MHBE 2024 Consumer Decision Support (CDS) Workgroup

Meeting 4 – September 18, 2024

Meeting will be recorded

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Members

Member	Affiliation
Lisa Barrows	CareFirst BlueCross BlueShield
Cara Chang	Optum/Dartmouth
Steven Doman	UnitedHealthcare
Shelly Eldridge	Shelly The Confidence Coach
Robyn Elliott *	Maryland Dental Action Coalition
Ruth Getachew	Maryland Insurance Administration
Erika Halsey **	Kaiser Permanente
Thomas Hamel	Aetna
Diana-Lyn Hsu	Maryland Hospital Association
Stephanie Klapper	Maryland Citizens' Health Initiative
Carmen Larsen	Hispanic Chamber of Commerce Montgomery County

Member	Affiliation
Allison Mangiaracino	Kaiser Permanente
Arianna Meehan **	Aetna
Joan Painter	Seedco
Shlomo Rosenstein	NIV Advisors
Seth Sevenski-Popma **	UnitedHealthcare
Lisa Skipper *	Mountain Laurel Medical Center

* Co-chair
** Non-voting member

Agenda

12:30 - 12:35 | Welcome and Approve August 27 Minutes
Robyn Elliott and Lisa Skipper, Workgroup Co-Chairs

12:35 - 1:05 | Presentation on Washington HBX's Consumer Decision Support Tool
Kristin Villas, Senior Policy Analyst at Washington Health Benefit Exchange

1:05 – 1:40 | Discussion - Second Part of Plan Shopping Tool
All members

1:40 | Public Comment

1:45 | Adjournment

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August 27 Meeting Minutes

- Vote to approve August 27, 2024 Consumer Decision Support Workgroup Minutes

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Washington Health Benefit Exchange: Consumer Decision Support Tool

CDST Attributes/Functionality

- Software product for health insurance shopping and comparing health plans

- Provides recommendation based on
  1. Premium (must integrate subsidies for Exchanges);
  2. Out of pocket costs (based on estimated medical usage and key insurance benefit design features);
  3. provider network; and
  4. Pharmacy coverage.

- Requires inputs from customer

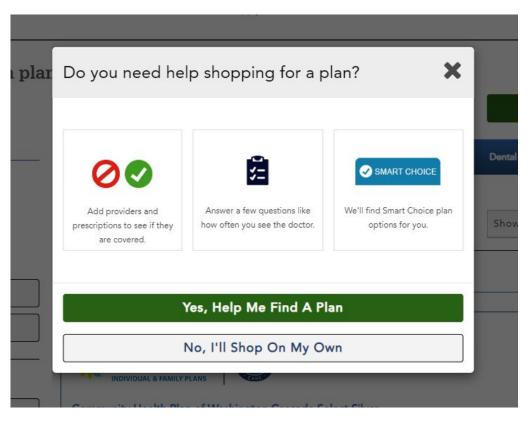- Full list of plans remains available for customer to shop

Consumer Decision Support Tool (CDST) Background

- Represented an early step toward Exchange market curation; vendor is GetInsured
- Originally procured in 2017 with following goals:
  - Personalized decision support to customers to find best plan for their needs and budget
  - Out-of-pocket cost calculator
  - Provider and Formulary look-ups
  - Integrated into the HPF platform
    - Seamless look and feel, include tax credits in cost calculations and integrate with provider directory
- One major update to CDST functionality in 2021
  - Changed from opt-in to opt-out
  - Changed display default order
    - Three CDST recommended plans, then Cascade Care plans
- More recently, Board gave Exchange direction to move toward market stewardship

Exchange Tools Direct Customers to Most Affordable Plans

Consumer Decision Support Tool (CDST) and Plan Display Order Encourage Enrollment in Standard Plans

- CDST heavily weights out-of-pocket costs, which means plans with lower net premiums (often driven by state subsidy) are recommended most often.

- Plan display architecture in *HealthPlanFinder* features standard plans before non-standard plans.

