



NEW MEXICO HEALTH INSURANCE EXCHANGE

**Legislative Health & Human Services  
Interim Committee Meeting  
Pueblo of Taos, NM  
July 18, 2014**

## Why is a State-Based Exchange Important?

The State of New Mexico passed Legislation in March 2013 to establish a State-Based Exchange to ensure that:

- All New Mexicans have coverage that qualifies under Affordable Care Act (ACA) Rules
- All New Mexicans receive the necessary resources to understand and select insurance products under the Exchange

**IT PUTS NEW MEXICO IN THE DRIVER'S SEAT!**



## A Brief Review of the Accomplishments from the Past Year

- Legislation Passed, the Governor signed enabling Legislation in March 2013, the Board was constituted and the organizational meeting was held in May of 2013
- Executed agreements with Human Services Department (HSD) to transfer funds to begin building the Exchange
- Obtained permanent office space
- Implemented a 24/7 Call Center
- Hired staff and developed office policies and procedures
- Created a state-wide enrollment system
- Implemented training and certification programs for Health Care Guides
- Implemented state-wide outreach campaigns
- Developed a user-friendly state-of-the-art “Plan Comparison Tool” for both Individual and SHOP
- Designed and implemented a multi-channel marketing campaign to include TV, radio, billboards, print, promotional items and social media
- Established contracts for IT to successfully implement technology interface, design and applications
- Successfully went live with the SHOP in October of 2013



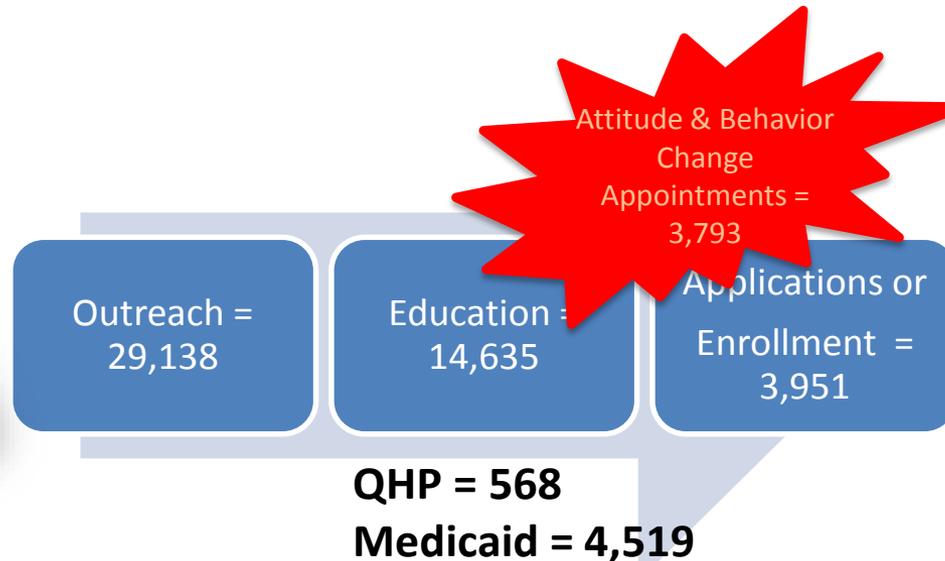
# Highlights of Native American Activities

- **Established the Native American Advisory Committee (17 members)**
- **Established and approved the Native American Guiding Principles and Protocols (including consultation policy)**
- **Met and provided direct education and outreach to the following tribal leadership:**
  - Mescalero Apache Tribal Council, Jicarilla Apache Tribal Council, All Indian Pueblos Council of Governors, Pueblo de Cochiti, Pueblo of Santa Clara, 8 Northern Indian Pueblo Council, Taos Pueblo Administration, Navajo Nation Division of Health and Human Services – council committee, Navajo Nation Division of Health Executive Director, Navajo Nation CHR Programs, Pueblo of Acoma, Pueblo of Laguna, Santo Domingo Pueblo, Pueblo of Zuni
- **Successfully assisted Native American Professional Parent Resource (NAPPR) in establishing Health Care Guide Agreements with Tribal Governments**
- **Development of Native American Marketing Materials**
- **Developed working relationship with several of the I/T/Us as well as the Albuquerque and Navajo Indian Health Services (IHS) areas**
- **Established two Tribal Liaisons to work directly with Tribal Leadership**



# NAPPR Activities and Outcomes

- **Provided in-person assistance and developed a statewide system for Native Consumers to learn more about new coverage options and enroll**
- **Trained and deployed 30 Health Care Guides in Non-Navajo Communities, and deployed 21 Certified Application Counselors located within the Albuquerque Area Indian Health Service. These guides are fluent in all NM Native languages including: Tewa, Towa, Tiwa, Keres, Diné, and Zuni**
- **Developed Area Wide MOA with Albuquerque IHS and co-located Guides at IHS facilities for outreach and enrollment**
- **Maximized technology and outreach strategies to eliminate steps and barriers to enrollment**
  - All outreach activities are designed to generate appointments which lead to enrollment focused on finding people where they are! Where they work, play, shop, and go to school!



