Centers for Medicare & Medicaid Services
2023 Health Insurance Marketplace Open Enrollment Period Stakeholder Webinar
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Kyla Ellis: Hello everyone. Thank you for joining. We will give people another minute or two to fully get into the webinar and then we will get started. This webinar is being recorded and you will see a button on your screen that you can accept in order to move forward. Good afternoon everyone and welcome to our second 2023 Health Insurance Marketplace Open Enrollment Period Stakeholder Webinar. I’m Kyla Ellis and I’m a Senior Advisor to the CMS Administrator. Thank you for joining us this afternoon as we begin the 10th Marketplace Open Enrollment Period. We had a great start yesterday and absolutely more to come. I will be brief in my introductions to make sure we have adequate time for questions. Today we are joined by CMS Administrator Chiquita Brooks-LaSure who wants to share a special message with you all about Open Enrollment. After that we will hear from experts from across CMS and HHS to provide updates on Healthcare.gov operations, the CMS marketing campaign, local engagement as well as partnerships and we will also hear about a recent report on Open Enrollment race and ethnicity data. We will also be hearing from Katie Roders Turner, the Executive Director of Family Healthcare Foundation, marketplace navigator, who will be sharing some partnership highlights and finally I will moderate a Q&A and provide some closing remarks. Before we begin, a few housekeeping items. This session is being recorded. The recording and transcript will be posted on marketplace.cms.gov following the event. Also, while members of the press are welcome to attend the call, please note that all press and media questions should be submitted using our Media Inquiries Form available at cms.gov/newsroom/media-inquiries. All participants will be muted. Closed captioning is available via the link shared in the chat by the Zoom moderator. We will have time for Q&A towards the end of the webinar. Please submit questions using the Q&A function at the bottom of your screen and we will do our best to get to as many questions as possible. With that I will turn it over to our CMS Administrator Chiquita Brooks-LaSure.

Chiquita Brooks-LaSure: Thanks Kyla and hello everyone. When I saw this on my calendar I got so excited and I think that I'm probably talking to so many people that I got the chance to talk to a year ago. What an incredible year we had at our last Open Enrollment. Thanks to you we were able to enroll a record number of people through the Marketplaces and as important or equally important, we really were able to enroll so many underserved populations where numbers of black and brown people enrolled really was just so significant. And so much of that incredible year we had last year was thanks to you. So now here we are again at our 10th Open Enrollment. We are just as excited as we can be to kick it off as Kyla said yesterday to get started and are really looking forward to a robust year. Thanks to the Inflation Reduction Act, we are so excited that the subsidies were extended, that we continue to be able to offer in the Marketplaces
that most people are going to be able to find a plan available to them for $10 or less per month, which we know is making such a difference in the lives of people. Also, one of the things that is new this year is that we are able to close the family glitch which I know so many of you worked on to make sure we could reach coverage. We think they're going to be about a million families where a spouse or child was not able to receive coverage and now it will be available to them through the Marketplaces. So, we are incredibly excited about this Open Enrollment. You're going to hear from, as Kyla' said, leadership across CMS and HHS. I am thrilled about some of our plans for marketing and the plans that we are continuing to build on based on last year of continuing to reach out. We are as you know, at record levels in terms of our Navigator expenditures, so nearly $100 million is going into our Navigator funding, which is also in addition to the money that we put into covering kids campaign. As you know, whether we want to enroll you in whatever “M” you are eligible for, whether it is Medicare, Medicaid and CHIP or Marketplace coverage. Just a huge thank you to all of you for all of your hard work over the year to get people enrolled and for helping us with this push this year. So, with that, I’m going to turn it over first to Emily Pedneau from CCIIO to talk through some of our operational changes. Emily?

