



## Utah Health Exchange Advisory Board Meeting Summary Wednesday, April 27, 2011

### Utah Health Exchange (UHE) enrollment as of May 1, 2011

100 employer groups (2821 individual lives)

To date, 20% of small businesses enrolled did not previously provide health insurance benefits to their employees.

UHE will be hosting an "open house" event in May, 26 states so far are planning on attending.

### Operations Report

OCHS (Exchange staff) have issued an RFP to solicit companies to contract with to do the employer/ee application function and underwriting. They will have a decision by the end of the week and move forward. The timeline for getting this IT platform up and running depends on which company wins the contract.

### Brokers: role on Exchange and broker training

Most small business groups are using brokers to enroll through the Exchange. Exchange staff would encourage the use of brokers for two reasons:

- 1) most of the appeals come from groups that are not using brokers
- 2) the cost to employers for using a broker is built in to the Exchange functions, so those employers who don't use one do not save any money by forgoing broker services.

By May 15 the UHE website will list only licensed and Exchange-trained brokers. This will be expanded at a later (unspecified) date to include quality rating of brokers.

### "Dashboard" (UHE enrollment and plans)

The Dashboard will be made public on the UHE website.

There are 146 plans being sold on the UHE website.

- Each has at least 1 person enrolled.
- Approximately 40 have less than 5 enrollees.
- Approximately 30 plans are the most popular, with the most enrollees.
- The top 5 are low deductible plans; the top 15 are \$500-\$1500 deductible plans.

Exchange staff plans to make this information available to insurers, so that they can see which deductible levels are most popular.

Discussion ensued about how employees are shopping on the UHE. Are they using brokers (individual employees do not necessarily use the employer's broker's assistance in choosing a plan)? Not sure why employees choose the default plan (35% do): they don't know what plan their employer has selected as default unless their employer or broker tells them. There was agreement that consumers need more information and need to be more involved so they are "forced" to take responsibility and make informed choices. To this end, there was a call for a better tool for employees to use to compare plans. While the filtering/sorting tool is working ok, the brokers on the Board stated that the "Best Fit Tool" is confusing and only gives "nonsense." This issue will be addressed as part of the [Exchange Planning Grant](#) core technology fix.

### Call Center

A call tree will be in place by July 1. The goal will be a 90-95% first call solution.

## UHE Demonstrations

Exchange staff are still working on a two demo products, one for consumers and one for stakeholders. These tools would allow individuals not enrolled in insurance through the Exchange to go into the UHE and get familiar with the Exchange, see what the UHE has to offer them.

## 2011 Legislation and the UHE

### SB294

- Adds an employer-one child family tier and changes the rate slope ratio to 6:1.
- The Governor vetoed this bill, so the Exchange staff will not implement it.

### HB128

- NetCare: not all carriers have NetCare on the Exchange, so carriers must update this
- Most popular plans: not much to correct here; got rid of “basic benefit plan” as it was
- Mental Health: carriers must add
- Large Group: removed from UHE. Will review this in the future, but focus is on small groups and individuals this year.
- Rate Review: in -house. Goes into effect with the fiscal year
- Appointment of insurance producers (brokers) to the defined contribution market (UHE): must be appointed by all carriers, be licensed in Utah, and attend UHE broker training one time.
- Broker training: Brokers who sell on the Exchange must attend a training on UPP (Utah Premium Partnership)—this training will begin in July, a link to public programs will be added to the UHE website.
- Call center: (already discussed)
- Addition of gender (optional) to rating: carriers can use this but send rates by age-bands to the UHE (gender rates not visible to consumers). This may be a non-issue as most carriers don’t use gender.
- 60 day advance of effective date renewal: this creates a 90 day timeline for the Exchange and may create a timing issue for brokers whose clients are comparing plans in and out of Exchange. This is ACA driven
- Transparency of health plans: the Dept of Insurance is working on a portal for insurers to use to load the required data so that it can be published on the UHE website.

## Next Meeting:

May 25, 2011

10:00-11:30