Presentation Data Sources: *HealthPlanFinder* data warehouse as of 1/15/24; reports provided by Data and Reporting Team (Kendra Jennings and Surbhi Gupta)

Exchange Tools Recommend Lowest Cost Standard Plans

- Most recommended are Cascade Care plans from issuers with lowest premiums.
- Since Cascade Care Savings became available, bronze non-standard plan recommendations significantly decreased.

SMART CHOICE **2024 Top Plan Recommendations**

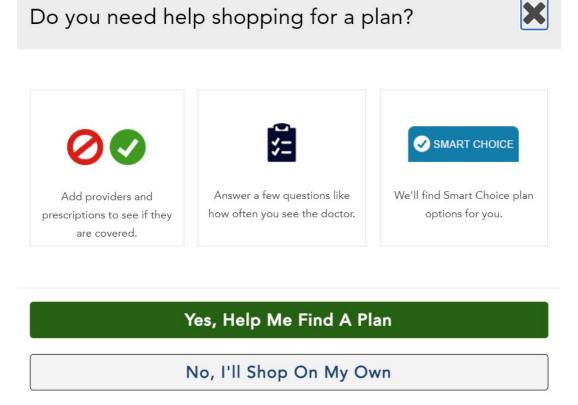| All Customers			Customers 250% or Less FPL	
Carrier	Plan Type		Carrier	Plan Type
Coordinated Care	Non-Standard Bronze		CHPW	Public Option Silver
CHPW	Public Option Bronze		Coordinated Care	Public Option Silver
CHPW	Public Option Silver		Coordinated Care	Non-Standard Silver
Coordinated Care	Public Option Bronze		Coordinated Care	Standard Silver
Coordinated Care	Public Option Silver		Coordinated Care	Public Option Gold

Customer Experience of CDST in Shopping Flow

- Located in Anonymous Browse after customer enters zip code, age, income
- Located in Application after customer receives eligibility determination

More information: Watch video about how customers use *Washington Healthplanfinder* here (Smart Planfinder at 1:17).

Do you need help shopping for a plan?

Add providers and prescriptions to see if they are covered.

Answer a few questions like how often you see the doctor.

SMART CHOICE

We'll find Smart Choice plan options for you.

Yes, Help Me Find A Plan
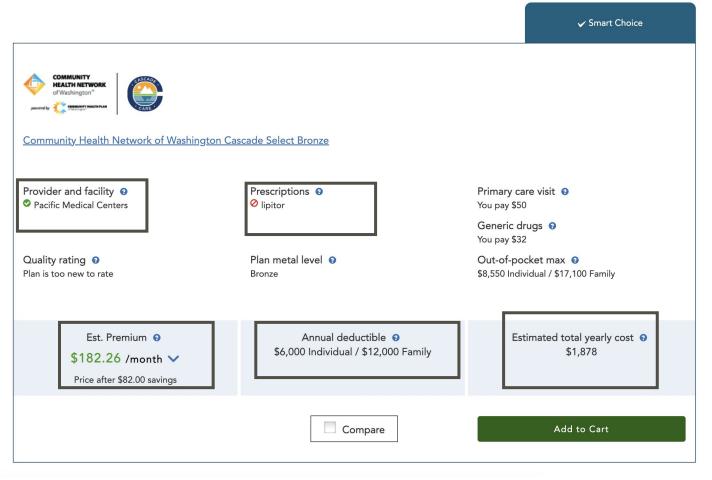
No, I'll Shop On My Own

Smart Planfinder

Smart Planfinder will help you choose a plan that best fits your needs. Answer a few questions to find Smart Choice plans that may be a smart fit based on your provider, prescription needs, and estimated costs.

Learn more ⬀

Add up to 5 providers or facilities to see if they are covered.

SEARCH PROVIDERS

For example: Sally Johnson

SEARCH FACILITIES

For example: Pacific Medical Center

NEAR ZIP

98122

NEAR ZIP

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How often do you expect to need medical care this year? For families, choose for the individual who needs the most medical care.

○ 0-2 doctor visits per year

● 3-5 doctor visits per year

○ 6 or more doctor visits per year and an outpatient surgery or treatment

○ 6 or more doctor visits per year, an outpatient surgery or treatment, and a hospital stay

Add up to 5 prescriptions to see if they are covered.