Emily Pedneau: Thank you, Administrator. I'm so glad to be joining all of you today especially here during Open Enrollment. In this 10th Open Enrollment Period, the Marketplace is stronger than ever. We have continued record affordability, robust competition and unprecedented outreach efforts. Starting yesterday, consumers can apply at the Marketplace to see specific savings available to them, review their plan options and gain peace of mind by enrolling in coverage starting January 1st. Next slide please. As the Administrator said, in 2021 the American Rescue Plan expanded the availability of financial assistance for coverage through the Marketplace, making that financial assistance available to more consumers and at greater levels. Thanks to the passage of the Inflation Reduction Act earlier this year, those benefits continue through 2025 and they are available to both eligible new consumers and to consumers returning to the Marketplace to shop for 2023. In part as a result of that Inflation Reduction Act, four in five consumers who enroll in Marketplace coverage find health care options that are $10 or less per month after subsidies. Next slide. This year consumers are also benefiting from the most competitive Marketplace in history. Within the healthcare.gov states for plan year 2023, 92% of enrollees have options from three or more insurance companies when they shop for plans. As you can see in this map, consumers in many states saw an increase in the number of insurance companies that are offering plans to them on the Marketplace for 2023. Next slide. In 2023, consumers will also have access to new plan options on healthcare.gov, which are called the standardized plans. These offer the same deductibles and cost-sharing for certain benefits and the same out-of-pocket limits as other standardized plans within the same health plan category. When consumers shop for plans on healthcare.gov this year, they will see these plans indicated with the green easy pricing icon that you can see in some of these screenshots. We also have educational content include to help consumers better understand how to compare these plans and to explain that these easy pricing plans provide pre-deductible benefits and copayments for specific categories of care. Next slide. Also, this year we are delighted to have a large number of Navigators, agents, brokers, and assisters all helping consumers sign up and helping to reduce
health disparities in communities across the country. In particular, Navigator requirements this year have been expanded to help reduce health disparities and Navigators will be providing customers and consumers with information and assistance on certain post-enrollment topics that will help consumers stay enrolled in coverage throughout the year. Additionally, CMS will continue to boost its outreach with the help of Champions for Coverage. This community initiative program includes more than 1,000 local organizations that are active in providing outreach and education about the Marketplace, about Medicaid, and about CHIP. Next slide. In the interest of time, I’m just going to talk briefly about three key updates to the healthcare.gov experience for consumers this Open Enrollment Period. First, we have made enhancements to how consumers can estimate their income when they are completing the Marketplace application. The application now incorporates a new guided income and expenses experience when consumers are entering their current month income and estimating their future annual income for 2023. This improved educational content will help consumers more clearly differentiate between current month and annual income and better understand what they need to include. These new estimation tools are provided to help consumers calculate their income based on what works best for them. This is especially important for consumers that have variable income over time and those that have multiple income sources and expenses that might fluctuate throughout the year. Next, we have made enhancements to how consumers understand their eligibility results. Earlier this year, the Marketplace redesigned the eligibility notice that consumers receive when they submit an application to the Marketplace. This updated notice leverages extensive consumer research and best practices in design and it recasts the notice in a clear person-centered design. All of the results and deadlines and calls to actions for a consumer are now on a single page. This new design also eliminates significant redundancy and ambiguity that we know the original notice had. It better reflects how people think about their families and understand their information and it removes the need for consumers to figure out on their own whether or not certain information applies to them which will reduce confusion and help consumers better understand their next steps. Finally, we are making it easier for consumers to shop for a plan that best meets their families needs. For this Open Enrollment, the enrollment experience now includes new hints, information and features to help consumers tailor their shopping and assist them in preparing plans. In addition to the easy pricing plans we talked about a moment ago, there is new help for consumers who are eligible for extra savings on silver plans, more clarity and transparency about deductibles for health and drug costs. We have also made some improvements in the provider and drug search feature that should empower consumers to find the best plan to meet their families needs. Next slide. We also want to note that it is also Open Enrollment in the many states that run their own Marketplace platforms. Just to flag here, consumers in these states should visit or call their state Marketplace websites to find more information about plans and prices, about how to get in-person assistance or to attend local events and to determine what their state specific enrollment deadlines are. So, with that, I am going to hand it over to Chris, our Director for the CMS Strategic Marketing Group who is going to walk through the ad campaign for the Marketplace. Chris?

