

Certified MNsure licensed insurance agent survey

January 13

2014

Licensed health insurance agents play a pivotal role in the success or failure of MNsure to achieve its goals. This survey tested the interaction of agents and their clients during the period September 2013 through December 2013. Prior to MNsure's launch, agents looked toward MNsure with uncertain hope. By December, agents became frustrated on behalf of their clients and in their own practices. Many began to question whether to walk away from MNsure. Dave Racer, MLitt – DGRCommunications, Inc.

Experiences,
attitudes, and
opinions
about
MNsure's
goals and
actions

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Author's Notes About this Survey

This survey tested agents' interaction with MNsure on behalf of everyday Minnesotans - their clients.

Licensed health insurance agents act like thermometers, measuring everyday individual's reaction to and interaction with health insurance. Agents are, therefore, engaged at many levels of the effects of health insurance reform. Agents know, through their personal interaction with MNsure's clients, the effects of health insurance reform on everyday Minnesotans.

Agents are trained to understand insurance transactions, including the nuts and bolts of enrollment and interaction with insurance providers, but more importantly, to take the measure of their clients' engagement with the system. Agents facilitate face-to-face transactions between everyday individuals and employers with MNsure, and Minnesota's insurance carriers.

Agents would likely prefer to act like thermostats, analyzing their clients' needs and setting the conditions to assist in making wise recommendations about health insurance. During the past two decades, agents' counsel contributed mightily to driving Minnesota's uninsured rate to among the lowest in the nation – in the commercial insurance marketplace, in fact, to an uninsured rate of less than three percent.

Agents provide extremely valuable and trustworthy insight into how everyday Minnesotans are faring while interacting with health reform's new insurance distribution model at MNsure, and with the nominally different private marketplace Minnesota's legislators allowed outside of MNsure.

Legislators and government administrators, and MNsure officials in particular, would be wise to pay attention to and discuss the results of this survey as they move forward executing the requirements of the Affordable Care Act, and Minnesota's enabling legislation.

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About funding for this survey

DGRCommunications, Inc. solicited support related to the cost of conducting this survey from about 600 insurance agents with whom Mr. Racer has had frequent interaction. Fifteen of those agents provided financial support that totaled less than \$900. No other funds have been received or used to conduct this survey and report on it.

Professional Association Status

While much of our work is coordinated with professional insurance agent associations, we alone are responsible for the content, execution, and analysis of this survey. We did not ask the associations for their permission nor did we receive direction from them.

Agents indicated their membership status in professional associations. Nearly 38 percent indicated no association affiliation. We tested for membership with the Minnesota Association of Health Underwriters (MAHU), the National Association of Insurance and Financial Advisors (NAIFA-MN), the Professional Insurance Agents (PIA-MN), and the Minnesota Insurance Agents and Brokers Association (MIIAB, often called the Big I). It should be noted that several respondents hold memberships in more than one association.

General Findings

A Shift from Hopeful to Frustration

- As of September 1, 2013, agents were hopeful that MNsure would be of value to their clients and to agents. Nearly 55 percent indicated they were very hopeful or hopeful but unsure. Another 24 percent indicated they expected failure, but even then, hoped to be able to write some business.
- As of the end of December, having interacted with MNsure, 16 percent indicate MNsure has at least worked well enough to help their clients, and as a result, the agents are pleased. Some 39 percent indicated they were able to provide some help, but it was very tough to do.
- Most critically, 53 percent indicated that MNsure was a partial or total failure in their practices.

Looking Ahead

- Eleven percent of agents indicate they are convinced MNsure will eventually work, and be a benefit to clients, while 13 percent are hopeful it will eventually work. Nearly 60 percent express disbelief it will ever work well, but expect to keep trying. More than 19 percent have given up trying.
- More than 47 percent urge professional insurance agent associations to focus on making sure a competitive, private marketplace exists outside of MNsure. Yet 27 percent urge their associations to work with MNsure while protecting the private, non-MNsure marketplace. Twenty-two percent ask their associations to support a complete MNsure overhaul, or work against MNsure.

Medicaid/MinnesotaCare Inquiries

- More than 44 percent of agents reported receiving a heavy volume of calls from individuals that qualified for Medicaid/Medical Assistance or MinnesotaCare. Agents receive no compensation for helping these individuals, and reported often spending two hours or more servicing them. Yet 78 percent of agents expressed their feeling that they ought to help these individuals – 57 percent expressed concern that helping Medicaid and MinnesotaCare clients negatively affected their ability to earn a living.
- Agents reported that of those individuals qualifying for Medicaid or MinnesotaCare, almost 54 percent expressed a desire to have the right to choose a private plan instead of government health insurance. MNsure does not allow this choice.

Non-Medicaid/MinnesotaCare Clients

- About nine percent of clients that agents assisted were able to find private insurance coverage at MNsure and pay for it. Another five percent completed the process but were unable to make payment.
- About 33 percent of clients assisted by agents either found coverage at MNsure or purchased coverage outside of MNsure.
- 13.6 percent of agents reported being unable to get anyone through the entire MNsure process. Another 21 percent of agents said they quit trying, and took their clients into the private marketplace whenever possible.