SEARCH PRESCRIPTIONS

For example: Lipitor or Atorvastatin

How many prescriptions do you expect to need this year? For families, choose for the individual that needs the most prescription drugs.

○ 0-2 prescriptions per year for an unexpected injury or illness

● 1-2 monthly prescriptions

○ 3 monthly prescriptions or takes higher cost drugs

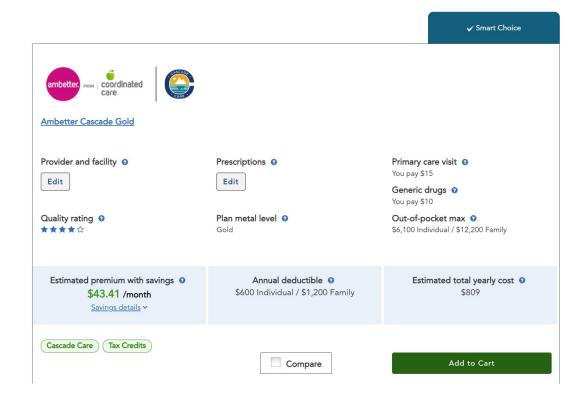○ 4 or more monthly prescriptions or takes a very high cost drug
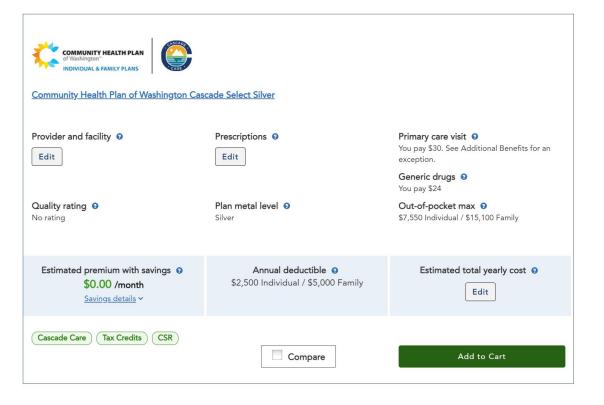
Plan Recommendation Screen

CDST uses answers to the questions and plan information to score plans and applies a "Smart Choice" badge to top three plans at top of results

Plan Search Hierarchy Part I

- When customer uses CDST, up to 3 plan recommendations are displayed first on *HealthPlanFinder*

- When customer opts out of CDST, default plan hierarchy ranks plans by premium
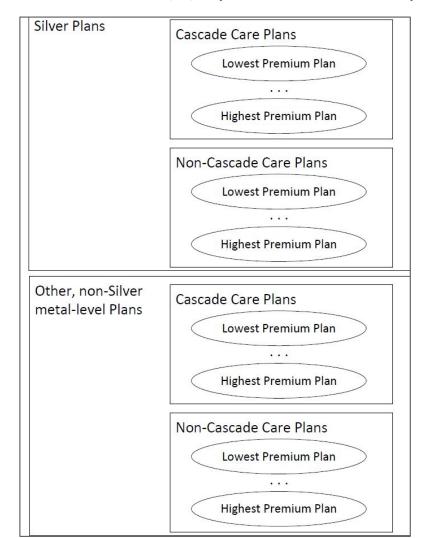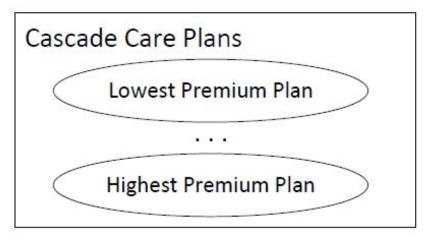
Plan Search Hierarchy Part II

Default *HealthPlanFinder* sort is based on customer Cost Sharing Reduction (CSR tier)

CSR Tiers 4,5,6 (250% FPL or less)

