









September 14, 2012

Peter Lee, Director California Health Benefit Exchange Board 2535 Capitol Oaks Drive, Suite 120 Sacramento, California 95833 Submitted electronically to info@hbex.ca.gov

Re: California Health Benefit Exchange Stakeholder Engagement Plan

Dear Peter Lee and Members of the Board:

On behalf of the undersigned organizations, we are hereby submitting comments on the *California Health Benefit Exchange's Stakeholder Engagement Plan* in advance of the Board meeting September 18 at which it will be considered. The plan includes several positive elements such as a transparent timeline and advisory committee selection process, as well as a stated commitment to public participation through open meetings and opportunities for public comment. We also appreciate the Exchange's commitment to ensuring that the advisory groups are representative of California's cultural, geographic and economic diversity.

The Exchange has put forth a stakeholder engagement plan that includes advisory groups on: 1) Plan Management, 2) Marketing, Outreach and Assistance and, 3) Small Employer Health Options Program. The group members will be announced in December and groups will start to meet in January of 2013. The plan is a good first step, however we have several recommendations with respect to the advisory committee scope, selection process and timeline which we think will help to improve stakeholder engagement and ensure the Exchange realizes its vision of improving the health of all Californians:

• The Exchange should convene additional, formal stakeholder Advisory groups on the Eligibility, Enrollment, and Retention System as well as Information Technology with DHCS: We are concerned by the lack of a formal process for stakeholder input into the critical areas of eligibility and enrollment and information technology. We do not think an ad hoc group on either of these topic areas is sufficient

to deal with the breadth and scope of issues that will need to be addressed by the Exchange and other CalHEERS program sponsors, including what consumer data the Exchange will be collecting, privacy protocols, consumer assistance, and specific issues with respect to eligibility determinations, health plan choice processes, and renewal procedures. Other states have set-up similar formal, separate stakeholder advisory processes on eligibility and enrollment and information technology to provide critical stakeholder feedback on these issues. The AB 1296 stakeholder process on eligibility and enrollment is completed. While it was a good model of collaboration between the Exchange, DHCS, HHS, consumer advocates, counties, workers, plans, and providers in which stakeholders put forth specific recommendations, the state partners did not indicate their policy decisions and the issues remain in need of discussion and decision. AB 1296 requires HHS Agency, the Exchange, DHCS and MRMIB to meet with stakeholders quarterly during implementation and this should begin as soon as possible.

- The Exchange should allow for formal stakeholder engagement on the Service Center: There is no mention of the Service Center as part of the scope of stakeholder engagement in any of the three Advisory groups mentioned in the plan. We request clarification as to whether the Service Center is part of the scope of work for the Marketing, Outreach and Assistance Advisory group. We would also note that the Service Center is also highly relevant to the new Eligibility, Enrollment and Retention System Advisory group, and could be folded into the work of that group.
- The Exchange must guarantee Adequate Consumer Representation in the Stakeholder Advisory Groups: The Exchange plan recommends that the stakeholder advisory group composition include consumer advocates and educated health care consumers who are QHP enrollees starting in 2014. In order to ensure that the Exchange continues to be responsive to the needs of consumers, we request that at least two of the Advisory group members for each group be consumer advocates to ensure sufficient coverage.
- The Exchange should consider hastening the timeline for the formal stakeholder process: We are concerned that the timeline for formal stakeholder engagement may be too slow to impact some of the critical decisions the Exchange is making right now with regards to eligibility and enrollment processes, information technology and plan management. For example, the Exchange will be starting the bidding process for Qualified Health Plans in November and the IT system planning, which touches nearly every aspect of the Exchange, is underway. We recommend that the formal process be hastened particularly with respect to plan management, eligibility and enrollment, and IT in order to ensure a robust stakeholder engagement.

Thank you for consideration of this input on the critically important stakeholder engagement plan. We look forward to continuing to work with the Exchange Board and staff to realize our shared vision of improving the health of all Californians.

Sincerely,

Casey Young AARP

Ellen Wu California Pan-Ethnic Health Network

Betsy Imholz Consumers Union

Anthony Wright Health Access

Elizabeth A. Landsberg Western Center on Law & Poverty

cc: Toby Douglas, Director, Department of Health Care Services