- 38 percent of agents' clients reported being unable to select a MNsure product because the process failed, while 45 percent were able to select a product, but stated the process was "quite frustrating."
- 64 percent of agents reported it took at least three attempts to get individuals enrolled at MNsure.

MNsure Customer Service for Agents

- Asked to rate the quality of MNsure's call center advice on a scale of 1 to 5, agents overwhelmingly rated it as Poor or Inadequate.
- 45.5 percent of agents reported wait time on the phone with MNsure's call center as an hour or longer. Another 26 percent indicated wait times of 30-60 minutes.
- MNsure provides an email address for agent inquiries (brokers@mnsure.org). 32 percent of respondents indicated they never used it. 43 percent indicated they either received a response indicating MNsure was too busy to answer their email inquiries, or are unsure they ever received a response.

Survey Details

Lists and Survey Participants

Over the past 18 months we have compiled an email contact list of health care finance professionals, the majority of which are licensed health insurance agents doing business in Minnesota. This list includes about 3,150 agents with whom we have frequently interacted. To this list, we recently added MNSure Certified Agents from the MNSure assister directory published at MNSure.org. This brought our total list to about 4,200 individuals.

Distribution

We sent the survey via ConstantContact using two different email notices – one to the individuals who are familiar with us, and a second to the MNSure certified agents recently added to our list. We distributed the survey at mid-day on December 30, 2013, and closed it at midnight, January 6, 2014.

Number and Nature of Respondents

463 individuals completed the 20 question survey – 95 percent indicated they are MNSure certified. 53 percent of respondents indicated their primary insurance practice is located in Greater Minnesota. We used the 11-county Metropolitan area for delineation purposes. Less than one percent answered the question “Other.” Seventy percent of respondents work in small agencies of four or fewer agents.

Validation

We recognize the limitations of this survey, and make no claim that it speaks for the professional associations or their members in the whole. In a less formal survey we conducted during late November and early December of 2013, sent to the 3,150 agents in our in-house list, we had asked agents across the state to share anecdotally about their interaction with MNSure (we have provided those results to MNSure’s CEO). The findings of this new survey seem to verify the anecdotal evidence collected in the earlier edition.

We believe the survey results reported herein are a fair representation of licensed professional health insurance agents’ interaction with MNSure from across Minnesota.

Authorship

Dave Racer, CEO of DGRCommunications, Inc., is responsible for writing, distributing, collecting, and analyzing this survey. Results were reviewed by his staff.

Discussion

A Shift from Hopeful to Frustration

Agents earn a living by meeting their client's need to purchase insurance. In general, agents know that very few people "buy" health insurance. There are many other demands on individual's money than to use them to pay health insurance premiums. Under the individual mandate of the Affordable Care Act, many agents realized the likelihood that clients would begin to seek them out for assistance in purchasing coverage, that is, individuals would begin to shop for and buy insurance.

As the table below shows, as of September 1, 2013, agents were hopeful that MNsure would be of value to their clients and to agents. Nearly 55 percent indicated they were very hopeful or hopeful but unsure. Another 24 percent indicated they expected failure, but even then, hoped to be able to write some business. To sustain or improve on this sense of hopefulness, MNsure needed a relatively well-functioning process.








"I thought I had won the job lottery," wrote a Dakota County agent. "Exciting products for many who needed it but had been denied access was great, and then add my desire to assist people with health care seemed like such a huge reward for doing a job."

"I was convinced it would change the future of our business and that I would be expanding the number of agents in health insurance," wrote a Wadena County agent.

Agents that expressed early hope also complained about the lack of proper training they received, feeling it set the tone for the mounting problems that followed.

Table 1 - Agent Attitudes on September 1

* Think back to September 1, 2013. At that time, what did you think about the whole MNsure experience that lay just ahead?

Answer	0%	100%	Number of Response(s)	Response Ratio
Very hopeful, expecting to write a volume of new business.			61	13.1 %
Somewhat hopeful, able to write some new business.			82	17.7 %
Hopeful, but unsure.			112	24.1 %
Expected it would fail to some extent, but still able to write some business.			111	23.9 %
Wanted to avoid MNsure if at all possible.			55	11.8 %
Had no expectations one way or the other.			25	5.3 %
Other			13	2.8 %
No Response(s)			4	<1 %
Totals			463	100%

By December, having interacted with the system, agents' hope had greatly diminished. Many, however, looked for improvements and still expressed hope that MNsure would eventually fulfil its mission. As of the end of December, having interacted with MNsure, 16 percent indicated MNsure has at least worked well enough to help their clients, and as a result, the agents are pleased. Some 39 percent indicated they were able to provide some help, but it was very tough to do.

“The technical problems made the experience unpleasant and stressful but most of my clients are now insured and they have better coverage than before and most of them pay less so it’s hard to say that’s a bad thing!” wrote a Dakota County agent.

Most critically, however, 53 percent of agents indicated that MNsure was a partial or total failure in their practices. This bodes ill for MNsure’s ability to attract and enroll individuals in non-government health plans. It sends a signal to MNsure that it needs to not only fix its website issues, but mend, if not recreate its efforts to woo insurance agents.

