



December 5, 2013

Arkansas Health Insurance Marketplace: Governance and Related Activities

SBM Core Areas for Initial Assessment/Research

December 2013 – March 2014

- **Legal Authority and Governance**
- Consumer and Stakeholder Engagement and Support – Stakeholder and Tribal Consultation Plan (1 of 4)
- Consumer and Stakeholder Engagement and Support – Call Center (4 of 4)
- Eligibility/Enrollment
- Plan Management
- SHOP
- Organization and Human Resources
- Finance and Accounting
- Technology
- Privacy and Security
- Oversight / Monitoring / Reporting
- Re-Use

- ✓ Arkansas focus
- ✓ Measure against comparable states
- ✓ Incorporate lessons learned and best practices
- ✓ Necessary for Blueprint, Level 1 and Level 2 Grants

ACA Governance Expectations

✓ Sets broad parameters to allow flexibility –

- May be governmental, quasi-governmental or a non-profit entity established by the state;
- States may operate state, regional, or subsidiary exchanges;
- Exchanges may perform all required functions in-house or contract out key services.

✓ Established by Legislative Authority

✓ ACA expects diverse and knowledgeable governance, with representation and input from those served by the HIM

❑ ACA expects states to maximize resources

❑ Governance is reviewed as part of:

- Blueprint Requirements for HIM
- Level I and Level II Establishment Grant Requirements and Reviews
- Future CMS Gate Reviews

Section 1311(d) gives States the option to establish the Exchange as a governmental agency or nonprofit entity. Within the governmental agency category, the Exchange could be housed within an existing State office, as it is in Utah, or it could be an independent public authority, as it is in Massachusetts. Regardless of its organizational form, the Exchange must be publicly accountable, transparent, and have technically competent leadership, with the capacity and authority to take all actions necessary to meet federal standards, including the discretion to determine whether health plans offered through the Exchange are “in the interests of qualified individuals and qualified employers” as Section 1311(e)(1) requires. The Exchange also must have security procedures that meet the data and privacy standards necessary to receive tax data and other sensitive information needed for enrollment. (DHHS, Initial Guidance to States on Exchanges, 2011)

Governance Requirements

States have responded to in different ways

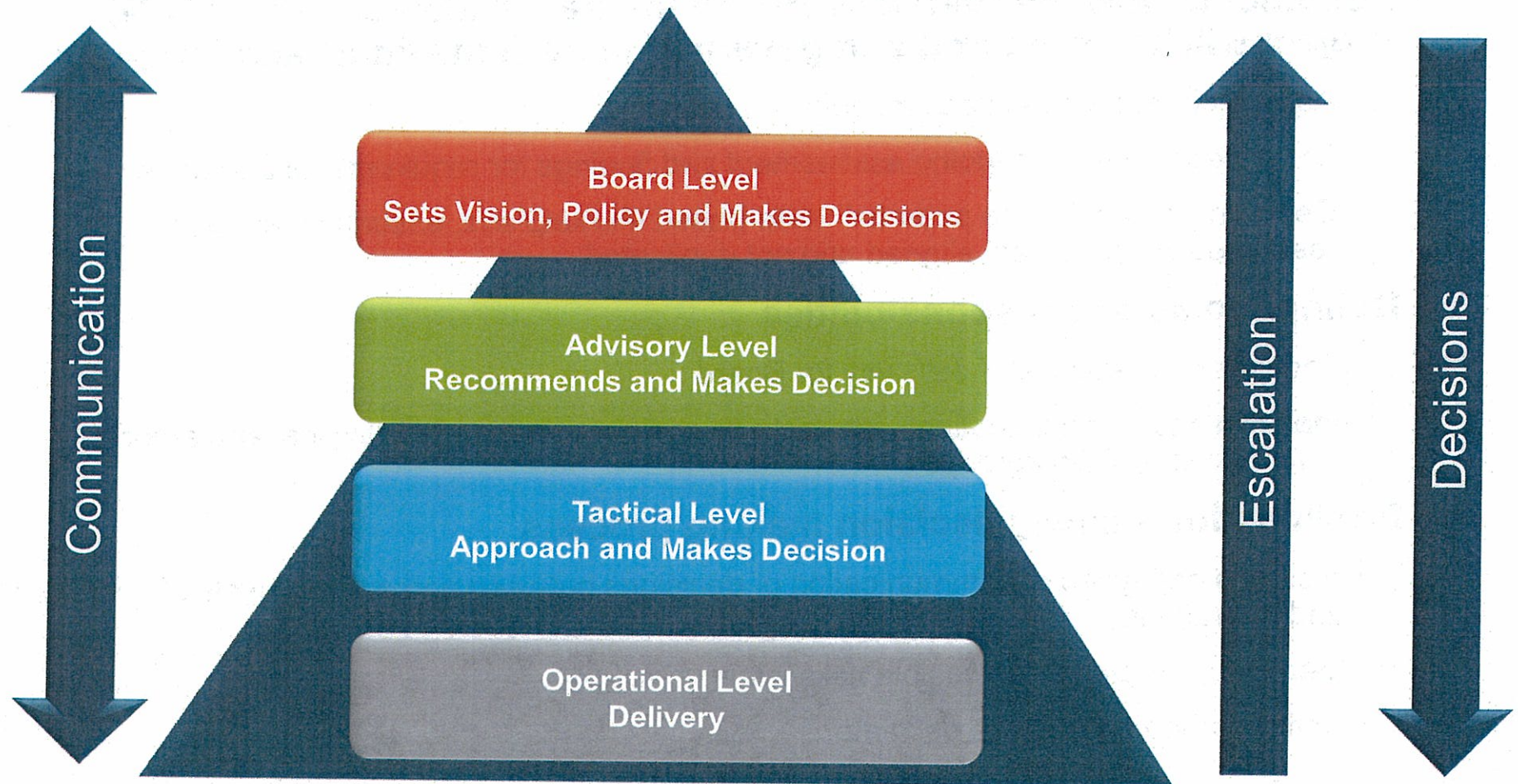
- **Multiple Health Insurance Marketplace Models (includes D.C.)**
 - 27 Federally-facilitated Marketplaces (FFM)
 - 17 State-based Marketplace (SBM)
 - 7 State Partnership Marketplace (SPM)
- **Flexible Governance and Administration structures**
 - Agency - top-down methods that primarily involve state
 - Quasi-Governmental - the use of private marketplace to allocate resources while operating under government regulation
 - Non-Profit - public/private partnerships or with the collaboration of community organizations
- **Possible plans to move from FFM / SPM to SBM**
 - Presently under consideration in Arkansas
 - Idaho, New Mexico planning for potential shift in 2015
 - Illinois, Delaware planning for potential shift in 2016

