



Department of Health and Human Services

**Centers for Medicare and Medicaid
Services – Health Insurance Marketplace**

2020 Action Plan

Who are we?

The Centers for Medicare and Medicaid Services continue to be a source of information and an entry point for consumers to apply for and enroll in Marketplace health insurance in 38 states that use the federally facilitated platform.

The way that consumers can access healthcare coverage is changing, as large employers are being given new options for how to provide healthcare benefits to their employees, and third party entities are able to provide direct access to Marketplace plans.

Healthcare.gov received close to 1.8 billion page views last year and the Marketplace call center answered over 17 million calls. Every improvement can have an impact on millions of customers.

The goal is to develop decision support information and tools that assist consumers to access the resources that will enable them to get health insurance that will meet their needs.



How do we deliver value to the public?

Occasion

During an employer's annual benefit period, employees are provided insurance benefit information and employees must make their health insurance elections. Some types of benefits offered by employers are designed such that the employee buys their own health insurance coverage and the employer provides some level of reimbursement towards premiums and other out of pocket expenses.

When completing the application for Marketplace health insurance, individuals must be able to accurately input their current and estimated income along with other household information before being able to enroll in coverage.

During the annual enrollment period, consumers need to update their information and re-enroll in Marketplace coverage for the following year.

High-Impact Service

Consumers (employees) being offered two new types of Health Reimbursement Arrangements (HRA) need to understand the parameters of their HRA, how that works with buying their own insurance, find out through decision support tools and the Marketplace application and enrollment process whether they should use the offer from their employer to buy coverage or whether they should use financial help provided through the Marketplace, and then finally enroll in a health plan and inform their employer whether they're using the HRA to help pay for the insurance.

Consumers need to think through and gather all relevant income information for the current month, figure out income already earned so far during the coverage year (if relevant) and project their future total income for the year, review and confirm the information and understand how their income estimates impact what they're eligible for when enrolling in coverage.

Consumers need to review information provided during the previous year on their application, update income and other household information, review new/updated eligibility results, and confirm a plan for the next coverage year by the Open Enrollment deadline.

Offering

Provide decision support that enables individuals to determine whether their employer HRA offering will enable them to afford Marketplace health insurance, or determine whether premium tax credits are available through the Marketplace to assist them and how the HRA impacts the decisions the consumer needs to make regarding its use and enrolling in a Marketplace health plan.

Provide a simplified application flow with integrated help content and tools to guide Marketplace applicants through various sets of questions, including the income section of the Healthcare.gov application along with expanded estimation tools for consumers that may be unsure what their income will look like for the coverage year.

Provide guided experience with pre-populated information in a streamlined update process to enable consumers to easily review and confirm changes for the future year across the application and enrollment end to end process.

Where could we improve?

Steps	1: Review and Understand Health Insurance and Options	2: Examine Costs and Eligibility for Savings	3: Apply and Enroll
Customer Steps Name and describe the main steps that a person takes to use the service, left to right, start to finish.	For consumers who receive an HRA offer from their employer, there are a number of places they may go to examine their health insurance options. These include: Healthcare.gov, Marketplace call center, employer HR or benefits coordinator, agents and brokers, insurance companies, etc.	Individuals who are interested in obtaining a Marketplace health plan will need to know what they may be eligible for in terms of paying less for their monthly insurance premiums given their HRA offer, and whether a Marketplace plan is the best option for their needs.	Once it is determined that a Marketplace plan is the right option, consumers must apply for Marketplace health insurance to confirm their eligibility for a qualified health plan, premium tax credits vs. using their HRA to help cover the cost of monthly premiums, or other cost sharing reductions, and then enroll in a plan.
Service System Describe the channels, roles, and tools from your agency or partners.	Healthcare.gov informational content Marketplace call center Supported enrollment pathways and partner resources	Educational information and interactive decision support / estimation resources available without logging in, providing consumers with an estimate and next steps for how their HRA offer from their employer may impact tax credits to help cover the cost of monthly premiums.	Marketplace application and enrollment experience across existing customer service channels (online, call center, through supported partners, etc).
Pain Points Describe the highest priority problems to solve	Understanding health insurance options is confusing and we need to educate and walk users through the process and provide information that will help them make an informed decision regarding the benefit of their HRA offer, including whether they can use it to cover premiums, or whether they may want to instead use premium tax credits, if eligible, as well as what decisions and steps are involved in enrolling in health coverage.	Provide an easy means for consumers to determine whether the HRA from their employer makes Marketplace insurance affordable for them, and to examine whether they are eligible for any other financial help that will assist with affordability of health insurance.	The application is complicated and adding in new types of employer benefit options for health insurance creates a potential additional layer for confusion. Understanding the steps and decision process between accepting an employer's HRA offer or using tax credits, when to make that decision, and when and how to apply and enroll in coverage to help facilitate deciding whether to use and how much to use of an HRA provided by their employer to purchase health insurance.

What will we do?

Purpose

*Why did your agency undertake this project?
What does it hope to achieve, in specific performance indicators, if possible.*

What is the problem?

