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# 2014 Open Enrollment Check-in

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Board of Directors Meeting, February 27, 2014

# Summary

- Over the past two weeks, significant progress has been made to effectuate our near-term operational and IT vision
  - Nine tactical workstreams created to address enrollment priorities
  - Deployed a new Data Entry Tool to expedite paper application processing
  - Deployed new hardware and software monitoring programs
  - On-boarded additional operations & technical resources, with additional ramp-up to peak performance levels on target
- We have more to accomplish to support our near-term goals
- Our efforts to develop a roadmap that involves solidifying a long-term HIX strategy are ongoing, but our number one priority at this time continues to be ensuring access to coverage for all Massachusetts residents
- Today, we will provide you with updates on our pathways to coverage and highlight our progress since the last Health Connector Board meeting and last week's public briefing

# Recap of Last Board Meeting

- At our last Board of Directors meeting on February 13, 2014, we covered a number of key issues:
  - Reviewed details of the new HIX project governance structure
  - Described the project management structure and discipline of the “MOCC” (Massachusetts Operational Command Center)
  - Identified near-term objectives for policy, IT and operations (*i.e.*, coverage extensions; tools and resources to expedite paper application processing; efforts to improve user experience on the website)
- We also identified several immediate next steps
  - Communicate and effectuate Commonwealth Care extension
  - Communicate transitional coverage extension
  - Launch Commonwealth Choice “Fast Path”
  - Execute near term operational and IT plan (identified above)
  - Kick off weekly public briefings

# Strategic Roadmap

**Strategic Question:** With pending deadlines of 3/31 and 6/30, as well as open enrollment later in 2014, will the HIX be ready to support full end-to-end enrollment functionality? While we continue our assessment, we are focused on driving a variety of near-term solutions that enroll residents, protect their coverage and improve overall experience.

## Near-Term

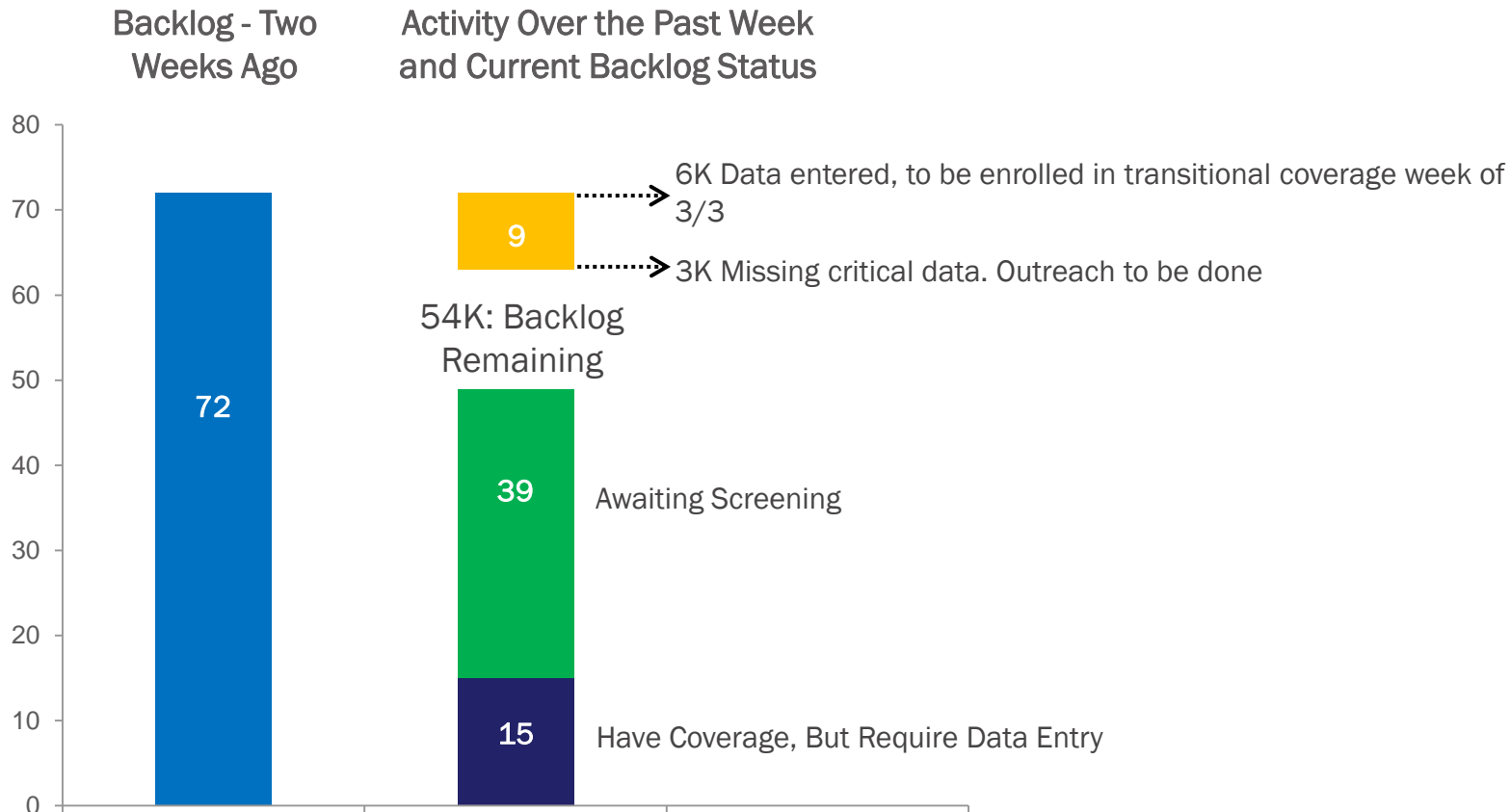
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- Operations Focus
  - Paper Application Backlog
  - Data Entry Tool Improvement
  - Staffing
- Consumer Experience
  - Customer Service & Escalations
  - Website Infrastructure
- Commonwealth Care Extension
- Commonwealth Choice Transition