Agents earn a living when they can solve problems. A Hennepin County agent explained his surprise at the expectation of new clients.

“The bulk of calls and referrals I received from MNsure were from people frustrated with the process, looking for someone to help them complete an application, but not necessarily looking for what I do as an [agent.] What I provide to my clients is help comparing plans and tax and legal advice...With the people who came to me through MNsure, they were looking for something different.”

A Pennington County agent wrote, “Out of all the people we helped, only one made it all the way through and still had a billing and plan issue. We feel helpless in every way...”

Agents expressed both hope and bewilderment at the expectation of clients that called them. Many came to an agent long after starting the MNsure process, and had grown frustrated. Many ended up qualified for Medicaid or MinnesotaCare but the time agents spent helping them is uncompensated. Agents indicated the website programming flaw that prevented or made it difficult for clients to identify their agent during enrollment – necessary for agents to be compensated – meant scores of hours spent helping folks, but with no income earned from the investment of time.

Table 2 – Agents Attitudes on December 31

* Having experienced MNsure since October 1, 2013, how do you now see the whole MNsure experience?

Answer	0%	100%	Number of Response(s)	Response Ratio
It has worked out well for my clients and me.			2	<1 %
It's worked well enough; so I've been able to help some clients, and I am pleased with my results.			14	3.0 %
Really not sure what to say. Able to help somewhat, but it's been tough.			179	38.6 %
It's been almost a complete failure and I've hardly been able to help anyone.			140	30.2 %
A total failure.			105	22.6 %
I have no opinion.			8	1.7 %
Other			14	3.0 %
No Response(s)			1	<1 %
Totals			463	100%

Looking Ahead

Eleven agents – 2.3 percent – indicate they are convinced MNsure will eventually work, and be a benefit to clients, while 13 percent are hopeful it will work.

Agents long expressed sentiment that MNSure discounted the value agents bring to the individual insurance transaction. Agents offer evidence of MNSure providing poor quality training that did not meet their needs and seemed to be designed by those with an eye on public relations rather than the agents that would eventually attempt to help individuals enroll in MNSure coverage.

MNSure officials, however, continued to insist that agents were essential to the exchange's success. Without agents actively engaging with clients and bringing them to MNSure, it is likely enrollment in private health plans will never meet MNSure's projections.

Hence, it is a threat to MNSure's future that 60 percent of agents express disbelief it will ever work well, but will keep trying. More than 19 percent have given up.

Table 3 – How Agents See MNSure Going Forward

*** Looking ahead, how do you see yourself working with MNSure?**

Answer	0%	100%	Number of Response(s)	Response Ratio
Convinced that it will work out, and be a great benefit once the website is fully-functional.			11	2.3 %
Hopefull it will work out because it could be a great benefit to my clients.			60	12.9 %
Doubtful that it will ever work well, but I will continue to work with it if it benefits my clients.			122	26.3 %
I will keep trying, but have become skeptical and don't expect much.			155	33.4 %
I've given up and have no plans to work with MNSure if I can avoid it going forward.			91	19.6 %
Other			23	4.9 %
No Response(s)			1	<1 %
Totals			463	100%

Agents that belong to professional associations expect their leaders to represent the agent's needs in influencing the development of public policy. Facing MNSure's engagement in the marketplace, agents are asking their associations to intercede as needed to protect clients and agents.

A Hennepin County agent seemed to capsulize the sentiment about wanting to help everyone find coverage:

"I would like to see MNSure available to help the poor, uneducated or unsure of how to buy insurance as I believe that all should be insured and not allowed to 'free-load.' I don't believe people should be allowed to drive uninsured or live uninsured. I hope MNSure can assist a certain segment who may go uninsured otherwise. However agents should be available for people who want an 'advisor' and do not qualify for subsidies, etc. There should be 'freedom' in ways to purchase plans."

Other agents suggested that MNSure might be the place for low-income individuals to get help, but many stressed that Minnesota's Department of Human Services already provided that service, without the need for a MNSure website.

More than 47 percent of respondents urge professional associations to focus on making sure a competitive, private marketplace exists outside of MNSure.

"My number one focus would be to allow for subsidies on plans purchased outside of the exchange. I'm convinced the carriers could develop the same system for a fraction of the cost and make the whole

process user-friendly,” wrote a Ramsey County agent who asks his association to concentrate on a competitive private marketplace.

Yet 27 percent urge their associations to work with MNsure while protecting the private, non-MNsure marketplace. Twenty-two percent ask their associations to support a complete MNsure overhaul, or work against MNsure.

“The perceived problem with health insurance is not the distribution of and access to insurance. The government has now messed up the distribution part too,” from an Olmstead County agent who asks the associations to oppose MNsure.

Table 4 – Agents and their Associations

Associations representing licensed agents want to do the right thing to help their members. Which one *of the following best expresses what you hope to see from a professional insurance association regarding MNsure?

