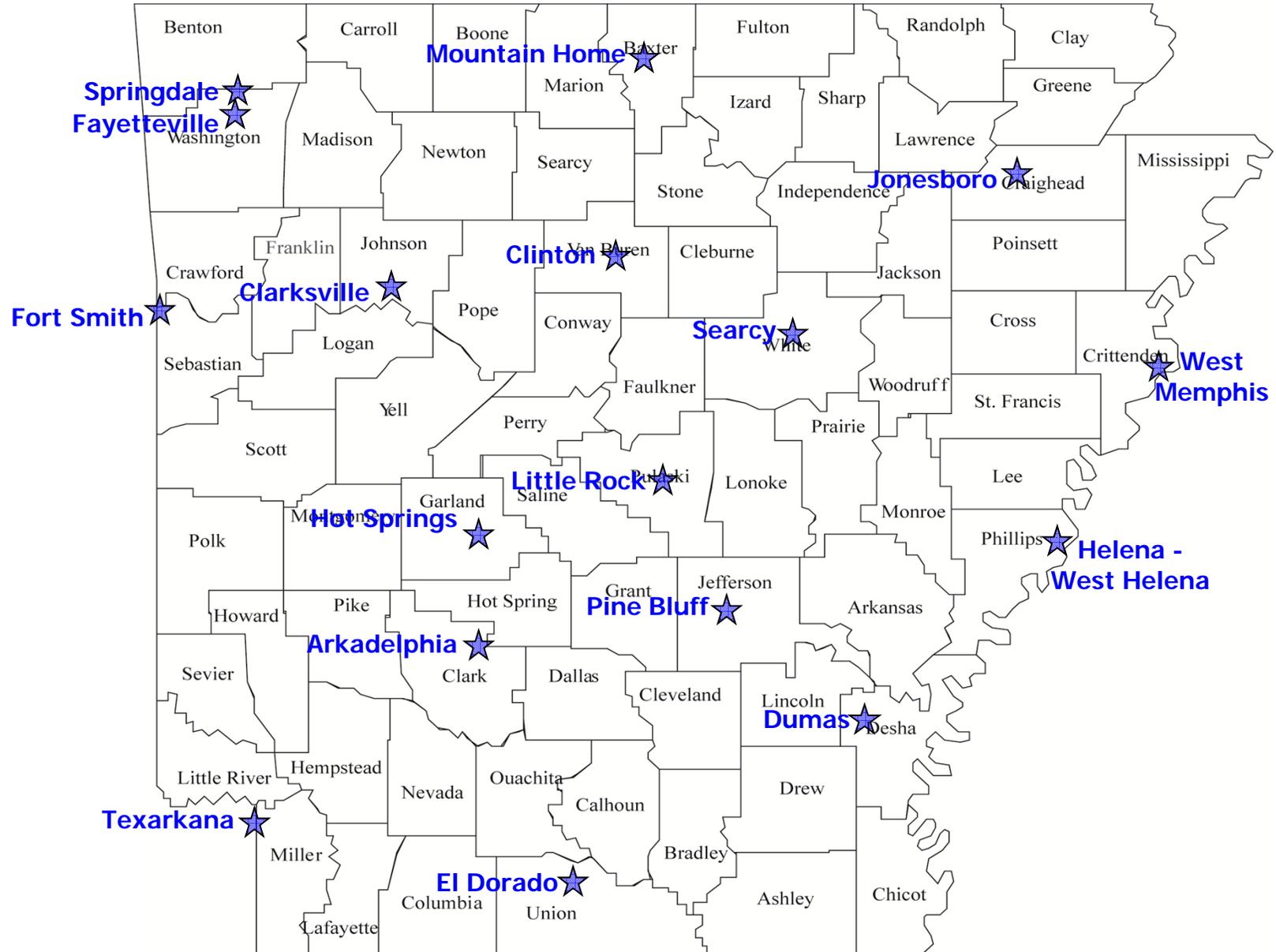




Arkansas Health Benefits Exchange Stakeholder Input

Arkansas Health Benefits Exchange Stakeholder Summit
October 11, 2011

Community Meetings



Web-based Survey

- Survey “live” from July 12 to August 26, 2011
- Attendees at community meetings received an e-mail providing the link to the survey and asking them to share it with others
- Planning Committee and Workgroups were provided link and asked to share it with all interested parties
- Link on Health benefits Exchange website
- Response Information
 - 1,323 viewed the survey
 - 473 completed the survey
 - 433 valid responses after data cleaning

Should Arkansas plan an exchange or accept the exchange that will be offered by the federal government?