Chris Koepke: Thanks a lot Emily. That was awesome, appreciate it. This will be a quick five minute overview of some of the marketing that we are going to do. If I could get the next slide
please. As the Administrator said, I think the context of the Inflation Reduction Act is greatly impacting our strategic direction. It is keeping the premiums lower and that allows us to continue focusing on enrolling the uninsured as well as we always do focus on maintaining people who have already enrolled. Some of our goals, as is true every year, first of all, drive people who lack health coverage to Healthcare.gov to enroll in Marketplace plans. The second one, is encourage those who are already enrolled to actively choose a plan. We know that people who actively go back in and look at the different plans available and say I am going to select this one are more likely to stay enrolled throughout the next year. Next slide please. So, our strategy and approach. This is from an advertising perspective. So, first what we call price point testimonials. Every bit of research you see from every organization including ours says it is the price. I'm not covered because people have a perception that the price is going to be high so what we do is we find real people who are enrolled and who will go on and tell their story, not just about how happy they are they have coverage and how great the coverage is, but actually what they are paying so people can see people like them and what they are actually paying. We call those price point testimonials which is different than just a long testimonial about their story. We really do focus on the price and get multiple people on an ad. We have also found that using upbeat, celebratory approaches that celebrate being covered, celebrate families, celebrate being able to do what you want to do because you have coverage combined with price point testimonial, actually has an impact on enrollment as well. Perhaps it expands to two different sets of markets of individuals who are needing coverage. What we are doing now, feel like a million, is a theme of an ad ran on the World Series last night. If you watched the Phillies have a remarkable game last night, you saw the feel like a million ad. Generational health is targeted to African Americans. I do want to say that the feel like a million and the price point testimonials are multicultural and have people from many different backgrounds in it. We also as we said here we have targets that include uninsured African Americans and we talked about the generational health which is a celebratory ad. We also have separate ads for people who speak Spanish and we target English-speaking Latinos and then we are also in several different Asian languages including Mandarin, Cantonese, Korean, Vietnamese, Tagalog and Hindi. We use a mix of traditional and digital outreach. Traditional for those of us in the ad games are what we call like TV and radio and digital is obviously all variety of ads that you can see in a digital space. We also have a direct response team so millions of people have given us their emails over the years and we can end other information. We email them, we text them, we autodial them to remind them that it is time to enroll. If they have started an application, reminding them of deadline so they can finish their application on time and also just reminding them of plan availability in their area and affordability in their area. Deadlines have always driven enrollment. I think that people who are looking for insurance are just like I was when I was writing a final paper in college. 12/15 is the first deadline for coverage starting 1/1 and 1/15 is the final deadline. On the 16 of December, our ads will all shift to the final deadline but up until then it will all be for coverage starting on January 1st. Next slide please. We do a lot of research and some of the things we have done most recently are focus groups. We have creative teams who have looked at the research over the years who build up lots of different concepts on how to reach people. This is where we come up with some of the celebratory concepts and what have you. We test these qualitatively. We will also test them quantitatively over time. As you can see, we have done multicultural, African
American ads, Latino focus groups, all conducted in August and September. Regardless of the group, this is the messaging and you are going to see this regularly. I have seen it in people's tweets in the last few days as well as our digital ads. Four out of five customers can find a plan for under $10. It tests very well, gets people's interest and it also addresses that is it going to be too expensive? But there are some skepticism out there on two levels, One is are the plans of high-quality? What we have learned is that high-quality in folks minds means is it going to cover what I need so if we say it covers prescription drugs, it covers doctors visits, it covers emergencies, it covers hospitalizations, different things from those lists, that gets it into people's minds oh, yeah, that is actually what I need. I need that coverage. For 10 bucks, I'm going to look into it. They go to healthcare.gov. Also, the skepticism, though, because there’s people who are 10 years old now and there is some skepticism out there that says well I always heard it was a little expensive. I don't know. So, we say new law. Now the new law this time is the IRA. It was the ARP a year and a half ago…almost two years ago. And if we say due to a new law we have these prices, that increases believability and also increases the truth quite honestly so it’s all fantastic. And again, testimonials continue to test well but when we find when we run them with the celebratory ads that we get a little bit more boost and we are excited about that. Thank you so much and I'm going to turn it over now to the Philadelphia Regional Administrator, Sharon Graham.

