



Marketing, Outreach, and Enrollment Assistance (MOEA) Advisory Group Meeting Minutes

Thursday, March 4, 2021 from 1:00 PM – 4:00 PM
GoToWebinar Platform

Webinar Participation:

Members:	Member Organization:
1. George Bacteria	Collective Choice
2. Michael Bergstrom	Neighborhood Health Insurance Center
3. Angela Cheda	Blue Shield of California
4. Sarah Dar*	California Immigrant Policy Center
5. Amy DeMarco*	Molina Healthcare
6. Melissa Diamond	Health Net
7. Hellan Roth Dowden	Teachers for Healthy Kids
8. Joseph Gabra	Accounting Rivers
9. Dan Garrison*	HealthMarkets Insurance Agents
10. Mark Herbert	Small Business Majority
11. John l'Anson	Kaiser Permanente
12. Cynthia Keltner	California Primary Care Association
13. Rick Krum	Anthem Blue Cross
14. Rachel Linn Gish	Health Access
15. Njeri McGee-Tyner	Alameda Health Consortium
16. Kristin McGuire	Young Invincibles
17. Lezlie Micheletti	Department of Managed Health Care
18. Pamela Moore	Redwood Community Health Coalition
19. Hugo Morales	Radio Bilingue, Inc.
20. Andrew Nguyen	Asian Americans Advancing Justice L.A.
21. Roberto Ortiz	Ortiz & Associates
22. Cori Racela	Western Center on Law & Poverty
23. Linh Tran	L.A. Care
24. Kerry Wright	Wright Way Insurance/C.A.H.U.

*The member was represented in the meeting by a colleague of the member's organization



Agenda by Items:

**Comments, questions or feedback made during or after each section are bulleted and each bullet is followed by the member's name who made the remarks. Additionally, comments have been condensed and paraphrased.*

Item I. Call to Order and Agenda Overview:

- George Balteria, MOEA Chair called the meeting to order.

Item II. Administrative:

- A. Invitation to members to fill the vacant Co-Chair position
- B. Updated MOEA landing page on hbex.coveredca.com website
- Cori Racela: Asked if there were term limits on the chair and co-chair positions.
 - George Balteria: Was unsure of term limits and has no objection to term limits, but he and the co-chair, Alicia Emanuel, encourage diversity in profile of the members and by enrollment channel to ensure there is balance within the group.

Item III. Covered California

A. Welcome

- Open Enrollment 2021 Overview
- 2021 COVID-19 Special Enrollment Period
- Proposed Federal Stimulus Package
- Chat Question: If the federal government increases subsidy assistance, will California continue its subsidy assistance?
 - Doug McKeever: Responded that the state subsidy will go away as the individuals will be getting more from the stimulus package. Don't know if the money that was earmarked just for the state subsidies or if it can be used elsewhere, but that is for our legislative people \$500 million over the next two years.
- Kerry Wright: Said that he was very proud of what we had accomplished during open enrollment (OE) almost all of 2020 but received comments that this was adverse selection. He sees people that are going to Covered California not for health reasons, but because they lost their jobs and need coverage and doesn't see this as damaging



the risk pool. Mr. Wright asked what has the impact to the risk pool and adverse selection been for 2020.

- Doug McKeever: Responded saying that his gut reaction is that risk pool didn't suffer as most of the people that came into Covered California were due to job loss. However, he says this with a degree of reservation as he doesn't have the data yet for rate negotiations for 2022 and doesn't know how the risk will positively or negatively affect rates for 2022.
- Hugo Morales: Asked what some of the barriers are to better enroll the Latino community and what can we do to increase it.
 - Doug McKeever: Responded saying that Covered California always strives to market to all communities of color, phone banks with great results, people in communications and public relations that are dedicated to reaching the Latino and will be a focus of our marketing to SEP (Special Enrollment Period) as well as other target populations like we have every year.
- Hellan Roth Dowden: Asked for an explanation in using California Healthcare Eligibility, Enrollment, and Retention System (CalHEERS) and how it ties in people that are getting health subsidies to getting health insurance.
 - Doug McKeever: Explained that California Healthcare Eligibility, Enrollment, and Retention System (CalHEERS) is an enrollment platform, so we will need to update the system to enroll people for different needs. Like the COVID-19 special enrollment, we had some dropdown boxes that were created so they don't have to go through a waiting period. The system will need to be updated for the additional subsidies.
- Cori Racela: Asked if there is a federal reconciliation forgiveness for excess advance premium tax credits (APTCs) or will there be an attendant forgiveness for state APTCs.
 - Doug McKeever: Responded that he was unable to address this question and said our Policy team will follow up.