Answer	0%	100%	Number of Response(s)	Response Ratio
Do everything possible to refine MNsure and make sure it works.			25	5.3 %
Work with MNsure as much as possible, but also work for an effective private insurance marketplace to compete with MNsure.			102	22.0 %
Focus energy on ensuring there is a competitive private marketplace to compete with MNsure, and let MNsure succeed or fail on its own.			174	37.5 %
Do nothing to help MNsure, but do everything possible to fight for a private marketplace.			48	10.3 %
If at all possible, rescind MNsure’s legislative authority, or at least, completely revise it based on what we’ve learned so far.			79	17.0 %
Work against MNsure in every way possible.			23	4.9 %
Other			10	2.1 %
No Response(s)			2	<1 %
Totals			463	100%

Medicaid/MinnesotaCare Inquiries

More than 44 percent of agents reported receiving a heavy volume of calls from individuals that qualified for Medicaid/Medical Assistance or MinnesotaCare. Agents receive no compensation for helping these individuals, and reported often spending two hours or more servicing them. Yet 78 percent of agents expressed their feeling that they ought to help these individuals – 57 percent expressed concern that this negatively affected their ability to earn a living.

An Anoka County agent captured the general sentiment of respondents:

“While I try to help everyone secure the insurance that they need, I have a family of my own to support. Consequently I have unfortunately explained to some people that as much as I would like to help them, I cannot afford to since I am not paid for it. Thankfully they understand and get it. They are astounded to hear that agents are being expected to work for free.”

Many agents reported that the MNSure call center referred clients to them, and of those clients, a good number could not qualify for Qualified Health Plans, from which agents earn commissions. About this, a Hennepin County agent wrote:

“Although I feel bad that people can't get enrollments done and it takes hours to get through to a MNSure assister, I find it annoying that they are being referred to me in the first place when they qualify for MA or MnCare.”





Some agents expressed a desire to work as both navigators and agents, but federal law prohibits this. “I am happy to work with whoever needs help but some of the clients required large amounts of time (more than 4 or 5 hours) and I was not paid for that,” wrote a different Hennepin County agent.

Agents recognize that clients who qualify for Medicaid or MinnesotaCare might help generate new clients through referrals, or eventually, earn enough to purchase other types of insurances. Property and Casualty agents, who write very little health insurance, often help new clients with homeowners, auto, and other insurances. “However, if the demand became too burdensome, I would have to limit my help, because I DO HAVE TO EARN A LIVING [emphasis in the original]...” from a Washington County agent.

More than one agent expressed regrets for becoming MNSure certified “...as I am finding the amount of time it takes with no reimbursement is not worth it.” (Beltrami County)

Table 5 – Agents Serving Low-Income Individuals

* In thinking about the individuals who qualified for Medicaid/MA or MinnesotaCare, how do you feel about providing help to them despite the fact that you cannot be paid for doing so?

Answer	0%	100%	Number of Response(s)	Response Ratio
Glad to help. It's my duty.			96	20.7 %
I'm willing to help a few, but not at the expense of earning a living.			266	57.4 %
I've had no choice but to quit offering help to these individuals.			59	12.7 %
I've had no experience with such individuals.			41	8.8 %
No Response(s)			1	<1 %
Totals			463	100%

Agents reported that of those individuals qualifying for Medicaid or MinnesotaCare, almost 54 percent of the applicants expressed a desire to have the right to choose a private plan instead of government health insurance. MNSure does not allow this choice.

Low-income individuals who apply at MNSure expecting to choose a Qualified Health Plan and receive premium tax subsidies but, instead indicate income at less than 201% of federal poverty guidelines, are, instead, auto-enrolled into MinnesotaCare or Medicaid based on the income they reported. Elsewhere, an agent reported to us his client wanted to reopen his application and claim more income so as to avoid MinnesotaCare. Other agents reported clients who were offended at being forced onto “government” health care (although willing to accept a tax premium subsidy).

Responding to this question of how often individuals asked for choices, a Dakota County agent commented:

“Every time. They even asked how to avoid subsidized assistance in order to obtain tax credits to buy their own plans. Those who first got notice that their children were ‘peeled off’ the family and sent to MNCare, while the parents were given a tiny tax credit, if any, to buy a plan, yet still can't afford the plan

with the small amount of tax credits, AND they are ‘on welfare’ and tied to the state in reporting every penny earned, etc. This is NOT what MNSure promised--tax credits are for FEW.”

Perhaps reflecting the individual and random nature of coverage, a Stearns County agent responded, “Only a few were uncomfortable excepting MA or MN Care. They chose not to follow through with it and stay on a standard plan off the exchange.”

[Although we did not test for it with this survey, many agents are uncomfortable with the lack of an asset test for those that qualify for Medicaid and MinnesotaCare. A Crow Wing County agent reported on a client that has a winter home in Arizona, works as a self-employed plumber, and claims less than \$9,000 a year in net income. The client, who enrolled in Medicaid, asked the agent to help him find a provider network near the Arizona home.

A Hennepin County agent reported about a retired 62-year old lawyer that had sold her practice. Her 59-year old husband was about to retire. They had \$900,000 in an IRA, and owned two homes valued at more than \$600,000. Yet, they structured their retirement income to qualify for MinnesotaCare with a premium of less than \$100. The woman worried, however, that she would lose access to her Mayo Clinic oncologist.]

