

Meeting 13: July 31, 2024



for small business

### **Agenda**

1:00 - 1:15 Welcome, Agenda, Meeting Minutes

Jon Frank, Co-chair

1:15 - 1:30 SBP Updates

Mimi Hailegeberel, Small Business Program Manager

1:30 - 2:00 PEO Study

David Cooney, Associate Commissioner, Maryland Insurance Administration

2:00 - 2:30 Enhanced Enrollment Portal Design

Dinesh Ganesan, Sr. IT Technologist

2:30 - 2:50 Discussion

2:50 - 3:00 Public Comment



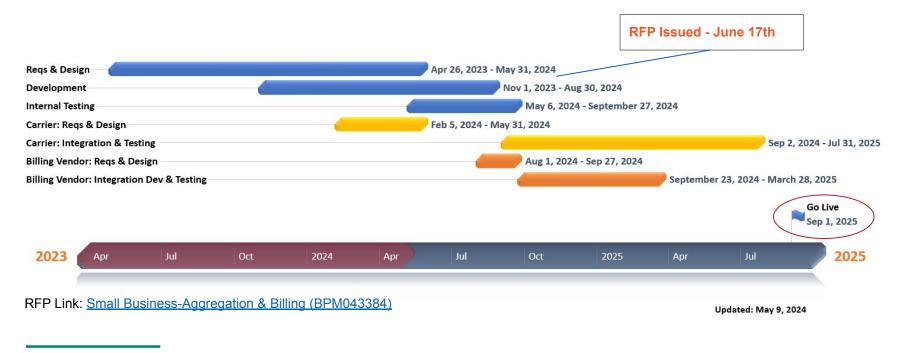
## **Approve Meeting Minutes**

June meeting minutes were emailed to members on 7/15/2024.



# SBP Updates

#### **Enhanced Enrollment Platform Status**



#### **RFP Timeline**

High-level procurement timeline for a Billing & Aggregation Contractor.

Task	Date
Publish Date on eMMA	6/14/2024
Pre-Proposal Conference	6/26/2024
Emma Posting ending	7/26/2024
Evaluation Period	7/30/2024 - 8/5/2024
Oral Presentations	TBD
Recommendation for Award	8/9/2024
Board Approval	8/19/2024



## **Maryland Tobacco Rating**

- Brokers and carriers oppose starting tobacco rating in the small group market (verbal and written feedback from last month's meeting).
- MHBE will not introduce tobacco rating for the 2025-2026 plan years due to lack of interest from insurance companies in implementing tobacco rates in the small group market.



## PEO Study Bill

## MIA Study Bill - HB 827

- Maryland allows Professional Employer Organizations (PEOs) to operate within the state in certain capacities.
- MIA's statement:

"Currently, Maryland is one of three states in the country that effectively prevent a small employer that has engaged a PEO from participating in the PEO's large group health plan. A Maryland small employer may engage a PEO to perform human resource and payroll services and may take advantage of pension and retirement plans sponsored by the PEO. However, with respect to health insurance, Maryland law looks at the number of people at the workplace employer level in determining whether the health insurance issued to those individuals must meet small group vs large group requirements."



## **Parameters of the Study**

- Identifying and comparing the Regulation of PEO's under federal law and state law in other states.
- Reviewing the History of PEO activities in the State of Maryland and elsewhere along with changes to the PEO industry over time.
- Reviewing PEO health plans and benefit designs.
- Reviewing requirements that businesses must meet to participate in PEO arrangements and access health plans.
- Examining the regulatory structures for health insurance and PEO's in other states and under federal law that allow individuals who are co-employed through a PEO arrangement and have a workplace employer that is a small employer to participate in the PEO's large group plan.
- Addressing any potential impacts of proposed statutory changes in the State relating to the offering of health coverage by PEO's on the small group market.