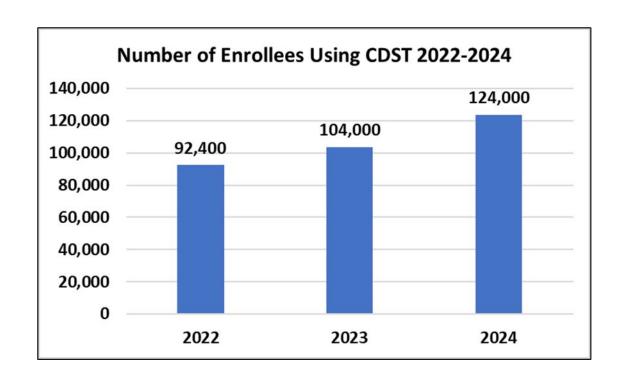CSR Tiers 1 (above 250% FPL, Tier 3 (AI/AN above 300% FPL

Silver Plans

Cascade Care Plans
- Lowest Premium Plan
- . . .
- Highest Premium Plan

Non-Cascade Care Plans
- Lowest Premium Plan
- . . .
- Highest Premium Plan

Other, non-Silver metal-level Plans

Cascade Care Plans
- Lowest Premium Plan
- . . .
- Highest Premium Plan

Non-Cascade Care Plans
- Lowest Premium Plan
- . . .
- Highest Premium Plan

Cascade Care Plans
- Lowest Premium Plan
- . . .
- Highest Premium Plan

Non-Cascade Care Plans
- Lowest Premium Plan
- . . .
- Highest Premium Plan

Inputs CDST Uses to Calculate Plan Score

Input	Details	Illustrative Example of Available Points
Total Expense Estimate Score (Annual Premium and Out-of-Pocket Costs)	Displayed as "Estimated Yearly Total Cost"; Factors in federal tax credits and Cascade Care Savings	60
Utilization and Deductible	Deductible adjusted based on utilization	10
Doctor(s) /Facility(ies) Entered in-Network	Customer may enter up to 5	15
Prescription (s) Entered Covered	Customer may enter up to 5	15

Enrollee Usage and Plan Recommendation Trends

Among enrollees during the latest open enrollment:

- Returning enrollees made up two-thirds of CDST users
- About 40% of enrollees using CDST selected a Smart Choice
- New enrollees more likely to use CDST and select a Smart Choice
  - 80% of new enrollees used the CDST; 57% selected a Smart Choice
  - 37% of returning enrollees used the CDST and 36% selected a Smart Choice

Number of Enrollees Using CDST 2022-2024

Year	Number
2022	92,400
2023	104,000
2024	124,000

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Content Review and Discussion

Discussion

- **Second half of Get an Estimate plan shopping tool**
  - Plan shopping page
    - Plan tile display
    - Sort/filter settings
    - *Revisit from 8/27 discussion: estimate of financial assistance page
      - Are the estimates/descriptions of financial assistance available to consumers clear?
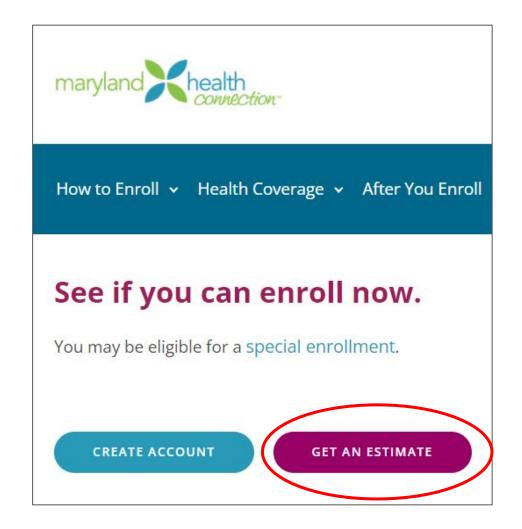
Review of Prior Meeting Discussions

Themes from discussion and feedback specific to second part of tool:

- Ways to simplify the plan tile, and ensure the appropriate amount of information for each plan is displayed and is easy to understand for the average consumer

- Symbols vs. numbers/pricing when displaying plan information

- Improving how we communicate the value of silver CSR and gold plans for consumers choosing bronze

- Plan recommendations vs. smart default (only showing recommended plans vs. sorting/filtering according to preferences)

Discussion

● Workgroup discussion of MHC 'Get an Estimate' plan shopping tool

Examples from other SBMs

Display of estimated financial assistance - more explanation of tax credits/cost sharing reductions

- **Colorado:**

Based on what you told us, it looks like you and your household may qualify for the following financial help.

