

2021 State Marketplace Modernization Grant Awards

The Centers for Medicare & Medicaid Services (CMS) awarded \$20,000,000 in funding to 21 State Marketplaces who applied to receive a State Marketplace Modernization Grant. The new grant initiative was funded under the American Rescue Plan (ARP) Act of 2021 to enable State Marketplaces to modernize or update any system, program, or technology to ensure the Marketplace is compliant with all applicable federal requirements. The requirements include the new ARP provisions that increase the financial assistance available to certain taxpayers and consumers in Plan Years 2021 and 2022 who enroll in a Qualified Health Plan (QHP) through a Marketplace.

This funding opportunity was a limited competition and was only open to the 21 approved State Marketplaces that, at the time of the application due date, had received approval or conditional approval from the Secretary of Health and Human Services (HHS) to operate a State Marketplace. States with a Federally-facilitated Marketplace were not eligible for this funding opportunity.

Final grant awards range from \$500,000 to \$1,107,392, and are based on the State Marketplace model and number of successful applicants. Grants were awarded for a 12-month period of performance, which runs from September 10, 2021 through September 9, 2022.

Below are the 21 State Marketplace Modernization Grant grantees, including the state served by each grantee, grant award amount, and a brief summary of proposed grant activities, as outlined in the grantee's application. Please note that final grant activities may be subject to change based on final grant award negotiations with recipients.

Arkansas

Grantee: Arkansas Insurance Department

Award Amount: \$500,000

Proposed Grant Activities

The Arkansas Insurance Department (AID) proposes to create a consumer education and awareness campaign to inform younger Arkansans of the availability of Marketplace health insurance coverage during the Open Enrollment period using non-traditional routes, including using community influencers. AID will develop and produce campaign creative assets, including video, digital ads, and radio commercials and will implement the campaign statewide to engage with target audiences, including Marketplace enrollees renewing coverage, individuals and families without access to employer-sponsored health insurance coverage, rural and multi-cultural communities with pronounced need for coverage, agents, brokers and licensed experts, and civic and community influencers. AID also proposes to focus additional modernization activities on improving the Marketplace plan review process to better ensure compliance with federal requirements related to the Mental Health Parity and Addiction Equity Act (MHPAEA) and formulary coverage.

California

Grantee: California Health Benefit Exchange

Award Amount: \$1,107,392.87

Proposed Grant Activities

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Covered California proposes to develop and produce a robust ARP consumer education campaign featuring the tagline “This way to health insurance” that centers on the experiences of real Californians who’ve struggled to get health insurance in the past. The campaign will build brand awareness and engagement, educate consumers about the availability of new ARP subsidies, drive enrollment, and reflect the state’s ethnically diverse population. The campaign will reach California's ethnically diverse population via cost-effective means to ensure Californians are aware of new subsidies available to them via the ARP, while also building brand awareness and engagement and driving enrollment through Covered California. The campaign will be targeted to reach consumers across various cultures and languages between the ages of 25-64 with a minimum household income of \$25,000 and will be specifically used to reach consumers in the multicultural segment.

Colorado

Grantee: Colorado Health Benefit Exchange

Award Amount: \$1,107,392.87

Proposed Grant Activities

The Colorado Health Benefit Exchange (COHBE) proposes to update technological infrastructure and decision support tools to ensure compliance with all requirements, provide enhanced customer support, improve the customer experience for consumers who are eligible for insurance affordability programs, support timely and accurate eligibility determinations, and ensure the highest data quality in enrollment transactions. This will include replacing older legacy technology with a more modern architecture to support Marketplace functions and will focus on increasing quality and efficiency for consumers throughout the lifecycle of an eligibility and enrollment experience.

COHBE proposes to use a portion of this funding for costs related to the implementation of the ARP amendments to the premium tax credit and cost-sharing reduction statutes to provide expanded access to financial assistance, ensure accurate eligibility and related noticing, and provide detailed eligibility determinations and additional guidance to unemployment insurance recipients. COHBE also proposes to review system-wide use of social security numbers to ensure appropriate protection and obfuscation of these numbers, including review of use and display of this data in Marketplace systems, role-based permission review of the specified job responsibilities of users, as well as remediation of any potential inappropriate display or use of this information.

Connecticut

Grantee: Connecticut Health Insurance Exchange (d/b/a Access Health CT)

Award Amount: \$1,107,392.87

Proposed Grant Activities

Access Health CT (AHCT) proposes to undertake five new technology modernization projects to support AHCT compliance with federal requirements. These projects will include vendor security and compliance audits, as well as consumer-facing enhancements to simplify user navigation to every major account service, with particular attention to application updates, electronic mail inbox, an alert system for open action items, a simplified application review interface, and a new interface to help consumers review and complete verification requirements. AHCT expects these improves will enhance the consumer experience and increase the self-service success rate for consumers, reducing reliance on call center support. AHCT also proposes

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to use a portion of this funding for the system updates required to implement the expanded financial assistance provisions of the ARP.