Table 6 – Right to Choose for Low-Income Individuals

Of those that qualified for Medicaid/MA or MinnesotaCare, did they express to you a desire to choose or * have the right to choose a private (commercial) insurance plan instead of Medicaid/MA or MinnesotaCare?

Answer	0%	100%	Number of Response(s)	Response Ratio
Yes			250	53.9 %
No			150	32.3 %
I had no experience with this			62	13.3 %
No Response(s)			1	<1 %
Totals			463	100%

Non-Medicaid/MinnesotaCare Clients

MNSure intends to become the dominant, if not single place for individuals to purchase private (commercial) insurance. This is evidenced by MNSure’s enrollment projection of 300,000 individuals in private health plans, – 5.7% of Minnesota’s population – exceeding total current enrollment in such plans. To accomplish this goal, MNSure asserts that it needs the services of licensed insurance brokers [sic]. (Note: Unless a licensed agent chooses to be a navigator, the agent is prohibited from receiving a fee for helping individuals enroll in Medicaid or MinnesotaCare. Hence, there existed an assumption that unlicensed individuals acting as navigators or personal assisters would do the bulk of non-carrier compensated enrollments, while licensed agents would do the bulk of carrier-compensated enrollments into QHPs.)

This question tested the experience of agents in working with non-Medicaid, non-MinnesotaCare clients. About nine percent of clients that agents assisted were able to find private insurance coverage – QHPs -- at MNSure and pay for it. Another five percent completed the process but were unable to make payment. About 33 percent either found coverage at MNSure or purchased coverage outside of MNSure.

“The folks that qualified for the tax credit I spent hours with trying to get through the MNSure software. In almost every case we made it to the payment portion and from there the system would not allow us to proceed,” wrote an Anoka County agent. “4 of the last 6 people I helped received a message that said the

insurance company would be sending them a bill in 7 - 10 days. The insurance company told me 'that is not how we do business' - so these folks may fall through the crack!!"

"I don't know if the people I signed up through MNsure will have coverage effective 1/1/14. There is no way to know for certain as the website doesn't show if coverage is issued and the phone customer service people can only tell you what is on the MNsure site," reported a Dakota County agent.

13.6 percent of agents reported being unable to get anyone through the entire MNsure process. Another 21 percent of agents said they quit trying, and took their clients into the private marketplace whenever possible.










This Hennepin County agent reports working with almost 100 individuals. "If the individual did not qualify for any of the subsidized government programs through MNsure I always directed them to the private marketplace. Of the approximately 90 to 100 individuals I personally assisted, only two or three qualified for subsidized government coverage. Two of them stopped the enrollment process when they realized that the subsidies were far less than what they expected."

As evidenced in other sections of this survey, agent's experiences and expectations vary greatly. Yet, the sentiment expressed by this Scott County agent should be sobering to MNsure leadership. It expresses the doubt with which many agents approached MNsure, and which has been exacerbated by hands-on experience. Repairing this breach of confidence will be difficult, but absolutely essential if MNsure is ever to achieve any level of success in the private insurance marketplace.

"MNsure's process was a nightmare for clients to navigate with all of the system glitches. I would be out of business if I had this process for clients to sign up. I don't believe MNsure was up front about the problems to consumers and brokers as well. I actually had many people tell me that they sat through MNsure orientation and MNsure never mentioned that people had options to get health insurance coverage outside of MNsure if they did not qualify for coverage."

Table 7 - Experience Placing Individuals into Qualified Health Plans

*Which statement below best represents the outcomes you experienced for those who qualified for commercial coverage - a Qualified Health Plan (QHP)?

Answer	0%	100%	Number of Response(s)	Response Ratio
All of them found adequate coverage on MNsure, selected a plan, and have completed enrollment.			12	2.5 %
Most found adequate coverage on MNsure, completed enrollment, and paid for coverage.			31	6.6 %
Most found coverage on MNsure, but were unable to complete the process and make payment.			25	5.3 %
Some found adequate coverage on MNsure, and others purchased coverage through the private marketplace.			82	17.7 %
At best, only a small number selected commercial coverage on MNsure.			73	15.7 %
I was unable to get anyone through the entire process of purchasing a commercial plan on MNsure.			63	13.6 %
I quit trying to take anyone to MNsure and instead, directed them to the private marketplace whenever possible.			98	21.1 %
I did not attempt to take anyone to MNsure.			61	13.1 %
Other			17	3.6 %
No Response(s)			1	<1 %
Totals			463	100%

38 percent of agents' clients reported being unable to select a MNsure product because the process failed, while 45 percent were able to select a product, but stated the process as "quite frustrating." 64 percent of agents reported it took at least three attempts to get individuals enrolled at MNsure.

Both nationally and in Minnesota, the problems created by exchange website malfunctions have been widely reported. We do not wish to elaborate much on this, except to share the experiences of agents who, for the most part, diligently attempted to help clients. The website issues are, after all, not agent problems, they are problems for the everyday Minnesotans MNsure meant to assist.

From St. Louis County, an agent wrote, "With my help, and while sitting with my clients, I was able to navigate MNsure and assist most with applying, selecting a plan and making a payment. With the level of problems specifically experienced in St Louis County with the subsidy calculation it's a miracle I was able to help anyone navigate the site correctly. It was horrible."


