

WV Health Insurance Marketplace Stakeholder Meeting Summary

Group: All Stakeholders & Consumer Assistance Work Group		
Location: O I C	Date: February 11, 2014	Time: 10:00 a.m.– 11:00 a.m.
Objectives: See agenda		
Facilitator/Lead: Matt West	Handouts: Agenda	
Attendees: 15 in-person, 17 Call-in		
Next Meeting Date: TBD		

Discussion Points

1. **What's New OIC newsletter** – The newsletter is a great resource for all types of information and activities regarding exchanges. Please send any materials and/or submissions you may have to the *What's New* newsletter to Debi McCoy at Deborah.McCoy@wvinsurance.gov.

2. **Federal Updates**
 - a. The IRS announced, through final regulation, that they are delaying the requirement for employers to offer full-time workers health coverage or pay a penalty for medium-sized employers (50-99 employees) until January 1, 2016. Employers with over 100 employees have also been provided with additional flexibility. They are now allowed to cover only a portion of their employees in the near-term (70% in 2015 and 95% in 2016). The rule also clarifies the counting rules for a 30-hour work week (or the equivalent of full-time), offering additional flexibility by allowing companies to average employee hours annually.
 - b. CMS announced that the Federal Data Services Hub has a scheduled outage planned from Saturday, February 15th, at 3:00 PM EST until Tuesday, February 18th at 5:00 AM EST for Social Security Administration maintenance.
 - c. CMS is scheduled to release updated enrollment numbers on or before February 14, 2014.
 - d. CMS has finalized a series of processes and policies a variety of topics related to consumers or issuers being able to make changes to information or plan selections based on changes in life circumstances. The following bulletins and other information releases are posted on the www.bewv.com website:
 - Bulletin #2: Functionality for Consumers-Initiated Application and Enrollment Changes
 - Bulletin #3: Special Enrollment Periods: Effective Dates and Processes
 - Bulletin #4: Enrollee-Initiated Terminations
 - Bulletin #5: Flexibility During the Initial Open Enrollment Period to Change Plans Offered by the Same Issuer at the Same Metal Level
 - Bulletin #6: Clarifications of the Instructions Presented in the December 12, 2013, Interim Final Rule and Bulletin #001
 - CMS also released a workaround for citizenship verification.

Q: Has there been any official announcement concerning changing the 2014 Open Enrollment dates to end on April 15th? The reason being it would allow tax preparers to assist with enrollments.

A: The OIC has not received any official notifications on dates for 2014.

3. **State Updates:**
 - a. Maximus reported 9,978 interactions; 787 enrollments in QHP's via healthcare.gov. They are focusing on community outreach. They are seeing a steady increase in traffic and speaking request. They have also assisted DHHR with the 10,000 people who were denied Medicaid. They have seen some success in scheduling appoints for this population.

Q: How many IPA's will be left in the field after March 31st?

A: No decisions have been made at this time. Maximus and the OIC are reviewing the needs. Decision will be made in a few weeks.

Q: Is there any one organization that is coordinating the actives of all of the groups and CAC's?

A: No. The OIC sends out an Event Calendar when they receive information from the IPA's and contracted groups of events.

Q: Why are the IPA's not enrolling in the field?

A: There must be a secure internet connection and a space for private interactions. If proper tools are available we can enroll in the field.

b. West Virginians for Affordable Health Care announced that Renate Pore, Director of Health Care Policy was awarded a Consumer Health Advocate of the Year Award from Families USA. The award, presented every year since 1998, recognizes outstanding contributions on behalf of our nation's health care consumers.

c. Community Care reported that they are also focusing on Community Outreach events in the 9 counties they serve. Additionally, they are receiving push back on the QHP's pricing and out of pocket amounts offered in the Marketplace and some prefer to stay with their current sliding fee plans. A number of clients are taking the wait and see approach. Their centers have initiated a policy that you must submit a rejection letter from Medicaid in order to participate in the sliding fee programs.

d. Valley Health reported that they have 22 IPA's and 9 CAC's visiting libraries and participating in community outreach. They also have a full-time IPA at Marshall University to meet with students. They have rented space at the Huntington Mall with the hopes of increasing younger population interactions. They have placed a kiosk at the food court with information and directions to their office. The office is staffed during Huntington Mall hours. They are also running a new 30 second commercial through March 31st.

e. WV Bureau of Senior Services reported increases in events and enrollments.

f. TSG is continuing to host community events. TSG will also be handing out information at the Winter Fest event scheduled in Charleston. Contact Naomi Bays for additional information on partnering with TSG (NaomiBays@tsgsolution.com).

g. Partners in Health – no updates

h. Primary Care Association- no updates

i. West Virginians for Affordable Health Care reported that they had provided funding to 31 organizations with small grants. Perry Bryant requested information on what plans will be available for continued enrollment into QHP's for qualifying events.

4. Other Updates:

CESD reported the survey that was discussed in previous meetings was ready to be sent out. Paper copies were distributed to attendees in room for their input. The purpose of the survey is to gather suggestions on what's next for the group.

5. Next Meeting

TBD

Action Register

What/Task	Who	When
1. Prepare notes from meeting	OIC	
2. Send out survey	CESD	