategies your Program has used to approach this Core Area?

- > Establish Advisory Task Force with members representing a variety of stakeholder groups to provide guidance on the design and development of a Minnesota Exchange.
- > Hire full-time staff dedicated to building on activities accomplished under earlier establishment grants to develop detailed work plans, timelines and budget estimates including stakeholder engagement activities.
- > Create Technical Work Groups to provide stakeholder input on the design and development of a Minnesota Exchange, including a Communications and Marketing and Navigators and Agents/Brokers work groups.
- > Lay the groundwork for public education and outreach by soliciting RFP bids for market research, brand development and public communications planning that will help direct public awareness and engagement strategies for the Minnesota Exchange.
- > Assess customer service functionality for the Exchange including an assessment of the functional customer service needs of the Exchange, documenting existing resources that can address some of these needs and examining options for operations. Exchange staff are also collaborating with the Department of Human Services to assess how existing call center operations can be coordinated and integrated into the operational plan.
- > Exchange bill includes policy direction for ongoing customer service functions of the MN Exchange.
- > The MNsure Board of Directors is in the process of establishing two advisory committees: the Health Industry Advisory Committee and Consumer and Small Employer Advisory Committee. Both committees will have up to 17 members each and will provide guidance, advice and recommendations to the Board as it carries out its mission.

What are some of your Program's significant accomplishments or strengths in this Core Area?

Exchange Advisory Task Force

> The MN Health Insurance Exchange Advisory Task Force was created under authority granted in Minnesota Statutes §15.014 in September 2011 and works in coordination with the Governor's Health Care Reform Task Force. The Advisory Task Force provides



guidance on issues related to the development of an Exchange for Minnesota including but not limited to:

- Size of the small employer market
- Merger of the individual and small group markets
- Provisions to avoid adverse selection
- Risk adjustment
- Regulatory simplification
- Cost, quality, satisfaction rating for insurers and health benefit plans
- Navigator program provisions
- Governance
- Ongoing funding mechanisms
- > Task Force members were appointed in October 2011 via an open appointments process. Task Force membership includes consumers, employers, health care providers, health insurers, insurance brokers/agents, organizations with experience assisting people with public programs, health care market experts, legislators, and Commissioners of State agencies. The Exchange Task Force released initial recommendations relating to avoiding adverse selection, ongoing financing, governance and navigators and agents/brokers in January 2012. In the fall and winter of 2012 the Task Force considered recommendations from a variety of work groups including:
 - Navigators and Agents/Brokers (levels of service, training/certification/licensure and compensation)
 - Finance (ongoing funding options)
 - Adverse Selection (risk adjustment and stand-alone dental)
- > Task Force recommendations informed policy discussions and decisions early in the 2013 legislative session including passage of MNsure's enabling legislation.

Work Groups

- > A number of technical work groups have been created to provide technical assistance on the design and development of a Minnesota Exchange.
- > These work groups are comprised of a variety of stakeholders and are tasked with developing, discussing and providing technical assistance on options to the Administration through the Health Insurance Exchange Advisory Task Force. There are numerous work groups which include:
 - Adverse Selection and Encouraging Market Competition and Value
 - Plan Certification Subgroup
 - Navigators and Agents/Brokers
 - Governance
 - Financing
 - Tribal Consultation
 - IT and Operations
 - Individual Eligibility
 - Small Employers and Employees
 - Measurement and Reporting
 - Outreach, Communications and Marketing
- > In the past year, more than 200 stakeholders have shared their ideas, advice and time towards planning a Minnesota Health Insurance Exchange.
- > The MNsure Board of Directors is in the process of establishing two advisory committees: the Health Industry Advisory Committee and Consumer and Small Employer Advisory



Committee. Both committees will have up to 17 members each and will provide guidance, advice and recommendations to the Board as it carries out its mission.

Marketing, Communications and Outreach

With foundation pieces – market research, branding and strategic communications planning – in place, Minnesota is inter-weaving the supporting pillars into a tightly knit, integrated public awareness and outreach campaign to launch MNsure and establish measurable benchmarks to build upon for ongoing communications, outreach and marketing efforts. Milestones and activities include:

- > Public Information Website: Earlier in the year, our functional website emerged from the mantle of the Department of Commerce site to become a stand-alone site dedicated to informing and engaging consumers and stakeholders. A vibrant, fresh look was applied to clearly convey the MNsure brand. The site underwent consumer testing to gather usability and user experience information that was applied to improve the site's design and navigation. Planning has commenced and continues on transitioning the current site into the introductory public information pages for the MNsure marketplace site.
- > Informational Video: In concert with the development of the new website, Minnesota created a public education video to explain MNsure and how consumers will benefit from the new marketplace option. The video is featured prominently on the home page, as well as on the MNsure YouTube channel.
- > Strategic communications planning: Contracted with local communications firm, Himle Rapp, to develop a strategic public relations and social media plan, along with key messaging. The plan has become the cornerstone of outward communications efforts leading up to the launch of MNsure.
- > Agent/Broker research: Additional research was conducted of the agent/broker groups based on two main factors:
 - Results from the research showed a strong symbiotic relationship between the small business owner and their agent/broker
 - The Small Employer and Employee Technical Work Group, in their November 2012 report to the Advisory Task Force, recommended that additional study be done on the role of brokers in the SHOP exchange and additional market research be targeted specifically at employers.

