

State of Maryland drops health exchange software

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Last week, in a unanimous decision, the board that oversees the Maryland state health exchange abandoned the software package it uses to manage insurance enrollment.

Upon its initial launch in October 2013, the Maryland Health Benefit Exchange website crashed almost immediately. In the intervening months, it has been plagued by a wide variety of technical glitches, such as broken links, frozen webpages and problems with creating new accounts or searching for insurance plans.

Problems with the website have been accompanied by other complications and sources of public frustration, including busy call centers, long lines at the exchange's offices and disconnected service numbers.

The Maryland Health Benefit Exchange is one of fifteen programs established under the Affordable Care Act (known as Obamacare) administered independently of the more expansive federal exchange at HealthCare.gov. According to a statement released by Capital News Service at the University of Maryland, comments on the exchange website are overwhelmingly negative, with only fifteen positive remarks out of a total of 4,000 posts.

An editorial last Friday in the *Washington Post* detailed the experience of one user, who was placed on hold for two hours, redirected multiple times and repeatedly given a non-working phone number.

The plan adopted last week by Maryland state lawmakers involves dropping the technology behind the website and bringing in Deloitte Consulting, a company that played a key role in setting up the exchange used in Connecticut. Officials in Maryland are hoping that Connecticut's software can be successfully imported and applied by November, when the next open enrollment period begins for the state exchanges. The board's decision to scrap the healthcare

website also included a request for an additional \$40-50 million in federal funds that would be used to pay a private consulting agency to help the state "revamp" its program.

When the exchange was first built and implemented, Maryland received \$180 million in assistance from the federal government. The state is estimated to have spent about \$129 million of that sum, which was used to hire Noridian Healthcare Solutions to oversee the project for the first several months, until it was handed over to Optum/QSSI at the beginning of the year. Optum/QSSI is a subsidiary of UnitedHealth Group and has worked on the HealthCare.gov website and databases. UnitedHealth owns one of the four health insurance companies currently operating on Maryland's health exchange.

With the Maryland exchange's first open enrollment period now publicly acknowledged as a technical disaster, contractors and managing agencies in the state government are pointing fingers at each other. In testimony before Congress last week, Joshua Sharfstein, the health secretary of Maryland, claimed that the technical services billed as immediately ready for implementation "actually were defective and deficient." Maryland is now planning to sue Noridian along with several subcontractors, with Sharfstein promising that the federal government will be reimbursed if these companies are successfully prosecuted.

For their part, several contractors are threatening to countersue the state of Maryland, arguing that the latter was at fault for failing to implement the companies' technology properly. Noridian and EngagePoint, another subcontractor, have already filed court claims against each other, regarding responsibility for the exchange's failures, as well as Noridian's apparent

attempt to undercut EngagePoint by hiring members of its staff.

Auditors appointed by the state legislature released their findings on the health exchange program last Thursday, after combing through the email correspondence and documentation released to the public. The report notes that leaders in the legislature and members of Gov. Martin O'Malley's administration had been briefed about significant potential problems with the exchange months in advance of its launch, but chose to proceed with its rollout anyway.

In a letter accompanying their report, the auditors observe that their efforts were "not conducted in accordance with generally accepted government auditing standards," owing to heavy redactions, approaching about 26 percent of the overall documentation.

Sharfstein replied by denying that the exchange board is concealing anything, and, in a revealing comment of his own, alleged it was the Maryland attorney general's office that removed information that had the potential to be used in a lawsuit against the state. The state auditors are expected to conduct a more comprehensive investigation this summer, and will be joined by a federal audit examining whether or not the state used its funds "appropriately."

The faulty technology and problematic launch of the healthcare exchanges that are component parts of Obama's healthcare initiative are not accidental features of the Affordable Care Act, but illustrate its essentially reactionary nature. All of the glitches, red tape, and confusion involved result from the ruling elite's impatience to advance this agenda, and its disregard for its impact on the population.

Obamacare represents an effort to ration the public's access to healthcare by forcing individuals to purchase inadequate plans or pay fines, while creating vast profits for insurers and cutting costs for both the government and employers.

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