Creating an AHIM Governance Plan

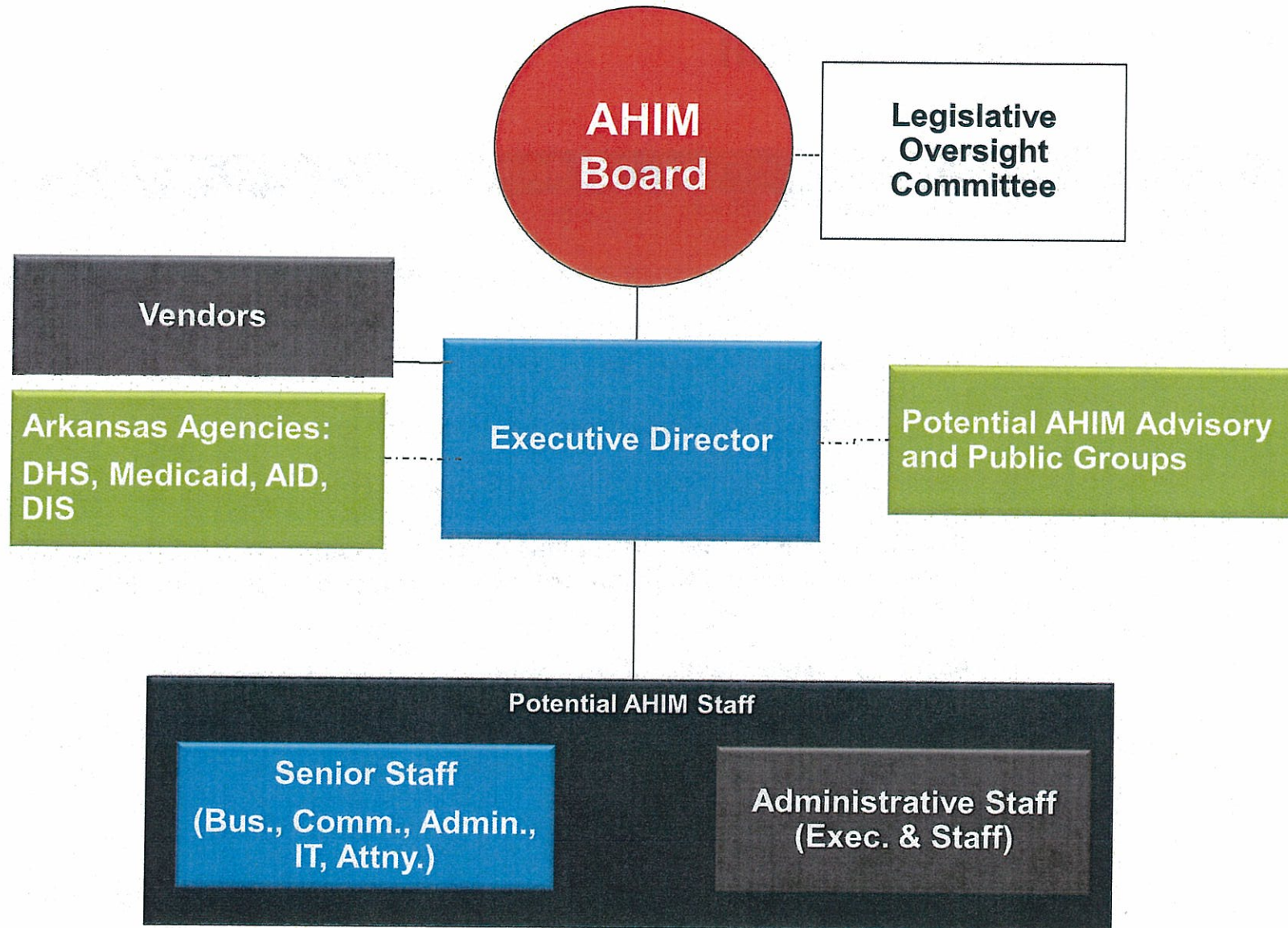
What is a Governance Plan?

