

# Vermont Health Connect

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*An Update on Vermont's Integrated system for  
Medicaid and QHP Enrollment*

*January 28, 2016*

# Overview

- Recent Milestones and Challenges
- Additional Updates
- Open Enrollment Home Stretch Reminders

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# Recent Milestones and Challenges

# Recent Milestone: 2016 Renewals

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VHC has completed QHP renewal processing.

- Successfully processed 21,000 renewals and updated subsidies to 2016 levels
- Automated process took care of 80% of cases
  - Measures were in place to ensure that customers not immediately renewed had coverage
  - Fewer than planned – more work and longer renewal time, longer suspension of COC
  - 143 renewal cases are in the process of being integrated with carrier (BCBSVT); complete in VHC system
- Four months ahead of last year

# Recent Milestones: Form 1095

This year, VHC is generating two versions of IRS Form 1095.

- 1095-A
  - Proof of coverage and subsidy for QHP customers to use when filing taxes
  - 25,000 sent to QHP customers
  - Final batches mailed this week
- 1095-B
  - A form, new this year, to show months of coverage
  - 120,000 being mailed to Medicaid recipients
  - On target for last batch to mail 2/17- a month and a half ahead of the federal deadline

# Recent Milestones: Medicaid

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Medicaid redetermination project is underway, engaging 10,000 households per month.

- Medicaid for the Aged, Blind and Disabled (MABD)
  - Redeterminations began in November 2015 (1K/mo.)
- Medicaid for Children and Adults (MCA)
  - First group of notices to legacy members mailed in early January for February redetermination
  - Two more groups for March and April redetermination (9K/mo.)
  - VHC member groups run May – October (9K/mo.)

# Recent Challenges

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- Change Requests
  - Change processing suspended during automated-renewal effort and for year-end process – inventory of requests increased
- 834 Processing
  - Large increase in integration errors
  - Increase in integration errors related to volume of activity, ratio of total the same
- Wait times at Customer Support Center
  - Just over half of calls answered in under 30 seconds the last two months
  - Some days peaked at 2-hour hold times

# Change Requests (COC)

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## Goal:

- Customers who report a change by the 15th of a month should expect to see that change reflected on their next bill.
- Changes submitted in the second half of a month should be reflected on one of the following two invoices.

## Inventory:

- There will always be a working queue of change requests.
- Acceptable as long as customer service targets are met.
- They have not been met while change-processing was on hold.



# Change Requests (COC)

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- Change request inventory: 5,700 (as of Monday)
- Processing restarted this week, after last weekend's successful deployment and validation of year-end process
- Maximus back up and running processing Medicaid COCs over the phone, other COCs to follow
- HAEU processing inventory of requests

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# Additional Updates

# Staffing

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Total staff across VHC Operations: 146

Current vacancies: 15

In addition:

- 9 positions are in the RFR process.
  - For example, we are converting premium processing temps to limited service.
- 7 temps started in January, assisting with the Medicaid redetermination project
- 13 more slated to start 2/8

# Audits

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## OIG Cost Allocation Methodology

- Review fieldwork complete
- Some time before the results are compiled and finalized

## CAFR annual financial audit and A133 compliance audits performed by KPMG

- Nearing completion
- No major findings reported to date

## Berry Dunn Programmatic Audit of Vermont Health Connect

- Started 1/27 and will extend over the next 6 weeks
- A review of enrollment and eligibility for fiscal year 2015 required by CMS of all state run exchanges

# Benaissance

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Benaissance is developing additional reporting capabilities to facilitate ongoing reconciliation activity.

Balance in custodial account (as of 12/31/15): \$5.9 million

- \$680,000 represented VPA subsidies that have not been sent to insurance providers due to partial premium payments from customers
- Unallocated figure to be determined and addressed in reconciliation

In the case of a termination of coverage, the VPA is credited against the subsequent invoice paid by the State for VPA. If a refund of premium payment is deemed to be warranted to the customer, a refund is sent.

Total premium payments for December: \$7.2 million

Total refunds for December: \$88,000 (approximately 1%)

# 2016 Renewal Reconciliation

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*An update and clarification to BCBSVT's presentation from last week.*

As of this Monday (1/25):

- Reconciliation efforts had accounted for all renewing customers in both the VHC and BCBSVT systems.
- Of the 691 customer cases identified by BCBSVT last week:
  - All renewals have been processed in the VHC system.
  - All but 143 renewals have been received by BCBSVT and are being processed on their end.
- A VHC team is working with BCBSVT on the final 143 this week.

