



2014 Open Enrollment Check-in

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Board of Directors Meeting, November 14, 2013

Overview



- Today marks our second Board check-in, 45 days into Open Enrollment
- As with our first check-in, we will be sharing with the Board key data points related to open enrollment and our programs for individuals and small businesses
- The goal of these check-ins is to provide the Board with information related to our overall efforts to transition to an ACA-compliant Marketplace, but also to highlight:
 - Where are we now
 - What are we doing to improve the customer experience
 - Where are we headed and key next steps

Where Are We Now: IT Functionality



- **Functionality by population**
 - Small Group
 - As reported in September, our small group ACA-compliant QHP offering is currently leveraging the SBSB platform
 - All 10 medical carriers available for comparison shopping
 - All 5 dental carriers available on website for call-center provided quotes
 - No major issues with website functionality or shopping experience at this time
 - Non-group (Non-subsidized)
 - End-to-end application and shopping experience available
 - Premium billing functionality slated to be available in December, in line with when members pay their premiums (generally not long before coverage begins)
 - Non-group (Subsidized)
 - Online application intake and submission available
 - Real-time eligibility determination and complete end-to-end shopping and plan selection for subsidized products to be phased in beginning later this month and onwards through December

Where Are We Now: Outreach

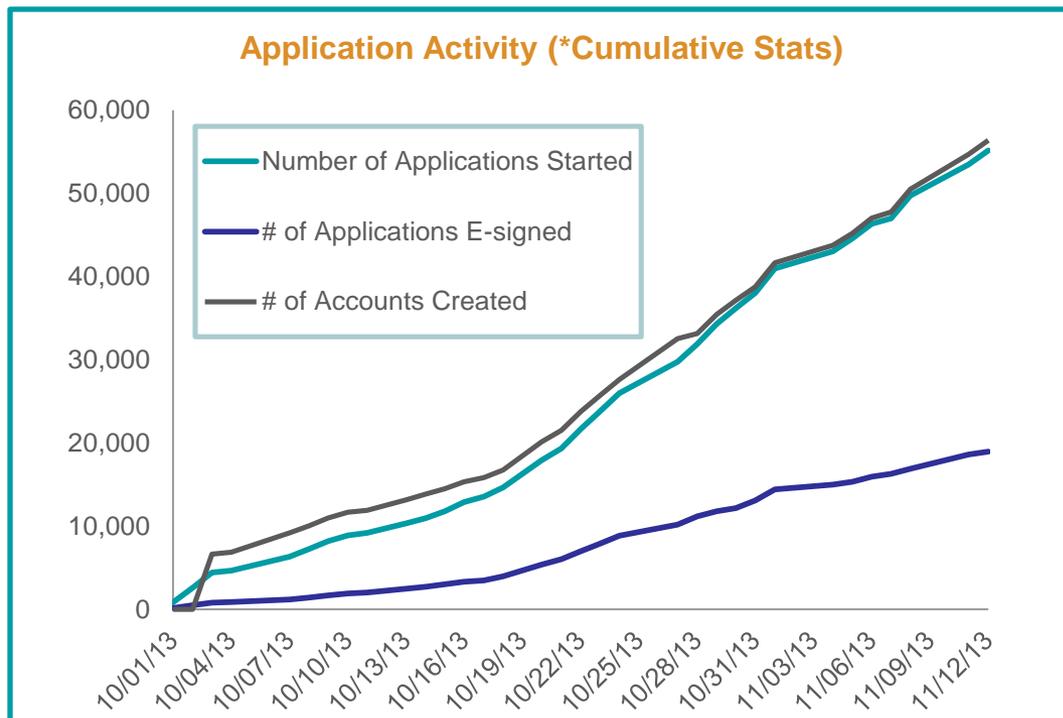
- Since our last Board meeting, we have ramped up our outreach efforts
 - Outbound calling campaign (launched 10/18)
 - We have dialed over 190K live-agent calls to current Health Connector members in Commonwealth Care, Young Adult Plans and Commonwealth Choice
 - Member mailing campaign (launched 10/15)
 - Mailed appx. 155K open enrollment packets to current Health Connector members and other populations expected to become Health Connector members (e.g., CMSP, MSP)
 - Another 100K packets slated for later this month
 - Launched a door-to-door canvassing campaign (10/23)
 - Targeting over 40,000 doors in communities with high member transition populations
 - Leveraging Health Care for All and 10 of their regional partners
 - Media campaign (10/21)
 - Television, radio, digital, public transportation and print ads in circulation with progressively increasing frequency that really began in November