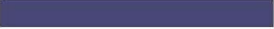




Agents wrote dozens of comments about problems with MNsure's call center. The following report, from a Wadena County agent, explains how even on Christmas Eve, agents were working on behalf of their clients, as urged by the MNsure Board of Directors in their prior board meeting.

"There were many frustrations for our clients in dealing with MNsure. Most was because their website froze and they could not get back on. The calls to MNsure were answered by those who could not answer questions or not ever answered. We have calls that were on hold for 1 hour and 45 minutes and then told they needed to be transferred - then no one picked up in the next hour. I was on hold for 2 and 1/2 hours then the line was disconnected. On Xmas eve 'all calls will be answered' - not true."

Thanks in some part to the low premium rates offered in most of Minnesota, premium tax credits for many were either non-existent or quite low. “Several said the little funding they would get in the end wasn’t worth the hassle of MNsure and decided to just purchase outside of MNsure,” wrote a Hennepin County agent.

Table 8 – Client Outcomes at MNsure

* In general terms, which one of the following statements best describes your clients' outcomes at MNsure?

Answer	0%	100%	Number of Response(s)	Response Ratio
Were able to select a health plan at MNsure and are quite happy with the experience.			8	1.7 %
Selected a health plan at MNsure but found the experience to be quite frustrating.			209	45.1 %
Were unable to select a health plan at MNsure, but the process was okay.			1	<1 %
Could not select a plan at MNsure because the process didn't work well enough.			176	38.0 %
Did not select a health plan at MNsure for other reasons.			38	8.2 %
Other			26	5.6 %
No Response(s)			5	1.0 %
Totals			463	100%

MNsure Customer Service for Agents

Insurance agents are used to working with insurance carrier “call center” employees. In addition, carriers employ company representatives to directly provide support services for their appointed insurance agents. Carrier representatives intercede for agents, answering questions about billing, coverage, features, benefits, and other relevant issues that agents need to know to service their clients’ needs. As agents approached MNsure, they expected a high level of competence and timely responses from MNsure’s call center.

MNsure asserts that it aspires to provide timely, accurate, and useful assistance to agents, and that MNsure recognizes the value agents bring to the insurance transaction. Several indicators from months of experience, however, show that MNsure’s attitude toward agents was oftentimes indifferent and dismissive of agents’ concerns.

MNsure rolled out agent training very late in the process and at a time when agents were preparing for their normal round of fall renewals. Agents complained often and loudly about the poor quality training provided by MNsure, and repeatedly asked for more and better training. Agents reported ongoing problems becoming certified – taking courses, passing tests, and finding nothing had been recorded on their records, requiring them to repeat the exams.

With all these ongoing problems in mind, the results of the question asking agents to rate MNsure’s call center is not surprising. Asked to rate the quality of MNsure’s call center advice on a scale of 1 to 5, agents overwhelmingly rated it as Poor or Inadequate.

When the MNsure agent call center failed agents, it also failed their clients. Another Hennepin County agent, understanding MNsure’s initial limitations from lack of experience, expressed it thusly:

“Based on the info they knew at the time - they did well and tried hard. However, I received new totally contradictory info after they received ‘better clarification and definition.’ I know I passed along inaccurate info based on what they said which makes everyone look bad. It was like trying to hit a moving target.”

A different Hennepin County agent expressed another serious concern; contradictory information that may have lead Minnesotans to assumptions about health coverage that are untrue:

“Call center staff, while polite, were generally unable to answer detailed questions. On subsequent calls for the same client, different answers were provided that conflicted with the original advice. In a few cases, call center staff literally commented the previous answer would never have been workable.”

Agents’ concerns about the MNSure call center were not directed at the individuals that tried to help. Many agents mentioned how hard call center employees worked to provide answers and remained patient, hoping to be helpful. A Pine County agent wrote:

“But I do not believe it was the reps at the call centers fault at all, and at times sounded quite beat up by others calling in! The system simply was not ready and as apologetic as they were, they could not necessarily help with anything, and just keep trying was not an acceptable option.”

Table 9 – MNSure Call Center and Agents

Disregard time on hold when you answer this question. In general, how would you rate the quality of advice you received from MNSure's call center?							
1 = Poor, 2 = Inadequate, 3 = Average, 4 = Good, 5 = Excellent							
	1	2	3	4	5	Number of Response(s)	Rating Score*
						431	2.1

*The Rating Score is the weighted average calculated by dividing the sum of all weighted ratings by the number of total responses.

Agents, like every day Minnesotans, spent hours on the phone. Unlike clients, however, agents repeat this process for many clients. This means agents attempted dozens of calls, and had long experience trying to get MNSure to help resolve problems. One agent wrote in another place that he waited 90 minutes to talk with a MNSure call center representative only to be transferred to a higher level MNSure representative – after 90 minutes waiting he hung up and “went to eat lunch.”

Because agent’s income is dependent on production of sales for which they can be compensated, every minute spent on hold with a call center is wasting them money. With this in mind, 45.5 percent of agents reported wait time on the phone as an hour or longer. Another 26 percent indicated wait times of 30-60 minutes.

