

Comments on the Establishment of a New York State Health Insurance Exchange

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The New York State Nurses Association (NYSNA), representing the professional interests of more than 250,000 licensed registered nurses in the state and the patients they serve, offers these comments on the establishment of a Health Insurance Exchange in New York State.

NYSNA's recommendations on the state's Health Insurance Exchange are based on the following longstanding principles of advocacy held by the Association:

- Promote legislation to assure that individuals without health benefits are able to purchase affordable, comprehensive health insurance;
- Promote the development of coordinated networks of services planned and provided by state agencies to ensure outreach to and accessibility by consumers;
- Protect the right of individuals to make informed choices about all aspects of their health care;
- Promote efforts to ensure confidentiality of private information;
- Advocate strong rules regarding conflict of interest, accountability, transparency and public participation to protect the public interest as healthcare delivery systems and financing mechanisms change; and
- Promote utilization of quality outcomes, including nursing measures of quality, to support decision-making that does not rely solely on economics.

New York State's Health Insurance Exchange should be based on the current research that supports an Exchange that:

- is a public authority with a Board of Directors comprised of experts in the health and insurance fields;
- includes an Advisory Committee of stakeholders;
- is structured for the most efficiency and flexibility, while allowing for accountability and transparency of operations; and
- includes an established process for managing potential conflicts of interest of the officers and board members.

The NYS Health Insurance Exchange should be a single, statewide entity that merges the individual and small business markets, but that accommodates the state's regional differences, as well as the differences in insurance markets. While the exchange should allow for variation in region and market,

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the overall structure and processes must remain consistent. There is an already established and effective structure within the small business market that should be leveraged in the creation of the statewide exchange.

The NYS Health Insurance Exchange must be actively involved with insurers to make certain that consumers have access to a variety of high quality and affordable coverage options including choice of healthcare practitioners and providers. The Exchange should include all public plans along with the private plans; the enrollment in plans should be consistent across the Exchange; the enrollment process should be streamlined and coordinated and must be able to efficiently manage the flux between the public and private plans.

The Exchange should evaluate the insurance plans on a regular basis, using standard metrics inside and outside the Exchange and between the public and private plans. Plans should be evaluated on the benefits offered, affordability, types of primary health providers (e.g. physicians, nurse practitioners, licensed midwives, etc.), enrollees engaged in health care homes, customer experience and patient outcomes at a minimum, and the Exchange Board and Advisory Committee should review the evaluation data regularly, in addition to the data being available on the Exchange website for use by consumers, navigators and brokers.

The information technology infrastructure necessary for the efficient functioning of New York's Health Insurance Exchange is considerable. The core elements must include interoperability among databases, standard definitions of data elements and standardized data sets as well as data security/privacy, and finally, comprehensive disaster recovery planning.

The state's goal of establishing a "customer-oriented" Exchange that produces a "first-class customer experience," that is easy to navigate and that provides assistance for questions and problems can be accomplished. The Exchange must be easily accessible to individuals and to small businesses; there must be navigators and brokers that are well-versed in all of the options within the Exchange, that are culturally competent and that are familiar with the particular market and locality in which they are functioning.

There truly must be "no wrong door" into New York's Health Insurance Exchange. The process must be seamless and worthwhile for consumers if we are to achieve our goal of improving access to high quality, cost-effective health care for all New Yorkers.