Where Are We Now: Current Activity



Accounts Created and Application Activity (as of 11/12/2013)

Check-in Date	10/08/2013	11/11/2013
Accounts Created	10,028	54,700
Applications Started	7,258	53,511
Applications Submitted	1,704	18,625
Completed Enrollments	(Not available until Dec. BOD meeting)	(Not available until Dec. BOD meeting)



- There has been a steady increase in accounts created and application activity through the HIX system over the last month
- We have also received 140 applications for non-group dental coverage
- Outside of HIX, through SBSB, we have received 64 applications for small group coverage

Where Are We Now: Customer Experience



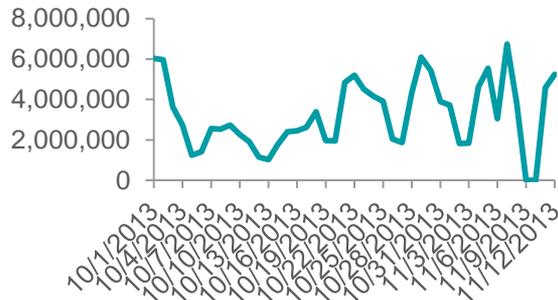
- **General website performance**

- The past 45 days have been a critical period for the new HIX-IES system. We have been working through many issues and incrementally improving system performance
- Overall, we have experienced general issues with system performance:
 - Website slow-downs and time-outs
 - Eligibility application intake instability, with sporadic error messages
- We have also experienced issues with the Customer Service portal, hampering the call center and our representatives' ability to assist consumers
- In addition, over the past month and a half, we have unearthed a number of more discrete issues that need to be addressed, ranging from typographical and message content errors – to data fields unable to support needed characters – to decision-support tools not appearing or functioning properly

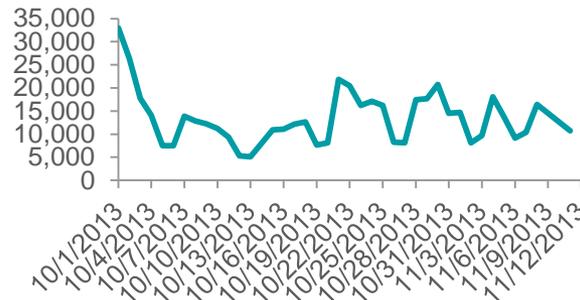
Where Are We Now: Customer Experience (cont'd)

Web Activity (as of 11/12/2013)

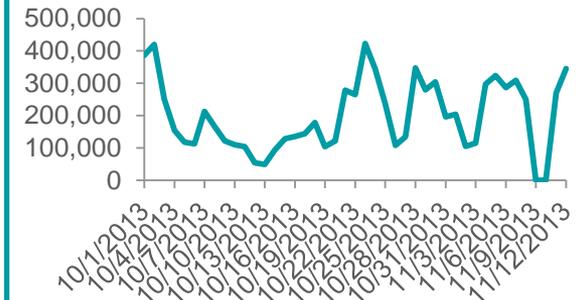
of Website Hits



Number of Unique Visitors



Number of Page views



Website metrics:

- 139,038,248 website hits
- 8,597,756 page views
- 537,597 unique visitors

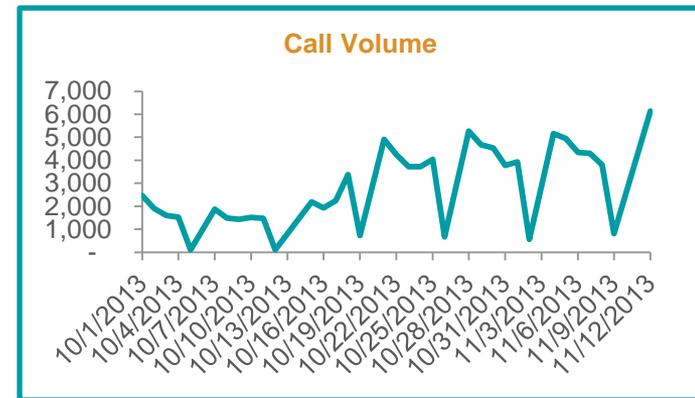
Performance metrics:

- Average CPU load: 4.12%
- Average RAM utilization: 32.59%

Where Are We Now: Customer Experience (cont'd)

Call Center Activity (as of 11/12/2013)

- The Call Center has experienced significantly higher call volume and call length since our last check-in, due to:
 - Increased outreach efforts that began mid-October
 - General system issues/error messages directing consumers to the call center
- Call length is also increasing
 - Applications by phone are taking an average 1hr to complete
 - CSRs are encountering system challenges when assisting callers



Check-in Date	10/08/2013	11/12/2013
Total Call Volume	9,492 calls	99,598 calls
Average Speed of Answer	9.28 sec	10.4 min
Abandonment Rate	0.91%	32.1%
Average Talk Time	5.9 min	10.5 min

What Are We Doing to Improve Customer Experience?



- We are working around the clock to fix problems and improve performance so all of our members have a best-in-class experience
 - IT Systems
 - Teams are working to fix issues reported by enrollment assisters, CSRs, media, constituents, etc.
 - Several major functionality defect fixes have already been processed, e.g., allow alpha numeric entries for Passport and Green Card numbers on the intake application
 - We continue to analyze and work to improve periodic “slowness” and related timeouts caused by high volume that consumers and CSRs experience while navigating the website, e.g., expanded system memory, tuned configuration settings to improve performance, identified “choke points” in code, etc.
 - Dedicated stabilization team in place for triaging, prioritizing and resolving issues; dedicated infrastructure team in place to monitor resolution production and support the stabilization team
 - Customer Service
 - We’re leveraging trained assisters (Navigators and CACs) to support member applications, which alleviates pressure on the call center
 - Given current call length and volume, we are deploying an additional 60 CSRs to be on-boarded as quickly as possible
 - Brought tech-support in-house to assist with triaging and trouble-shooting issues

Where Are We Headed & Key Next Steps



- Continuation coverage for the Commonwealth Care population
 - The Commonwealth Care program formally ends on 12/31, but the Health Connector and EOHHS have been working collaboratively with CMS over the past several months to provide continuation coverage for this population through the end of federal open enrollment – 3/31/14
 - Our goal is to ensure that our Commonwealth Care population is able to take advantage of the full 6 months afforded to everyone else in the country to select their new plans and enroll in new coverage
 - We obtained approval by CMS in October to provide this coverage to our Commonwealth Care population as we complete the transition of this population to their new ACA-compliant coverage – the ConnectorCare program
 - Since then, we have been working with our Commonwealth Care MCO partners to effectuate this continued coverage
 - We are continuing to aggressively outreach this population as well as the assister community to ensure that we do not lose momentum in getting this population transitioned to their new coverage under the ACA

Where Are We Headed & Key Next Steps (cont'd)



- Upcoming functionality releases
 - As noted, we have a number of upcoming releases that are extremely important to provide our entire population with the ability to access new ACA-compliant coverage
 - For the Small Group population:
 - Anticipate releasing the HIX version of our current SHOP in Q4 2013 or Q1 2014, which will provide the same plans available on our current web platform but with significant enhancements for small employers
 - For the Non-group, Non-subsidized population:
 - Releasing billing functionality in December, in line with when applicants pay their first premiums (generally closer to the start date of new coverage which in this case, is January 1)
 - Releasing the final phase of back-end functionality in December to support enrollment data transmissions (834 file transfers) between the system and carriers; testing in progress with carriers
 - For the Non-group, Subsidized population:
 - Releasing the first-phase of real-time program determination for certain populations along with plan selection and enrollment functionality later this month
 - Opening up this functionality to more complex families and mixed households in December