Amelia   ✅ **Lower monthly premium**

You could be eligible for a **Premium Tax Credit** that, if taken in advance, could lower your monthly insurance bill by:

Save $335 per month

We will include these savings when we show you your plans and costs. *NOTE: The amount above is an* **estimate.** *To get the exact amount of your Premium Tax Credit, complete an application.*
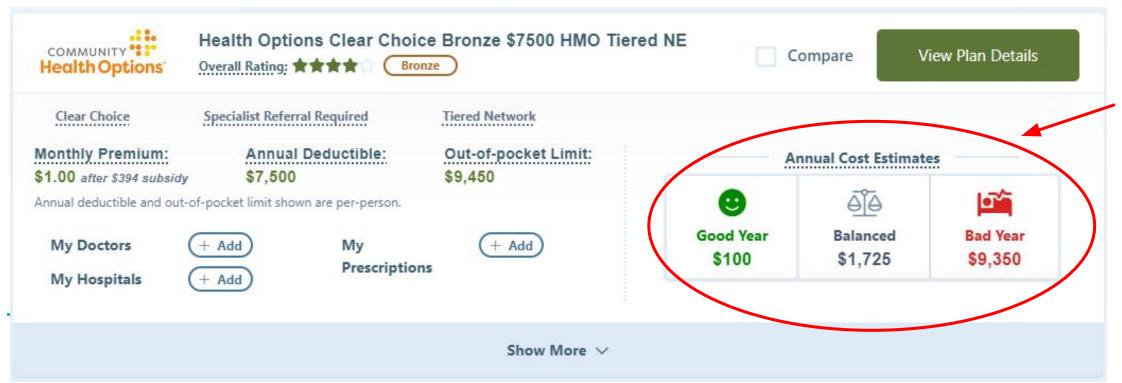
✅ **Lower out-of-pocket-costs**

You may also be eligible for Cost-Sharing Reductions. These will reduce the **copays**, **deductibles**, and **coinsurance** you pay when you receive care. To use Cost-Sharing Reductions you must select a **silver level plan**. We will include these savings when we show you plans and rates available to you. When you compare plans, you'll see that the Silver plans have lower out-of-pocket costs.
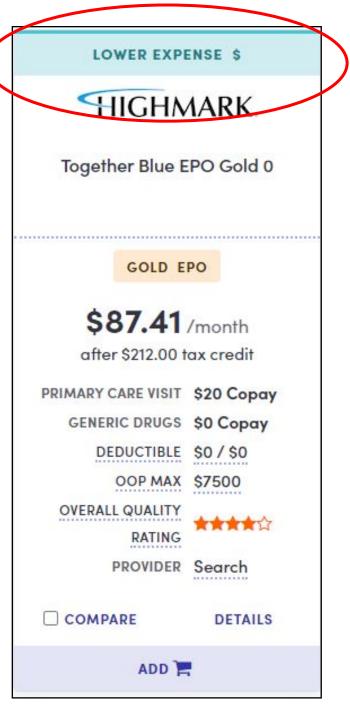
Examples from other SBMs (cont'd)

Plan tile display: Annual total cost estimates in different scenarios (low, average, and high utilization) with use of symbols/color

- **Maine:**

Examples from other SBMs (cont'd)

Use of color/symbols to highlight total cost estimate of plan

- **Pennsylvania:**

Examples from other SBMs (cont'd)
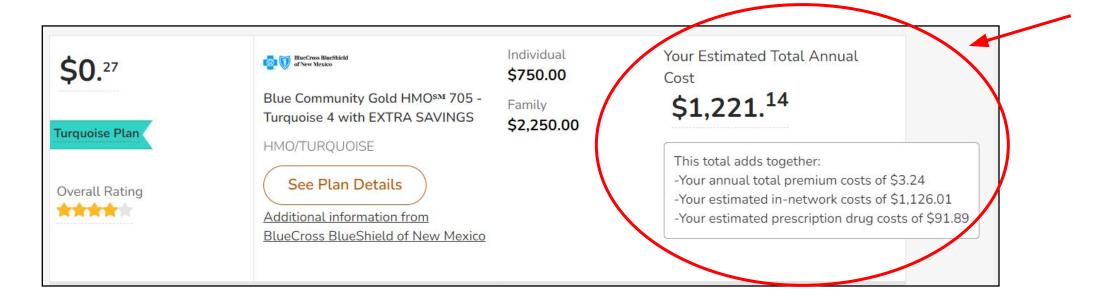
Another plan display example, with prominent explanation of total cost estimate

