

KENTUCKY HEALTH BENEFIT EXCHANGE ADVISORY BOARD

Meeting Minutes

November 2, 2023

Attendees: Deputy Secretary Banahan, Sharon Clark, Ryan Sadler, Harry Hayes, John Mark Fones, David Roode-Priscilla Easterling as proxy, Supra Parthasarathy, Whitney Allen

Deputy Secretary Banahan welcomed the attendees and confirmed they had received the minutes from the October meeting. John Mark Fones made a motion to accept the meeting minutes with Sharon Clark making a second for the minutes to be approved. Meeting minutes were adopted, and the first agenda item, an update from the Kentucky Health Benefit Exchange was given by David Verry.

David began with the top news that Open Enrollment had begun the previous day and confirmed Open Enrollment would be from November 1st until January 16th. The end time will be 1:00am Eastern Time on January 17th to ensure access for enrollment to all time zones.

Approximately 61,000 enrollments were automatically renewed for 2024 from the 2023 enrollments. This is the bulk of enrollments, and their coverage will have a January 1st start date. The exchange reported some residents eligible for Cost Sharing Reductions (CSRs) had been enrolled in a bronze plan or gold plan rather than the silver plan. For this reason, David shared, every resident should actively shop for the best plan for their needs. David also explained there may be confusion for residents on the difference between coinsurance and copays. David described the resident point of view that they may say their plan doesn't cover something, yet they mean their plan doesn't cover it until a deductible is met. Posters, flyers and fact sheets are developed for employers and groups of employers to use with family dependents and spouses with unaffordable options through work to explore the exchange for options. Public relation developed flyers called the family fix. David reported that special enrollments have also been on the rise, gaining a couple 100 every week or about 1000 a month of people who lost Medicaid or other life events, enrolling for 2023. David reiterated that residents who use a special enrollment late in the year for 2023 coverage, must also actively shop for a 2024 plan as the passive renewal is over.

There is also an MCO change requests so when a resident wants to change their MCO, they can do so through a kynector or agent. When someone wants to change their MCO for the next month they can just simply make that request at the contact center beginning in the middle of December. Those with access to the Self-Service Portal will be able to make that request from their dashboard.

The search tool for kynectors and agents now shows the location on a on a Google map, so residents will see who is closest to their location. A new title was given in the search for kynectors called certified application counselors versus contracted kynectors. They were previously defined as private kynectors, which was confusing for users. This group of kynectors are now defined as Facility Based kynectors as they may work in hospital or medical provider offices or other facilities.

David shared that enhancements were made to the shopping module, that allows users to select bronze and extend expanded bronze together and use filters to look at all those plans or everything but silver or Anthem and Molina or everything but CareSource, or everything all at the same time.

Open Enrolment activities were kicked off, and additional monthly meetings with the kynectors and kynector administrators were added to the calendar. The Friday Facts newsletter will continue as is the incident tracker. The feedback received helps with continuous improvements and the tracker allows the team to resolve problems and clear up misunderstandings.

David reported that system performance had gone very well for day one with few hiccups that were detected and resolved, often within minutes. There were no reports of spinning or clocking or not being able to shop.

Preliminary discussions concerning standardized plans for 2025 have begun. This means there would be a same plan for silver or bronze offered with the same co-pay, same deductibles, and coverage across all issuers. A standard plan would be offered by all issuers, but issuers would still have the ability to offer other plans in each metal level. This will be discussed further within subcommittees and with the Advisory board.

Priscilla Easterling asked what type of issues were being reported through the incident tracker. Kayla Miles provided an update with a slide of information concerning the incident tracker items as well as information from one-on-one sessions. The top five categories were Document upload, Onboarding, Medicaid eligibility, EMM, and Case Association. The breakdown of who submitted incidents showed Agents/organizations with 31 reported, other with 24 reported, Community Action with 16 reported, and KHBE with 11 reported.