#### **Discussion Questions**

- Maryland is one of three states in the country that effectively prevent a small employer that has engaged a PEO from participating in the PEO's large group health plan. What makes Maryland a unique landscape?
- What factors should MIA consider in their report to the legislature?
- What are the implications of PEOs entering the small group market?
- What are the impacts on consumers?
- What regulatory controls will be proposed if PEOs are allowed to enter the market?



# **Enrollment Portal Updates**

**Dinesh Ganesan** 



#### Employer & Employee UX Demo

- Employer Experiences
  - Enroll
  - Renew
  - Disenroll
- Employee Experiences
  - Enroll
  - Renew
  - Disenroll



## Discussion

## Public Comment

# Appendix

## Small Group-Tobacco Rating

#### **Tobacco Rating 101**

- The term tobacco surcharge means any allowable differential that is charged for insurance in the SHOP Exchange that is attributable to tobacco use as the term tobacco use is defined in 45 CFR 147.102(a)(1)(iv).
- The tobacco rating factor applies to legal users of tobacco products, generally those 18 and older, and includes all tobacco products (except religious or ceremonial use of tobacco).
- The maximum surcharge allowed, under the ACA, is 50%.
  - At his age, John's premiums would be \$600/month. But he smokes. He can be charged: \$600 + \$300 tobacco surcharge= \$900
- Small group- avoid rate-up if you participate in smoking cessation through a wellness program.
- Currently, insurance companies are not tobacco rating in Maryland.



Source: <u>26 CFR § 1.45R-1</u>

#### Requirements

- Rating would apply to people who use tobacco products four or more times a week within the previous six months.
- Includes all tobacco products, except that tobacco use does not include religious or ceremonial use of tobacco.
- Users would be expected to self-identify when they enroll in their health insurance plan.
- Under the Affordable Care Act (ACA), insurance companies are required to provide tobacco users with the opportunity to avoid the tobacco surcharge by participating in a tobacco cessation program or meeting certain alternative standards during a 12-month period of benefits coverage



#### **Stats**

- Tobacco use is the largest cause of preventable illness in the United States.
- Smokers living in states with high tobacco surcharges are less likely to have health insurance.
- In 2022, 9.6% of adults in Maryland smoked cigarettes, which is lower than the national average of 14%.
- Smoking rates also vary by gender, with 3.7% of women and 19.4% of men reporting that they were current smokers.
- State tobacco surcharge policy may have a substantial impact on whether tobacco users choose to remain insured and consequently their ability to receive care critical for preventing and treating tobacco-related disease.



### **ACA Implementation Guidance**

The CMS Guidelines requires that health insurance plans cover:

- Screening: Screening of all patients for tobacco use.
- Counseling: Four tobacco cessation counseling sessions of at least 10 minutes each, including telephone, group, and individual counseling.
- Medications: All FDA-approved tobacco cessation medications, including both prescription and over-the-counter medications, for a 90-day treatment regimen.
- Attempts: At least two tobacco cessation attempts per year.
- No prior authorization or cost-sharing for treatments.



## Some states prohibit or restrict the use of tobacco surcharges



California, Massachusetts, New Jersey, New York, Rhode Island, Vermont, Virginia and Washington, D.C.



► Prohibit tobacco surcharges completely

#### Connecticut

▶ Only prohibits tobacco surcharges for health plans sold in the state's health insurance exchange (Access Health CT).