The research project concentrated on seeking out the benefits and barriers an agent/broker perceives with the advent of MNsure; what features, services and training might address their needs or influence their behavior; and what messages would be most effective to engage their participation in the MNsure marketplace. Some key findings included:

- > Agents/brokers are concerned about the survival and stability of their field. They feel they are an integral part of the health insurance buying process and want to ensure that their value is demonstrated to clients.
- > They identified the top benefit as being able to compare multiple plans in one place.
- > The main messaging points are: acknowledge the role of agents/brokers; emphasize new options; and show advantage of MNsure tool.

The 30-page report can be accessed on MNsure's website.

> Brand Development: Hired a local branding firm, Haberman, to guide us through brand development. The project was conducted in four phases: Brand Discovery, Brand Creation,



Brand Testing and Brand Finalization. Input was sought at each step from numerous stakeholder groups including; staff; the Advisory Task Force; the Outreach, Communications and Marketing Work Group; and inter-agency partners (commissioners, communicators, planning group members and Governor's office staff).

- Mission: To ensure all Minnesotans have the security of health insurance.
- Vision: To create a statewide resource that provides access to private health insurance and public medical assistance programs.
- Positioning: To be the trusted, go-to resource for Minnesotans to access private health insurance and public medical assistance programs, and secure available financial assistance for purchasing coverage.
- Brand Imperatives: straightforward, positive, for all, non-governmental, unique to Minnesota, go-to resource, emphasis on choice/options

After exploring 28 name options, 4 descriptors, 10 logo designs; and testing the final two options (reaction from 53 individuals was collected by way of 5 focus groups and 14 one-on-one interviews), we arrived at the MNsure brand.

- > Launch Campaign: We are currently working with a local agency, BBDO Proximity, to develop a statewide public awareness outreach/marketing campaign for the launch of the MNsure marketplace. While the campaign is still under development, we envision an approach that combines broad-based public awareness with elements directed to targeted groups such as the uninsured, small business owners and specific ethnic populations. The campaign will incorporate mass media for widespread reach, as well as grassroots outreach strategies crafted to locate consumers in their communities and not only educate them on MNsure, but move them to action. Campaign components:
 - Community Outreach (presentations, events, webinars, etc.)
 - Earned Media (news releases, PSAs, story placements, TV/radio appearances, etc.)
 - Paid Media (TV, radio, billboards, transit, newspapers, direct mail, etc.)
 - A robust social media campaign
 - A dedicated small business outreach strategy
 - Corporate partners / sponsors
 - A strategic communications initiative that taps into existing efforts by consumer assisters, health care provider organizations or companies, and other government agencies.
 - Measurement and performance metrics

> Additional tactics:

- Continuing presentations to public and stakeholder groups. To date, staff have presented to over 150 groups representing a variety of constituencies.
- Exhibiting in the HealthFair 11 area at the Minnesota State Fair. Over 300,000
 Minnesotans visited HealthFair 11 in 2012, while staff had meaningful conversations with
 more than 2,600 Minnesotans who stopped by the booth to ask questions and gather
 information.

Navigators and Agents/Brokers

Minnesota created a Navigator, Agent and Broker work group that focuses on options for navigators, agents and brokers to assist individuals, small employers and employees seeking health insurance coverage through the Minnesota Health Insurance Exchange. The work group members consist of a broad selection of stakeholders including a consumer, small employer, health insurer, navigator, agents/broker, provider, county representative, tribal representative as well as state agency and legislative staff. In December 2011, the work group presented the Exchange Advisory Task Force an initial list of recommendation to ensure that consumers and businesses served by a Minnesota Exchange receive the necessary assistance to complete the application and enrollment process. The Exchange Advisory Task Force adopted the work group's proposed recommendations in their January



2012 meeting. The work group presented recommendations regarding levels of service and training/certification/licensure to the Task Force at the October 2012 meeting, and recommendations regarding compensation were presented in November 2012. Policy decisions related to Navigators and Agents/Brokers were included in the Exchange bill enacted in March of 2013.

> Additional activities to date include:

Navigator:

- Completed a multi-state environmental scan to further inform the recommendations for the Levels of Service, as well as navigator, agent, broker roles, certification/licensure, training, targeted populations, tools and compensation.
- Draft Navigator Program Design completed including current Navigator, Agent & Broker Work Group levels of service recommendations.
- Draft report identifying Levels of Service to be provided by Navigators, Agents & Brokers was presented to and accepted by the MN Advisory Task Force.
- Landscape review of current training and certification practices with organizations performing similar duties and services, i.e. MNCAA, Senior Linkage, etc. in addition to other state activities and considerations was completed.
- Performed landscape review of current Minnesota Outreach and Education Public Programs and Community Efforts; to document an inventory of organizations and inform future potential partnership development.
- Developed draft recommendations regarding Training, Certification and Licensure requirements for the Navigator / Consumer Assistance
- Program which were presented to and accepted by the Advisory Task Force.
- Consumer Assistance / Navigator Program Compensation Models were developed per recommended Level of Services and presented to the Advisory Task Force on 12/11/2012.
- Assessed and began capturing initial administrative and operational resource needs necessary to build the infrastructure of the Consumer Assistance Program.
- The Navigator, Agent and Broker work group presented proposed compensation recommendations for Navigators, In-Person Assisters and Agents / Brokers to the Exchange Advisory Task Force in December 2012. These materials are available on the MNsure website.
- Minnesota State Legislature passed a Bill in March 2013, solidifying the direction of the Navigator & In-Person Assister Program (Consumer Assistance Program) and defined the role of the Agent & Broker in MNsure.
- In April 2013 MNsure issued rules on the policies and procedures whereby entities (including Insurance Producers (Agents / Brokers), Navigators and In-Person Assisters) would be certified to deliver consumer assistance services to consumers using the MNsure web tool to enroll in health care insurance. The rules established the certification requirements for MNsure's Navigator Program and the selection and certification requirements and compensation for MNsure's In-Person Assister program.
- On May 29th, MNsure posted an RFP for Outreach and In-Person Assister Infrastructure Grants with the intent to be award in late August 2013. The solicitation and application for Consumer Assistants (Navigator, In-Person Assisters, Certified Application Counselors) was also posted on the MNsure website on May 28, 2013.