# VHC-Carrier-Benaissance Reconciliation

*An update and clarification to BCBSVT's presentation from last week.*

BCBSVT showed a slide from VHC reconciliation team's raw data report

- VHC reconciliation team intentionally casts the widest net possible to capture all discrepancies, then uses a data analysis procedure to determine:
  - Cases in which no action is needed (ie "Street" in one system and "St." in another)
  - Priority areas of work – with input from reconciliation team, leadership, and carriers
- "Customer Missing" actually means "Records Not Found"
  - Doesn't indicate that a case or a customer doesn't exist.
  - Most frequently indicates date discrepancies in which coverage ended in one of the systems so that record could not be "found" in the other systems.

# COC “Reject Rates”

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*An update and clarification to BCBSVT’s presentation from last week.*

- BCBSVT slide showed reject rates fluctuating between 9.5% in July to 13.1% in November, then dipping to 10.8% in December.
- VHC implemented a validation tool in December, expects reject rate to continue to decline in months ahead.



# Customer Calls

*An update and clarification to BCBSVT's presentation from last week.*

- BCBSVT slide showed calls from VHC customers vs. other customer pools
  - Problems are one of many reasons for customers to call
  - Apples and oranges comparison to other pools
  - Customers in other pools aren't encouraged to actively shop for plans and re-evaluate options as subsidies change
- Second BCBSVT slide showed quarter-over-quarter change in volume
  - Problems such as CoCs could be one reason
  - High number of letters, from both VHC and BCBSVT, inviting calls is another
    - Full-Cost Individual Direct Enroll option new this quarter
    - Plan Comparison Tool and increased outreach to consider plan options

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# Open Enrollment Home Stretch Reminders

# Customer Support Center

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With Open Enrollment ending on a weekend, the Customer Support Center will be open special hours:

Saturday, January 30: 8am to 4:30pm

Sunday, January 31: 10am to 5pm

Call volume at the deadline is always high, so these special weekend hours are for new enrollments and plan changes only.

# Federal Fee

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By signing up for health coverage, Vermonters can avoid having to pay the individual shared responsibility fee – which increases significantly in 2016 – when they file their federal taxes.

- The federal fee for not having health insurance increases in 2016 – the typical uninsured individual will pay \$695 when they file their 2016 taxes (in spring 2017).
- Those with higher incomes will pay more – 2.5% of their household income above the filing threshold – and could have to pay for all of their own health care costs on top of that.

# Plan Comparison Tool

The screenshot displays the Vermont Health Connect website interface. At the top, the logo reads "VERMONT HEALTH CONNECT" with the tagline "Find the plan that's right for you." Navigation links include "Help Center", "Health Plans", "About VHC", "Latest Updates", "FAQ", "Search", and a "SIGN IN" button. Contact information for languages and phone numbers (855-899-9600) is also present.

The main content area is divided into two primary sections: "NEW CUSTOMERS" and "CURRENT CUSTOMERS".

- NEW CUSTOMERS:** Features a "Compare Plans and Sign Up" button with a pencil icon and a "GET STARTED" button.
- CURRENT CUSTOMERS:** Includes "Renew Your Plan or Shop for Another Plan" with a refresh icon and a "LEARN MORE" button, and "Report a Life Change" with a megaphone icon and a "REPORT A CHANGE" button.

A "WE'RE HERE TO HELP." section offers support options: "BY PHONE" (855-899-9600 toll-free), "IN-PERSON" (Find an Assister), and "ONLINE" (Find Answers).

Below this, there are three main tool areas:

- Subsidy Estimator & Decision Tools:** Describes a tool to "Compare costs for different plan options including monthly premiums, possible out-of-pocket costs and financial help available to lower costs." It includes a "Try Our Decision Tools" button. A yellow arrow points from this section to the bullet point below.
- Featured Videos:** Lists "Still in the right plan?" (WATCH "Review") and "Life change to report?" (WATCH "Changes").
- Looking for something else?:** Lists resources such as "Green Mountain Care, Medicaid, Dr. Dynasaur", "Other public programs and benefits", "How to apply for an exemption", "Tax filing, bill payment, and other FAQs", "Questions about Medicare?", "Paper applications", and "Resources for small businesses".

