MHBE 2024 Consumer Decision Support (CDS) Workgroup

Meeting 7 – November 13, 2024

Meeting will be recorded



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 2

October 16 Meeting Minutes

 Vote to approve October 16, 2024 Consumer Decision Support Workgroup Minutes



Agenda

12:30 - 12:35 | Welcome and Approve October 16 Minutes Robyn Elliott and Lisa Skipper, Workgroup Co-Chairs

12:35 – 1:30 | Final Discussion of Draft Workgroup Report and Recommendations *All members*

1:30 | Vote

All members

1:40 | Public Comment

1:45 | Adjournment



Discussion

Overview of Draft Report

Conclusion:

 Throughout their discussions, Workgroup members acknowledged the competing desires to provide comprehensive information about a plan and to streamline the information presented to a user in order to simplify decision making. As MHBE considers implementing these recommendations, the agency will have to balance between these two goals.



Cont'd

Workgroup members were given the opportunity to rank their top three priorities among the full list of recommendations, as what they identify as most important for MHBE to consider further in addressing areas to improve consumer plan shopping decision support:

With four votes each:

- Simplify the plan tile display; and
- Simplify explanations of financial assistance.

With three votes each:

- Provide option to tailor plan recommendations to consumer preferences
- Improve explanation for asking about expected health care usage on the health care utilization page
- Display the plan premium and deductible more prominently in the plan tiles.



Final Discussion





Vote to Approve Workgroup Report

"I move to approve the draft Workgroup Report of Recommendations [as presented OR as amended] as final."



Next Steps

Next Steps

- If no vote today, MHBE staff will send survey for members to submit virtual vote
 - Deadline to vote by next Wednesday November 20th
- November 14th: MHBE staff present workgroup recommendations to MHBE Standing Advisory Committee
- Full report will be posted on the MHBE Consumer Decision Support workgroup page



Public Comment

Appendix

Draft Workgroup Recommendations

Initial Get an Estimate landing page:

- 1. Add introductory consumer video tutorial:
 - Provide an introductory tutorial for consumers using the plan shopping tool.
 - Tutorial could provide an overview of how to use the plan shopping tool, important health insurance concepts, and/or narratives with examples of how others have made their plan choices based on budget and needs.
 - Should be accessible and offered in multiple languages.
- 2. Improve explanation of building a household and "Select coverage" dropdown:
 - Clearer explanation of how to build a household, and why to include someone in your household even if they are selecting "no coverage" (impacts financial eligibility)
- 3. <u>Disclaimer regarding adult and pediatric dental coverage:</u>
 - Provide disclaimer on dental coverage requirements and stand-alone dental plans all qualified health plans (QHPs) include coverage for pediatric dental, but not all cover adult dental.
- 4. Explanation of pregnancy status question
 - Provide brief explanation for why consumers are asked about pregnancy status when building their household, as it relates to Medicaid eligibility.



Explanation of financial assistance page:

- 5. Simplify explanations of financial assistance:
 - Use more plain language with explanations of eligibility for tax credits and cost sharing reductions (exconsider using phrases like "premium assistance" and "lower out-of-pocket costs).
 - Embed links to pages with more detailed explanations of how premium tax credits and cost sharing reductions work, and how they are applied to plans to reduce costs.



Estimate Health Care Utilization page:

- Improve explanation for asking about expected health care usage:
 - Include more prominent explanation of how the consumer response to this question will be used to calculate total cost estimates for plans.
 - Provide illustrative example of the out-of-pocket difference between plans in cases of unexpected medical expenses.
- Include consumer preference question(s):
 - Add a question to this page that asks about consumer cost preferences (preference for lower premium with higher out-of-pocket costs, or higher premium with lower out-of- pocket costs), rather than just their expected healthcare usage.



Provider Directory:

- 8. Prominent reminders to confirm provider participation directly with provider:
 - Display prominent disclaimers about the provider directory, that consumers should always check with their provider directly to confirm they participate in a plan.
 - MHBE is actively working on improving issues affecting the accuracy of the directory, including variations in the spelling or punctuation of provider names between carriers, as well as how to collect the provider data in a more standardized way to prevent variation among carriers.



Plan shopping page:

- Clear explanation of metal levels:
 - Use more plain language about difference between plans of different metal levels in terms of coverage and health care needs. Reduce text and use more symbols/graphical depictions to help make information easier for consumers to digest.
 - Particularly consider consumer groups who are likely less familiar with private coverage, for example those transition from Medicaid or young adults aging off of their parent's plans.
- 10. Communicate the value of Silver CSR plans for eligible consumers
- 11. Reminders about free assistance available:
 - Provide more reminders throughout the tool that free consumer assistance is available and provide more opportunity to navigate to various avenues of assistance.



Plan tile display:

12. Simplify the plan tile display:

 Reduce the amount of information currently displayed on plan tiles, and make the "Details" button more prominent. The "Details" button provides a comprehensive breakdown of plan design, including in-network and out-of-network costs for each covered service.

13. <u>Display the plan premium and deductible more prominently:</u>

 Monthly premium and annual deductible/out of pocket maximum should displayed more prominently and separated visually from other information on plan tile.

14. <u>Display information more uniformly:</u>

Re-format the display so the layout is more uniform. In particular, the way telehealth cost-sharing
information is currently formatted differs significantly from the general plan cost-sharing information
above it, making the information difficult to understand.



15. <u>Include information about separate prescription deductible:</u>

 Include information on whether a plan has a combined medical and prescription deductible, and if they are separate, list the prescription deductible along with the medical deductible that's currently displayed.

16. Use of symbols and colors to highlight important plan features:

Ex: use \$\$\$ to highlight high-cost plans

17. Disclaimer of in-network costs:

 Provide explanation that any copay/cost-sharing information displayed in the plan tile is for in-network services only, and that consumers should check for and consider in-network vs. out-of-network coverage and costs under any plan.

18. Update the display and explanation of "Your total yearly cost estimate":

- Make the total yearly cost estimate more prominent in the plan tile. It's easy to miss in the plan tile the way it's current displayed.
- Provide more prominent and transparent information about how these estimates are calculated.



19. Include total cost estimates for "good" and "bad" years:

 Purpose is to show illustrative examples of what happens to your costs in years with lower or higher than expected health care utilization.

20. <u>Disclaimer to consider unexpected health care costs</u>

 Include text or visual depiction to flag for consumers the need to consider unexpected health care costs in a year when choosing a plan.

21. More support for individuals with chronic conditions or high healthcare usage:

 More information to help consumers understand whether a plan meets the needs of a consumer with chronic conditions or higher care utilization (such as highlighting costs for specialist care or certain treatments).



Plan recommendations or smart default:

22. Provide options to tailor plan recommendations to consumer preferences:

- Provide the option to give consumers a few recommended plans that are listed first in the plan shopping page, based on consumer inputs (expected health care utilization, cost preferences, provider/prescription coverage, etc.)
- Ensure consumers are still able to see the full list of plans below any recommended or highlighted plans
- Conduct consumer user experience testing when developing the methodology and formatting for providing consumer plan recommendations.

General:

23. <u>Incorporate more consumer information from other parts of MHC website:</u>

 Embed more links to helpful consumer information that are already on the MHC website, directly into the plan shopping tool.

