



**Testimony of Scott Leitz, Interim CEO, MNSure
U.S. House of Representatives Oversight and Government Reform Committee,
Subcommittees on Economic Growth, Job Creation and Regulatory Affairs
and Energy Policy, Health Care and Entitlements**

April 3, 2014

Thank you for inviting me to come here today to talk about Minnesota's experiences in establishing MNSure, our online health exchange.

I want to start by telling you about Corey and Kate Needleman who live in Minneapolis. Corey is a teacher. For years the family had health insurance through his job. But over time the family's out of pocket costs grew. After welcoming their third son, Irving, into the family, they had to choose between paying their mortgage or paying their health bills. Last fall, when MNSure opened, her three boys qualified for Medical Assistance with no premium or deductible, and she was able to purchase a plan for herself that is less than \$200 a month - without tax credits. In her words, "I was thrilled. It blows my mind that we are going to be cared for and we are not going to lose our house."

Today, I am proud to say MNSure is stable, secure and successful. And because of our efforts, the Needleman family is just a few of 169,251 people in Minnesota who now have access to affordable, comprehensive coverage because of MNSure.

Of that 169,251:

- 87,986 have enrolled in Medicaid under the expanded provisions of the Affordable Care Act
- 34,219 have enrolled in MinnesotaCare, our state's basic health care plan for people between 133 and 200 percent of the federal poverty line. In other states, these enrollees would be in private plans with tax credits.
- The remaining 47,046 have enrolled in private Qualified Health Plans.

It is worth noting that in Minnesota, 95% of people enrolled in health coverage have paid for it. And as we continue to process applications, we expect our numbers to grow even higher.

It isn't news to this committee that MNSure's rollout was rocky. Our initial launch in October was plagued by software errors and technical glitches. I was appointed Interim Chief Executive Officer on December 18th after MNSure's first executive director resigned.

In recognition that more must be done to ensure Minnesotans have access to a functioning website and comprehensive, affordable health coverage, I took immediate action.

In January, I commissioned an end to end review of our exchange by Optum Health. They recommended we make a number of enhancements to the customer experience to help boost enrollment and customer satisfaction.

Working in close partnership with our vendors we were able to stabilize our system. Our eligibility software is now operating with an over 99 percent success rate, compared to 70% in mid-December. And our online marketplace has been stable enough to process more than 2,000 enrollments a day.

December's software problems caused our call center wait times to climb to over an hour and up to 70 percent of consumers were simply giving up before they could be helped. We resolved this problem by more than doubling the size of our call center and by bringing stability to our software system. Average wait times for the month of March were dramatically less.

Moving forward, we are planning preliminary budgets for 2015. I am happy to say that next year's calendar year budget is balanced and does not seek additional state or federal funds to operate MNsure.

In the longer term, we are in the process of selecting a "lead vendor" that will help MNsure assess the larger architectural software issues that were identified in the Optum report. The goal is to not just make the 2015 open enrollment period a better experience for consumers, but to have a comprehensive roadmap for continuously improving MNsure and enhancing the exchange for consumers in every open enrollment period to come.

I recently had the opportunity to meet Kate Needleman and her son Irving. She told me that, 'Having affordable insurance has opened a door for her family.' The affordable care act is more than a website. It's about getting real people and families in to affordable, comprehensive health coverage. This is something we are doing well in Minnesota.