## Long-Term

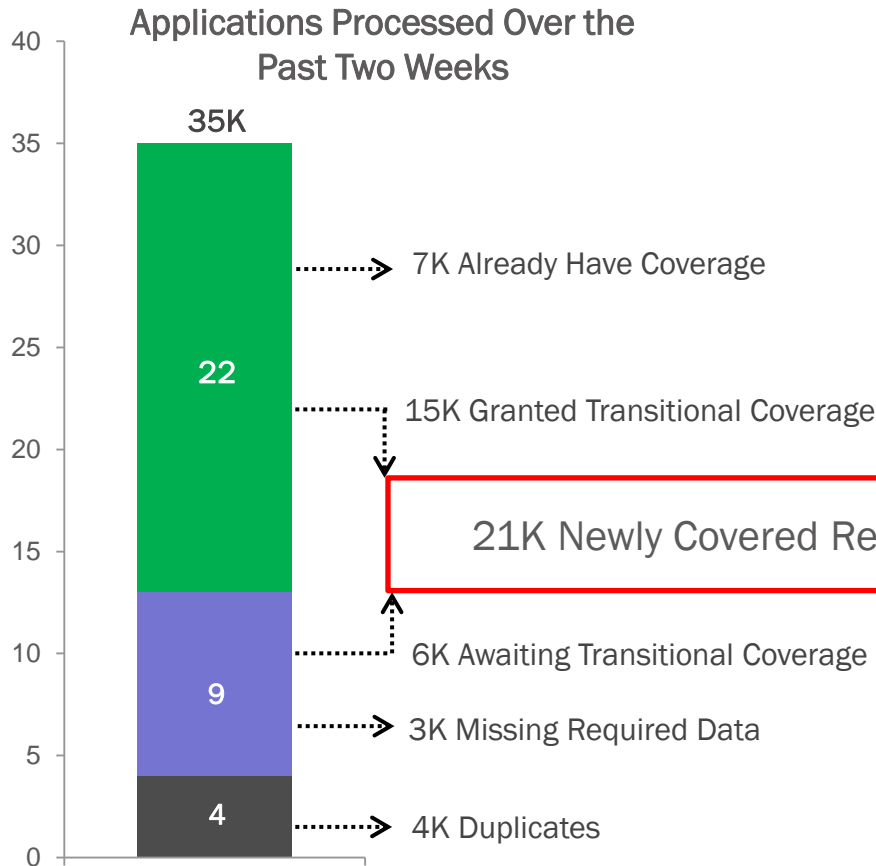
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# Application Process Update



Two weeks ago, we had an application backlog of 72K (50K paper applications, 22K electronic applications awaiting processing). We have reduced the total backlog to 54K paper applications, of which 15K have been identified as having coverage and 39K are awaiting screening, some whom may already have coverage, but still require being data entered into the system.