B. Policy Updates:

1. Proposition 22 App-Based Network Company Drivers
 2. SB 260 Automatic Health Care Coverage Enrollment
 3. SB 260 Consumer Contact Information
- Kerry Wright: Explained that his Covered California clients going to Medi-Cal which end up coming back to Covered California, the agent is offered to select coverage for that member and then they remain a client. He wondered if this is true for SB 260 as it seems like there is an automatic selection for the lowest silver. He asked if he will receive a list



of people coming off coverage and will agents remain the “agent of record” like they do with Medi-Cal.

- Andrea Zvonicek: Responded saying her understanding that agents of record on a Covered California application will remain agents of record on the transferring Covered California account. Cori Racela: Asked if consumers will receive a notice about staying with their Medi-Cal managed care plan carrier if they are offered a Covered California product and it is not the second or if this is the lowest cost silver.
 - Andrea Zvonicek: Responded that Covered California is developing a notice according to the law outlining the options the consumer can choose to select another available plan, that they can change the plan they are auto-enrolled in, and they will also be given the option not to enroll in the plan. The law states that Covered California can use data from the county or other plan to enroll the individual into their previous managed care plan if it is available and if able to be done within the required timeframe. Covered California will engage with stakeholders when implementation planning resumes.
- Kerry Wright: Commented that when agents contact their clients, they consider carrier continuity as well as evaluating other opportunities their client might have. Kerry suggested having someone on the agent side such as George be present.
 - Andrea Zvonicek: Responded Covered California will be engaging with external stakeholders such as agents and advocates for feedback.

C. Marketing:

- Chat Question from Hugo Morales: Asked if messaging will include increased financial assistance for the Covered California plans or will it be that it includes more individuals but not increased assistance. He added a follow-up question asking if some plans cheaper now with the increase assistance from Congress.
 - Colleen Stevens: Responded that if this (the stimulus package) goes through as the bill is written, it will provide more funding to those currently enrolled and create funding to those that have never received subsidies at all, so Marketing will be promoting both of these messages to every population.
- Chat Question from Hugo Morales: Asked for a few masks and wants to know if there will be any increased investment in the campaign to any group or groups.
 - Colleen Stevens: Responded saying that there will be additional investments on top of Special Enrollment Period (SEP) and they will cover the broad spectrum for the state, larger band of income as we had stopped at \$150,000 but now includes other people. Our priority is our base group of people. Will send another package of masks.



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- Doreena Wong: Asked about additional marketing other than banner ads in the three primary Asian languages.
 - Colleen Stevens: Developing a campaign for the stimulus which will include print, television and digital.
 - George Balteria: Asked if Covered California might be thinking of allocating resources as applied to open enrollment as opposed to extended open enrollment. With it being more aggressive like an open enrollment, will it be less aggressive than last open enrollment as there is an extended deadline?
 - Colleen Stevens: Last year, we had regular open enrollment followed by a COVID-19 open enrollment and then real open enrollment and less people signed up during regular open enrollment. Felt it was important to have a wide-open door as people were suffering. With the stimulus, it's incumbent on us as there's not much talk of this in the relief package. Will be a great deal with people and discussing in our budget for next year, if it passes and we have this special enrollment we might continue it and how we invest in next open enrollment based on enrollment in special enrollment period. We will be very aggressive during this stimulus time and we don't want to miss anyone that wasn't eligible in the past or because there weren't enough subsidies for the specific federal poverty level before. A lot of new people will be eligible now and those that already have coverage will receive more money.

D. Communications

- Chat Comment from Hugo Morales: Commented excellent testimonial provided by the Communications team in the 'Real People' story.