District of Columbia

Grantee: DC Health Benefit Exchange Authority

Award Amount: \$1,107,392.87

Proposed Grant Activities

The DC Health Benefit Exchange Authority (DCHBX) proposes to use funding to update and modernize its new open source, cloud-based eligibility determination system, including updating account transfer protocols between the Marketplace and Medicaid, modernizing eligibility verifications, automating the generation and transmission of customer notices, as well as updating the system to provide for the lower premiums and cost sharing reductions provided by ARP in response to the COVID-19 pandemic.

DCHBX also proposes to use funding to provide expanded call center support to help meet ARP-related customer service needs and increased customer volume, as well as to increase consumer education and awareness about eligibility and enrollment options, including the enhanced benefits under ARP. DCHBX proposes to partner with the Restaurant Association Metropolitan Washington (RAMW) to educate owners and workers in the restaurant industry that have been severely impacted by the COVID-19 pandemic.

Idaho

Grantee: Idaho Health Insurance Exchange (d/b/a Your Health Idaho)

Award Amount: \$1,107,392.87

Proposed Grant Activities

Your Health Idaho (YHI) proposes to use funding to modernize Marketplace technology, including making key updates to improve the customer experience for Idahoans seeking to enroll through a Special Enrollment Period (SEP), allowing consumers to shop for plans while their Qualifying Life Event (QLE) documents are reviewed and validated, and modernizing technology controls to allow more flexibility to remove or merge multiple household applications. YHI proposes to use funding to modernize and enhance support for in-person assistors and enrollment counselors who are critical to educating Idahoans about their enrollment options and the benefits of ARP, as well as serving Idaho's most vulnerable populations. YHI also proposes to use a portion of the funding for costs related to updating necessary systems and technology to provide increased financial assistance through the ARP.

Kentucky

Grantee: Kentucky Cabinet for Health and Family Services (CHFS)

Award Amount: \$650,000

Proposed Grant Activities

The Kentucky CHFS proposes to use funding to update IT systems to align with ARP's financial assistance eligibility and affordability requirements, as well as federal requirements related to the state's transition to a State-based Marketplace. In addition, CHFS proposes to conduct expanded consumer education efforts to increase visibility and awareness of the benefits available through ARP and kynect, including statewide outreach events and direct consumer contacts through mailing, texting, and voicemail. Target populations include consumers who were denied

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Medicaid, consumers who have received unemployment benefits during 2021, and consumers with income between 400 – 500% of the federal poverty level (FPL).

Maine

Grantee: State of Maine Department of Health and Human Services (DHHS)

Award Amount: \$650,000

Proposed Grant Activities

The Maine DHHS proposes to design and implement technology improvements to improve processing efficiency of monthly carrier enrollment reconciliation activities in order to reduce discrepancies that must be manually resolved via reconciliation. Inaccurate or incomplete enrollment data can impact a consumer's ability to access care, an issuer's ability to create accurate invoices or mail correct ID cards, and CMS' ability to execute timely advance premium tax credit (APTC) payments to issuers. In order to minimize the resources required for manual reconciliation resolution, DHHS proposes to design and implement a regular, prescriptive data reconciliation process to ensure the accuracy and completeness of enrollment data.

Maryland

Grantee: Maryland Health Benefit Exchange (MHBE)

Award Amount: \$1,107,392.87

Proposed Grant Activities

The MHBE proposes to use funding to modernize its eligibility and enrollment system, expand consumer education, and improve stakeholder training. The ARP provision which enhanced financial assistance for consumers who received unemployment benefits in 2021 is due to sunset at the end of 2021. MHBE will update system functionality which provided these enhanced benefits and return the eligibility determination logic to its prior state. MHBE will also expand its current ability to raise consumer awareness and encourage enrollment by utilizing digital strategies and outreach to target the largest share of eligible Marylanders – those above the 400% Federal Poverty Level bracket who are 19-34 years old. MHBE will use traditional and digital media, social media micro-influencers, and community outreach partnerships to reach this target audience. Additionally, MHBE proposes to modernize its stakeholder training program to address current content gaps related to ARP, the end of the Medicaid certification extension period, the sunset of benefit enhancements for consumers who received unemployment compensation in 2021, and the creation of additional special enrollment periods in 2022 to best serve the needs of consumers and the Maryland marketplace.

