

case study:

Health Insurance Marketplace Plan Management



THE CLIENT

Arkansas Insurance Department (AID)

THE PROJECT

Development of guidelines and requirements for Qualified Health Plan (QHP) certification; QHP strategy and operational support; health insurance rate review

THE OPPORTUNITY

In April, 2013, AID contracted with PCG Health as prime contractor to develop Arkansas guidelines and requirements relating to Qualified Health Plan (QHP) certification and subsequent activities such as recertification, decertification, interaction with the Private Option Medicaid expansion and development of plan quality metrics. PCG continues this engagement today.

PCG's relationship with the AID expanded and, in November, 2013, the AID Health Connector Division engaged PCG Health to assist with strategic guidance and operational support. The PCG team incorporated QHP carrier-specific quality metrics into consumer-facing media and facilitated stakeholder engagement related to this quality initiative.

In December, 2014, AID's Health Insurance Rate Review Division engaged PCG to assist with program oversight related to its Effective Rate Review Program.

THE APPROACH

PCG has served as the plan management vendor for the Arkansas partnership marketplace since its inception. For QHP guidelines and requirements, the team followed a thorough process that included many steps such as development of issues briefs, certifying/recertifying/monitoring, methodologies for QHP quality rating determinations, timelines and criteria for QHP certification/recertification, and more.

Through an expanded scope of work, PCG assists AID as it works to understand how to best communicate health insurance quality information to consumers. The PCG team first identified priority areas and assessed the technical landscape required for data collection and implementation and used stakeholder groups to gather consensus. During the process, PCG engaged participants to evaluate options for measures, report design, and how to best display quality information to consumers for the coming marketplace open enrollment period. Next steps in this project include converting this pilot report into an ongoing, web-based consumer quality dashboard for all health plans offered in the Arkansas market, as well as integrating state-specific quality measures within the shop-and-compare portion of the new state-based Marketplace.

In the most recent engagement, PCG initiated an evaluation of the financial resources available to the Division. The AID Health Insurance Rate Review Division has received four rate review grant cycles over the program's lifetime, with concurrent initiatives and vendor commitments occurring across these grants. Upon identifying funds available, funds spent, and funds committed to vendors, PCG developed a revised program budget in accordance with shifting Division needs and gained both federal and state approval of re-budgeting for over \$1.25 million in funds. PCG also assisted with financial compliance by developing an automated fiscal reporting platform to provide rapid access to required quarterly, annual, and final grant report data. Next steps identified in this project relate to ongoing program oversight and documenting project milestones in accordance with requirements under the Effective Rate Review Program designation.

THE RESULTS

PCG's expertise on issues involving the communication of complicated health care data to consumers in a meaningful way has made Arkansas an early adopter and leader in this important area of health care reform. PCG continues this engagement today.

Other achievements include the successful navigation of federal and state re-budgeting of multiple rate review cycle grants totalling more than \$7 million, allowing Arkansas to re-allocate financial resources according to Division priorities.