- **New Mexico:**
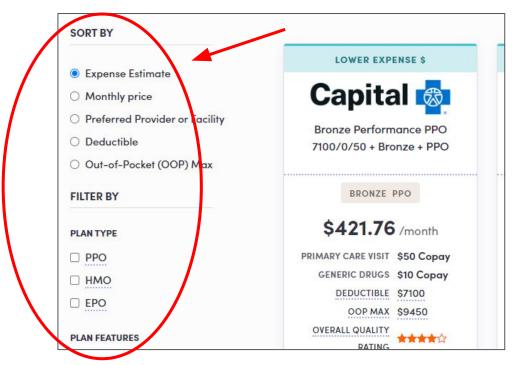
Examples from other SBMs (cont'd)

Sort/filter options

- **New Jersey: filter includes these explanations about meta-level costs**
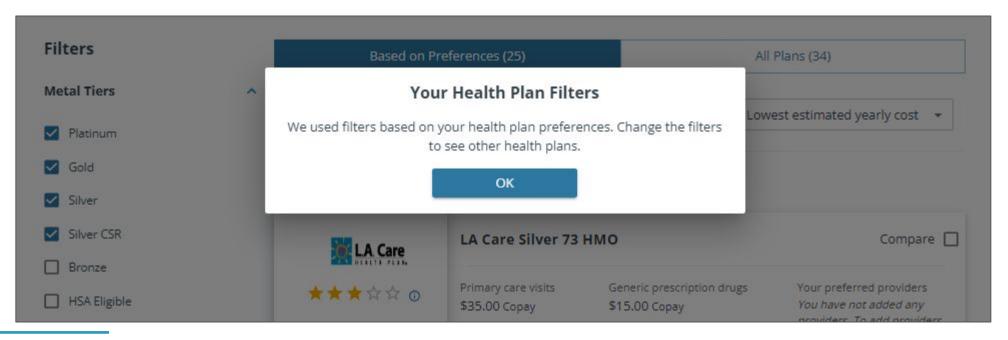
- **Pennsylvania: more prominently displays sort and filter options to consumers on plan list page**

Examples from other SBMs (cont'd)

Auto or default sort/filter settings

- **California: Auto-filters plans based on consumer inputs. Also default-sorted by "Lowest estimated yearly cost".**

Links to SBM Plan Shopping Tools

- **California:** https://apply.coveredca.com/lw-shopandcompare/
- **Colorado:** https://planfinder.connectforhealthco.com/home
- **Connecticut:** https://www.accesshealthct.com/AHCT/official/famInfo/loadFamilyInfo
- **DC:** https://dc.checkbookhealth.org/hie/dc/2023/
- **Maine:** https://me24.checkbookhealth.org/#/
- **Massachusetts:** https://betterhealthconnector.com/get-an-estimate
- **Minnesota:** https://www.mnsure.org/shop-compare/
- **Nevada:** https://enroll.nevadahealthlink.com/hix/preeligibility#/?fromHome=1
- **New Jersey:** https://enroll.getcovered.nj.gov/hix/preeligibility#/
- **New Mexico:** https://getcovered.bewellnm.com/individual/prescreenNav/beginNewApp
- **New York:** https://info.nystateofhealth.ny.gov/cost-estimator
- **Pennsylvania:** https://enroll.pennie.com/hix/preeligibility#/?fromHome=1
- **Rhode Island:** https://ri24.checkbookhealth.org/#/
- **Vermont:** https://info.healthconnect.vermont.gov/compare-plans/plan-comparison-tool
- **Washington:** https://www.wahealthplanfinder.org/HBEWeb/Annon_ViewIndividualPlans?request_locale=en