Massachusetts

Grantee: Commonwealth Health Insurance Connector Authority

Award Amount: \$1,107,392.87

Proposed Grant Activities

The Commonwealth Health Insurance Connector Authority proposes to use funding to support its implementation of the ARP, including required IT system changes and a multi-phase, multi-platform consumer education and outreach campaign to ensure that members, applicants, and the public have access to and knowledge of the new subsidies available via ARP. The Health Connector will target key constituencies most likely to benefit from ARP, including the uninsured, individuals collecting unemployment during 2021, those who purchase individual market coverage outside of the Marketplace, as well as individuals who may wish to switch to

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Marketplace coverage from COBRA during Open Enrollment. The Health Connector will also target consumers who may be encouraged to apply for coverage by the enhanced affordability under the ARP, including uninsured young men, individuals from communities of color, immigrant populations, and lower-income residents. The Health Connector will host community-based in-person visibility and informational events in cities and towns with higher rates of un-insurance and unemployment. The Health Connector will also develop and distribute consumer education materials and resources in a variety of languages to meet uninsured residents where they are and to be as consumer-centered and responsive as possible.

Minnesota

Grantee: Minnesota Insurance Marketplace (MNsure)

Award Amount: \$1,107,392.87

Proposed Grant Activities

MNsure proposes to modernize and update Marketplace systems and technology, and to implement and operate the amendments to the APTC and cost-sharing reduction (CSR) programs made by sections 2305, 9661, and 9663 of the ARP. MNsure plans to update and improve the annual notice used to inform consumers about household eligibility for enrolling in coverage for the coming plan year and also develop a new notice to inform and assist consumers who are approaching age 65 and planning to enroll in Medicare to help avoid dual enrollment and dual billing situations. Additionally, MNsure proposes a statewide consumer education and outreach campaign to increase awareness of ARP benefits and drive enrollment.

Nevada

Grantee: Silver State Health Insurance Exchange (SSHIX)

Award Amount: \$1,046,499.81

Proposed Grant Activities

The SSHIX proposes to use funding for the costs associated with helping Nevada consumers realize the savings available to them under the ARP, which includes implementing eligibility and enrollment system changes and increasing call center capacity to ensure consumers are able to get help when they needed it. SSHIX also proposes to develop and implement a comprehensive consumer education and outreach campaign to ensure consumers are aware of the new benefits available under the ARPA. SSHIX proposes to target uninsured and underinsured Nevadans, as well as existing Nevada Health Link consumers.

New Jersey

Grantee: New Jersey Department of Banking and Insurance (DOBI)

Award Amount: \$1,107,392.87

Proposed Grant Activities

The New Jersey DOBI proposes to use funding help cover the costs of the technical implementation of the ARP benefits, including changing APTC amounts and automatically updating already enrolled consumers with the expanded financial help. DOBI proposes to expand its call center operations and capacity in response to an anticipated significant increase in call volume due to the increased financial help made available through ARP. The focus will be on existing enrollees who can benefit from increased financial help and new consumers that may be newly eligible for financial help. DOBI's call center expansion will mean more customer service representatives that are well-trained to be able to answer consumer questions quickly and

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accurately without long wait times. DOBI also plans to expand call center support for processing and resolving data matching issues and will make updates to call center processes, scripts, and system to ensure that customer service representatives are trained on the nuances of ARP.

New Mexico

Grantee: New Mexico Health Insurance Exchange

Award Amount: \$650,000

Proposed Grant Activities

The New Mexico Health Insurance Exchange (NMHIX) proposes to use funding for the modernization of systems and processes aligned with the establishment of NM's State-Based Marketplace (SBM), and the ARP changes, as well as to prepare for the end of the Medicaid Maintenance of Effort. Specifically, NMHIX plans to modernize its customer engagement center, consumer education program, and Native American outreach program. NMHIX call center preparedness and modernization will support the ARP assistance and New Mexican's transition from Medicaid to Marketplace due to the eventual end of the Medicaid Maintenance of Effort. NMHIX also proposes to use funding to continue developing research, gaining feedback, and modernizing its outreach strategy and plans for continued engagement with New Mexico's Native American population, in close partnership with the Native American Advisory Committee.

New York

Grantee: New York State of Health

Award Amount: \$1,107,392.87

Proposed Grant Activities

The New York State of Health (NYSOH) proposes to use funding for ongoing ARP-related IT system work, including updates to annual eligibility redetermination processes and consumer notices to ensure that consumers receive the correct APTC amounts and renewal notices under the ARP. NYSOH also proposes to expand consumer education activities, including a consumer education and outreach campaign to promote ARP benefits among potentially eligible New Yorkers and the development, translation, and printing of materials and resources into 26 languages.