Table 10 – Agent Time on Hold with MNSure Call Center

***When you made calls to MNSure for help, what was your average wait time?**

Answer	0%	100%	Number of Response(s)	Response Ratio
Less than five minutes.			3	<1 %
6-10 minutes.			8	1.7 %
11-15 minutes.			4	<1 %
16-30 minutes.			30	6.4 %
More than 30 minutes, but less than an hour.			120	25.9 %
An hour or more.			211	45.5 %
It varied so much I cannot even guess.			44	9.5 %
I never called MNSure.			42	9.0 %
No Response(s)			1	<1 %
Totals			463	100%

As an adjunct to a broker [sic] call center, MNSure quickly began offering help to agents via email. Setting aside legal and data privacy issues agents might have in sharing client information with MNSure through email, agents hoped that this would at least alleviate time on hold with the call center.

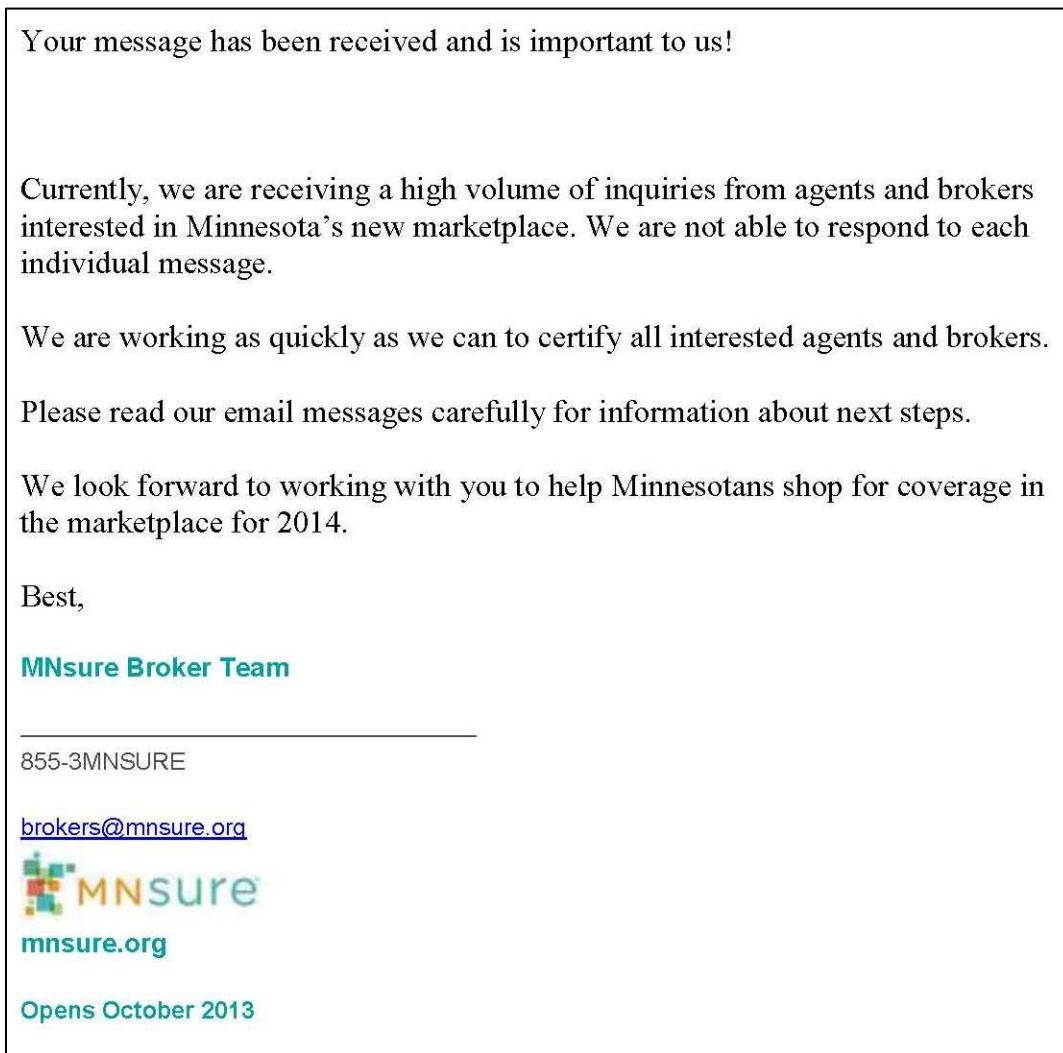
MNSure created an email address for agent inquiries (brokers@mnsure.org). Of respondents, 32 percent indicated they never used it. 43 percent indicated they either received a response, indicating MNSure was too busy to answer their email inquiries, or are unsure they ever received a response. The following table is a response commonly received by agents when they made inquiries using the brokers@mnsure.org inquiry address.