Agent/Broker:

- o As above.
- Insurance Producers (Agents/Brokers) were asked to complete a Letter of Intent, informing MNsure of their intent to partner with MNsure starting in June 2013.

Customer Service

MNsure engaged the CMS designated Minnesota SHIP Director and her team (on loan) to develop a Call Center design. The design work was completed on March 31st and is now being



implemented. The final design is a virtual model that will utilize a technology infrastructure to connect the key players, which include the Call Centers at DHS and a newly implemented front door model that will have 34 staff officing at MNsure (with 20 Call Center Agents and 7 Specialists in a variety of areas including pharmacy, enrollment, tribal and SHOP).

Additional activities to date:

- > The new Call Center Director started June 20th and all three supervisors are in place.
- > All hiring of Tier One and Tier Two Specialists have started with offers made to half of Tier One agents.
- > The Instructional Designer has been hired and an offer is going out to a Data Analyst
- > Contracts to purchase the software for the Call Center are complete.
- > Operational protocols are being reviewed and the final technology plan has been drafted.
- > Training modules are being developed and designed.
- > The CRM tool is in the build phase.
- > The IVR for the phone system has been defined and is currently in the build phase
- > The counties are a key part of the service model and have been engaged in the process of creating workflows.
- > The carrier workgroup continues to meet and is working on detailed process and hand offs of consumers.
- > The DHS contact centers are meeting and the three areas that will be directly touched by the MNsure IVR will have seats in the CRM to allow for smoother management of calls and better customer experience.
- > All other internal and external stakeholder groups continue to meet to identify gaps and issues

What are some of the significant barriers your Program has encountered?

- > Brand development was delayed from a mid-2012 delivery to a March 2013 delivery.
- > Hiring call center representatives in a timely manner has been challenging the NCRC test requirement set back the interview process by two weeks due to lack of capacity for applicants to take the test at the Workforce centers.

What strategies has your Program employed to deal with these barriers?

- > Brand development was efficiently executed and incorporated stakeholder input at every step, which allowed for a smooth progression.
- > We have been working with HR to either lift the NCRC requirement going forward or to send have HR send through more applicants from the original pool than initially sent. We've also offered to screen all resumes ourselves to save HR resources and time however have not been allowed to.



CORE AREA: ELIGIBILITY AND ENROLLMENT

What are the primary strategies your Program has used to approach this Core Area?

- > Establish Advisory Task Force with members representing a variety of stakeholder groups to provide guidance on the design and development of a Minnesota Exchange, including eligibility and enrollment activities.
- Hire full-time staff within MNsure, including Public Programs Operations Director, dedicated to building on activities accomplished under the Planning and Level One Establishment grants to develop detailed work plans, timelines and budget estimates including program integration with the Minnesota Department of Human Services (Medicaid agency).
- > Create stakeholder and interagency work groups to provide stakeholder input on the design and development of a Minnesota Exchange, including an Individual Eligibility work group.
- > Establish five new MNsure staff to address policy, operational and business processes development and implementation.

- > The Individual Eligibility and Enrollment work group has worked with the vendor partners to create an operating system that meets the Federal minimum requirements. On June 18th, this system successfully demonstrated to the Feds that it can hit the federal hub and generate a non-subsidy QHP, a QHP with APTC, and a Medicaid result.
- > The Notifications workgroup has worked with the vendors to identify the needed notices and their associated trigger points.
- > The Individual Eligibility and Enrollment workgroup has worked with the carriers, financial workgroup, and Plan Provider workgroup to establish the policies, procedures, and data flows for premium payment and necessary 834 and 820 transactions.
- > Documentation of eligibility policy requirements for Insurance Affordability Programs started in July 2011 and is ongoing. The Exchange initially leveraged existing subject matter experts and policy expertise at the Minnesota Department of Human Services in the documentation of the Insurance Affordability Programs (IAP) eligibility policy requirements. MNsure has initiated the hiring of permanent MNsure business policy and operations staff to begin the transition of policy development and maintenance to MNsure for Qualified Health Plan, Advanced Premium Tax Credit and Cost Sharing Reductions program policy. Staff continue to analyze and document IAP eligibility policy to identify and resolve policy gaps and to escalate policy issues for decisions as needed.
- > The new Minnesota Health Insurance Exchange Interagency Structure includes both an Eligibility and an Enrollment work group:
 - Eligibility: This group addresses issues of streamlined eligibility determination for premium tax credits and Medicaid, continuity of care and coordination of benefits for individuals moving between public and private coverage and families with members enrolled in public and private coverage, and effective account/case management services for these individuals and families. This work group is specifically responsible for Maximus contract module 1 and portions of module 7 (including eligibility, exemption, and account/case management) and blueprint sections 3, except portions of 3.3, 3.4, 3.6, 3.11, and 3.12 and portions of section 3.0 related to SHOP.
 - Enrollment: This group addresses issues related to health plan enrollment for private and public health insurance. This work group is specifically responsible for Maximus contract module 2 and blueprint section 3.12.