Oregon

Grantee: Oregon Health Authority

Award Amount: \$500,000

Proposed Grant Activities

The Oregon Health Insurance Marketplace (OHIM) of the Oregon Health Authority proposes to modernize its tools and services in response to ARP provisions. Specifically, OHIM proposes modernizing its consumer webtools, including updates to its standalone plan display feature, development of enhanced provider and formulary search tools, and Spanish translation of OHIM's primary website and plan display tool. OHIM also proposes expanded consumer assistance activities, targeted consumer education activities, and development of additional APR-related training materials and support for call center staff, community partners, and agents.

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Pennsylvania

Grantee: Pennsylvania Health Insurance Exchange Authority

Award Amount: \$1,107,392.87

Proposed Grant Activities

The Pennsylvania Health Insurance Exchange Authority (d/b/a Pennie) proposes to use funding to support two consumer-centric projects that facilitate exposure of the ARP benefits, including expanded call center support and increased consumer assistance. Pennie's consumer assistance center significantly increased its staffing and support this year, based on anticipated pressure stemming from the ARP campaign, a comprehensive outreach campaign, distribution of approximately 240,000 eligibility notices, and email prompts. Pennie also proposes an enhancement to, and expansion of, its Exchange Assister program to specifically target historically under and uninsured populations. Pennie proposes to add subcontractors already aligned with Pennie's goals and serving the LGBTQ, Hispanic/Latino, and African-American communities. Exchange Assistors will work with consumers through community centers and one-on-one appointments, as well as an amplified calendar of outreach and educational events.

Rhode Island

Grantee: Executive Office of State of Rhode Island

Award Amount: \$1,107,392.87

Proposed Grant Activities

The Executive Office of the State of Rhode Island proposes to use funding to support mission-critical activities connected to three primary goals: (1) engage and educate customers and Rhode Islanders about the changes to health coverage affordability under ARP; (2) make needed improvements to application and decision-support tools to improve user experience and self-service; and (3) modernize the organization's eligibility and enrollment system and support critical compliance needs. Specifically, Rhode Island plans to implement a consumer education and outreach campaign, make updates to its website, consumer webtools, and SHOP functionality, expand self-service functionality, and facilitate smoother customer transitions between health coverage programs, with less reliance upon manual intervention and support.

Vermont

Grantee: Vermont Agency of Human Services (AHS)

Award Amount: \$1,107,392.87

Proposed Grant Activities

The Vermont AHS proposes to use funding to modernize its eligibility and enrollment reporting system, as well as for system updates required to implement ARP provisions. AHS also proposes expanded consumer education and assistance efforts to ensure vulnerable populations are aware of the new lower costs available through the Marketplace. AHS plans to provide competitive "mini-grants" to local organizations who work in specific geographic areas, serve young adults or BIPOC Vermonters or other vulnerable demographics, or represent business sectors with above-average proportions of uninsured Vermonters, to speak authentically to key populations of potential enrollees. AHS anticipates these community partners will be key mechanisms for reinforcing ARP messaging, as well as messaging about Medicaid redeterminations when restarted following the end of the public health emergency.

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Virginia

Grantee: Commonwealth of Virginia State Corporation Commission (SCC)

Award Amount: \$500,000

Proposed Grant Activities

The Commonwealth of Virginia SCC proposes to design, develop, and implement necessary updates to its consumer education and stakeholder training programs in response to the ARP and to support consumers who are likely to be affected when the COVID-19 public health emergency ends. The SCC consumer education and outreach program updates will include a specific emphasis on reaching the geographic areas of the state with higher uninsured rates, and individuals and families most likely to be affected when the COVID-19 public health emergency ends. The SCC training program updates will focus on the implementation of ARP and the coordination of eligibility and enrollment between the SCC, CMS, and Medicaid. Additionally, the SCC proposes to complete a market analysis of eligibility and enrollment to assist in predicting the expected impact of ARP, the expected impact of the end of the public health emergency including movement of consumers from Medicaid to QHPs, and projections of related anticipated changes to premiums in the individual market.

Washington

Grantee: Washington Health Benefit Exchange (WAHBE)

Award Amount: \$1,107,392.87

Proposed Grant Activities

In order to update its systems and successfully implement provisions of the ARP, the WAHBE is proposing a two-pronged project. The first initiative is aimed at addressing consumer education challenges, particularly in Washington's underserved rural and urban communities. WAHBE will conduct statewide educational and outreach events to reach these communities and specifically target the uninsured, those currently enrolled in Medicaid who may lose eligibility at the end of the COVID-19 Public Health Emergency, and current customers who are receiving expanded COBRA premium subsidies which are set to expire. The second initiative will address the technical challenges of implementing ARP provisions on Washington Healthplanfinder. WAHBE proposes to enhance the Washington Healthplanfinder and respond to system limitations further exacerbated by ARP with the goal of increasing system enhancement capacity, enabling the WAHBE to meet ongoing business needs, as well as address new needs necessary for the successful implementation and operation of ARP in Washington.