E. Outreach and Sales Division Updates:

- Doreena Wong: Asked will there be a webinar or training for the new updates for navigators and agents.
 - Terri Convey: There will be lots of trainings, both formal and informal. There will be a large conference in the third week of April, but we will also host webinars mid-March along with email alerts. We are also happy to host a webinar specifically for your organization.
- Kerry Wright: Thanked Covered California for continuously educating agents. The agent delegation tool has streamlined his workflow and made it easy to delegate to a consumer while still working on the application. He mentioned virtual enrollment has been up and called out the shop and compare tool. The challenge with shop and



compare is great because he can share screen while on the virtual platform with the consumer, but the tool does not allow for emailing the quote to the consumer to be discussed and considered outside of the virtual meeting. He has requested a downloadable version for the quotes obtained from ship and compare. He recalls someone saying the update was being worked on and he wants to get status.

- Terri Convey: Applauds engagement and asking questions that continues to help facilitate the workstream. We do indeed have an IT (Information Technology) initiative to roll this out, but I do not have the roll out date. Thank you for following up on this topic.
- Cori Racela: Employment Development Department (EDD) is sending a Covered California informational flyer insert to those people who have been approved for unemployment benefits. Is there consideration to expand to those people who are applying for unemployment not just to those who are approved. Is there also any thought about similar efforts with the Franchise Tax Board (FTB) for those people who did not know about the mandate special enrollment period?
 - Terri Convey: The Employment Development Department (EDD) project is gaining momentum since the stimulus bill through the American Rescue Plan (ARP) has the opportunity to enhance subsidies to some people. Covered California has a workgroup looking at this initiative. On the topic of the Franchise Tax Board (FTB), I do not have insight on this and will defer to anyone else who may have some information on this, otherwise, we will have to get back to you on this topic. We will determine whether we can get information and do outreach through the FTB for those people who are engaging with them.
- Hellan Roth Dowden: Is so impressed with what Covered California is doing. There has always been a problem with the confidentiality of the EDD data, is this a barrier working with them, if so, how is it being addressed? Also, Medi-Cal enrollment is decreasing but Covered California enrollment is increasing, and we would like to know what Covered California is doing to obtain those results? Is Covered California able to share those tactics with the partners here on some of those strategies?
 - Terri Convey: As an organization we are mission driven in reaching consumers to create awareness and make sure we enroll consumers into a plan. We must call out marketing in their efforts to roll out messaging through our marketing campaign. Additionally, our partnerships with carriers, agents, navigators, enrolling partners, advocacy groups, community organizations all contribute to the success that occurs in California.
- Rachel Lynn Gish: There is a legislature bill this year, SB 644 that would make the connections stronger between organizations such as EDD through the flyer inserts going



to the EDD members. We thank that work and partnership and hope the bill strengthens these types of collaborations.

- Terri Convey: That is fantastic, thank you for that information.
- George Balteria: Would like to thank the work done through the enhanced delegation tool, his agency is still new to it and is working through it and understands the concept behind the tool is great. One comment on the slide showing the decrease on the storefront program on the Covered California dotcom. On the surface comparing the 2019 to 2020 views, there seems to be a 62% decrease and would agree to some degree this is due to COVID-19 but would still want to highlight the changes done to the dotcom landing page. The new section of the storefront finder is very hidden and the feature for in-person help is essentially not existent on the landing page. I'm concerned that navigators and agents, having done the majority of the enrollments would not have been featured on the landing page for new consumers to access.
 - Terri Convey: That is a fair comment. Sometimes changes have unintended outcomes but we will note this and revisit this. The storefront is a great program and very important and we've got very good partners.

Item IV. MOEA Member Discussion

A. Advisory Group Action Items Updates:

- Hellan Roth Dowden: Can you put the links in the chat to the reports for the completed action items?
 - Karol Sandoval: The PowerPoint presentation is accessible on the Health Benefits Exchange (HBEX) MOEA (Marketing, Outreach, and Enrollment Assistance) website under today's meeting under "presentation", but the action items can also be found in the Quarterly Summary Reports section.
 - George Balteria: You can find the Health Benefits Exchange (HBEX) website by searching 'Covered California MOEA' or 'Covered California Stakeholders' and the HBEX website should come up.

B. COVID-19 Vaccine Outreach:

- Kerry Wright: When there were face-to-face meetings there was a lot of buzz from stakeholders around the "Public Charge" and I know the Biden Administration is going to do something about the "Public Charge" can a stakeholder on the call brief us on what is being done and where the "Public Charge" topic is moving? In regard to the vaccine outreach, I know the Los Angeles Association of Underwriters got our county vaccine



program director to do a webinar and reached out to members for a discussion. The county was not really interested in the underwriters' feedback back in January 2021 because they thought we were trying to jump the line for the vaccine when in actuality we were trying to think ahead for the phases 1B and 1C and become a resources for those people but they did not want to partner with us.