- MNsure works in close coordination with the Minnesota Department of Human Services, Minnesota's Medicaid agency. MNsure staff coordinate regularly with staff at other agencies, including multiple weekly meetings, shared participation in monthly calls with CMS and joint APD/gate reviews.
- > MNsure appeals has tailored its project plan and process requirements to meet the objectives of the proposed rules, which were promulgated in January, 2013. MNsure has designed a foundation that will enable it to swiftly develop the MNsure appeals process, train its staff and educate the public, and begin hearing appeals on October 1,2013.
- > MNsure has executed an interagency agreement with the Minnesota Department of Human Services (DHS) and the Minnesota Office of Administrative Hearings (OAH) to provide the adjudication of MNsure appeals and for consultation services in designing, developing and administering the MNsure appeals process.
- MNsure appeals has begun refining its business requirements and process flow; drafting policies and procedures, templates for correspondence and decisions, training materials and training plans, public education materials; hiring and training new support staff, administrative law judges, and supervisors.
- > Activity in this area as also included:
 - Reviewed with the vendor during Sprints 1 and 2, the high level requirements for the following
 - Anonymous Plan / Provider Information Search
 - Communicate Consolidated Household Eligibility Results MAGI
 - Determine Household Premium Payments and Pay Now
 - Determine if Eligible for the Exchange
 - Determine Potential Medicaid or CHIP Eligibility and Tax Credits Eligibility (MAGI) and Screening
 - Determining Eligibility for Advance Payment of Premium Tax Credits & Cost Sharing Reductions and BHP
 - Enroll in Selected Plan (State Funded or QHP) Initial Enrollment Form(CNX interface in place)
 - Enter Application Data MAGI and State Programs
 - Estimate Tax Credit
 - Maximum Premium Tax Credit Verbiage
 - Monthly Plan Cost and Premium Verbiage
 - Monthly Tax Credit to Apply Verbiage
 - Receive and Process Household Premium Data
 - Remove Company Plan Advisor for Medicaid
 - Remove Wellness Plan Advisor for Medicaid
 - Shop for Eligible Health Plans (State Funded or QHP)
 - Explore case management which includes redetermination of eligibility
 - Explore the Individual shopping and enrollment functionality demographics and eligibility interface
 - Explore the Medicaid shopping and enrollment functionality
 - Review verification functionality of IBM/Curam solution

- > The final federal rules governing Exchange appeals have not been promulgated. No estimated release date has been shared.
- > New regulations and/or developments addressing appeals related matters (e.g., delay on employer mandate reporting and penalty requirements) require modifications to MNsure appeals materials (i.e., draft policies, procedures, notices, and public education materials).



- > MNsure appeals continues to work to resolve an open issue regarding the document location of appeals eligibility records.
- > Final regulations are issued after code freeze from a IT software delivery life cycle timeline requiring evaluation of possible change management determination.
- > Identification and implementation of integration points across all vendor COTS products has taken longer than expected.

What strategies has your Program employed to deal with these barriers?

- > MNsure appeals takes pride in its flexibility and is prepared to revise all draft materials to accommodate forthcoming rules governing appeals and any other appeals related matters.
- > MNsure appeals, together with its appeals entity, is planning for contingencies and risks that could affect appeals operations on October 1, 2013.
- > MNsure appeals is meeting with its technological vendors twice a week to ensure that the technological features meet the necessary requirements to ensure compliance.
- > State and vendor teams are meeting on a daily basis to review impacts and options of final regulations.
- State established a daily issues management and implementation decision meeting where state and vendor business and IT resources participate to discuss and resolve immediate high impact project issues.

CORE AREA: PLAN MANAGEMENT

What are the primary strategies your Program has used to approach this Core Area?

- > Close coordination with state agencies with regulatory authority of insurance and HMOs.
- > Create technical work groups to provide stakeholder input on the design and development of a Minnesota Exchange, including an Adverse Selection work group, Measurement and Reporting Work Group, and plan certification subgroup.
- > Create interagency work group to facilitate coordination on plan management issues.

- In Minnesota, the Commissioner of Commerce has statutory authority to enforce Minnesota's insurance laws and the Commissioner of Health has authority over HMOs. To avoid duplication of regulatory responsibilities and to capitalize on existing regulatory expertise, the certification process will be conducted by the existing regulatory structures within the Departments of Commerce and Health. The Departments of Commerce and Health have released a joint regulatory bulletin specifying the requirements and process for filing plans and rates for certification for the Exchange.
- > The process flows will be facilitated by the State Electronic Rate and Form Filing (SERFF) system. The Minnesota Exchange has also released guidance to insurers on plan certification requirements to comply with Minnesota Law. Plan certification requirements for future years were created in statute in May 2013.
- > Additional accomplishments include:
 - Commissioner-level decision to utilize SERFF standardized templates when released in March of 2013.



