



STATE OF VERMONT
Vermont Health Access

MEMORANDUM

TO: Joint Fiscal Committee

FROM: Cory Gustafson, Commissioner, Department of Vermont Health Access

DATE: July 21, 2017

SUBJECT: Preparation for 2018 Open Enrollment

Vermont Health Connect's 2018 Open Enrollment starts November 1, 2017. This memo intends to provide legislators with greater detail about open enrollment deadlines and prospects for success.

Open Enrollment – what is it and when is it?

Open Enrollment is the annual period when new applicants can use the Vermont Health Connect (VHC) marketplace to sign up for health and dental plans for the coming year. It is also the time that existing members have the option to change plans. Vermonters will find 20+ options for qualified health plans from Blue Cross Blue Shield of Vermont (BCBSVT) and MVP Health Care (MVP), as well as dental plans from Northeast Delta Dental (NEDD).

Members who do not qualify for financial help can enroll directly through BCBSVT or MVP and have their billing managed by their carrier.

The 2018 Open Enrollment will be shorter than in past years. It will run from November 1 to December 15, 2017. Members will have a start date of January 1.

Vermonters who miss the deadline could have to wait until January 2019 to start health coverage, although those who qualify for Medicaid can sign up throughout the year and those who qualify for a Special Enrollment Period generally have 60 days to sign up.

Applicants can sign up in one of four ways: online, by phone, by paper, or with an in-person assister. Existing members who are happy with their current plan don't have to do anything other than continue to pay their bill in a timely manner.

What lessons did DVHA take from previous Open Enrollment and Renewal periods?

QHP renewals presented major challenges for VHC during the marketplace's second and third years, including fall 2015, which was the first year with automated renewal functionality and was complicated by a significant contractor going out of business. In 2016, thorough planning and testing enabled the State and its partners to successfully complete three key steps. Specifically:

Step 1: Determined eligibility for 2017 state and federal subsidies and enrolling members in 2017 versions of their health and/or dental plans through a single automated run which took care of 91.5% eligible cases.

Step 2: Sent files to payment processor and insurance carriers to ensure appropriate billing and effectuation, with 99% accuracy in mid-November.

Step 3: Ran a year-end business process that allowed changes to be made on cases with a 100% success rate.

Altogether, performance on these three steps made the 2017 QHP renewal experience markedly different than 2016 (when the renewal process was not complete until the end of March) and positioned DVHA to hit operational targets and provide improved customer service in 2017. For 2018, DVHA aims to draw upon the successful 2017 schedule, with member communication front-loaded to ensure members are equipped to make educated decisions at the beginning of Open Enrollment.

How Will DVHA Ensure a Successful 2018 Open Enrollment?

To ensure a successful open enrollment and renewal period, DVHA and partners are taking the following steps:

- 1) Set clear goals - Enroll 95% of customer in coverage for 2018 without manual intervention by staff. Answer Tier 1 Customer Service Center calls in under 24 seconds 75% of the time. Transmit files to carriers with 99% accuracy.
- 2) Prepare customer support staff – Maximus call center staff will be fully staffed and trained by October 15th. In-person Assistants will be trained and certified by September 1st.
- 3) Ensure data is clean and reconciled - VHC is current on all processing, with no significant operational backlogs. Programmatic Data Quality Reports are being used to identify and address data issues prior to October 15th.
- 4) Communicate with carrier partners – DVHA held an open enrollment kick-off meeting was held with carriers and Vermont Legal Aid on July 12th. Meetings are continuing bi-weekly through November 1st.
- 5) Communicate with members – DVHA is using bill stuffers to inform members of open enrollment deadlines and resources such as the Plan Comparison Tool. Renewals notices will be mailed by the end of October. Notices of Decision will be mailed to all renewing members the week of November 6th, more than a month earlier than last year, to ensure that members understand their new subsidies and will have plenty of time to evaluate whether a different health plan would be a better match for their needs and budget.
- 6) Conduct thorough system testing -- Defects related to Open Enrollment are on schedule to be addressed over the course of three releases beginning the week of July 24th and ending by mid-September. The State will then enter a code freeze, with no planned releases until after Open Enrollment. Renewal file testing begins the week of July 24th. User Acceptance Testing and User Validation Testing follow each release.

By taking these six steps and continuing to work with community partners to communicate the importance of health coverage, DVHA will ensure a successful open enrollment period and a smooth customer experience.