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Next Steps

Next Steps

- **Next meeting #5: <u>Wednesday, October 2nd,</u> 12:30 - 1:45 PM**
  - Tentative Agenda:
    - Discussion 1: Any follow up from 9/18 discussion of plan shopping page
    - Discussion 2: Tailored plan recommendations
- July - October: Seven regular meetings
  - 6th meeting: draft report of workgroup recommendations for review and discussion
  - 7th and final meeting: Vote to finalize workgroup recommendations
- November 14th: MHBE staff present workgroup recommendations to MHBE Standing Advisory Committee

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Public Comment

Appendix

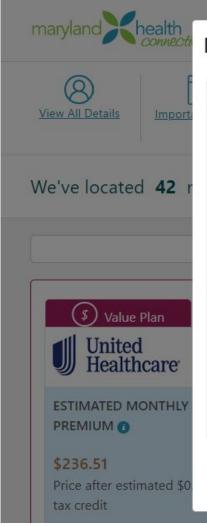# Evidence-Supported Decision Aids **Currently** in Use on MHC

- Decision aids currently in use by MHC and supported by evidence reviewed:
  - Sorting & filtering tools
  - Side-by-side comparison of plans
  - Auto-applying subsidies to premium & CSR estimates
  - Rollover definitions
  - Drug and provider directories
  - Filtering low-income consumers to Silver plans
  - Quality ratings
  - Providing (& sorting by) total estimated cost
    - Observed confusion when OOP cost estimate given without explanation of the factors that contributed to it

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Evidence-Supported Decision Aids **Not** in Use on MHC

- "Smart default" plans, or tailored plan recommendations, based on the consumer's expected health care costs

- Personal preference questions asking what consumers look for in a plan (ex: premium costs, other costs, coverage of certain provider) to inform tailored plan recommendations (weighted with expected health care costs)

- Highlight the plan attributes that evidence shows consumers tend to care about

- Allow enrollees to sort and filter plans based on up-to-date info on whether plans cover a specific physician or hospital

- Filter option to view only Silver CSR plans

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Evidence-Supported Decision Aids **Not** in Use on MHC (Cont'd)

- Tools to help consumers understand plan pricing

    ○ *MHC has a pop-up disclaimer that consumers must click out of before plan shopping, which explains metal levels and premium vs. out-of-pocket costs.*

Evidence-Supported Decision Aids **Not** in Use on MHC (Cont'd)

- Front-and-center, clear information explaining:
  - preventive primary care must be covered at no additional cost under all plans
  - affordability provisions available for consumers who qualify, such as cost-sharing reductions.
  - Explaining the adult dental insurance marketplace
- Specially developed digital decision support tools that help educate consumers on health insurance concepts
- Prompts to remind consumers to:
  - use all decision support tools at their disposal
  - consider total estimated costs
- Narratives about health insurance situations and how others have made their plan choices
  - Other modes besides written info should be considered (Ex: video tutorials)

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Evidence-Supported Decision Aids **Not** in Use on MHC (Cont'd)

- Use of symbols rather than numbers to represent price level
  - A system of 1 to 4 dollar signs ($ to $$$$) was the type of symbol tested in the evidence reviewed
    - *Currently, MHC uses a star symbol rating for quality ratings.*

Evidence-Supported Decision Aids **Not** in Use on MHC (Cont'd)

- When providing total out-of-pocket cost estimates, clearly explain the factors contributing to the estimates
  - *California is a good example of how they explain total cost estimates for each plan* —>
- Providing total cost estimates for several possible outcomes, such as a typical usage scenario and a worst-case scenario, rather than for just one.
- Graphical depictions of total estimated cost for plan

Estimated Total Cost

This is an estimate of the total yearly cost of this health plan. We based the estimate on how much health care you plan to use in 2024. Your actual health care use and costs may be different.

You can change your expected health care use in your Preferences. These are your preferences now:

- Health plan use: **Medium**

- Prescription drug use: **Medium**

12 monthly premiums ($55.76 /month)	$669.12
Costs for health plan use	$775.21
3 Primary care visits	
2 Specialist visits	
5 Lab tests	
1 Outpatient visits	
20 Generic prescription drugs	
Your estimated total cost	**$1,444.33**

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