- Execution of an interagency agreement between the Departments of Health and Commerce and MNsure in April 2013 to facilitate the certification process and solidify agency roles across different policy areas and operational issues.
- Interagency steps taken to build a centralized repository for provider network adequacy and directory data. MNsure and the Departments of Health and Human Services have developed a common set of provider data elements that will be collected through a single data collection system in the future.
- Leading Exchange IT vendor through understanding, properly structuring, and correctly displaying provider quality data.
- Leading Exchange IT vendor through understanding, properly structuring, and correctly displaying issuer plan data.
- Developing other aspects of MNsure decision support tools to help consumers compare and choose their health benefit plan, such as comparative health plan quality metrics based on existing market data and algorithms to determine how plans will be presented to consumers.
- Carrying out a consumer testing process in May 2013 related to understanding of health plan quality measurement concepts and categorization of potential measures.
- Establishing biweekly carrier meetings to address an array of carrier integration issues, including enrollment, financial management, customer service, SHOP, plan management data, and carrier IT integration testing issues.
- Creation of a SharePoint site to provide carriers a venue for posing questions and receiving written answers and posting of numerous documents of interest to the carrier community.

- > The timeframes for MNsure's IT vendor to implement some aspects of our decision support tools is tight, which has required additional prioritization of functionality that can be ready by October 1.
- > Integrating with SERFF is a time consuming process. There is also some uncertainty related to how carriers have completed CCIIO templates that may affect MNsure's data transfer and loading process.

What strategies has your Program employed to deal with these barriers?

- > MNsure is balancing our highest priority functionality needs in the context of what our IT vendor can deliver by October 1 and sequencing enhanced functionality over time.
- MNsure staff have worked closely with our IT vendor, SERFF and carriers to map which data elements from CCIIO templates in SERFF will be pushed into MNsure. MNsure is also collecting test plan data from carriers to load into SERFF.

CORE AREA: SHOP

What are the primary strategies your Program has used to approach this Core Area?

- MNsure SHOP has created, developed, and maintains a strong collection of Technical Working Groups that provide stakeholder input on the design and development of a Minnesota Exchange; including Carrier Operations, Carrier Financial Operations, and Regulatory Review.
- MNsure SHOP continues to work closely with the NAB team to ensure that we've enabled the Broker's success in the exchange. We see Employer adoption and use of the Exchange as being dependent on the Broker's success. A successful, effective, and helpful Broker will lead to ER MNsure traffic and a successful SHOP roll-out.



> Predictability of costs is seen to be a strong ER need that MNsure is addressing with its defined contribution capability. Helping the ER feel as if the cost to offer coverage to her employees is understood is believed to be critical in moving shoppers along to becoming enrollers.

What are some of your Program's significant accomplishments or strengths in this Core Area?

- > MNsure SHOP has created several Carrier Working Groups that provide technical assistance and explore options for MNsure Carrier-related issues.. The work groups include Carrier Operations, Carrier Financial Operations and Carrier Legal as well as agency and legislative staff and experts.
- > An interagency work group has also been established to interpret Federal and State regulations.
- > Vendor use case models have been developed and are being used to describe functionality across all planned releases.
- > Vendor led system wide integration plans detailing the build, testing, and delivery for 10/1/2013 and 1/1/2014 are in process.
- > A technical design solution to support list bill, premium aggregation, and EDI transactions between MNsure and Carriers has been developed. Working closely with Finance work group to configure.
- > There is collaboration between Vendors and MNsure to define the functionality for Employer Shopping, ID Proofing, Reference Plan, Defined Contribution, Employer Choice, Employee Choice, and Broker functionality.

What are some of the significant barriers your Program has encountered?

- > We have experienced barriers with Vendor integration and program development for Employee enrollment
- > Late decisions from Federal agencies are impacting ability to provide the desired functionality, has often led to rework that we don't have time to do, but must.

What strategies has your Program employed to deal with these barriers?

> We are working with the vendors to determine what can be delivered by October 1st and then mitigating the risk by developing manual processes to continue the process from Employer enrollment through Employee enrollment and effectuated coverage.

CORE AREA: ORGANIZATION AND HR

What are the primary strategies your Program has used to approach this Core Area?

- > Hire full-time staff to provide leadership to state-based exchange design and development activities in Minnesota.
- > MNsure activities were taking place as part of Minnesota Management and Budget (MMB). This structure has enabled the Exchange to utilize existing state processes and procedures and coordinate with other state agencies as appropriate.
- > With the passage of enabling legislation, create and execute a plan for a transition from MMB into an independent state agency with a seven member board.



- > Utilize Board leadership for the ongoing development and maintenance activities of MNsure.
- > Create support offices to maintain day to day functionality of MNsure including human resources, procurement, accounting, budget, legal, communications and other general administration support.

- > MNsure has hired all senior management roles.
- MNsure design and development activities are transitioning from MMB to the Board. As such, the MNsure is still able to utilize existing state processes and procedures. Minnesota is also committed to creating an Exchange that works for all Minnesotans and as such is coordinating with other state agencies to the greatest extent possible. MNsure maintains a close relationship with the Department of Human Services for project management, design, development, implementation and maintenance.
- > Specific accomplishments to date include:
 - MNsure has hired over 20 additional full time employees since June 2012, including:
 - SHOP Director
 - o Security Officer
 - Procurement Specialist
 - Budget Analyst
 - Navigator Manager
 - o Three Call center Supervisors
 - Call Center Manager
 - o Accounting Supervisor
 - Human Resource Personnel Officer
 - Marketing and Coordinator
 - Outreach Coordinator
 - Social Media Coordinator
 - 2 IT System Administrators
 - Network Administrator
 - Security Technician
 - Security Administrator
 - Integration Administrator
 - o IT Supervisor
 - An additional 26 call center positions, 11 IT positions and 11 are in the interview process as of July 1, 2013.
 - Balance of positions will be posted and targeted to be filled in the next 3 months. 1)
 Accounting staff, 2) Facility staff, and 3) Operation positions for customer service, plan management, reporting, SHOP, Navigator/Agents/Brokers and individual eligibility.
 - > MNsure Consultants/ Temporary Resources
 - The temporary resources needed by MNsure have been staffed to meet 90% of the needs. A few additional resources have been identified such as User Acceptance Business Analysts, English as a Second Language Project Manager and Training resources.
 - Procured permanent space for MNsure, built out and moved into. Call Center space is estimated to be ready by August 15. Temporary space will be used for call center training as well as vendor staff.