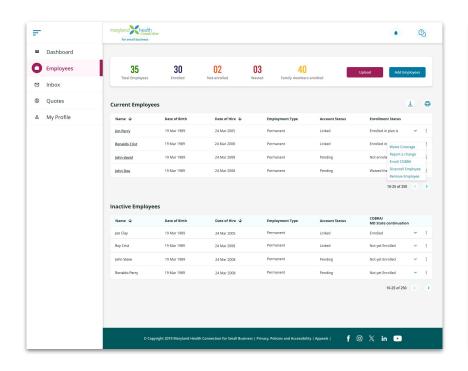
#### Kentucky, Arkansas, and Colorado

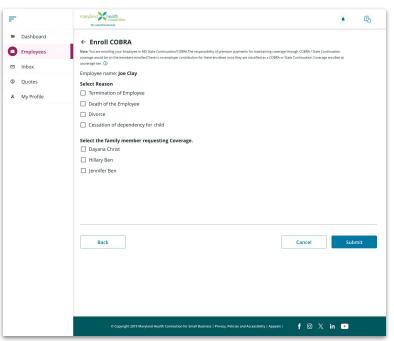
▶ Allow a lower premium differential than federal law. Colorado limits the tobacco surcharge to 15%. Arkansas limits it to 20%, and Kentucky limits it to 40%.



# Enrollment Portal Updates

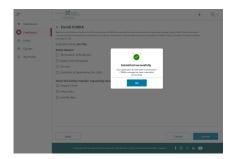
#### **COBRA Enrollment Experience**

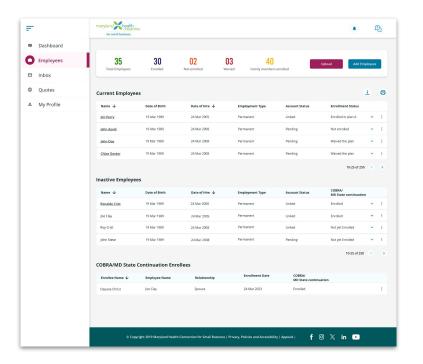






#### COBRA - Cont...







#### **Broker Achievement Awards**





#### 2024 BROKER ACHIEVEMENT AWARDS

Monday, May 6, 2024
[ive! Casino & Hotel Maryland

Marylandhbe.com

#BrokerAwardsMHBE24



Maryland Health.mp4



# Enrollment Portal Updates

#### **MHC for Small Business Vision**



- Mission: Reduce the Maryland uninsured rate to less than 5.5 percent.
- Target Audience: Small Businesses with less than 10 employees.
- **Enrollment Goal**: Enroll approx. 10,000-15,000 in the first 5 years, post-launch.
- Legal Obligation: Fulfill our statutory mandate to serve small businesses (Md. Code Ann. §31–102 (c)(3)).
- Action Plan: Implement a robust marketing strategy pre-launch.

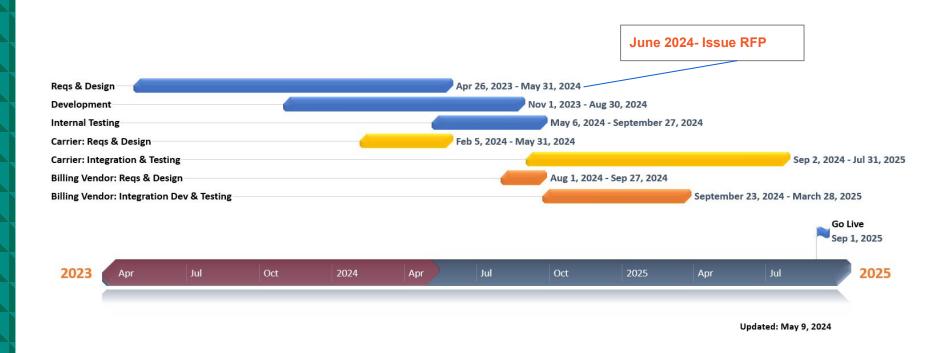


### **Carrier Integration Timeline**





#### **Enhanced Enrollment Platform Status**





#### **Plan Selection**

#### **Employer Plan Selection Options**

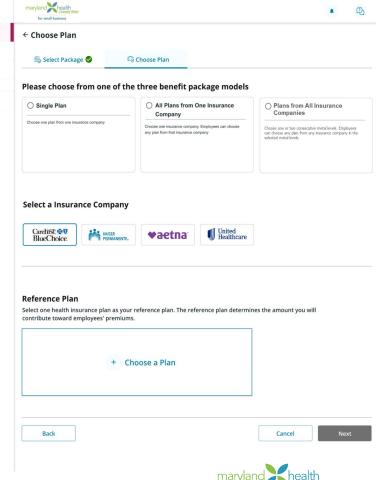
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- A Single Plan.
  - No reference plan.
- Employer Choice: All plans from one insurance company.
  - Employer chooses a reference plan.
- Employee Choice: Plans from all insurance companies.
  - Employer chooses a reference plan.

