



Office of Evaluation and Inspections Work on Health Care Marketplaces

October 23, 2014

New England Intergovernmental Audit Forum
North Conway, New Hampshire

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Presentation Outline

- Part I.
 - Background on ACA-related work
 - Landscape on Health Care Marketplaces
 - Overview of “inconsistencies”
 - OEI’s Report: “Challenges in Resolving Inconsistencies”
 - How we did the work
 - Significant challenges in doing this work
- Parts II and III.
 - Additional OEI work underway and completed on ACA matters





Congressional Mandate

PL 113-46:

(c) Report by Inspector General- Not later than July 1, 2014, the Inspector General of the Department of Health and Human Services shall submit to the Congress a report regarding the effectiveness of the procedures and safeguards provided under the Patient Protection and Affordable Care Act for preventing the submission of inaccurate or fraudulent information by applicants for enrollment in a qualified health plan offered through an American Health Benefit Exchange.





Health Care Marketplaces

- “One-stop shop” to:
 - Provide information about qualified health plans
 - Select a plan
 - Determine eligibility to enroll
 - Determine eligibility for insurance affordability programs
 - Premium tax credits
 - Cost sharing reductions





Health Care Marketplaces

- 15 State Marketplaces
- Federal Marketplace for other 36 States





Inconsistencies

- Applicant provides information
- Marketplace matches applicant information against Data Hub and other electronic sources
- If data from Data Hub
 - Do not exist
 - Do not match

= *Inconsistency*





Inconsistencies Report

- Objectives:

Determine extent to which marketplaces resolved inconsistencies related to enrollment and eligibility for financial assistance
- Methods:
 - Requested data from FFM and SBMs
 - Telephone interviews with 9 SBMs
 - Site visits to FFM and 6 SBMs
 - Document reviews





Findings

- **Marketplaces unable to resolve most inconsistencies,**
- **Most commonly-- citizenship and income**
 - *Federal marketplace unable to resolve 89 percent of inconsistencies*
 - 2.6 million of 2.9 million inconsistencies
 - CMS eligibility system not fully operational.





FFM Inconsistencies

- Types of Inconsistency that FFM COULD be resolve

Type	Number	% of All
– Citizenship-related	1,295,571	44 %
– Income	960,492	33 %
– Employer Coverage	355,717	12 %





SBM Inconsistencies

- ***Abilities of the State marketplaces to resolve inconsistencies varied***
 - 4 of 15 SBMs unable to resolve inconsistencies
 - 1 SBM resolved some, but not, all inconsistencies
 - 3 SBMs relied on Medicaid offices.
 - 7 SBMs: no problems in resolving inconsistencies





Findings

- **Data on inconsistencies limited**
- **Challenges resolving inconsistencies despite policies and procedures**
 - *Web site operational problems*
 - *Information system problems*
 - *Data Hub issues sometimes hindered their ability to resolve inconsistencies*





Recommendations

- **Develop and make public a plan on how and by what date the FFM will resolve inconsistencies,**
 - steps to clear the backlog
 - methods to monitor, track, and measure progress
- **Conduct additional oversight of SBMs to ensure that they are resolving inconsistencies according to Federal requirements**





Agency Response

- “Working expeditiously to resolve inconsistencies”
 - Federal marketplace has in place an interim manual process to resolve inconsistencies
 - Later this summer, CMS plans to replace that manual process with an automated system.
- Will continue to monitor State marketplaces through technical assistance and financial assessment.





Collaboration: OEI and OAS

- Regular planning meetings
- Joint site visits
- Shared Notes
- Shared data
- Joint vetting/ release of reports
- Joint testimony





Challenges in Conducting Evaluation

- Limited Data/ quality of data
 - Early implementation
 - Unable to verify data
 - Reported out as “States reported”
- Limited access to program staff
- Troubled roll out – difficult environment

