

## MNsure timelines



- Open enrollment: November 15, 2014 February 15, 2015
- Always open enrollment for public program recipients
- Conversion groups 3 and 4: later this year
- Renewals: later this year



## Progress to date



- Cumulative enrollment as of September 8, 2014:
   194,887 people were enrolled in Medical Assistance,
   70,550 in MinnesotaCare and 54,464 in a Qualified Health Plan.
- Between September 30, 2013, and May 1, 2014, the number of uninsured Minnesotans fell by 40.6% to a record low of 4.9%



## Conversions



- Phase 1 MinnesotaCare
  - Who: includes the conversion/transition of approximately 125,000 enrollees with MCRE and IMA eligibility on the MMIS system.
  - When: Began this year, continuing later this year.



### Conversions



- Phase 2 Medical Assistance (MAXIS)
  - Who: Includes the conversion/transition of approximately 500,000 individuals in families with children whose MA eligibility is subject to the new MAGI rules under the ACA. These enrollees are commonly referred to as "Apparently MAGI" MA recipients on the MAXIS system.
  - When: CMS is requiring this be completed by September 15, 2015.



#### Renewals



- Timeline:
  - Later this year
- Training series:
  - Online Renewals course
  - Video
  - Series of open VILTs for workers to attend with specific questions.



# State Basic Health Plan (BHP)



- MinnesotaCare becomes a BHP January 1, 2015
  - Legislative action needed for MinnesotaCare program to comply with the final federal regulations for a Basic Health Plan.



## Deloitte contract



- Deloitte, as the project's general contractor, will provide functional knowledge, advisory services and enhanced project management resources to MNsure and its partner agencies in support of the State's efforts to implement critical components of the work plan.
- Through December 2014



#### Deloitte contract



- Four main areas
  - Changes in Circumstance
  - Enrollment System of Record
  - Renewals
  - Contingency Processes



# Deloitte contract: Change in Circumstances



- The MNsure system does not have the end-to-end functionality to process existing client case changes:
  - Clients are unable to enter changes directly in the Citizen portal
  - Changes made in the Worker portal may not result in the expected eligibility determinations
  - Changes in eligibility are not propagated to carriers and MMIS
  - Changes entered into the Worker portal are not updated in Citizen portal

# Deloitte contract: Contingency Processes



- Worker Portal: This issue team has continued to analyze some of the tasks workers are currently receiving in order to determine which tasks still need instructions and which ones currently have workable instructions posted on ONEsource.
- Retro MA: This issue team has been meeting daily for the past week in order to provide updated/revised instructions to workers on processing Retro MA. This team is also working to create streamlined processes for pass-off between Minnesota Care, MNsure and counties when clients are requesting retroactive coverage, no matter what their on-going eligibility type or major program.

# Deloitte contract: Contingency Processes



- Notices: This issue team is continuing to identify which processes currently have notices tied to them, which processes need instructions for sending notices, and any current gaps in the notices available to workers.
- MMIS: This team had its kick-off meeting on 08/21/14. During this meeting, issue team members were able to connect with technical staff from MMIS in order to discuss interface issues that have the potential to be fixed (even if only temporarily) via a manual process. Another project team has also been working to tackle known issues with the interface and the MMIS issue team will be partnering with this existing project.

# Deloitte contract: Contingency Processes



- Special Enrollment Period: This issue team was able to host a joint meeting with some members of the Changes in Circumstance work group in order to confirm that the two teams were not duplicating work and that all procedures are as streamlined as possible. We now have a clearer direction for moving forward.
- Rules: This issue team has begun writing high-level requirements for what to do when a client indicates, through the citizen portal, that their MEC is ending in a future month. This group has also begun writing and reviewing requirements for procedures related to correcting an initial benchmark calculation of \$0 when that calculation is incorrect.

## Deloitte contract: Contingency Processes



- Interfaces (PRISM): As of right now, we are hoping to begin convening this group in early September.
- Invoicing and Payment: As of right now, we are hoping to begin convening this group in early September.
- \*Reassessment: As of right now, we are hoping to begin convening this group in early September.