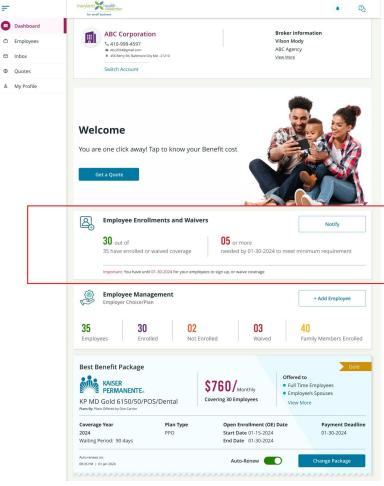




# Minimum Participation Requirement

- Employee Enrollments & Waivers section displayed until OE end date.
- Employers send OE reminders to employees via "Notify" button.
- Access Employee Management from dashboard to add or upload employees anytime before or after creating benefit package.
- Dashboard displays total Employees, Enrolled, Not Enrolled, Waived, and Total Dependents.







#### **Crosswalked Plans & Auto-Renewals**

- Crosswalked plans are plans that are identified as similar or comparable to an individual's existing plan.
- Currently, individuals are given the option to choose a new plan from the crosswalked options provided by the carrier.
- When the previous plan is no longer offered, MHC-SB will send a notice to the Employer's inbox that will detail the renewal package along with the crosswalked plan.





#### **Notices**

#### Go paperless!

Visit Maryland Health Connection for Small Business to select paperless delivery. It's a fast, easy, and secure way to view and keep your important plan documents.

#### Important Notice: Employee Plan Renewal

Employee Application ID: <<Application ID>>

Employer: << Employer/Group Name>>

MHC for Small Business Employer ID# «Entry\_Id»

Notice Date: «Month Date, Year»

Dear << Employee FN MN LN Suffix>>

Good News! << Employer Name>> has chosen to renew the offer of health insurance coverage to employees through MHC for Small Business. Your open enrollment period begins on << Renewal OE Start Date>>.

#### Your Coverage Will Automatically Renew

Since you already enrolled in employer-sponsored coverage through MHC for Small Business, your current plan, if available, will automatically be renewed. If your current plan is no longer available, you will be automatically enrolled in the most similar plan. You can choose a different plan during your open enrollment period between <<Renewal OE Start Date>> and <<Renewal O/E End Date>>. Coverage will begin on <<Coverage Start Date>>.

Decide if you want to stay in this plan or choose another one by <<Renewal O/E End Date>>.

#### Your New Plan and Cost Information

Your Medical Coverage	Current Plan Coverage Dates: (< <current date="" effective="" plan="">&gt; - &lt;<current date)<="" end="" plan="" th=""><th>New Plan Coverage Dates: (&lt;<renewal date="" effective="" plan="">&gt; - &lt;<renewal date="" end="" plan="">&gt;)</renewal></renewal></th></current></current>	New Plan Coverage Dates: (< <renewal date="" effective="" plan="">&gt; - &lt;<renewal date="" end="" plan="">&gt;)</renewal></renewal>
Covered Individual(s)	< <employee name="">&gt;   &lt;<dependent 1="">&gt;   <dependent 2="">&gt;   &lt;<dependent 3="" etc="">&gt;</dependent></dependent></dependent></employee>	< <employee name="">&gt;     &lt;<dependent 1="">&gt;     <dependent 2="">&gt;     <dependent 3="" etc="">&gt;</dependent></dependent></dependent></employee>