**Sharon Graham:** Thanks Chris and being that I am in Philadelphia I did see the feel like a million last night as the Phillies were making us feel like a million so kudos to us. I am Sharon Graham and I am the Philadelphia CMS Regional Administrator in the Office of Program Operations and Local Engagement. Next slide please. OPOLE is the CMS version of boots on the ground. We have staff in all 10 of our regional offices that you see here on the slide. Within OPOLE, we organize ourselves around three key components that you see there on the slide. Oh, I’m sorry, OPOLE has its four different components that I will speak to next but within the regional offices we have three key components represented with our boots on the ground staff. We have of course OPOLE and that makes up about half of the staff. Across our Center for Medicaid and CHIP Services and our Center for Clinical Standards and Quality, we have additional staff who are spread out across the regions doing the key work of engaging with our Medicaid states and also our Medicaid populations and doing nursing home and other oversight in the nursing home and clinical standards industries. Next slide please. So, within OPOLE itself though, we have four key components and you see them here on the slide. We have Innovation and Financial Management which engages around Medicare Part A and B programs. Then in the Drug & Health Plan Operations side, we have staff who do oversight of the Medicare Part C, Medicare Advantage, and Medicare Part D prescription drug program. I’m going to speak more to the operational area that I represent, Local Engagement and Administration, and then lastly, we have Strategy and Business Operations, which is more of our back door work that supports the 650 or so staff that reside within OPOLE. Next slide please. And here is OPOLE’s vision and mission. We are really dedicated and committed to the work that we do in the regions to you the stakeholder, to our beneficiaries, our consumers, 150 plus million people that we serve at CMS. Our four key areas of our mission and vision, we are striving to increase cohesion and integration across all of the program components. As the staff who are in the field, we represent all
components within CMS to our stakeholders and so we want to make sure that we are bringing
cohesion across all of those messages. We of course are committed to high performance and
customer service. We represent you. You are our customer. We bring back the information that
you share with us, your challenges and your successes. We bring them to the attention of the
CMS leadership here. We are responsible for conducting local outreach and education. I think
this is primary for our purpose here today. We have staff in each of those 10 regional offices who
work with our local stakeholders, our local audiences who have a vested interest in the
Marketplace and in many other programs as well. We are the people that speak to you and to
hear from you. We bring you our message and we ask that you share that across your
constituencies as well. If you have any questions or need any help, our local offices are there to
help you get the answers that you need. And lastly, we monitor the implementation of and
provide oversight of all of the CMS programs, Medicare A, B, C and D. Next slide please. And
specifically, here for local engagement administration, again, this is a component that is really
boots on the ground working with our stakeholders in the communities. Just to show you some of
those numbers of our successes from 2021, you can see the reach but our reach is really
amplified by your reach. That’s why we love to work in collaboration with all of our community
partners to further spread the message of all of our programs. You can see there we work to build
partnerships with trusted local organization such as yourself. Your reach extends our reach. We
are actively involved in consumer education campaigns including the Marketplace and I’ll list a
few more on our next slide. We outreach to local constituents on our CMS entire portfolio, again,
whether its Medicare, Medicaid, or the Marketplace. We represent those programs in the field.
Engaging with you for that very important stakeholder feedback. That feedback that you provide
to our LEA OPOLE staff is what we bring to the administration. How are things going? What are
your challenges? How is policy being implemented? What are you seeing and feeling out there in
the field? It is our role as OPOLE to be bringing that message back. Lastly, we are the caretakers
of all of the regional staff. Here in Philadelphia, we have about 120 staff that I'm responsible for.