- Hellan Roth Dowden: I'm glad to hear that Kerry is getting involved in the vaccine outreach. The schools are now going back. The basic vaccinations are still required for school entry but not the COVID vaccine, at least yet, we're finding that 40% drop-off of kids not getting the basic vaccines. Schools have been trusted messengers. The 'Public Charge' is not an issue at the public schools. Los Angeles Unified School District has 42 clinics doing vaccines. There may be some synergy with working with the schools. Eventually the COVID vaccine may be required as early as next year once people see how effective they are. This may be a way to reach out to the parents to sign off on the vaccinations. This may also be a way to incorporate a Covered California message into this strategy.
- Hugo Morales: We have been very involved at messaging during the pandemic. We've been heavily involved in contact tracing using our own voice to message to our people. This may be something we can talk to our producers about to promote health care enrollments but have not tied the vaccine to health care. We have promoted health care but separately and not too frequent. At the same time, we have partnered with University of California, Davis, Institute of Disparities with Sergio Gaxiola, on a small on COVID-19 tracing that includes Fresno County, and several others by surveying people who participate in contact tracing. Only two-thirds of people who say will get the vaccine and at another location 50% say they will not get the vaccine in Modera county. Our instinct is that the Modera county is farmworkers and indigenous people and the lack of knowledge is swaying them against wanting to get the vaccine. I will request signage to share at these vaccination sites to help promote Covered California since they have mobile clinics.
- Pamela Moore: I have two things to recommend, during the January open enrollment we did Spanish and English radio interviews about COVID in general and the importance of having health insurance specially if you lost your health coverage. The interviews were done on Zoom but were streamed live on Facebook by the radio stations. For vaccine related outreach we created a postcard that had the importance of health insurance and the other side it stated what an enrollment counselor could do to help you in English and Spanish. We individualized the address section to the nearest health center. This way the health center can distribute the postcard for the people waiting after



getting their vaccine during the 15-minute waiting period, they can get the information on the postcard. The postcard was simple and easily accessible.

- Doreena Wong: In terms of strategies, many of our navigators are doing COVID-19 outreach and education even beyond health, into food distribution. When we have drive-through food events, we give flyers about Medi-Cal and Covered California. We also have a table of materials for COVID-19 testing and health care options. We received funding for community health worker training to ensure they know about the different types of health care coverage and can refer to our certified enrollment counselors (CECs) for enrollment with specific language. We even do tax preparations and link them back to health coverage. So, we have been able to integrate the health care message into the COVID-19.

C. COVID-19 Pandemic: Looking Ahead

- Kerry Wright: One of the things that worked very well in 2020 is evaluating the information about adverse selection and the impact of the open enrollment periods on the quality of the risk pool is going to be interesting. Having the extended enrollment period was very helpful. People that lost businesses and those that lost employer sponsored coverage benefited from the special enrollment periods.
- Pamela Moore: One of the challenges we faced was people not having access to the internet. We found phone enrollment was helpful for these people without internet. The shop and compare tool is great so a resource for enrollers would be a one-page document that essentially asks all the same questions that shop and compare asks, specifically: Is there a provider you prefer, do you have children, do you have prescriptions and how often do you fill them? This one-pager could be mailed out to the consumer prior to the call so the consumer can be ready and have something to look at while we help them on the call.
- Njeri McGee-Tyner: I would like to recognize more hospitalization and death rates among the African American and Latinx community and were disproportionately higher for COVID. These two communities also experienced greater disease burden and outcomes. I know with these events geared towards the Asian Pacific Islander and African American community were great, but we need to do more. The masks were also great, but we should be more visible and host events in these communities and not just in the nice locations but get into the grassroots communities to address the health disparities in these communities.
- Mia Nam: We would like to address an issue with the duplicate applications in CalHEERS. The application does not notify the enroller that the application has a duplicate until the end of the application once we are done. It would be great to have



the system detect the duplicate application at the beginning of the application. We also have people going from Medi-Cal and Covered California and it would be easier if the transition was smoother going back and forth between the two systems. We need help on mixed household applications when changes occur at the county level, so the Covered California applications side has the correct information. It is hard to determine when changes occur, and it causes double the workload for our counselors trying to figure out what happened and who made the changes.