- **Documents how the Arkansas Health Insurance Marketplace (AHIM) Project will be structured and governed in both the short and long-term**
 - Assess current Marketplace models and authority
 - Set expectations for ongoing assessment and findings for requirements and gaps
 - Decision on/transition to potential State Based Marketplace, ensuring necessary resources are procured, aligned and not duplicated
- **Defines roles and responsibilities**
 - Focuses on the levels of authority for Board
 - Identifies the communications, interactions and coordination in activities, and among committees and workgroups
- **Provides for a timely decision making process**
 - Methods and types of communication of decisions between and among levels of oversight and operations
 - Identifies and plans for possible risks/issues/changes
 - Defines when and how to escalate

Governance Model – Roles / Responsibilities Flow



Governance Decisions on Organizational Structures/Relationships

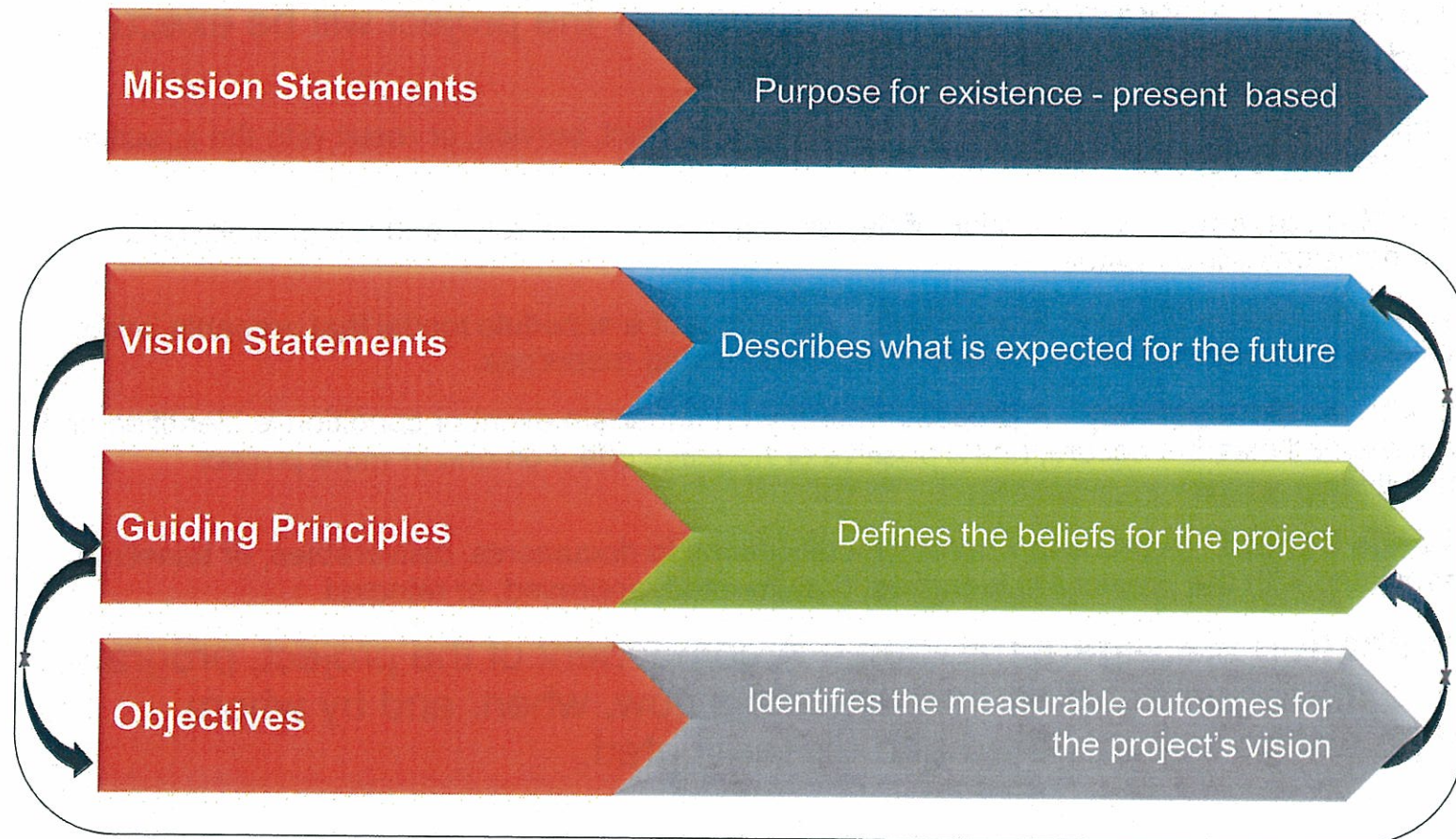


Governance Model Detail

Level	What	Responsibilities
Board of Directors	Sets vision, policy and makes decisions	<ul style="list-style-type: none"> • Has overall authority for the project • Provides or designates accountable 'point person' or team for all key decisions and milestones • Provides leadership, sets vision and direction for the Arkansas • Provides Marketplace Project and policy leadership • Ensures that the deliverables and functionality of the project are achieved • Reviews executive level status of the project, assessing constraints (time, cost, and scope) to align Illinois Marketplace Project progress with program vision and direction • Approves changes to the project scope, budget, and schedule • Makes decisions about escalated change requests/issues/risks raised by and affecting the Arkansas Health Insurance Marketplace Project • Makes decisions about recommended mitigation and/or recovery plans • Creates and Directs any Committees and vendors to research and provide input for decisions • Reports to Legislative Oversight Committee