Plan Information				
Plan	<current carrier="" name="">&gt; &lt;<current name="" plan="">&gt;</current></current>	<renewal carrier="" name="">&gt; &lt;<renewal name="" plan="">&gt;</renewal></renewal>		
Coverage Date	Coverage ends: <current coverage<br="">End Date&gt;&gt;</current>	Coverage begins: < <renewal plan<br="">Effective Date&gt;&gt;</renewal>		
	Cost Information			
Total Monthly Premium	Employee Pays: < <employee Premium&gt;&gt; Employer Pays: &lt;<employer premium<br="">for Employee Household&gt;&gt;</employer></employee 	Employee Pays: < <employee Premium&gt;&gt; Employer Pays: &lt;<employer fo<br="" premium="">Employee Household&gt;&gt;</employer></employee 		

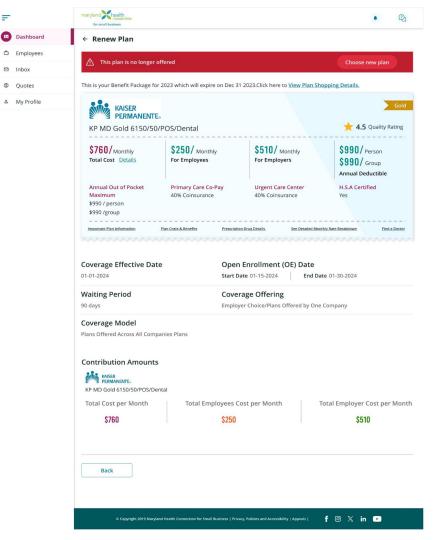
#### You Can Change Your Plan Selection during Open Enrollment

You must make any changes to your employer-sponsored coverage through MHC for Small Business by <<renewal O/E end date>>. If you no longer want coverage through <<Employer Name>> you must go into your MHC for Small Business employee account and "waive" coverage for the upcoming plan year.



#### Renewals

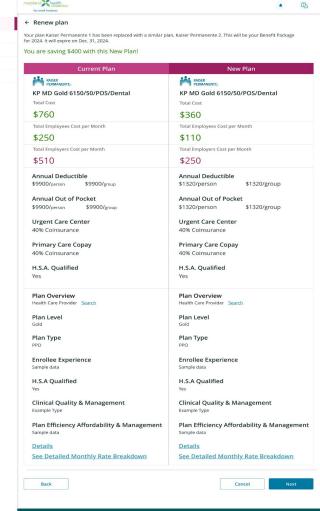
- When the previous plan is no longer offered, MHC-SB will send a notice to the Employer's inbox that will detail the renewal package along with the crosswalked plan.
- The Employer will be prompted to choose a new plan.





# Auto-Renew (Crosswalk)

 If the group selects auto-renew and does not actively review and select a new plan, they will be crosswalked into a similar plan.



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## Marketing Update

# Communication Tools to Promote Small Biz Video Content

- What is MHC for Small Business? English and Spanish
- Small Business tax credits
- How to get help (promoting free authorized broker support)
- Testimonial broker and small business testimony owner/employees





#### **Testimonials**



Pao Kao, Office Manager Germantown Allergy & Asthma



Tamar Eskin, Owner Conceptual Analytics



Shelly Eldridge, founder The Confidence Coach



## **Social Media & Testimonials Strategies to Target Small Businesses**

#### Facebook, Instagram, LinkedIn & YouTube

Use social media to target small business owners









- May is National Small Business Month Provide posts to support Small Businesses
  - MHC for Small Business celebrates National Small Business Month, not just in May, but year round! Enroll your employees in a private health plan any time of the year. Keep celebrating and thriving! MHCSmallBiz@MarylandHealthConnection.gov
- MHC for Small Business Video English & Spanish YouTube, Webinars, Presentations



### **Read All About It!**







- Develop news stories with statewide media recognizing small business success.
- Hold regional press events to promote MHC with Small Businesses and brokers (on-site) on their success, benefits of the tax incentive program and financial incentives, and employee retention.
- Partner with statewide newspapers and radio stations (schedule interviews called Small Biz Strong MD...Small and Healthy!).