#### **ONEsource**



- ONEsource was launched earlier this year as a resource for workers who determine eligibility for Insurance Affordability Programs (IAP's).
- Recently (September 4, 2014) a new structure was developed and implemented based on feedback from mentors, county representatives, and DHS staff.
- The new structure includes additional chapters (14 rather than the previous 4) which should improve usability of ONEsource.



#### Retro MA



- Medical Assistance (MA) retroactive coverage eligibility can now be determined through the online application when a person is eligible for ongoing MA and the data for the retro months is the same as the ongoing data. If the data is different, the current retro MA process will be used (i.e. county determination).
- The DHS document "Retro MA Citizen Portal Questions" clarifies how consumers should answer these questions to get the appropriate determination.



## Mentor program



- The Health Care Mentor Program is designed to develop experts within each agency and provide system and policy support to their agency staff.
- Started in April 2014 with four level-setting webinars
- In-person and virtual instructor-led sessions began in May 2014
- Each county has at least one representative



## County entry of paper applications



- In December 2013, MNsure Operations (HCEO) started entering paper applications into the client portal
- In June 2014, MNsure Operations (HCEO) started entering paper applications into the worker portal
- In July 2014, Health Care Mentors were trained on entering paper applications into the worker portal
- Beginning September 9<sup>th</sup>, workers who have completed the privacy and security training, cases 1 – 3, and the training videos can register for training on entering paper applications



## County entry of paper applications



- Workers who have completed paper applications can train other workers who meet the above requirements.
- Effective a date to be announced, workers who have been trained can start to enter paper applications received at the county into the worker portal.





- Stuck cases.
  - Sometimes, the new eligibility system does not properly process applications once they are submitted. This can result in applications getting "stuck" in the system and not fully completing the eligibility determination and enrollment process.



## Application processing issues



- Stuck cases.
  - Procedures for resolving "stuck" cases have been developed. State staff monitor the number of "stuck" cases on a daily basis and implement the procedures to ensure any cases that get stuck are resolved and successfully complete the eligibility and enrollment processes. Cases that can't be successfully resolved are manually processed outside of the new eligibility system.
  - Total number of stuck cases fluctuates daily as new stuck cases are created while existing ones are resolved. As of August 25, the total number of stuck cases: 59





- Exception/Error Queues
  - Sometimes a system error occurs while an application is being processed in the new eligibility system. When this occurs, the application is automatically stored in one of 2 error queues in the system for analysis and resolution. This can cause processing delays.



## Application processing issues



- Exception/Error Queues
  - Procedures have been developed to release applications that land in an error queue so they process correctly.
     State staff monitors the error queues on a daily basis and implements the procedures to ensure any applications in the queues are released and process successfully.
  - As of August 25, the total cases in an error queue = 29





- Pending Applications
  - Applications entered into the new eligibility system are automatically processed to determine the client's eligibility for insurance coverage. Sometimes clients are required to provide additional information before their eligibility can be determined. In these cases, the application enters a "pending" status until the additional information is received from the consumer. Some rules programmed within the new eligibility system are not working properly. Until those rules are fixed, some applications have been placed in a "pending" status by the system when they should not be.

## Application processing issues



- Pending Applications
  - Two strategies are being simultaneously implemented:
    - 1) Programmers are currently working to fix the rules within the system so they work properly.
    - 2) While work to fix the system rules is underway, staff monitors pending applications on a daily basis.
       Those identified as pending inappropriately are manually fixed.





- Pending Applications
  - Progress to resolve cases is made daily though new inappropriately pending cases continue to be created and will be until the longer term system fix is implemented.
  - There are 23,569 applications pending.
    - Of these, 10,520 are Open Cases
    - 6,954 cases are pending "appropriately," 3,566 cases are pending "inappropriately"



# Contact information



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https://www.dhssir.cty.dhs.state.mn.us/MMIS/Pages/default.aspx