The footer contains "ASSISTER LOGIN", "Privacy Policy · Terms of Use · © Copyright 2013", the Vermont state logo, "Vermont.gov Official State Website", "Are you having trouble signing in?", and social media icons for Facebook, Twitter, and YouTube.

- Interactive tool has attracted over 10,000 visits in the last six weeks.

# Plan Comparison Tool

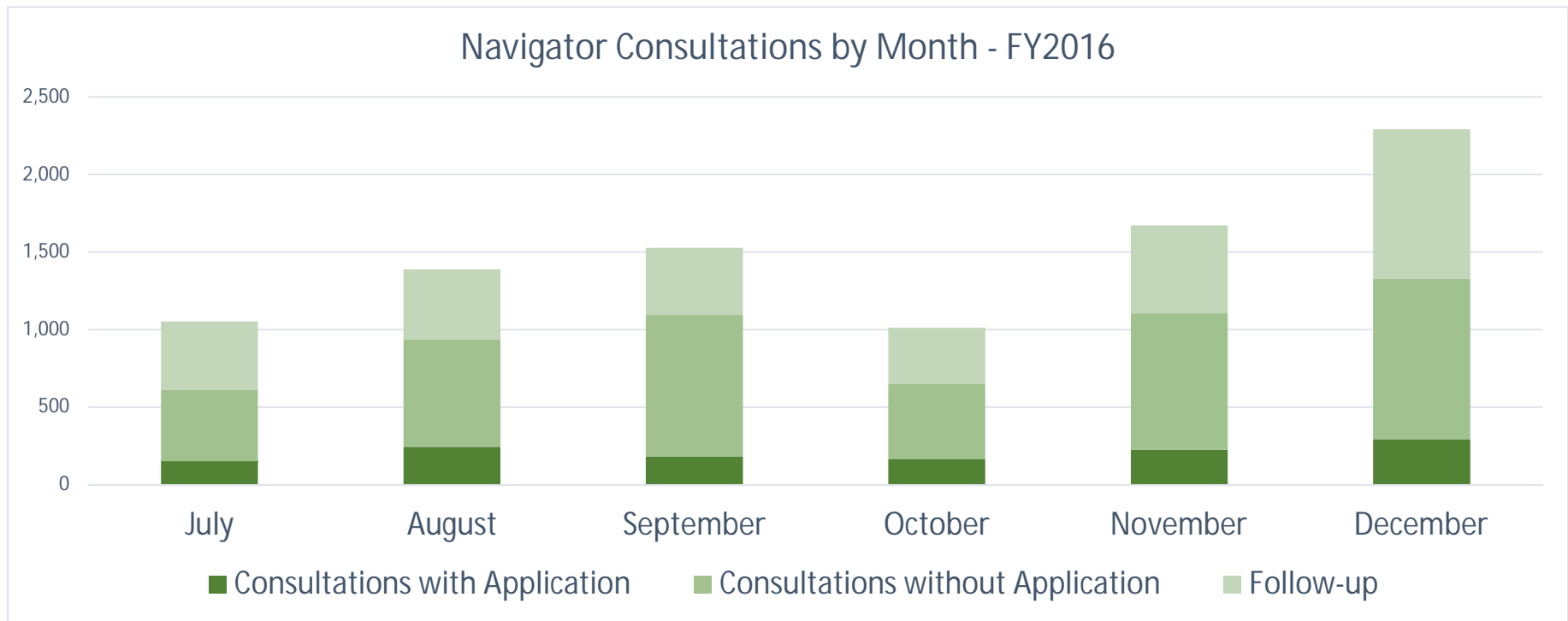


Available Health Plans: 20 plans found.