# **Small Business Policy Update**

#### **MHC-SB Policy Update**

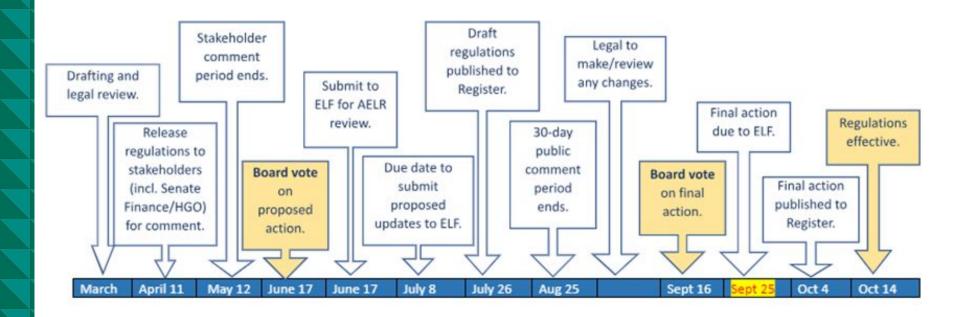
- Stakeholders review and feedback were due May 12th 2024.
- Comments from two issuers in support of the changes.

#### Changes to COMAR 14.35.18:

- 1. Change the employee minimum participation rate (MPR) for a qualified employer's SHOP eligibility to "at least 60%" uniformly.
- 2. Reduce the wait period a small employer may set for a qualified employee to no more than 60 days. Current regulation allows up to 90 days.



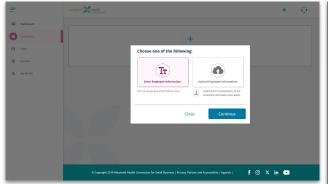
# SHOP MPR and Wait Period Regulatory Updates Timeline

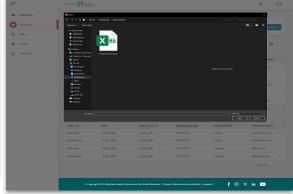


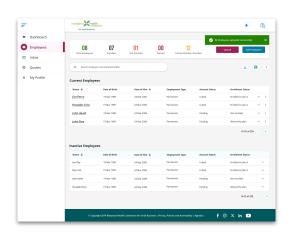


## **MHC-SB Portal Updates**

Supports Upload employees details



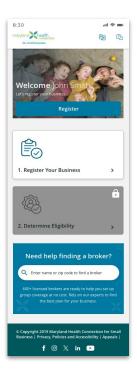






### **MHC-SB Portal Updates**

Supports Mobile Experience





# Professional Employer Organizations (PEOs)

#### **PEOs**

PEOs are co-employers.

The PEO relationship involves a contractual allocation and sharing of employer responsibilities between the PEO and the client. This shared employment relationship is called co-employment. As co-employers, PEOs contractually assume substantial employer rights, responsibilities and risk through their employer relationships with their clients' workers.

- Provides integrated services to manage critical human resource responsibilities and employer risks;
- Establishes and maintains an employer relationship with the employees at the client's work site (share employees);
- Contráctually assumes certain employer rights, responsibilities and risk.
- Different PEOs have different pricing structures, often charging per-employee per-month fees or a percentage of each payroll run.





### MIA Study Bill - HB 827

- Maryland allows Professional Employer Organizations (PEOs) to operate within the state in certain capacities.
- MIA's statement:

"Currently, Maryland is one of three states in the country that effectively prevent a small employer that has engaged a PEO from participating in the PEO's large group health plan. A Maryland small employer may engage a PEO to perform human resource and payroll services and may take advantage of pension and retirement plans sponsored by the PEO. However, with respect to health insurance, Maryland law looks at the number of people at the workplace employer level in determining whether the health insurance issued to those individuals must meet small group vs large group requirements."