# Application Process Update



New Applications Received Over the Past Two Weeks

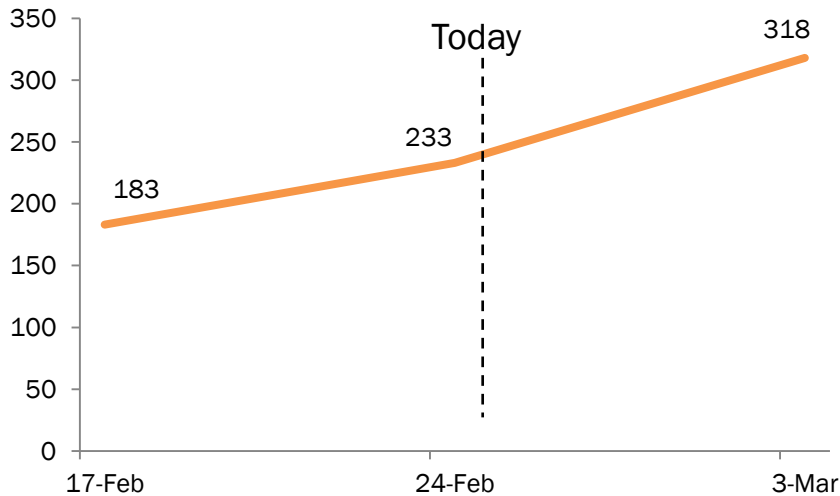


Remaining Applications To Be Processed: 54K

Since the last Board meeting, we enrolled 15K residents into transitional coverage and an additional 6K residents will be enrolled the week of 3/3, which will bring our total of newly covered residents to 21K since our last Board meeting. Over the past two week, we have also received 17K new applications, bringing our current backlog total to 54K.

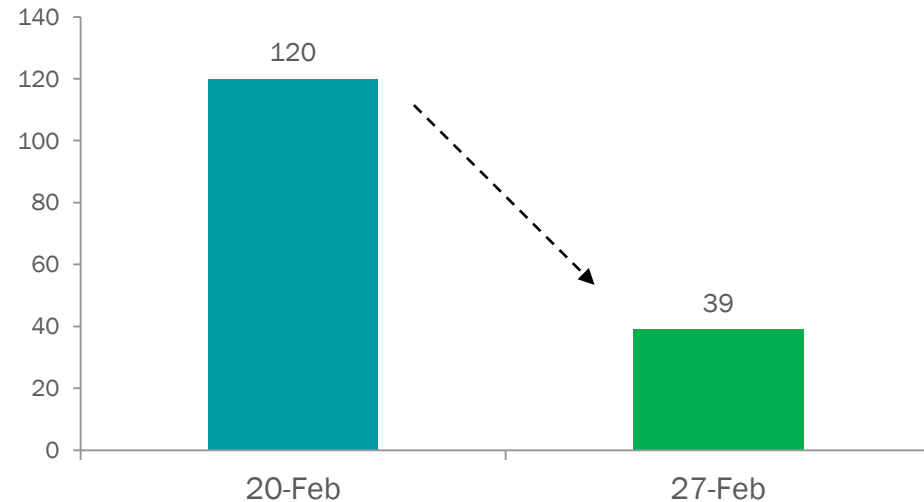
# Operations Progress

## Optum Data Entry Personnel Ramp



Optum continues to aggressively add data entry personnel. The total universe of trained agents will eclipse 300 employees by mid-week next week.

## Improved Efficiency From New Data Entry Tool (Minutes)



We have successfully implemented a new data entry tool that dramatically reduces the average time to enter paper applications. We continue to test the stability of the tool.

# Consumer Experience Update



## Types of Escalations

- Urgent Coverage
- Application Status and Eligibility
- Payment Suspense
- Other

## Observations of Current Escalation Process

- Long wait times resulting in caller disconnects drive escalations to other entry points
  - February MTD Abandon Rate:
    - 33% for MassHealth (eligibility support group)
    - 16% for the Connector
- Call was answered but no solution available or resolution was not acceptable
  - Certain Health Connector support teams unable access the appropriate systems to resolve consumer's issue
- Consumer inquiries to elected official, government representative, or directly to MA state exchange leadership remains high and steady through the enrollment season
  - Volume per week: Mass Health = ~150, Connector = ~150
- Disparate tools with limited functionality and differing processes across agencies
  - Lack of cross communication and enterprise tracking allows for escalation duplicates, slower resolution times and rework



# Consumer Experience Update

## Opportunities

## Actions and Recommendations

### Increase Agent Empowerment:

Provide additional tools for agents to solve caller issues the first time they call.