- **A majority of the community participants were in favor of proceeding with plans for an exchange designed by Arkansans, for Arkansans.**
- **In the Web-based survey, 36.6% supported the planning effort,” 31.5%, “had concerns about the planning effort but believed that an Arkansas planned Health Benefits Exchange was a better than a federally mandated Exchange;” and 31.9% felt “planning for the Exchange is a waste of time and money and should be discontinued.”**

Who should govern the exchange?

- On the issue of operational control, each of the three models of governance had supporters and detractors.
- In the Web-based survey, 46.0% favored “A public organization overseen by a separate non-profit Commission/Board,” 36.5% recommended a “State Agency,” and 17.8% recommended a “Not-for-profit organization.”

Should individuals making more than 400% of the FPL be allowed to participate in the exchange?

- **Many of the participants expressed a desire for the exchange to be as inclusive as possible. However, a sizable number of participants urged caution concerning opening the exchange to all.**
- **In the Web-based survey, 74.4% including individuals making more than 400% of the FPL**

Should businesses with more than 50 employees be allowed to participate in the exchange?

- **Again, many of the participants expressed a desire for the exchange to be as inclusive as possible. However, a sizable number of participants urged caution expanding eligibility.**
- **In the Web-based survey, 49.3% preferred the 50 or less definition; 40.2% preferred 100 or less definition and 10.5% were uncertain.**

How should the navigator program be run?

- Navigators should be well trained and either licensed or certified.
- Agents were the best trained to assist purchasers with the use of the exchange.
- In the Web-based survey, there was support for Navigators from a variety of backgrounds
- Three-fourths indicated that Navigators should be “Certified” or “Licensed.”

Should the exchange offer all qualified health plans or should the exchange select the best plans?

- **There seemed to be a preference for an exchange that is open to all plans; also support for asking insurers to compete for the opportunity to sell through the exchange.**
- **In the Web-based survey, opening the exchange to all qualified plans was supported by (33.3%) followed closely by the hybrid model (32.2%). Asking insurers to compete for the opportunity to sell through the exchange was supported by 20.0% and 12.5% were Uncertain.**

How can the Arkansas Health Benefits Exchange minimize adverse selection?

- Co-pay to encourage the insured to make better healthcare purchasing decisions.
- be waiting periods before coverage begins .
- The penalty for individuals not having insurance and small businesses dropping insurance should be increased.
- Annual contracts and open enrollment periods.
- In the Web-based survey, There was support for all options.

Summary

- **A majority of the participants were in favor of proceeding with plans for an exchange designed by Arkansans, for Arkansans. However, there was a strong and vocal minority of the participants who were unequivocally opposed to planning an exchange.**
- **Most participants want the Insurance Department to be the agency to regulate plans and companies. With respect to operational control, there was support for all three proposed models.**
- **Expanding the Exchange to include optional groups : Some want to be inclusive and spread the risk across the largest possible pool. Others recommended starting with the minimum eligibility categories and expanding eligibility at a later date.**

Summary

- There was a general consensus that navigators should be well trained, either licensed or certified, and meet continuing education requirements.
- A number of participants, including many who were not agents, indicated that agents were the best trained to assist purchasers with the use of the exchange; some were worried about a conflict of interest.
- Navigators should be from the cultural groups they are serving.
- There was consensus that competition lowers costs. Thus, there was support for both an exchange that is open to all plans where they compete for business, as well as requiring insurers to compete for the opportunity to sell through the exchange.

Summary

- **There was no support for new taxes to finance the Exchange. Among the participants who had thought about the financing options, most felt that multiple sources would be required.**
- **The ability to compare plans offered through the Exchange on a variety of quality measures was considered a positive.**
- **There was consensus that the Exchange should utilize measures to minimize adverse selection.**

Questions / Comments

Other Topics

- **Should Arkansas consider adding to the Minimum Essential Benefits?**
- **Should Arkansas offer a “Base-plan” for those between 139% and 200% of the Federal Poverty Level?**
- **Should Medicaid enrollment be integrated into the exchange portal?**
- **How should the Arkansas Health Benefits Exchange be financed?**
- **What are some of the Quality Indicators Arkansans would find useful when comparing plans offered through the Arkansas Health Benefits Exchange?**
- **Other**