- > State salary ranges limit ability to attract qualified candidates.
- > The need to hire quickly for many positions at the same time has put a strain on limited HR resources.
- > Need to re-budget federal grants to move salary savings to contracted resources for the same activity causes delays in gaining resources.

What strategies has your Program employed to deal with these barriers?

- > Sought and received legislative approval by the 2013 Legislature for compensation plan for MNsure to assist with attracting qualified managerial employees.
- > Utilized a contract resource to draft work orders for short term consultants, as well as review resumes and organize interviews. Contract ended in April 2013
- > Utilized a temporary position to draft position descriptions, review and post positions on state systems. Position ended in May 2013
- > Utilized services from Minnesota Management and Budget agency to provide Human Resource resources including a temporary director and other resources for processing positions.
- > Hired Human Resource position who is being trained by Minnesota Management and Budget Human Resource staff.

CORE AREA: FINANCE AND ACCOUNTING

What are the primary strategies your Program has used to approach this Core Area?

- Hire full-time staff within the Department of Commerce, including a Finance Director, dedicated to building on activities accomplished under the Planning Grant to develop detailed work plans, timelines and budget estimates related to financial management of an Exchange.
- > Utilize existing Department grant management, procurement, financial management and internal control structures for all Exchange activity until a transition plan from Commerce is fully executed.
- With the passage of enabling legislation, create and execute a plan for a transition from MMB and Commerce for Financial Management activities into an independent state agency with full staffing to meet day to day needs of MNsure. Create Technical Work Groups to provide stakeholder input on the design and development of a Minnesota Exchange, including a Finance work group.
- > MNsure compliance staff has completed a compliance plan to lay out the strategy for detailing processes to ensure financial integrity.

What are some of your Program's significant accomplishments or strengths in this Core Area?

Because Minnesota development and design activities have been under Commerce and MMB, MNsure was able to utilize existing state resources and grant monitoring processes and procedures. With the passage of authorizing legislation, MNsure has hired accounting, budget and procurement staff in addition to the Chief Finance and Administrative Officer to transition these activities to MNsure.



- > MNsure has developed an accounting structure for operations including interactions with Department of Human Services for cost allocation as well as the Department of Health and Commerce for interagency activities.
- Minnesota has contracted with US Bank as an e-vendor. MNsure will utilize US Bank to process SHOP and initial month QHP payments. This service may be used for BHP/MnCare as well, pending discussion on payment process needs for BHP/MnCare with the Department of Human Services. MNsure is also partnering with the Minnesota Department of Human Services Issuance Operating Center and Receipt Center to print paper invoices and notices and process check payments.
- > Grant management, procurement, financial management and internal controls for MNsure planning and establishment grants currently follow the financial and accounting processes and procedures of the State of Minnesota, including utilization of the state's accounting and procurement system (SWIFT) and many statewide policies and procedures to ensure financial integrity.
- > The MNsure compliance plan draft has been completed and is in process of review and discussion with MNsure business area management. The compliance plan will outline the strategic approach for ensuring integrity of grants management and financial management activities.
- 2013 Legislature enacted authorizing legislation establishing a 1.5% premium withhold for CY 14 to establish an operating reserve. In addition, the legislation authorizes the MNsure board to set an annual premium withhold of up to 3.5%.
- > A Carrier Work Group was established for finance issues. Processes including 820 and 834 guidelines, transmissions and reconciliation as well as premium payments and withhold process were developed.
- > Additional accomplishments include:
 - Re-budgeted grants and began transition of grants from Commerce to MNsure.
 - Invoice layout designed and prepared for testing with IOC and Receipt Center.
 - Use case development for premium processing.

- > Changes to CCIIO guidance on re-budgeting from 25% to \$250,000 has created a significant amount of work.
- > Lack of reconciliation or definition between Minnesota's IT contract amounts and the NOA has created additional work on the fund release requests.
- > Need to transfer grants from the Department of Commerce to MNsure via federal required systems has created a significant amount of work and will potentially delay critical purchases.
- > Definition of operating structures for day 1 not completely known yet without final IT operation in place, therefore budget estimates constantly changing.
- > Large range in participation estimates.
- > Complex cost/budget relationships between multiple agencies and state programs.

What strategies has your Program employed to deal with these barriers?

- > Have requested reconsideration of the \$250,000 threshold.
- > Have worked with CCIIO project officer to reconcile amounts.
- > Working with the Department of Commerce and CCIIO staff on the grant transfer.