- Requesting enrollment tool access for Health Connector staff that allows “location” of application to be determined
- 20 agents recently approved for access to application system (MMIS)

### Deploy Common Tool:

Design and deploy a centralized tool to be utilized to monitor and track all incidents from intake to resolution.



- Joint development session scheduled for week of March 3<sup>rd</sup> to build system requirements and pricing estimate. Opportunity to deploy Optum “off the shelf” tool

### Increase Resources and Refine Processes:

Augment staff at the Health Connector and MassHealth locations with Optum resources to execute and manage the process.



- 7 Optum FTE assigned for escalation handling (assess need for more)
- Integrate Health Connector and MassHealth processes for consistent handling
- Create feedback loop for consumer notification

### Improve Consumer Experience:

Increasing call center staff to reduce wait times and abandoned calls, which could ultimately turn into an escalation.



- Add new prompt that will route calls to new agents for handling of “Where’s my application” calls
- Training underway in Health Connector and MassHealth call centers for new hires as well as introducing De-Escalation materials for existing agents

# Website Infrastructure

- Implemented two new tools to monitor application performance and availability
- Added physical capacity to alleviate memory constraints and initiated capacity-planning process
- Installed additional physical server for performance testing
- Implemented IT Service Management Processes to manage:
  - Incident Management
  - Change Management
  - Problem Management
- Implemented iMOCC operational structure
- Identified and addressing system storage concerns

# Update on Commonwealth Care Extension



- At the last Board meeting, we announced CMS authorization to extend coverage for the Commonwealth Care and former MSP population through June 30, 2014
- Since then, we have broadly communicated this extension to the market:
  - Email blast to Navigators, Certified Application Counselors and the Massachusetts Health Care Training Forum listserv (13,000+ recipients) – 2/14
  - Presentation at the monthly MassHealth advocates meeting – 2/14
  - Update provided with information for members on Health Connector microsite ([www.bettermahealthconnector.org/updates](http://www.bettermahealthconnector.org/updates)) – 2/14
  - Social media blast (twitter, facebook, etc.) – 2/18
  - Legislative briefing for constituent services staff – 2/19
  - Mailings to members – slated for beginning of March
- To date, we have also met with each participating MCO and are working closely with them to effectuate this extension
  - More details to be reported at March 13 Board meeting