Marketplace content related to HRA offers has been in place on Healthcare.gov since 2018, as this has been an option for small businesses since then with additions in 2019 reflecting a new type available that might be offered by large employers. However, disentangling and understanding how employer coverage and HRA offers impact eligibility for tax credits through the Marketplace has proven to be difficult for consumers.

Desired future state?

Guided experience that provides consumers with clear information to make decisions about how to get their health insurance coverage.

Any measurable indicators and targets?

Customer satisfaction scores for healthcare.gov users
Usage and completion of the HRA estimation resources available online.

Qualitative research showing improvements in consumer comprehension and success in the application/enrollment experience.

Consumers indicating they have one of these HRA offers, and enrolling in coverage.

Approach

Describe the timeline and work plan to achieve that purpose. If this is an ongoing initiative, describe your progress.

Process, methods, and expertise?

User-centered design grounded in data, customer and stakeholder feedback.

Timeline, stage gates and dates?

- July 2020: Launch new decision support resources, updated application and enrollment logic for one of the two new HRA types (individual coverage HRAs).
- Fall 2020 (stretch goal): Support small employer HRA offers in the decision support/estimation tool
- 2021: Continued refinement of decision support capabilities, educational content, and consumer resources
- Fall 2021: Additional affordability logic added to application support small business HRA offers

Deliverables being produced?

Launch of new consumer resources to assist with understanding next steps and how an HRA offered by an employer impacts tax credit eligibility and update application & enrollment processes.

- Enhancing educational content and information
- Interactive tool providing estimation/decision support
- Eligibility updates for HRA affordability calculations vs. tax credits
- Eligibility and enrollment updates to handle HRA Special Enrollment Periods

Resources

Describe the stakeholders involved, financial and human capital dedicated to the work, and any partners contributing to the work.

Who is responsible?

The Office of Communications within CMS

Who is contributing to the project?

Multi-disciplinary team of UX, research, call center, web, content, policy SMEs.

What are we proud of this year?

Service Improvement

Who is the user and what was the problem? If you have baseline statistics, include (ex. "34% of users dropped off on this page, or "call volume on this made up 20% of our calls)
HealthCare.gov originally wasn't designed to be mobile responsive and application and enrollment processes are complex and sometimes users struggled to complete various tasks, especially on mobile for the application and enrollment flows. In the first few years of the program, mobile use was around 10%. As iterative improvements have been made to sections of the site we saw small increases in mobile use up to about 15-20% for the last several years as some sections received responsive design updates.

What did you build / improve? What does it do for the public or how you deliver your mission? What was the resulting impact? (Include numbers whenever possible)
We built newly updated iterations of our streamlined application UI and plan shopping experience while launching these updates with a visual refresh and conversion to a Design System framework, providing more streamlined experiences for users and improving the mobile experience while users fill out the application or shop for plans. As we've enhanced streamlined parts of the site and converted tools over to Design System for its UI platform components, we've continued to see upward trends in mobile usage. Now within parts of the site with these improvement we're seeing increases in users on mobile, sometimes reaching 50% of users on a mobile platform, inclusive of phone and tablet.

Any lessons for other agencies emulating this work?

Biggest lesson learned was that as we're streamlining and converting tools over to a common Design System platform, customized components needed to added to the Design System framework to consider

Sum up what happened in two sentences.

After 7 years, we are launching newly streamlined tools that leverage a Design System platform to handle the UI which has better mobile and accessibility features built in for a consistent experience. With these improvements, we've seen mobile utilization that was around 10-20% significantly grow to 50% in some of the improved experiences.

What are we proud of this year?

Classic Application UI – not mobile optimized

Application ID: 6927882

City optional State optional ZIP code optional

Employer's phone number Ext. optional

Employer Identification Number (EIN) optional

In the past 60 days, did any of these people lose qualifying health coverage, like one of these types? optional

- An individual health plan (including from the Marketplace, or a student health plan)
- Coverage through a job, or through another person's job
- Pennsylvania Medical Assistance (MA) (Medicaid) with full benefits
- Pennsylvania Children's Health Insurance Program (CHIP)

Learn more and see a list of qualifying coverage types.

John Carson

When did John Carson lose health coverage?

MM/DD/YYYY

What was the name of John's prior health coverage? optional

None of these people

Don't check the box if a person lost coverage because they didn't pay their premiums.
Note: You may need to submit documents to confirm that you recently lost coverage before your new coverage can start.

SAVE & CONTINUE

Streamlined Application UI – responsive design for mobile, not on design system

Will anyone lose qualifying health coverage before 9/14/2018?

Don't select anyone who will lose coverage because they didn't pay their premiums. You may need to submit documents to confirm that you'll lose coverage before your new coverage can start.

John Carson

Did anyone listed below get married on or after 5/17/2018?

You may need to submit documents to confirm your recent marriage, and show that you or your spouse had coverage at some point during the 60 days before your marriage. [Learn more about why we ask for this information.](#)

John Carson

Did anyone listed below get released from incarceration (detention or jail) on

Visual Refresh Streamlined App UI on design system platform – enhanced mobile

HealthCare.gov Menu

[← Back](#)

Upcoming coverage changes

Will any of these people lose qualifying health coverage between 5/26/2020 and 7/25/2020?

[Learn more about qualifying health coverage.](#)

John Carson

Save & continue

Application ID: 155750538