- > Working with multiple agencies to estimate appeals, paper applications, training, and outreach costs based on experience in current state programs.
- > Utilize participation estimates from Gruber/Gorman for 2016 and the Wakely Budget Model to estimate 2014 and 2015 participation and revenue estimates.
- > Implemented a Financial Management Operations Workgroup between stakeholder agencies to review issues and make recommendations.
- Implemented interagency agreements with Minnesota Department of Health, Minnesota Department of Commerce and Department of Human Services outline financial relationships and operations between the agencies.
- > Utilize current statewide accounting system and process and procedures for financial management.

CORE AREA: TECHNOLOGY

What are the primary strategies your Program has used to approach this Core Area?

- Signed an IT contract completing two-stage "proof of concept" Request for Proposals (RFP) process for "best in class" information technology components of an Exchange. IT contract signed and completed in June 2012. Supplemental amendments as well as other supporting contracts have also been executed to help with the MNsure application effort.
- > Hire and utilize technical staffing from multiple organizations within the State government of Minnesota, COTS vendor staff, and supplemental contractors that are dedicated to building on activities accomplished under the Grant to develop and execute detailed work plans, timelines and other project estimates related to the IT build.
- > Utilize a governance structure that provides a flexible guidance and allows decisions to be made at the lowest possible authority level, along with escalation steps to the proper authority if needed.
- Establish relationships to work with the proper oversight groups that are both internal and external to the project. These groups include an Independent Validation and Verification (IV&V) vendor, various Departments within the State of Minnesota, and three office centers at CMS.
- > Collaborate with the Minnesota Department of Human Services, the MN Central It Agency (MN.IT), and other state agencies to jointly complete Gate Reviews and PAPD.
- Coordinate re-use and work efforts with multiple State agencies as well as other State Exchange projects. Because we are using the same COTS vendors in our solution, Minnesota is working very closely with the State of Maryland to coordinate project efforts.
- > Minnesota also participates in a number of other forums that facilitate state collaboration including State Refor(u)m, UX2014, Exchangers, RWJF State Network, Pacific Business Group on Health and Consumers Union.
- > The MNsure project acted on the opportunity to leverage and extend existing infrastructure in a MN.IT data center. This action allowed the project to save considerable costs that would be associated with procuring a whole new and supported infrastructure set.
- > The MNsure project uses a combination of COTS applications, custom applications, and service-oriented system integration products to accelerate the implementation of MNsure application. The COTS applications provide large parts of the required system



- functionality and are integrated through an enterprise scale, service-oriented platform for system integration.
- Aligned with Medicaid Information Technology Architecture (MITA) and Web Services Interoperability Organization (WS-I) guidelines. WS-I's basic profile defines best practices within the web service standards and promotes the highest possibility for reuse and platform independence by emphasizing standards, utilizing built-in security and privacy and by being information-centric.

What are some of your Program's significant accomplishments or strengths in this Core Area?

- Minnesota is committed to developing an Exchange that is consumer-friendly, easy to use and accessible, and fosters fair and equitable competition in the health care system. The Minnesota Exchange will seamlessly support private and public health care coverage options to individuals and small businesses. To accomplish these goals Minnesota is working closely with vendors, state agencies and other states to leverage existing efficiencies and expertise. Minnesota's IT infrastructure is modular in nature to encourage a best in class solution.
- Minnesota has entered into a vendor contract to utilize existing COTS software that will be tied together via an integration layer to make up the MN HIX solution. We also are leveraging existing infrastructure resources within the MN Medicaid agency to host the MN HIX solution. A plan to fortify the infrastructure has been established and enacted to meet the estimated needs during production times. Efforts have also commenced to establish integration solutions that will be utilized with the MN HIX.
- Minnesota is leveraging the working relationships between all partners at the vendor, State and Federal levels. These efforts have produced strong collaborations and the ability to work through many contentious issues. The relationships have also provided grater possibilities for sharing of ideas, solutions, and re-use between staff at various locations.

What are some of the significant barriers your Program has encountered?

- > **Schedule and Timeline** This is a large and complex project difficult to implement under this short time frame. The project is continually evaluated, managed and adjusted to keep the schedule in line.
- Scope Most project requirements have been established and documented. However, prioritizations of the requirements continue to occur in order to meet schedule revisions. These rework efforts sometimes produce other scope impact issues due to the need for resources and implementation. The Scope is also being impacted around some requirements that have not been fully defined or had been defined late in the process.
- Requirements not fully defined Related to the scope barrier issue, it has been found that not all requirements had been defined or even known at the time of requirements gathering within the project plan. These unknowns have come out later in the project and have impacted many project resources in trying to deal with the late implementation. Examples of these late requirements are some Federal Rules that have been release late in the summer of 2013.
- > **Staffing turnover** Any project is subject to staff resource turn over and MNsure is no different. This barrier requires the project to manage turn over by constant documentation, training and knowledge transfer to others involved in the project.



What strategies has your Program employed to deal with these barriers?

- > **Schedule and Timeline** The project schedule is continually evaluated, managed and adjusted to keep to the timeline and meet key milestones.
- > **Scope** Prioritizations of the requirements continue to occur in order to meet schedule revisions. Modified or newly identified requirements are evaluated as part of an ongoing process to manage the project scope.
- > **Requirements not fully defined** Requirements that are found later in the project are evaluated, assessed for effort and prioritized for implementation.
- > **Staffing turnover** The project staffing plans are routinely managed and efforts are made to manage the effects of turn over by constant documentation, training and knowledge transfer to others involved in the project.

CORE AREA: PRIVACY AND SECURITY

What are the primary strategies your Program has used to approach this Core Area?