Defining Cornerstones of Program Governance

First Steps - Establishing the AHIM Purpose and Direction



Project Planning

- **Project Management Plan (PMP)** – Once defined, initial governance incorporated into a document that describes how the project will be executed, monitored and controlled, including:
 - **Project Scope** – The work performed to deliver a product, service, or result with the specified features and functions
 - **Staff Management** – A description of decision making bodies, roles and responsibilities and how decisions will be made.
 - **Project Schedule (Project Work Plan)** – An output of a schedule model that presents linked activities with planned dates, durations, milestones and resources.
 - **Risk/Issue Management** – A process whereby an uncertain event or condition is identified and documented that, if it occurs, has a positive or negative effect on one or more project objectives.
 - **Change Control** – A process whereby modifications to documents, deliverables, or baselines associated with the project are identified, documented, approved, or rejected.
- **Communication Management Plan** – A component of the project, program, or portfolio management plan that describes how, when, and by whom information will be administered and disseminated.

Communication Planning

Marketplace Communication Plans and Activities

Internal Communication

Internal Communications Plan

Formal governance related documents will be produced for communication purposes, including:

Vision, Guiding Principles and Project Objectives
Roles and Responsibilities
Protocols

Internal Project Communication Plan

Project Communication Plan

Describes the processes, roles, responsibilities, protocols and management of internal communication for:

Project Status
Project Issues
Project Change Control
Project Risks
Project Issues
Project Milestones/Deliverables



External Communication

External Communication Plans

Who	What
Stakeholders	Communication Matrix
Focus Groups	Project Updates
Advocacy Groups	Core/Key Messages
Other Agencies	Education
Public	Outreach
Consumer	
Media	

