Fiscal Year 2012
Year in Review & Fiscal Year 2013 Goals

Roni Mansur
Chief Operating Officer

Ashley Hague
Chief of Staff & External Affairs/Assistant General Counsel

Board of Directors Meeting
July 12, 2012
Agenda

• Fiscal Year 2012 Goals Recap
• Fiscal Year 2012 Year in Review
• Fiscal Year 2013 Goals
• Next Steps
FY12 Health Connector Year in Review
FY12 Goals Recap

1. Connector 1.0 Goals
2. Connector 2.0 Goals
3. Administrative & Organizational Goals
FY12 Goals Recap (cont’d)

1. Manage Commonwealth Care and Commonwealth Choice program costs by pursuing operational and systems efficiencies, enhancing program integrity and (for Commonwealth Care) controlling capitation
   - Maintain positive member and customer shopping and coverage experience
   - Enhance collaboration with health plans, operations and systems partners and other state agencies providing health insurance
   - Complete outstanding projects from Fiscal Year 2011

2. Develop and pursue updated strategic vision for the Health Connector based on the needs of the Commonwealth and national health care reform requirements
   - Secure federal funding to facilitate policy development and implementation activities associated with national health care reform
   - Collaborate with the federal government and other states to promote national health care reform, including disseminating lessons learned from the Health Connector experience

3. Recruit and retain highly talented staff
   - Maintain transparency in operations and decision-making and accessibility to stakeholders, experts and the public
   - Ensure appropriate oversight of our organization by our Board of Directors
FY12 Year in Review

- General Overview of Fiscal Year 2012
- “Connector 1.0” Goals & Key Accomplishments
- “Connector 2.0” Goals & Key Accomplishments
- Administrative & Organizational Goals and Key Accomplishments
- Projects Not Completed in Fiscal Year 2012
FY 2012 Goals Year In Review – Overview

3 Major Categories

10 Specific Goals

41 Key Strategies

83 Success Criteria & Metrics

191 Key Tasks (10 Deferred) 94.7% Completed
FY 2012 Goals Year In Review – "Connector 1.0" Goals & Key Accomplishments

MASS HEALTH LAW
Massachusetts to save $91 million in health insurance costs, regulators say

THE MEDICAL SECURITY PROGRAM
Health Insurance Benefits for Unemployment Insurance Claimants

Earn a rebate of up to 15% with Wellness Track
• Another successful Commonwealth Care procurement – 10% projected rate decrease since FY11

• Expeditious re-integration of the Aliens with Special Status population – completed in less than four months

• Re-launch of Business Express with all eight major insurance carriers

• Completed Year 1 implementation of Wellness Track

• Completed competitive re-procurement of the Medical Security Program – $30M in savings

• Renegotiated rates on behalf of public college and university students as part of Year 3 of the Student Health Initiative – aggregate rate increase of ~6.6% with major new benefits

• Developed new Affordability Schedule and published report showing that the number of people assessed a tax penalty continues to decline for the fourth year in a row
FY 2012 Goals Year In Review – “Connector 2.0” Goals & Key Accomplishments
• Obtained enactment of a number of important laws to transform the Health Connector into an ACA-compliant Exchange

• Awarded several federal grants – $55,869,326 to date – and completed required “Gate Reviews” showing our tremendous progress as a result

• Instituted a new internal Project Management Office and developed a detailed Roadmap with key milestones and major deliverables to move the Health Connector towards ACA compliance

• Restructured Commonwealth Care and Commonwealth Choice teams into an integrated Program Management team to better align with the functions of an ACA-compliant Exchange

• Launched the HIX-IES project with UMass and EOHHS

• Enhanced external engagement activities and outreach by supporting publication of BCBSMA Foundation Toolkits, convening Broker Advisory Council meetings, launching Carrier integration working sessions and participating in local and national conferences related to health reform in Massachusetts and under the ACA
• Successfully retained existing staff who continue to demonstrate high energy and commitment to the evolving role of the Health Connector

• Improved financial oversight of the Health Connector by formalizing the role of the A&F Subcommittee through an official charter and regular check-in calendar and our annual audit process

• Balanced administrative budget within flat state resources while still making crucial investments in ACA transition efforts
Projects Not Completed in Fiscal Year 2012

- Deferred

  - Provider Search Tool for small businesses – deferred to 2013 due to overwhelming competing priorities related to Business Express and the HIX-IES project

  - Launch broker newsletter – deferred to July 2012 as we were awaiting U.S. Supreme Court decision on ACA

  - Apply for a Level 2 Exchange Establishment Grant – deferred to FY13 in light of new grant opportunities released in June 2012

  - Complete Phase III of staff performance review process – deferred to July 2012 to provide a full-fiscal year picture of staff performance