Sort By Yearly Cost Estimate

Filter Results	Plan	Yearly Cost Estimate	Cost in a Bad Year
	Click plan name for <b>DETAILS</b> or to <b>ENROLL</b> Click checkboxes to compare	(Estimated average total for people like you including premium and out-of-pocket)	(Estimated total for people like you in a high health care year -- 8% chance)
	<b>MVP Vitality Plus</b> <input type="checkbox"/> MVP Health Care - HMO - Silver Monthly Premium: <b>\$125.78</b> - after \$827 subsidy Deductible: Medical: <b>\$120</b> / Drug: <b>\$100</b> per person	\$2,669	\$5,379
	<b>BCBSVT Blue Rewards Silver Plan</b> <input type="checkbox"/> Blue Cross and Blue Shield of Vermont - EPO - Silver Monthly Premium: <b>\$103.32</b> - after \$827 subsidy Deductible: <b>\$400</b>	\$2,730	\$5,740
	<b>BCBSVT Silver CDHP Plan</b> <input type="checkbox"/> Blue Cross and Blue Shield of Vermont - EPO - Silver Monthly Premium: <b>\$110.80</b> - after \$827 subsidy Deductible: <b>\$2,300</b>	\$2,920	\$3,630
	<b>MVP Vitality HDHP</b> <input type="checkbox"/> MVP Health Care - HMO - Silver Monthly Premium: <b>\$109.10</b> - after \$827 subsidy Deductible: <b>\$2,400</b>	\$2,949	\$3,709
	<b>BCBSVT Silver Plan</b> <input type="checkbox"/> Blue Cross and Blue Shield of Vermont - EPO - Silver Monthly Premium: <b>\$141.98</b> - after \$827 subsidy Deductible: Medical: <b>\$1,200</b> / Drug: <b>\$200</b> per person	\$3,124	\$5,004
	<b>MVP Vitality</b> <input type="checkbox"/> MVP Health Care - HMO - Silver Monthly Premium: <b>\$159.76</b> - after \$827 subsidy Deductible: Medical: <b>\$1,200</b> / Drug: <b>\$200</b> per person	\$3,337	\$5,217
	<b>MVP Vitality Plus</b> <input type="checkbox"/> MVP Health Care - HMO - Bronze Monthly Premium: <b>\$0.00</b> - after \$827 subsidy Deductible: Medical: <b>\$10,000</b> / Drug: <b>\$600</b> per person	\$4,490	\$13,700
	<b>MVP Vitality</b> <input type="checkbox"/> MVP Health Care - HMO - Bronze Monthly Premium: <b>\$0.00</b> - after \$827 subsidy	\$4,520	\$13,700

# Assisters



# Outreach: at this week's Farm Show







# DON'T WAIT UNTIL IT'S TOO LATE.

**OPEN ENROLLMENT ENDS JAN. 31<sup>ST</sup> 2016.**

**GET COVERED. STAY COVERED. ►**

Avoid the federal fee by getting insurance.

## HEALTH INSURANCE. THE SMARTER AND CHEAPER OPTION.

**OPEN ENROLLMENT ENDS JANUARY 31<sup>ST</sup>, 2016!**

Time is running out to get health insurance. And, the federal fee for not having insurance has gone up. Worried about the cost of coverage? Many Vermonters find it cheaper to buy insurance than pay the federal fee. **Sign up now!**

### Cost of coverage vs. Federal fee

#### COUPLES

In 2016, a couple earning around \$40,000/yr. can find a plan for about \$600/yr. Without a plan, the federal fee is \$1,400.00.

#### FAMILIES

In 2016, a family of four earning around \$60,000/yr. can find a plan for about \$1,000/yr. Without a plan, the federal fee is \$2,100.00.

#### INDIVIDUALS

In 2016, someone earning around \$25,000/yr. can find a plan for less than \$300/yr. Without a plan, the federal fee is nearly \$700.00.

**If you have an existing plan and are happy, you don't need to do a thing.**



### GET STARTED OR GET SOME HELP

VISIT [VermontHealthConnect.gov](http://VermontHealthConnect.gov)  
CALL Toll-Free 855-899-9600

Find the plan that's right for you.

# DON'T WAIT UNTIL IT'S TOO LATE.

**HURRY! OPEN ENROLLMENT ENDS JANUARY 31<sup>ST</sup>, 2016!**

Time is running out to get health insurance. And, the federal fee for not having insurance has gone up. Worried about the cost of coverage? Many Vermonters find it cheaper to buy insurance than pay the federal fee. **Sign up now!**

#### FEDERAL FEE

In 2016, the federal fee for not having a plan could cost you twice as much as having coverage.

#### AFFORDABILITY

Most Vermonters qualify for financial help. Our online Decision Tools are a great place to start.

#### HAPPY WITH EXISTING PLAN

If you're happy with an existing plan, there's no need to do a thing.



### GET STARTED OR GET SOME HELP

VISIT [VermontHealthConnect.gov](http://VermontHealthConnect.gov)  
CALL Toll-Free 855-899-9600