Across the field, there is over 1,500 CMS staff and each of those office has the responsibility to
make sure that we have engaged and happy employees. Last slide please. Here's our goal
specifically for Marketplace Open Enrollment 10 (OEX). We are going to continue our successes
that we had last year in both the FFE and the state-based exchanges that operate on the federal
platform. We had great success last year in over 600 activities and we plan to expand that this
year with your help. We are going to be promoting key theme weeks that you will hear more
about in today's webinar. They help to guide us in directing our attention to certain very
important audiences throughout the campaign. We will be working with you our navigators and
assisters to help execute and amplify on events. Anytime you need help, please do reach out to
the regional office counterpart. We will be engaging in Champions for Coverage, again another
great program for people who are invested in the Marketplace and we intend to work closely
with them to further amplify the Marketplace message. For our own campaign you can see here
we have five different metrics that are so important to us. The 500 non-email activities, we will
be collaborating with you across events in the entire country. We want to have 250 activities that
engage those hard to reach populations whether that be rural, LGBTQ, African Americans, Asian
Americans. Any vulnerable or hard-to-reach population, we are actively targeting to reach to
make sure that they know open enrollment is here and for them. We are looking for feedback
from you. I mentioned how important that was, and so 50 is a low number. We really want to hearing from you on a regular basis how things are going. Info shares is you sharing our message even further and even deeper which is so important to our success. And obviously our congressional delegations are a key constituency that also can help us spread the word about Marketplace. Thanks for your attention today. With that, I am going to turn it over to Christie Peters and Nancy DeLew from the Office of the Assistant Secretary for Planning and Evaluation and they will be walking through the recent Marketplace enrollment reports. Christie?

Christie Peters: Thank you Sharon. Good afternoon everybody. My name is Christie Peters and I have also on the panel with me Nancy DeLew and we are from HHS Office of Assistant Secretary for Planning and Evaluation. We are a research and policy shop within HHS and a big part of our mission is to conduct research and data analyses to inform department decision-making. With respect to health coverage, we have some ongoing work that I would like to highlight for you today. Next slide please. The first body of work I wanted to share with you is last Tuesday, October 25, we posted a short report on our website looking at the distribution of Marketplace enrollment by race and ethnicity for each of the Open Enrollment Periods from 2015 to 2022. This analysis used data files where we imputed race and ethnicity values for missing self-reported data using name and ZIP Code to develop probabilistic estimates of possible race and ethnicity for missing values. So basically, we were looking at the probability of an individual being a certain race and/or ethnicity. This first slide shows pre and post imputation, what the distribution of enrollment in the Marketplace looked like. The dashed line in the first graph shows the share of enrollment data each year during Open Enrollment that is missing self-reported race and ethnicity data. We reached 38% in Open Enrollment for 2022 meaning that 38% of our Marketplace applications that were submitted during OE did not include race and ethnicity information. The graph on the right shows post imputation and you will see all of our lines moved up in the graph, meaning our enrollment across all groups of individuals increased because we now have come up with probabilistic estimates of the race and ethnicity for the missing values. We find that all lines move up and we also note that there are changes in the slopes of the lines as well which shows relative change in annual Open Enrollment. Next slide please. This slide hones in on year-over-year changes by race and ethnicity and we see a substantial climb in enrollment across all groups, but particularly for Latino and Black enrollees starting in 2021. These increases are attributed to the administrative and legislative policies put in place during this time, including the substantial increase in funding for outreach and enrollment assistance, the extended 2021 special enrollment period, and the American Rescue Plan. The increase in enrollment of these groups during this time impacts the distribution of Marketplace enrollment by race and ethnicity. Next slide please. As we see in this bar graph, Latino enrollees, which are the purple bars, represent a quarter of all Marketplace enrollees in 2022. Black enrollees, which are represented by the gray bars, account for 12.7% of total enrollment. This is up from 18.1% and 10.6% respectively in 2018. So, you see that growth, and you see that impact of imputing values can do in terms of giving us a clearer picture of what enrollment in Marketplace looks like. We are continuing to analyze these imputed enrollment data files and we will be posting additional analyses in the coming months, including findings on Marketplace plan generosity, affordability, and deductibles by race and ethnicity. Another body
of work we are heavily engaged in is monitoring the uninsured population and changes in health coverage over time. Next slide please. In July, we posted a report highlighting that the national uninsured rate for the total population had reached an all-time low of 8% based on the National Health Interview Survey, which is issued by the CDC. We also use census data to better understand the geographic distribution of uninsured individuals and the characteristics of the uninsured population. We create and post on our website extensive tables presenting national, state, and county level data on the uninsured including details such as income, employment, race, marital status, and other characteristics as reported and collected in the census survey data. Next slide please. This last slide shows a heat map of the uninsured population based on the smallest geographic unit census uses from one of our reports. This shows you how we are able to highlight where the uninsured populations are relative within states, within counties and within these local areas known as PUMAs. The uninsured tables currently available on our website are based on 2019 census data. We are currently in the process of updating these tables using 2021 data which just became available to us about two weeks ago. We anticipate posting those updated tables later this month. I have put the links to both of these reports that I just highlighted in the chat so if you're interested in looking at those you can just click on those. I would like now to turn it to Katie Roders Turner, Executive Director of the Family Healthcare Foundation, to share some highlights about engaging consumers during this year’s Marketplace Open Enrollment Period. Katie?