- Kerry Wright: There were changes that happened at the carrier level with an issue of automatic payments and billing for those consumers who were unsubsidized it took longer to reinstate than those consumers who were subsidized. It would be nice for consumers who get unsubsidized plans get the same rights as those consumers who are subsidized. This was the biggest challenge.
- Cori Racela: I want to second and uplift what Njeri McGee-Tyner said about outreach to underserved communities I would like to request we get a specific report out on this outreach. Although the marketing for in-language is wonderful but that does not always overlap with outreach to specific communities. I would like to see a section for this topic highlighted at our next meeting and followed-up as an action item.

D. Open Discussion

- Kerry Wright: Does anyone know the evolution of “Public Charge” for taking health benefits from Medi-Cal or Covered California?
 - Jagdip Dhillon: We saw that as of February 22nd the Supreme Court would agree to hear a challenge from the Trump administration. Covered California was not part of the “Public Charge” rule. The Biden administration has been active saying they would make changes to these things. No final decision has been determined.
 - Wayne Lucero: Jagdip is correct with the Supreme Court, the Biden administration did go back to change their argument. On the other front, on February 2, 2021, they issued an executive order that called for an immediate review of agency actions on “Public Charge”. The Biden Administration asked the Secretary of State, Attorney General, Secretary of Homeland Security and heads of other agencies to review all the actions related to implementation of ‘Public Charge’ grounds. That group has 60 days from date of that order to submit a report describing any actions that go against anything listed in that executive order. You can go to [whitehouse.gov](https://www.whitehouse.gov) and search under their executive order announcements for February 2nd.



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- Cori Racela: Another great resource is protectingimmigrantfamilies.org. I do want to clarify Medi-Cal in general are not subject to the “Public Charge” it is actually a very narrow group who are subject to this as there are many exceptions like children and immigrant children.
 - Wayne Lucero: Added that financial help through Covered California state premium assistance is not a public benefit under the ‘Public Charge’ rule and are not considered as public benefits when making a ‘Public Charge’ determination.
 - Hugo Morales: Consulted some specialized lawyers on benefits and said that they would get a hold of Covered California on this issue. They advised Medi-Cal and Covered California do not impact the ‘Public Charge’. Even if we tell immigrants this, they do not want to believe it. Not sure how the printed materials got out last year when we had our meeting. There are a lot of misrepresentations even with people that are well read. Read an article in the New York Times about the bill being offered in the house and going to the Senate will provide increased subsidies to the exchanges, therefore will drop the amount monthly people would pay for benefits and will last two years. He wanted to verify this as it said premiums that were \$1,200 will maybe now be \$600 and wanted to pitch this while it lasts.
 - Colleen Stevens: Still determining what the subsidy bill will be. One of the clauses is the issue of people capping out at 8.5% as this will affect a lot of middle-class people. As soon as we get the details all nailed down, there will be trainings and we will get the message out there as it will really help people at the lower end but higher than the working poor with a substantial amount of their income going to health insurance.
 - Pamela Moore: Asked Jagdip Dhillon about the woman in the video whom said she did not pay anything for her hospital stay. If someone is in the hospital for COVID-19 care, does it mean that they don’t have an out-of-pocket expense for the year as it’s COVID-19 related.
 - Jagdip Dhillon: Responded that he will have someone else from Covered California follow up.
 - Rachel Lynn Gish: Understands there are special steps the state took and full-emergency coverage the state had. There are some articles out there of people getting high hospital bills but that might be for people on grandfathered plans. Think that there might be some cliff coming up once the state entities stop covering emergency treatment, something they are seeking information on. In the past, we allowed undocumented buy into Covered California with their own money. There is some talk of bringing them up again and don’t know how that will play into the current



situation might be an opportunity to revisit this. Wondered about the one-dollar premiums, even if you are fully subsidized you might be paying one dollar for reproductive care as the federal government doesn't pay for that. There is a current budget ask in the state legislature to zero that out so that no one loses coverage.

V. Adjourn

- George Balteria reminded everyone of the co-chair position adding that they are not making a decision for a quarter or two but prior to the next meeting. Mr. Balteria thanked Covered California staff for their work preparing the presentation as well as the audience for their participation and questions.

Meeting was adjourned at 3:30 pm.