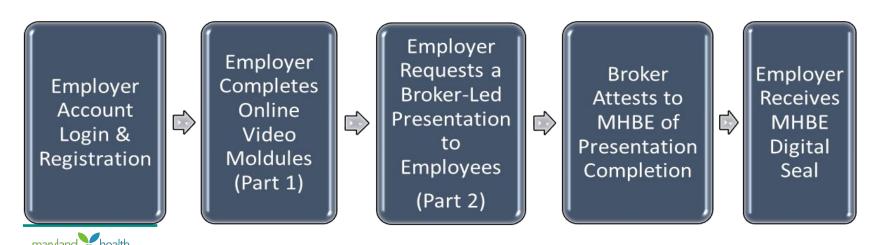
#### MIA Study Bill - HB 827 - Cont...

- If the bill passes, the Maryland Insurance Administration (MIA) will be mandated to conduct a study on professional employer organizations (PEOs) in the state, with a report due by December 31, 2024, to the House Health and Government Operations Committee and the Senate Finance Committee.
- Requirements include; (1) compare federal and state regulations on PEOs, (2) assess historical and industry changes, (3) examine PEO health plans, (4) review membership requirements for businesses in PEO arrangements, (5) analyze regulatory structures in other states for co-employed individuals in PEOs, and (6) evaluate the potential impact of proposed statutory changes on PEO health coverage in the small group market.



### **Outreach & Education Update**

- Proposed process flow for and outreach and education program targeting employers and employees of small businesses.
- Do you recommend a different approach for the below outreach and education process flow?



#### **Welcome New Members**

Name	Organization
Amber Hyde	All About Benefits, LLC
Stephanie Klapper	Maryland Citizens' Health Initiative
Dr. Armel Simo	Petro Health, LLC



### **2024 Objectives**

- 1. MHC for Small Business Enrollment Portal.
- 2. Small Business Policy/Regulation changes.
- 3. Marketing Initiatives.

Do you have any additional objectives to suggest for the upcoming year? Your input is welcomed and encouraged.



#### **MHC-SB Enrollment Portal Status**

Apr 2023 - Nov 2023

Nov 2023 - Mar 2024 \

Apr 2024 - Aug 2024 Jun 2024 - Aug 2024

Jul 2024 - Sept 2024

Oct 2024 - Feb 2025

#### **Requirements & Design**

During the requirements and design phase, project managers and subject matter experts collaboratively develop the specifications for the enhanced portal and design the features and functionalities for the enhanced enrollment portal.



#### Development & Carrier Participation

In the development and carrier participation phase, MHBE's IT team will construct the back-end applications. In parallel, the team will engage in meetings with each issuer, working collaboratively to define specific requirements. MHBE will provide issuers with the essential requirements and design specifications to facilitate seamless integration and participation in the process.

#### Internal Testing & Carrier Integration and Testing

During the internal testing and carrier integration phase, internal stakeholders will rigorously test the system, and the IT team will address any identified issues by making necessary corrections. Carrier integration activities will run in parallel with testing efforts.

#### Billing Vendor Onboarding & Initial Integration

The selected TPA for the billing and aggregation services will undergo the onboarding process and commence initial integration activities.

#### Billing Vendor Development & Testing

The Third-Party
Administrator (TPA) will
collaborate with MHBE's
IT team during the
development and
testing phase of the
complete billing and
aggregation services.