Katie Roders Turner: Thank you so much Christie. Thank you so much everyone for having us today. My name is Katie Roders Turner, Executive Director of Family Healthcare Foundation. I am going to tell you a little bit about the work that we do in Tampa Bay connecting children and families to health care coverage. Next slide please. The Family Healthcare Foundation is a nonprofit that’s been working in Tampa Bay for almost 25 years with a vision that everyone in Tampa Bay has equitable access to affordable quality health care to ensure a healthy and vibrant community. We really seek to be a leader in our community ensuring that access to high quality health care coverage for all is there. Next slide please.

[plays video]

"Understanding health insurance should be as easy as a walk in the park as simple as shooting hoops at the playground. Accessing quality health care should be as fulfilling as a well-earned tip. As uncomplicated as Friday date night at home. Everyone deserves affordable quality health care. That’s why the Family Healthcare Foundation is dedicated to helping you find a health plan that works, no matter your age, family size or job status and at no cost to you. Navigators are here to help – free, unbiased, confidential. We believe in making health insurance easy. We believe in empowering you take charge of your health. We believe in a community where everyone thrives. Work with a healthcare navigator free of charge to guide you through the process. When children and adults have access to affordable quality medical care, our Tampa Bay community wins. We are healthy, we are vibrant, we are thriving. Visit familyhealthcarefdn.org or call us at 813-995-7005."

Katie Roders Turner: Thank you. Next slide please. That was a video project that our
navigators were able to do last year. As I mentioned, Family Healthcare Foundation was established about 25 years ago. Initially, we were a volunteer run organization. Community leaders wanted to make sure that children in Hillsborough County enrolled into a newly established children’s health insurance program. We evolved beyond that and became subgrantees for CHIP and then ACA navigator grants for the Tampa Bay region under the University of South Florida’s statewide umbrella project. We have gone on to engage other partners and have other outreach and enrollment partnerships with Florida Healthy Kids for the We are KidCare program, with our local children’s services councils for the Connecting Kids to Care program, and we also are very fortunate in one of our counties that we serve to have a comprehensive managed care safety net program. We provide education and outreach enrollment assistance for Hillsborough County Health Care Plan. Next slide. This group knows of course the value of navigators. It is free, unbiased confidential application and enrollment assistance for any publicly funded health care program in our region. We operate in Tampa Bay, Florida. As many know, Florida is still a Medicaid gap state. If we are unable to help assist people with the Health Insurance Marketplace because they fall into the Medicaid gap, we will look for any local resource to help get them access to health care coverage. We also train community agencies on affordable health care options for their clients and the families that they serve. We have also just celebrated 10 years of convening the Covering Tampa Bay Coalition, which is a wide network of assisters all focused and engaged on getting Tampa Bay access to health care coverage. Next slide. So, we believe we’ve honed in on some of the strengths of our navigators and the strengths of the organization, the Family Healthcare Foundation. We have a comprehensive assessment tool that we use with every new consumer that we serve. We review their income and their household side, as well as the location, their geographic location, to see which of the publicly funded health care programs that we assist with, that they may be best served by. We also have a Family Advisory Council and this is comprised of parents who have had children in CHIP programs to give their feedback on what’s worked and what needs improvement. We have an experienced and stable workforce so we are very fortunate to have many of the year one navigators still alongside us in year ten. We are also seen as a trusted source of assistance by our community and we are very fortunate to have a wide network of Tampa Bay partners. Next slide. Some of the other things that have worked really well for us in Open Enrollment, but well into Special Enrollment Periods to have monthly and quarterly community meetings. In addition, when we are attending those monthly and quarterly meetings to be sure to be showing up every time and on time to remind people that navigators are still here and available to assist consumers to enroll. We have in person office hours. With the onset of the COVID-19 pandemic we did shift to a virtual model but pretty quickly went back to a hybrid model to ensure that we were serving the most vulnerable in the places they could be served. We continue to have in person assistance even outside of Open Enrollment. We also ask for feedback. We check in with our community partners to ensure that we are helping them meet the needs of their clients and also, we tag them in all of our social media posts as well to ensure that they know that they can amplify the messages that we are putting out. Next slide please. And speaking of our Tampa Bay partners, I have to mention some of the most important ones to us. We have had an incredible relationship with BayCare Health System for over 10 years as navigators. In addition, we built on the clinical and community based model to expand the clinical side by bringing in partners at