  - Certain enhancements to the Commonwealth Care eligibility determination process – deferred given program re-alignment under the ACA
FY13 Health Connector Organizational Goals
Overview

- Refining goal setting process for FY13 to more clearly articulate our core vision, emphasize the most important priorities for effectuating it and identify some key metrics to measure our progress
While the Health Connector still needs to maintain “Connector 1.0” operations, much of our organizational efforts are now focused on “Connector 2.0”

- Being a successful Exchange in a post-Commonwealth Care world
- Complying with the ACA

**FY12 Organizational Categories**

1. Connector 1.0 Goals
2. Connector 2.0 Goals
3. Administrative & Organizational Goals

**FY13 Vision**

1. Become a Health Insurance Exchange with a Transformative Impact on Health Insurance for Small Businesses and Individuals
2. Leverage the Health Connector’s health insurance procurement expertise to contain costs while ensuring comprehensive coverage within our own state-funded program and for other programs and partners
3. Expertly execute the Health Connector’s public policy and regulatory responsibilities
4. Embody the highest standards for organizational performance, transparency and public and stakeholder engagement
FY13 Vision

**Vision #1:**
Become a Health Insurance Exchange with a Transformative Impact on Health Insurance for Small Businesses and Individuals

**Vision #2:**
Leverage the Health Connector’s health insurance procurement expertise to contain costs while ensuring comprehensive coverage within our own state-funded program and for other programs and partners

**Vision #3:**
Expertly execute the Health Connector’s public policy and regulatory responsibilities

**Vision #4:**
Embody the highest standards for organizational performance, transparency and public and stakeholder engagement
Goals Supporting Vision #1

Vision #1: Become a Health Insurance Exchange with a Transformative Impact on Health Insurance for Small Businesses and Individuals

Goal:
Provide users with “choice made easy” when it comes to health insurance and evidence-based tools to improve wellness

Vision #2:
Leverage the Health Connector’s health insurance procurement expertise to contain costs while ensuring comprehensive coverage within our own state-funded program and for other programs and partners

Vision #3:
Expertly execute the Health Connector’s public policy and regulatory responsibilities

Vision #4:
Embody the highest standards for organizational performance, transparency and public and stakeholder engagement

Goal:
Promote competition on price and value and positive innovation among health insurance carriers

Goal:
Ensure full compliance with the Affordable Care Act
## Vision #1:
Become a Health Insurance Exchange with a Transformative Impact on Health Insurance for Small Businesses and Individuals

<table>
<thead>
<tr>
<th>Goals</th>
<th>Strategies</th>
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<tbody>
<tr>
<td>Provide users with “choice made easy” when it comes to health insurance and evidence-based tools to improve wellness</td>
<td>• Offer a range of products and carriers that can meet the needs of a diverse set of consumers</td>
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<td>• Enhance consumer or user experience from eligibility determination to shopping to enrollment to payment</td>
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<td>• Ensure consumers know about opportunities to access coverage through the Health Connector</td>
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<td>• Connect customers to evidence-based tools to improve wellness</td>
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<td>• Understand customer, market and partner needs through engagement of key market participants</td>
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<td>Promote competition on price and value and positive innovation among participating health insurance carriers</td>
<td>• Fashion easy-to-understand, user-friendly Health Connector shopping experience so that high-value health insurance options have the potential to differentiate and grow</td>
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<td>• Make it as easy as possible for carriers to offer high-value health insurance options through the Health Connector</td>
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<td>• Develop customized approach to promoting payment reform as part of the QHP certification process (Seal of Approval) for coverage effective January of 2014</td>
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**Vision #1 Goals**

- Provide users with “choice made easy” when it comes to health insurance and evidence-based tools to improve wellness
- Promote competition on price and value and positive innovation among participating health insurance carriers
- Make it as easy as possible for carriers to offer high-value health insurance options through the Health Connector
- Develop customized approach to promoting payment reform as part of the QHP certification process (Seal of Approval) for coverage effective January of 2014
## Strategies – Vision #1 (cont’d)

### Vision #1:
**Become a Health Insurance Exchange with a Transformative Impact on Health Insurance for Small Businesses and Individuals**

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<tr>
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<td><strong>Ensure full compliance with the Affordable Care Act</strong></td>
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<td><strong>Goals</strong></td>
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<td>- Use federal grant revenue to ensure a successful transition to an ACA-compliant Exchange, with proper audit and compliance procedures</td>
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<td>- Meet requirements for federal approval of the Health Connector as ACA-compliant Exchange</td>
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<td>- Maintain a comprehensive Transition Roadmap detailing all major ACA deliverables with specific timelines for development, testing and implementation</td>
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<td>- Maintain an internal Project Management Office and governance structure (workgroups and workthreads) to ensure full execution of the Roadmap</td>
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<td>- Educate the public, partners and other stakeholders about the Affordable Care Act</td>
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<td>- Manage member transitions from current Health Connector programs to those they are eligible for in 2014, including MassHealth where applicable</td>
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**Key Metrics – Vision #1**