# OUTCOMES & NEXT STEPS

## OUTCOMES:

- We didn't get as many people enrolled as we need: 34,000 instead of 82,500
- For every person we enrolled in the NMHIX, we guided approximately 8-10 to Medicaid (over 130,000 new enrollees)

## NEXT STEPS:

- Public research to understand why people did not enroll
- Surveys of those who did enroll to understand their motivation
- Interest group feedback sessions across the state to understand opportunities for improvement
- Reevaluating existing media plan/vendor



# NMHIX Strategy

## VISION:

- **Enroll all qualified New Mexicans in the New Mexico Health Insurance Exchange thereby improving the collective health and well being of New Mexicans by facilitating better access to competitive, affordable, high-quality, timely medical care through greater healthcare coverage**

## MISSION:

- **We operate a transparent and user-friendly Exchange that allows individual consumers to compare, select and buy private health insurance plans**
- **We are focused on standing up, operating, monitoring and continuously improving this Exchange by providing New Mexicans with entry to private and public insurers in a way that promotes the public trust in a health care delivery system that offers accessible, affordable, quality and effective medical care**

# NMHIX Financials

## As of May 31, 2014

<u>Account Title</u>	<u>Calendar Year 2014 Budget</u>	<u>May 2014 Expenditures</u>	<u>YTD 2014 Expenditures</u>	<u>Calendar Year 2013</u>	<u>Total Expenditures 2013-14</u>
<b>Salaries</b>	\$ 2,115,376	\$ 75,686	\$ 468,570	\$ 325,990	\$ 794,560
<b>Fringe</b>	774,975	19,143	84,583	96,256	180,839
<b>Consultant Costs</b>	1,019,000	21,017	95,506	270,378	365,884
<b>Equipment</b>	295,300	4,266	21,098	61,206	82,304
<b>Supplies</b>	249,996	2,868	10,250	14,850	25,100
<b>Travel</b>	240,000	3,348	8,626	7,703	16,329
<b>Other</b>	1,842,230	68,012	333,664	294,135	627,799
<b>Contractual</b>	<u>81,540,676</u>	<u>3,946,584</u>	<u>13,491,315</u>	<u>21,154,874</u>	<u>34,646,189</u>
	<u>\$ 88,077,553</u>	<u>\$ 4,140,924</u>	<u>\$ 14,513,613</u>	<u>\$ 22,225,391</u>	<u>\$ 36,739,004</u>

# Grant Awards – Balances at June 30, 2014

	<u>Grant Period</u>		<u>Awarded</u>	<u>YR</u>	<u>Drawn Down</u>	<u>Remaining Balance</u>
	<b>FROM</b>	<b>TO</b>				
HSD Sub-grant	1/1/2013	12/31/2013	\$ 11,360,800	2013	\$ 11,360,800	\$ -
Grant ****185	10/15/2013	10/14/2014	\$ 18,600,000	2013	\$ 5,800,000	
				2014	\$ 4,600,000	
					<u>\$ 10,400,000</u>	\$ 8,200,000
Grant ****187	11/6/2013	11/5/2014	\$ 16,223,170	2013	\$ 2,700,000	
				2014	\$ 12,100,000	
					<u>\$ 14,800,000</u>	\$ 1,423,170
Grant ****193	1/22/2014	12/31/2014	\$ 69,402,117		\$ -	\$ 69,402,117
<b>Totals</b>			<u><b>\$115,586,087</b></u>		<u><b>\$ 36,560,800</b></u>	<u><b>\$ 79,025,287</b></u>

# 2014 GOALS AS ADOPTED

**#1: Stand up and develop the NMHIX (Individual non-group and SHOP) with continued refinement to ensure optimum functionality and marketplace effectiveness.**

**#2: Enroll eligible New Mexicans in the NMHIX**

**#3: Stand-up Individual Exchange**

**#4: Ensure a financially viable and sustainable NMHIX**

## **NAPPR Phase II**

- **Add 50 FTE to provide in-person assistance on Navajo Nation and other communities**
- **Specialize functions, e.g., Outreach Specialists who are trained to increase awareness and understanding – resulting in increased numbers of appointments and enrollment**
- **Strategic outreach**



## Stretch Vision (Post '16)

**To be the State's authority in providing access to, education about and guidance for access to quality medical care. This includes obtaining, interpreting and providing Information to empower consumers of health insurance across New Mexico to select the right coverage, plans, carriers which will result in the correct outcomes as measured medically for the benefit of the patient. The unifying concept behind this ambitious vision seems to be that consumers would be empowered with useable information to demand such a system of medical care.**



## Other Opportunities for Improvement and Concerns We're Facing

- Our level of confidence that our Individual Enrollment platform will be ready for the next open enrollment (November 15) is not 100%
- The Federal Government is requiring all existing Federal Enrollees to dis-enroll and then re-enroll in the NM Exchange
- We must make a decision within the next week regarding continuing with the Federal Individual Enrollment, or if we push for the implementation of the Individual Exchange at the State-level → Board discussion July 25
- Financial Sustainability is a constant consideration and concern. We must get people enrolled! And, we must decide upon a funding mechanism!

# Questions?