Table 11 – Agents’ Experience with Email Inquiry Service

***If you used MNSure’s email inquiry service for agents (brokers@mnsure.org) which of the following statements best describes your experience?**

Answer	0%	100%	Number of Response(s)	Response Ratio
I never made an email inquiry.			148	31.9 %
I got answers almost immediately most of the time.			2	<1 %
I got answers, but it took more than half a day.			39	8.4 %
Most often I received an answer saying they were too busy to answer right away, but would answer as soon as possible.			100	21.5 %
Not sure I ever received an answer from an email inquiry.			100	21.5 %
Other			71	15.3 %
No Response(s)			3	<1 %
Totals			463	100%

Figure 1 – MNsure Email Response to Agents



Agents' General Comments:

Part of the survey focused on agents' and their associations. We asked agents about which issues they hoped would become a priority for their associations. These have been shared with the association leaders, and are not included in this report.

More than 155 agents took the time at the end of the survey to write personal comments. These ranged from hopeful to hopeless. Some attempted to provide suggestions to improve the system, while others thought the only solution was to shut it down. We attempt here to give a sampling of the range of comments.

"With the great majority of people we've seen getting huge reductions in their health insurance and health care costs; it's still unclear to me how it will all be paid for... I remain cautiously optimistic." Isanti County agent

"Advise consumers to contact an agent. The level of failure is completely unacceptable. Compensation will never equal the time spent helping people get enrolled. Being on the front lines, I saw first-hand the frustration and lack of confidence that the average citizen had in this entire process. MNsure can't be seen as a positive as of today." Carver County agent

“With three years and the many millions of dollars that MNSure has cost the taxpayers it is a true embarrassment. Those in management should be released of their duties and the board should have members replaced or added that understand Health insurance. The training of the call center staff is Horrific. This training must be addressed.” Wadena County agent.

“This system would have worked fine with a limit of 200-250% of the poverty level without expanding Medicaid. The question on the application that asks ‘do you want us to send you a voter registration’ betrays what the designers really want... to buy votes. People with income over 250% of poverty don't need the subsidy, nor want it.” Carver County agent.

“I want to help my clients. I had clients ask if I was going to be compensated after the lengthy process (generally 1 1/2 to 2 hours). I am not sure if I will get paid judging from the errors and problems in the system. We will see. Not much incentive until I see the compensation results. Thanks is OK but doesn't pay the electricity.” Clay County agent.

“The intent was to help those that needed assistance in securing a plan, however, as a licensed agent; I have never been at such a disadvantage when trying to assist applicants, at times embarrassing that I couldn't figure out a way to better assist them. This needs to be more streamlined; more efficient from a time perspective!” Hennepin County agent.

“It is a disservice to the citizens of Minnesota to have an insurance broker directory meant to provide assistance when the brokers themselves cannot access/login to the MNSure system. I regret ever agreeing to be included in this directory. We still cannot help the vast majority of prospective callers at this time.” Scott County agent.

“ObamaCare is the law and we need to help the lower income people be able to afford insurance but this is not the answer - needs a lot of work.” Anoka County agent.

“This whole thing was a bad idea from the start. A large majority of my clients are so doubtful over the whole ObamaCare and find that it isn't fair that we have to pay for all of the people that haven't had insurance in the past and they are now getting it for nothing. What is probably going to happen next is a lot of people filing bankruptcy.” Polk County agent.

About Dave Racer and Contact Information:

Dave Racer, MLitt, received his Master of Letters Degree from Oxford Graduate School in 2009. Dave's master's thesis is titled, *A Comprehensive Approach to Health Care Reform in the United States: Twenty-Five Keys to Understanding the Challenges*.

Dave is a writer, researcher, publisher, speaker, and teacher. As such, he has written and/or edited 35 books: Nine focus on health care and health finance issues - <http://alethospress.com/hcbooks.htm>.

Dave has spoken in more than 25 states during the past eight years, as a keynote speaker and/or Continuing Education instructor. Dave's talks have been about health care reform including legislative and congressional actions related to the financing and delivery of health care. In this capacity, Dave has spoken to health care finance and provider professionals, employers, civic groups, and churches.

Dave has written and presented more than 12 original Continuing Education courses concerning health care finance taught in Minnesota and other states. In 2011, Dave developed and presented the two-hour C.E. course to guide agents through the launch of the Healthy Minnesota Contribution Program attended by more than 500 agents in 18 different locations. In 2013, Dave developed, presented, and managed the myMCHAagent program attended by more than 600 agents, using a webinar format.

Although he is not a licensed insurance agent, Dave is a member of the National Association of Health Underwriters (NAHU) and its Minnesota Chapter (MAHU). He is a Board Member of the Minnesota Physician-Patient Alliance.

Dave has written, traveled, and spoken on behalf of the Minnesota Agents' Coalition for Health Care Reform, and this work is ongoing. Dave maintains a mailing list of greater than 4,600 active health care financial professionals across Minnesota, and hundreds more across the country, with which he shares updates and information on health care reform issues.

His undergraduate work was spread among three institutions: Macalester College in St. Paul, the University of Minnesota, and the University of Southern Mississippi, majoring in Educational Psychology. He graduated from St. Paul's Johnson High School in 1965.

Dave is a Viet Nam era veteran of the United States Air Force.

Dave is the President of DGRCommunications, Inc., providing research, writing, publishing, and communication services for a diverse group of individual and corporate clients, and is the founder and CEO of Alethos Press, a book publisher.

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