Tampa General Hospital, Premier Community HealthCare, and Evara Health which are two federally qualified healthcare centers in our geographic area. So, we formally partner with these agencies and collectively call ourselves the Tampa Bay Navigator Project. They do phenomenal work and we are able to have over 32 navigators in Tampa Bay. Beyond that we have our informal partnerships which are also incredibly important. These are partners who are letting us come to their resource centers or sending their employees over to us as they retire who are giving our information out in food bags at food pantries. The list goes on and on. This is just a few but needed to make to highlight them. Next slide please. You are welcome to find us on Facebook; Instagram and we are also on LinkedIn. We have very active social media and we are going to continue to post all the great content that CMS has provided to us. Next slide. This is my contact information. I am so excited to be working and getting into this year 10 Open Enrollment. Thank you for everyone for having us. I would now like to turn it over to Stefanie Costello, Director of the CMS Partner Relations Group, to walk through some of the Marketplace partner resources. Stefanie?

**Stefanie Costello:** Thank you so much for that and thanks for all of our presentations. I know we’ve shared a lot of information. We have a little bit more information to share before we open it up to Q&As. I now some of you all have been putting some of your questions in the Q&A box. We encourage you to keep doing that and we will do our best to get to as many questions as we can. Before we do that, I want to just go through some of our updated resources we have for the Marketplace and sharing some of the things that have just been posted. So, hopefully you are familiar with our [marketplace.cms.gov](http://marketplace.cms.gov) and this is our place for partners and stakeholders and assisters, and Champions to get all sorts of great information to share with consumers about the Health Insurance Marketplace and particularly this Open Enrollment. To begin we have the first section is for the Champions for Coverage and we have other partner resources but I want to take a minute to talk about the Champions. Some of y’all are Champions and some of y’all might not be. These are organizations who are helping spread the word about Open Enrollment and enrolling in health insurance. You don't have to be an assister, you just have to be willing and able to share information. We have our updated Champion webpage that was just updated today that has a little bit more information about how you can become a Champion for Coverage, why your organization can do it, how you can become a Champion, and then there are some resources here for your organization to use as a Champion including a Virtual Event in a Box toolkit, a DIY Design Toolkit, and other customizable materials. We encourage you to check that out. On the tool and toolkit page you can access it here. If you're not a Champion, you can apply by filling out the application form here. We also have a list of all our current Champions which is updated periodically so take a look at this. You can find the Champions in your state. If you are a Champion, we also have a dedicated mailbox for y’all to ask questions. We have our theme weeks posted for this Open Enrollment so our theme weeks document is located here. These are all of our theme weeks for this Open Enrollment. As you can see, we are in the week of October 30th, so we’re in our Open Enrollment Begins and our Latino Week of Action. Next week is our Pre-Existing Conditions and Disability Week of Action and Health Centers Week. Following that is our Black Americans Week of Action and Rural Week of Action followed by our Thankful for Coverage Week of Action, which is the week of Thanksgiving. To round out
November, we have our American Indians/Alaska Natives/Tribal Week of Action and our LGBTQ Week of Action. If you are on our Partner Toolkits webpage, you can access the Word document here with the full list of our theme weeks to help prepare and coordinate your outreach. In here we also have all of our theme week toolkits, so you’ll notice that we have each theme week and under that we have a document with the talking points, 5 things you need to know, and social media messaging