*Several key metrics have been identified to track and measure our progress against the goals supporting Vision #1*

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<tr>
<td>1</td>
<td>Commonwealth Choice membership</td>
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<td>2</td>
<td>Commonwealth Choice customer service member satisfaction and call center performance metrics</td>
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<td>3</td>
<td>Measures of public knowledge about the Health Connector</td>
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<td>4</td>
<td>Participation in Wellness Track</td>
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<td>5</td>
<td>Percentage of Roadmap deliverables that are executed by due dates</td>
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<tr>
<td>6</td>
<td>Average premium trend for Commonwealth Choice products</td>
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Goals Supporting Vision #2

**Vision #2:**
Leverage the Health Connector’s health insurance procurement expertise to contain costs while ensuring comprehensive coverage within our own state-funded program and for other programs and partners

**Goal:**
Partner with other public entities to assist with procurements for health insurance

**Goal:**
Expertly manage Commonwealth Care as the program winds down its life cycle

**Goal:**
Provide substantive and strategic advice and technical assistance with efforts to transition state-funded health insurance programs towards alternative payment methodologies promoting efficient, evidence-driven and coordinated care

**Goal:**
Continue to assist colleges and universities in procuring health insurance for their students
Sample Strategies – Vision #2

**Vision #2:**
*Leverage the Health Connector’s health insurance procurement expertise to contain costs while ensuring comprehensive coverage within our own state-funded program and for other programs and partners*

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| Expertly manage Commonwealth Care as the program winds down its life cycle | • Manage program costs and promote positive member experience during FY13  
• Engage MCOs and customer service vendor on coverage and customer service mechanics for first half of FY14, coordinated with the strategy for managing member transitions within the Health Connector and to MassHealth based on the ACA  
• Enhance tobacco cessation coverage in Commonwealth Care and modify coverage for dental and other benefits as required by the FY13 budget |
Goals Supporting Vision #3

Vision #3: Expertly execute the Health Connector’s public policy and regulatory responsibilities

Goal:
Implement Affordable Care Act policy and regulatory changes for which the Health Connector is responsible and assist other agencies as needed with their ACA-related policy projects

Goal:
Augment Health Connector research and publication agenda to proactively report on key findings, trends and lessons learned from our programmatic and policymaking experiences to date
### Sample Strategies – Vision #3

#### Vision #3:
*Expertly execute the Health Connector’s public policy and regulatory responsibilities*

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| Implement Affordable Care Act policy and regulatory changes for which the Health Connector is responsible and assist other agencies as needed with their ACA-related policy projects | • Mesh state individual mandate (including affordability schedule and MCC and enforcement/appeals) with relevant ACA rules (federal individual mandate affordability/penalty/appeals framework, benefit standards through MCC and EHB rules, required enrollee contributions to subsidized coverage in MassHealth and the Health Connector)  
• Lead development of a state-based methodology for instituting cross-small/non-group market risk adjustment, including efforts to secure federal authorization for the Commonwealth to implement this approach  
• If enacted as part of health care cost containment legislation, assume responsibility for policymaking with respect to Fair Share and Free Rider rules, and accordingly play leading role in efforts to mesh existing state employer responsibility rules with new ACA standards  
• Assist/coordinate with other state agencies with respect to ACA-related policy and regulatory responsibilities under their principal jurisdiction (e.g., DOI rules on Essential Health Benefits, reinsurance, etc.) |
Vision #4: Embody the highest standards for organizational performance, transparency and public and stakeholder engagement

Goal: Proactively and consistently engage our Board of Directors on our priorities and activities

Goal: Attract and retain high-quality staff

Goal: Fully engage the public and stakeholders on the activities of the Health Connector
### Vision #4:
*Embody the highest standards for organizational performance, transparency and public and stakeholder engagement*

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<td>Proactively and consistently engage our Board of Directors on our priorities and activities</td>
<td>• Conduct regular Board meetings with ample preparation of Board members and regular follow-up on Board meeting topics of discussion and outstanding questions</td>
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<td>• Conduct enhanced engagement on ACA transition activities (provide regular updates on ACA transition activities at Board meetings, conduct Retreat focused on ACA transition, have Board members formally participate on ACA planning committees)</td>
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<td>• Empower Board to conduct rigorous oversight of programs, finances</td>
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Next Steps

• Solicit and incorporate feedback from the Board of Directors

• Present Board of Directors with FY13 Goals Manual for publication

• Develop an internal “Plan of Operations” to support the successful execution of the FY13 organizational goals