Health Benefit Exchange Project
– Health Care Commission Update

Delaware Department of Health
and Social Services

September 1, 2011
Health Benefits Exchange | Agenda

- Key Accomplishments To-Date
- Policy and Regulatory Report Summary
- Stakeholder Outreach Summary
- Next Steps - 30-Day Outlook
Health Benefits Exchange | Key Accomplishments

- Completed Technical Assessment of current environment and future requirements to support the Exchange.

- Explored several alternatives to leverage existing public and private resources and alternative models including:
  - Private Exchange solutions
  - Innovator States solutions
  - Federal Exchange continues to have little information available

- Met with commercial carriers to collect and assess data on DE insurance markets.

- Completed analysis of DE policy and insurance regulations with proposed rules to identify potential conflicts.
  - Essential Health Benefits are not yet defined and expect further rules/clarification.

- Facilitated 3 Focus Groups in August
  - Small Group – Provider – Consumer Advocacy
Method of Review

- Review and monitor Federal Law
- Review Delaware Insurance and Medicaid code and administrative codes
- Evaluate gaps in the Delaware law relative to the Federal Law
- Create a matrix with this evaluation
- Provide findings and recommendations
Findings and Recommendations:

1. Establish a state-administered Exchange with the power and authority required by ACA

2. Prioritize the coordination with Medicaid and CHIP – Eligibility and Enrollment are key!

3. Prioritize changes need to incorporate financial oversight and authority for regulation of the Exchange - particularly related to fraud investigations and financial management review.

4. Evaluate the current Delaware insurance mandates as part of the Benefits Assessment

5. Consider the privacy and security framework at the time the Exchange governance and operations are complete

6. Assure public accountability and transparency by expressly incorporating (in statute or executive order) the reporting requirements for price, quality, benefits, consumer choice and other factors deemed necessary for evaluating insurer performance

7. Promote efficiency by assuring the Delaware authority to enforce the federal standards for insurers regarding Marketing, Network adequacy, Accreditation for performance measures, Quality improvement and reporting, Uniform enrollment procedures.
Public Forums Summary:

- During May – July, 7 forums were held in various locations throughout the state.
- Forums provided an opportunity to:
  - Educate stakeholders on Exchange related issues,
  - Dispel misinformation, and
  - Address questions and comments from the public.

FAQs and Key Concerns:

- Is Delaware large enough to support an Exchange on its own?
- How will the Exchange work with Medicaid to track individuals as they churn between Medicaid and Exchange premium subsidy eligibility?
- How will the commercial carriers and ratings be regulated?
- How is the Exchange going to attract uninsured individuals when the penalties are low?
- Does everything have to be done on the web?
Focus Group Summary: 3 groups over 2 days, resulted in 18 pages of feedback

Sample of Takeaways:

- Some of the more successful CHAP outreach strategies may effectively reach Exchange population
  - Outreach through faith based organizations and community leaders (focus on “training the trainer”)
  - Organized “Health Days” that include basic screenings like blood pressure testing
  - Align outreach events with other assistance programs (e.g. setting up an information booth at the Dept of Labor on reapplication days)

- Standardized benefit summaries and efficient premium aggregation would be most beneficial in attracting small employers to the SHOP

- Over 40% of insurance applications are still completed on paper
  - Need to ensure that there are paper based options available for those who are not inclined to use the web
## Health Benefits Exchange | 30-Day Outlook

<table>
<thead>
<tr>
<th>Category</th>
<th>Major Deliverables</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stakeholder Outreach</td>
<td><strong>Deliverable</strong>: Stakeholder Report DRAFT</td>
<td>9/2/2011</td>
</tr>
<tr>
<td></td>
<td>Dependency(ies) - Forums/Focus Groups</td>
<td></td>
</tr>
<tr>
<td>Program Integration</td>
<td><strong>Deliverable</strong>: Benefits Assessment Report DRAFT</td>
<td>9/16/2011</td>
</tr>
<tr>
<td></td>
<td>Dependency(ies) - Actuarial Analysis (in progress); will issue draft report by 9/16 with all available data</td>
<td></td>
</tr>
<tr>
<td>Resources &amp; Capabilities</td>
<td><strong>Deliverable</strong>: Resources &amp; Capabilities Report DRAFT</td>
<td>9/1/2011</td>
</tr>
<tr>
<td></td>
<td>Dependency(ies) - Environmental scan of public and private resources (in progress).</td>
<td></td>
</tr>
<tr>
<td>Finance</td>
<td><strong>Deliverable</strong>: Finance Options Report DRAFT</td>
<td>9/1/2011</td>
</tr>
<tr>
<td></td>
<td>Dependency(ies) - Technical To Be Assessment (in process).</td>
<td></td>
</tr>
<tr>
<td>Technical Infrastructure</td>
<td><strong>Deliverable</strong>: To-Be Technical Assessment DRAFT</td>
<td>DONE</td>
</tr>
<tr>
<td></td>
<td><strong>Deliverable</strong>: Technical Roadmap</td>
<td>TBD</td>
</tr>
<tr>
<td></td>
<td>Dependency(ies) - Technical To Be Assessment (in process).</td>
<td></td>
</tr>
<tr>
<td><em>Grant Application</em></td>
<td>Letter of Intent - Draft (Optional)</td>
<td>9/2/2011</td>
</tr>
<tr>
<td></td>
<td>Actuarial Analysis - Benefits Assessment</td>
<td>9/16/2011</td>
</tr>
<tr>
<td></td>
<td>Grant Application - Draft</td>
<td>9/20/2011</td>
</tr>
<tr>
<td></td>
<td>Grant Application - Final</td>
<td>9/27/2011</td>
</tr>
</tbody>
</table>
Email: HBE_Delaware@state.de.us (HBE_Delaware@state.de.us)

Website: http://dhss.delaware.gov/dhss/dhcc

(Delaware Health Care Commission)