- > Hire full-time staff within the Department of Commerce, including a Senior Counsel, dedicated to developing detailed work plans, timelines and budget estimates related to privacy and security of an Exchange.
 - Hired the MNsure Privacy & Security Manager dedicated to the development and implementation of MNsure administrative policies and procedures to ensure the privacy and security of the data within the health insurance exchange.
 - Implemented mandatory HIPAA and Security training and reporting for all MNsure fulltime staff and consultants working on the setting up and running of the MN health insurance exchange.
- > Privacy and Security provisions have been built into the technical and business infrastructure contract that was signed in July 2012.
 - Provided the MARS-E security standards to the vendor consultants building the main components of MNsure to ensure adherence to the required standards.

- Protecting privacy and security of Exchange users is a paramount focus of all Exchange design and development activities. Users of the Exchange must feel confident that their personal information is safe and secure to ensure trust and accountability in the new online marketplace. Minnesota has included detailed privacy and security requirements in the recently announced IT contract and is working closely with agency partners and vendors to make certain all federal privacy and HIPAA laws are followed.
- > Additional accomplishments to date include:
 - Identifying and starting a Privacy & Security cross agency work group
 - Analysis of the PIA to breakdown to a level to assign resources to complete.
 - Decision to leverage current information security and privacy infrastructure within other MN state agencies.
- > Attendance at CCIIO privacy and security webinars
- > Completion of the SSP and SPR



- > MNsure Legal and Compliance full-time staff attending additional CLE legal training on Privacy and Security
- Securing a dedicated team to develop the identity and access management (IAM) for the MNsure website.

Delays in receiving federal guidance on specific privacy and security requirements as well as delays/changing timelines for privacy and security documentation have negatively impacted planning and execution in this area.

What strategies has your Program employed to deal with these barriers?

MNsure has sought clarification on issues via its state officer, but has also implemented reasonable interpretations in absence of direct federal guidance on specific issues. To the extent that further guidance on an issue we have taken action on conflicts with the action MNsure has implemented, MNsure will work quickly come into compliance.

CORE AREA: OVERSIGHT, MONITORING AND REPORTING

What are the primary strategies your Program has used to approach this Core Area?

- > Hire full-time staff within the Department of Commerce, including a Senior Counsel, dedicated to oversight, monitoring and reporting.
- > Utilize existing state processes and procedures.
- > Hired a Compliance and Program Integrity Coordinator dedicated to developing and implementing the administrative policies and procedures for oversight, monitoring and reporting for the MN Health Insurance Exchange.

- Minnesota is designing an Exchange that is accountable to the people of Minnesota. Minnesota is dedicated to ensuring prevention of waste, fraud and abuse at every level of Exchange design and development activity. Current efforts have included working with existing State Agency resources devoted to these issues and with outside resources with vast experience in this arena. Minnesota will continue to monitor and report on all areas of waste, fraud and abuse prevention and will continue to update standards as new best practices become available. Minnesota is requesting grant funding for an Internal Audits/Program Integrity Manager and enforcement staff at the Department of Commerce.
- > Additional activities to date include:
 - Control awareness training for the team working on the MN HIX website tool.
 - Overall prioritization plan for business risks to the Exchange to determine schedule for deep dive assessments.
 - Draft compliance plan.
- > Process to complete a deep-dive business risk assessment for the business processes tied to the MN HIX website tool after each development sprint and later into the testing phase.
- > Deployed a consolidated risk register to document and report risks related to both MNsure project and operational risks.



- > Identified a dedicated Risk Manager to manage the risk register process.
- > Drafting of a risk-based internal Compliance and Audit plan for MNsure.
- > Conducted internal control awareness seminars.
- > Established contact with compliance and law enforcement staff in other agencies including: DHS- Internal Audit Department and the Office of the Inspector General, Commerce Insurance Fraud Unit, Ramsey County Attorney.
- > Coordinated the development of business requirements for audit trail logging.
- > Coordinated the first round review of the MNsure project by an Independent Validation and Verification vendor.

N/A

What strategies has your Program employed to deal with these barriers?

N/A

CORE AREA: CONTRACTING, OUTSOURCING AND AGREEMENTS

What are the primary strategies your Program has used to approach this Core Area?

- > Hired Contract/Procurement coordinator to review and process contracts to ensure they meet state and MNsure procurement policies.
- > Utilize Attorney General and Department of Administration as necessary for complex contracting issues
- > Utilize MN.IT staff from Department of Human Services and MN.IT central for major IT procurement negotiations.
- > Established Interagency Steering Committee to review contracting issues for major IT build contracts
- > Established Technical Architecture Committee to review major IT infrastructure needs and strategies
- Established Business Architecture Committee to review business operation contracting needs

What are some of your Program's significant accomplishments or strengths in this Core Area?

- > Processed contracts and procurement for major IT purchases for the MNsure IT infrastructure
- > Hired Procurement manager with statewide procurement experience

What are some of the significant barriers your Program has encountered?

> Ability to meet multiple business area needs in a short time frame.



- > Requirement to request re-budgeting authority for grant category spending changes over \$250,000 even though the purchased item was included in the grant, but not in the category of spending originally budgeted in.
- > Delays in IT fund release requests at CCIIO.

What strategies has your Program employed to deal with these barriers?

- > Working with CCIIO to waive the \$250,000 re-budgeting requirement.
- > Providing CCIIO with preliminary draft of fund release to identify concerns.
- > Set procedures/policies for business areas on purchases requiring Procurement staff notification at the beginning of the process.

