



Insight

Key Questions For Secretary Sebelius

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Tomorrow HHS Secretary Sebelius is testifying before the Senate Finance Committee on the troubled roll out of the Affordable Care Act. While there are several questions that will be posed of the Secretary on the political aspects of the ACA, here are ten substantive questions that deserve answers from the Administration.

Numbers, Numbers, Numbers

In order to know what impact the horrendous rollout of the Affordable Care Act's (ACA) health insurance exchanges has had on enrollment in the exchange, it is critical to know how many people have signed up, what types of coverage those people have signed up for, and the demographics of those who have signed up.

The Associated Press obtained an internal Health and Human Services (HHS) memo from September which claimed that HHS had set a goal of 494,620 enrollees by the end of October and 3.3 million by the end of December. HHS has not confirmed or denied those targets.

Despite repeated claims by the Administration that they do not have figures on enrollment to date, the House Oversight Committee has obtained documents that reveal that enrollment figures are being tracked on a daily basis.

Finally, when the Administration has spoken about enrollment numbers to date, they have ignored any distinction between those individuals signing up for Medicaid (and whether they were previously eligible for Medicaid, and will thus cost their states additional money) and those signing up for private insurance coverage through the exchange.

Question 1) Secretary Sebelius, you have stated that enrollment data for the month of October will be released in "mid-November." Can you tell us when specifically those numbers will be made public? Have you personally seen any internal HHS estimates of how many people have signed up? Are you aware of the existence of any numbers regarding how many people have signed up?

- a. Recently released documents obtained by the House Oversight Committee show that those numbers are readily available, compiled at the end of each night by QSSI in what has been referred to as the "daily dashboard." In light of the many concerns surrounding the viability of the online marketplace, why have those daily tallies of enrollees not been released to the public?

Question 2) Secretary Sebelius, in addition to knowing how many people have signed up, it is important to know the basic demographics of the enrollees, and what they have signed up for. What percent of enrollees has signed up for Medicaid versus private insurance offered through the exchanges? What are the demographics of those enrollees? Were they uninsured previously or are the bulk of the exchange enrollees those who were kicked out of their current plans?

- a. If you are unable or unwilling to provide this information today, will you commit to providing information about the demographic makeup of enrollees when you release numbers later this month, and will you include information regarding their type of coverage or plan selection?

Question 3) Secretary Sebelius, according to documents obtained by the Associate Press, HHS had set a goal of 494,620 enrollees by the end of October and 3.3 million by the end of December. In light of the disastrous rollout, has HHS revised those goals? If so what are they, and what impact do anticipate on the final number of enrollees?

Cancellations

Several million individuals and families have received, or will receive, cancellation notices because their current health plans do not meet ACA requirements and are not grandfathered, rendering them unavailable after December 31st. The American Action Forum [projected recently](#) that 9.69 million Americans could be facing cancellation of their existing individual market purchased insurance.

While President Obama and virtually every supporter of the law have been repeating the mantra “if you like your insurance, you can keep your insurance” for three years, it is now clear that was an unabashed lie. Recent efforts to explain away this controversy lack credibility – for example many supporters are suggesting that only “bad” or “insufficient” coverage is being cancelled, a statement that ignores the principle of free choice, as well as [real examples](#) of people with excellent coverage who are losing it as a result of the law.

Even setting aside these egregious abuses of the public trust, there are very real consequences of these cancellations. Individuals who have had their insurance cancelled are being told they may be eligible for better, subsidized coverage through the exchanges. Due to problems with the websites, however, they cannot yet shop for new coverage. Even if [healthcare.gov](#) is functional by November 30, as is now promised, these people will have just 14 days to access the web site, create a profile, choose a plan, and enroll in that plan. If they are unable to do so in those 14 days – or if the website repair is delayed further – these millions of individuals and families will become uninsured on January 1.

Question 4) Secretary Sebelius, millions of Americans are receiving cancellation notices for their insurance policies. These individuals and families must enroll in new coverage by December 15th, or they will not be insured on January 1st. You have stated that Healthcare.gov will be fixed by the end of November. Setting aside for a moment your excuses for why people are losing their coverage, and assuming that you do have the website fully operational by the end of November, do you think it is reasonable to ask people to sign up for new coverage in 14 days, or face a lapse in coverage on January 1?

- a. Will you commit to issuing a waiver to allow people to renew non-ACA-compliant plans for another year until we are certain that the ACA-mandated exchanges are at least functional? If not, what will you do to protect people who are losing their coverage through no fault of their own?

It's More than a Website

President Obama is fond of saying that the ACA is more than a website, but the website is a critical piece of the ACA and the law cannot work without a functional web portal. HHS claims the website will be fixed by the end of November, but there are also a number of questions about the website, beyond when it will be functional.

Question 5) Secretary Sebelius, HHS has stated that the website will be fully functional by the end of November. Given the unexpected delays and continuing problems with the IT infrastructure, is there a contingency plan in the case that the website is not functional by then? Will the deadline be extended to December 31st? How is the public expected to be confident that they will be able to sign up for coverage before the end of the year?

Question 6) Secretary Sebelius, In light of the significant obstacles facing consumers who attempt to enroll in coverage through healthcare.gov, you and other administration officials have encouraged those seeking to enroll in coverage to use alternative means to apply – notably telephone and in person applications. However, telephone and in person applications still require the use of the same system that is failing many Americans – paper applications must still be entered into the website system and those applicants are still expected to use the online marketplace to select a plan. Why do all “alternatives” to the website still require the eventual use of the website? Why was a purely non-digital application method not implemented in order to account for massive problems such as those currently being experienced by the website?

Question 7) Secretary Sebelius, the insurance plans available through healthcare.gov were intended as an affordable alternative for individuals who do not receive coverage through their employer. What measures are in place to stop those individuals who have coverage available through their employer from receiving subsidies on the exchange? How will HHS verify that an individual does not have an offer of affordable insurance through their employer?

Question 8) Secretary Sebelius, as part of the debt limit agreement last month, HHS is required to verify exchange applicants' income before providing subsidies. How is this being done? How confident are you that the system is only providing subsidies to those with appropriate incomes?

Question 9) Secretary Sebelius, an [HHS report](#) from June of this year revealed that QSSI, one of the major contractors tasked with building, and now repairing, the online marketplace, was deemed a “high risk,” having endangered the personal data of more than 6 million Medicare beneficiaries through insufficient security controls. Given the concerns over QSSI's ability to properly secure American's sensitive data, why was QSSI tasked with repairing the website that it built so poorly? In light of the report's concerns, as well as the failed launch of the website, wasn't it appropriate to tap another company, possibly one more capable and not classified as “high risk,” in order to fix the website?

Question 10) Secretary Sebelius, on the topic of fixing the website, how is HHS paying for the repairs since no money has been appropriated for this purpose? All told, how much has been spent by the federal government on healthcare.gov to date?