# Enhanced Enrollment Portal Design

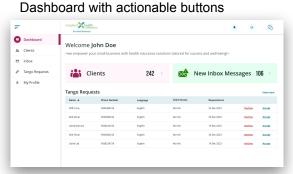




#### **Self-Service Digital Portal**

Contemporary Digital Self-Service Portal for Small Business Owners, Employees, and Insurance Brokers

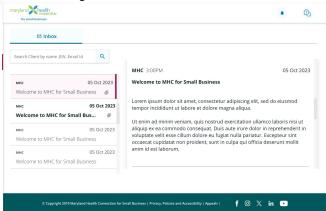
## For Brokers



#### Search tool with Smart Grid capabilities



#### Integrated Inbox for communication





#### Dashboard



# For Small Business Owners

Reference Plan & Cost



Broker Information

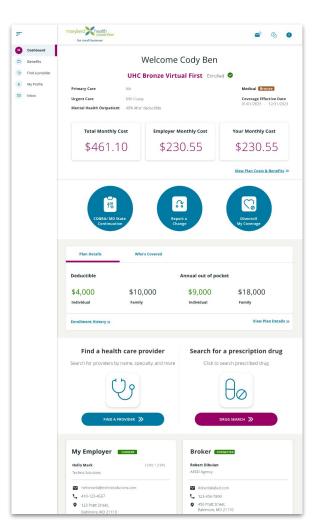




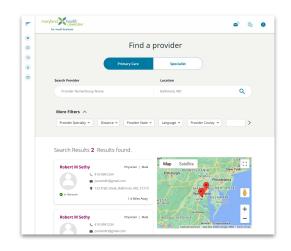
#### Employee Dashboard

## For **Employees**

Quick Action Tools



#### Search Tools







#### **Crosswalked Plans & Auto-Renewals**

- Crosswalked plans are plans that are identified as similar or comparable to an individual's existing plan. The term "crosswalk" suggests a connection or mapping between the old and new plans.
- Currently, individuals are given the option to choose a new plan from the crosswalked options provided by the carrier. This allows them to maintain coverage while accommodating changes in cost-sharing.
- Would you support MHBE proposing that carriers offer the same plans for a minimum of two years to minimize disruptions to small businesses and to provide stability and continuity, particularly for their most popular plans?



## **2024 MHC Small Group Plans**

Issuers	MHC Small Biz Medical Private Health Plans		
CareFirst/GHMSI	17		
United Healthcare/Optimum Choice/MAMSI	23		
Aetna Health CVS	6		
Kaiser Permanente	13		
Total	59		



### **2024 MHC Small Group Plans**

		Kaiser Permanente	CareFirst BlueChoice	GHMSI	CareFirst of MD, Inc	Aetna CVS	UHC	MAMSI	Optimum Choice
F	Platinum	2	0	0	0	0	1	2	2
	Gold	4	3	1	1	2	4	2	2
3	Silver	4	4	1	1	2	4	2	1
E	Bronze	3	4	1	1	2	1	1	1
7	<b>Total</b>	13	11	3	3	6	10	7	6



## Regulatory Update: Amendment to COMAR 14.35.15.08C

- Pre-2025: Carriers allowed four plans in each bronze, silver, gold, and platinum metal levels for MHC Individuals and Small Business.
- Post-2025: Limitation to three plans per metal level.
- Rationale: Recommended by the 2022 Affordability Workgroup to address consumer choice overload during plan shopping.
- Result: MHBE has submitted comments to the AG: Limiting SHOP market plans to three per metal level is unnecessary because "choice overload" is not a problem in the SHOP market. This change back to the status quo is in alignment with federal regulations.



## COMAR 14.35.18.06: Employee Choice Model

- The proposed change in the Employee Choice Model, from allowing employers to select two consecutive metal tiers to permitting all four metal tiers for employees, has prompted consideration and received public feedback.
- In response to recommendations, we are conducting additional market analysis and stakeholder discussions to carefully assess the implications of altering COMAR 14.35.18.06 - Employee Choice Model Requirements.
- Concerns about potential increased risk selection leading to higher premiums in the small group market, potentially reducing SHOP Exchange appeal to carriers.