David Verry covered a slide on Medicaid Reinstatements next. He explained when individuals are procedurally terminated, that means they didn't turn their documents in, or they could not be reached. Those residents still have 90 days to respond, and if they do that and determined eligible, they are reinstated. David indicated there were thousands per month and the reinstatements have helped get through this unwinding period with more people being able to either keep their coverage or get it back quickly. David said they have implemented about every strategy that CMS allows to improve the processing of and avoid procedural termination, either manually or through system change or both. It was stated that there were about 17% of people who will lose Medicaid and are APTC eligible have enrolled in a QHP on the Exchange.

Karla Burton provided the next update on kynector outreach beginning with announcing there were approximately 492 public outreach or enrollment events scheduled across the state for November. This is reportedly a higher number than during non-open enrollment months that average 300-500.

The kynectors had 19,83 appointments in the month of September, which may have resulted from public enrollment events where the enrollment couldn't be completed, and a follow up appointment was required. kynectors made 1,358 referrals to other community partners that assist with things like clothing or housing and other areas of need. 1,317 system actions were taken by kynectors during the month of September. Reported numbers are expected to increase over the coming months.

David Verry interjected that it was exciting to see how Kentucky is the only state in the Union that has kynectors who are also SHIP counselors who can refer to kynectors and insurance agents have been

working from their side as well. David further stated Medicare Open enrollment was happening which has created a crunch time for people who are help residents, the elderly with their supplements. David reported firsthand accounts of a kynector, SHIP counselor and insurance agent pulling together for their part in the process to make sure those residents receive answers and the support needed.

Harry Hayes with Anthem asked if appointments were documented to indicate if the meetings resulted in a referral to QHP's. He asked if there is any documentation or tracking for appointment results.

Karla Burton responded that kynectors do both Medicaid and QHP enrollments. kynectors would likely refer a resident to an agent if they could not schedule the resident. David Verry did add that metrics could be reviewed to compare the number of QHP enrollments by kynectors and agents. David stated the bulk of those enrollments would fall under agents.

Karla continued with kynector updates with a slide showing pictures of kynectors at events such as the Jack o lantern Spectacular. kynectors had a presence there on October 25th and 26th where they handed out promotional items, with an estimate of over 8,000 attendees over the two days. Karla explained this was an annual event in in Louisville at Iroquois Park with over 5,000 artistically carved pumpkins in different themes.

The Cross-Country Championship was another event kynectors attended. It was held at the Kentucky horse park with over 7,000 attendees.

Deputy Secretary Banahan moved to the next agenda item of Subcommittee updates. She shared that Martha Mather was unable to attend the meeting to provide the Behavioral Health subcommittee update. The next behavioral health subcommittee meeting will be held November 15th.

Whitney Allen then provided the Education and Outreach Subcommittee update. She shared that the Outreach and Education Subcommittee had met Monday, October 23rd, where they received a kynect resources presentation by Tracy Williams. Whitney stated there are ways to ensure community organizations are aware of the kynect resources system and tools. This includes how kynectors can access and leverage those tools with residents they serve. The next meeting is scheduled for Monday, November 13th and will include a presentation from a SHIP counselor, with information on how they may help support work from kynectors.

The Agent Navigator Subcommittee update was not provided as Mark Kleiner was not able to attend and David Verry had not attended the last meeting. David did state they did meet and will continue with monthly meetings.

Ryan Sadler had to leave the Advisory Board meeting early, so Karla Burton provided the Qualified Health Plan subcommittee update per Ryans notes. The subcommittee had met on October 18th and discussed standardized plans, Medicaid redeterminations and health SHERPA. Ryan asked for the group to be reminded that the standardized plan survey was due back by close of business on November the 9th, and that the next QHP subcommittee meeting would be held on November the 15th.

Deputy Secretary Banahan asked if there were any questions or topics for discussion anyone wanted to bring forward. With no responses, Deputy Secretary Banahan announced the next Advisory Board meeting for December 7th from 3:00 to 4:00 PM.

A motion to adjourn was made by John Mark Fones with a second given. The meeting was adjourned.