and that is broken out by theme week. All of our November theme weeks are posted. All of the toolkit are up and live. You can use this to plan ahead so we heard you. We heard y’all wanted the information sooner so y’all have all of the talking points and social media now for the whole month of November. We encourage you to stay active on each of these theme weeks. We will be posting the December theme weeks in the few weeks and so we will update you once those are posted through our listserv. We will have our December ones shortly, but for now we have our November theme week toolkits posted for your talking points and social media. We also have theme week graphics here so if you are looking for specific graphics to use for social media or other needs, they are here underneath all of the theme week names so you can grab those. They are available in English and Spanish. We have also general Marketplace Open Enrollment Toolkits in English and Spanish and the graphics separately in English and Spanish so we encourage you to download those and use those for your organization. We have our full list of webinars posted here that you can sign up from. We have already completed our first two as we are just finishing the second one today. Our next one will be December 13, so you can register for that and then the last two will be in January. We also have a couple tools and resources I wanted to go over today and that includes brand identity and design standards. We have the SEP social media toolkits here. I know that was a question in the chat about getting ready for the SEP already but those are there. We have customizable materials which includes DIY Design Toolkit, fact sheets, postcards, posters, flyers and we have a number of additional materials which are available for you to order. If you haven't done this before, I strongly encourage you to go set up an account. It is free. You can order in English and Spanish and you can order I think up to 50 copies of any of the Marketplace materials there and get those delivered for free right to your organization. You can pass out your fact sheets and flyers, hang up a poster there so if printing is an issue please go ahead and get those ordered. I also want to let you know you should have received our listserv that went out this week. We will be sending those out biweekly so our next one will come. If for some reason you did not receive our listserv with all of our updates and resources, you can email us at partnership@cms.hhs.gov and we can get you added to that email list so you will receive all of our great updates. Those are all of our resources. Again, just wanted to flag the theme weeks and the additional ones we have up here. With that, I’m going to go ahead and stop sharing my screen and I am going to turn it over to Kyla who is going to start taking up through our question and answer part of the webinar.

Kyla Ellis: Thanks, so much Stefanie. So, as she mentioned, we have a couple minutes for questions. I’ve seen that we have been feverishly answering them in real time so if you have any additional questions that you want to use the Q&A box function for at the bottom of your screen, we’ll give a couple of minutes for questions that have not been answered yet. One that I see hasn't been answered thus far is just a question about SNAP and Medicaid eligibility backlogs. These do vary from state to state so we don’t have exact information, but if you’d like in an
inquiry we can try to look into it for you. Ok, I see most of the more specific questions are being answered so I will move onto some closing remarks while people are able to answer those in writing. Thank you so much to all of our speakers and a special thanks to our ASPE colleagues who joined us as well as our Navigator Partner Katie Roders Turner and a special thanks to the CMS Administrator who was able to join us earlier. I also wanted to thank you all for attending and for taking the time to be with us today. We encourage all of our partners to use the material available at marketplace.cms.gov to promote this year's Open Enrollment which runs through January 15th. Stefanie walked through our upcoming theme weeks of actions for November. It will be wonderful if you all aligned your organization’s outreach and events with those upcoming weeks and help spread the word. As we mentioned at the top of the call, we will post the recording and transcript for today's webinar at marketplace.cms.gov page in about a week or so. Please join us for our next webinar which will be Tuesday, December 13 at 3:00 p.m. Eastern. We will continue to share resources and materials available to help with outreach and enrollment efforts. To register for that and any other upcoming webinars, you can use the link posted in the chat or in the email you received about this event. Please feel free to share the invitation with your networks. Thank you again and we hope to see you next month. That concludes our webinar and have a great rest of your day.

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