Suggested Next Steps – Governance Activities

December 2013 – March 2014

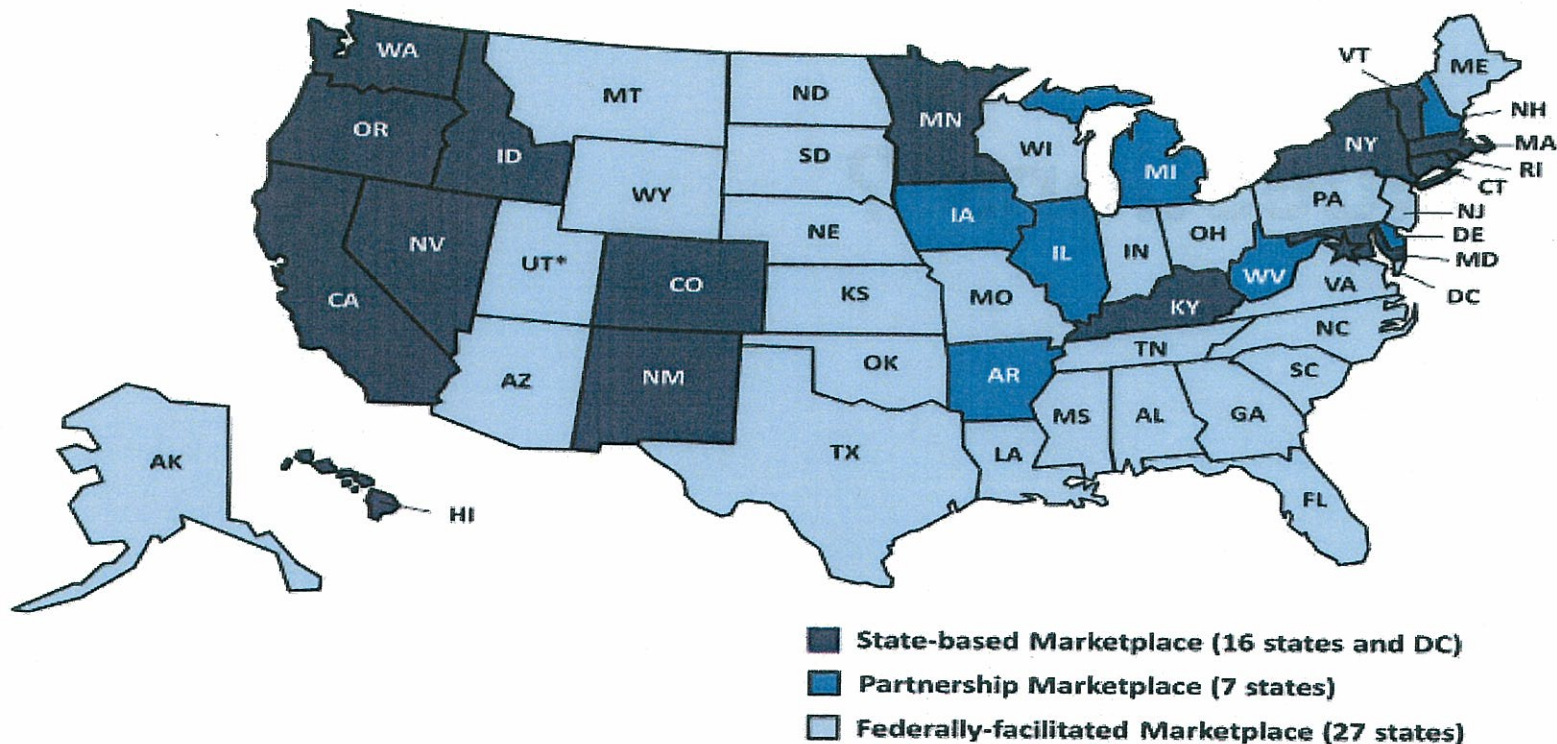
- **Board should identify ‘point person’ for key areas (e.g., governance, communication, staffing, etc.)**
- **Propose scheduling and meeting Board Members to:**
 - Identify short-term/long-term purpose & objectives
 - Capture AHIM roles and responsibilities (i.e., Board, potential subcommittees, need for staffing)
 - Discuss issues around operations and project management (e.g., decision making, risk management, issue management, change order process)
 - Define communicate processes and how best to engage key participants/impacted groups
- **Use feedback to present findings and begin to document plans on:**
 - Governance
 - Project Management and Communication



Questions ?

Map of Health Insurance Marketplaces

States Health Insurance Marketplace Decisions, May 10, 2013



* In Utah, the federal government will run the marketplace for individuals while the state will run the small business, or SHOP, marketplace.

Appendix II

Example of Idaho Governance Map

Idaho State Exchange Strategy