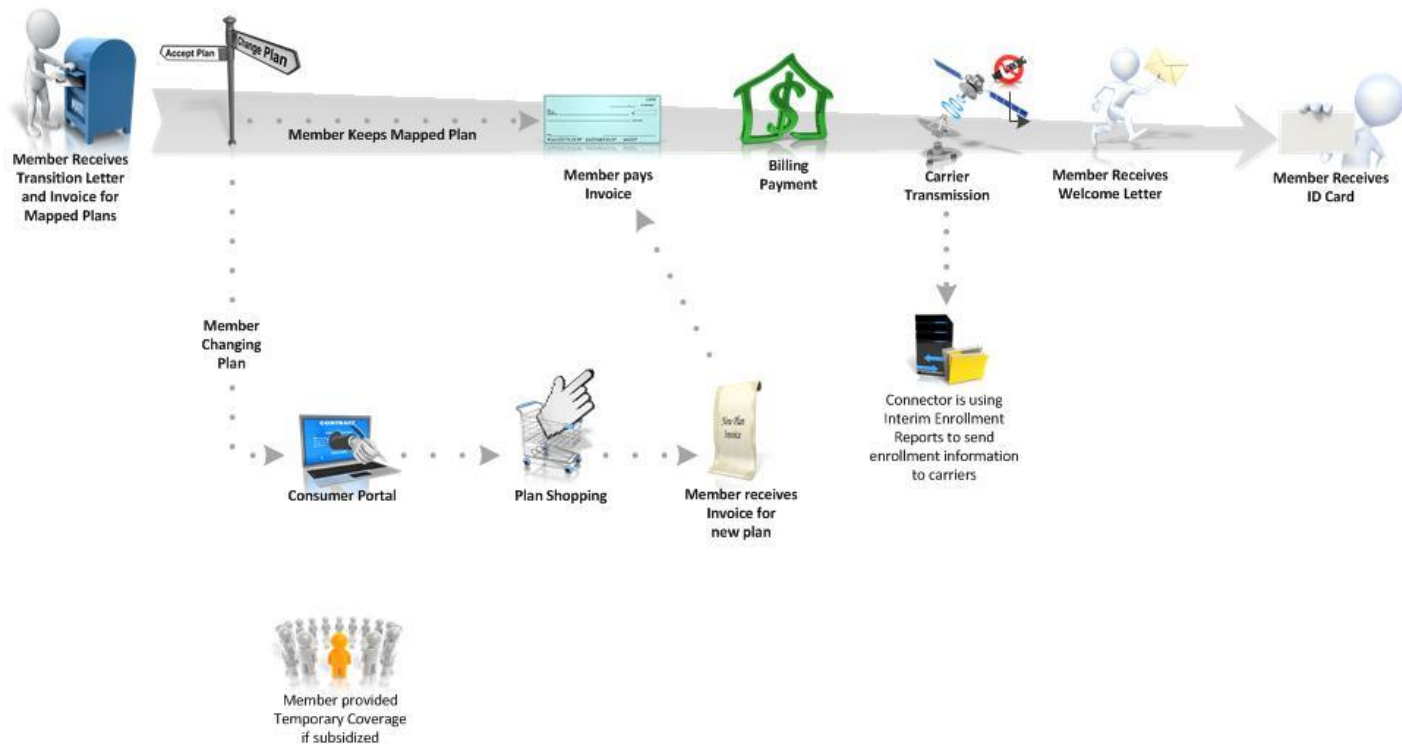
# Update on Transitional Coverage



- At the last Board meeting, we also announced CMS authorization to extend the transitional coverage program through June 30, 2014
- We similarly – in partnership with MassHealth – communicated that information to the broader stakeholder community (again via email, presentations, etc.)
- An update for providers was also posted on MassHealth’s website (<http://www.mass.gov/eohhs/gov/newsroom/masshealth/providers/>)
- For individuals enrolled effective February 1, mailings were sent out that included information about the availability of this program through June 30 or when we send them a final eligibility determination – whichever is sooner
- We are also working on a second mailing for individuals that were enrolled effective January 1 to similarly communicate the updated information – slated for mailing the beginning of March
- More information about the transitional coverage program (including information about benefits and providers) is available on our microsite (<http://bettermahealthconnector.org/temporary-coverage-information-and-resources/>)

# Update on Commonwealth Choice “Fast Path”

- Since our last Board meeting, we have launched the Commonwealth Choice “Fast Path”
- As a reminder, the Fast Path provides members with an option for enrolling in a QHP that their current carrier identified as most closely resembling their Commonwealth Choice plan



# Update on Commonwealth Choice “Fast Path” (cont’d)



- We mailed packets to 22,096 Commonwealth Choice subscribers regarding their enrollment in individual or family coverage (totaling 32,455 members)
- Recipients included members with plan end-dates ranging from 12/31/13 to 3/31/14 who had not yet enrolled in a new plan through us
- Members were given two different options for enrolling in a new health plan—
  - Fast Path to coverage
    - Member enrolls in new plan, specified in their mailing, by paying their first premium bill
    - Fast Path plan was suggested by members’ current carriers as the most similar 2.0 QHP available
  - Apply and enroll through [MAhealthconnector.org](http://MAhealthconnector.org)
    - Members who do not want to enroll in Fast Path plan selection are advised to go to website to apply
    - Members were encouraged to apply for a subsidized plan if they are interested in getting help paying for coverage

# Update on Commonwealth Choice “Fast Path” (cont’d)



- A generic version of the mailing is being translated into Spanish and will be available on our website
  - Language preferences are not recorded for Commonwealth Choice members, but a babel card is always included
- A follow-up email will be sent to members on March 3, rounding out a number of prior communications to this population describing the need to re-enroll, the potential for accessing subsidies and the opportunity to shop and compare plans:
  - 90-day termination notice (mentioned subsidies)
  - Open Enrollment packet (mentioned subsidies)
  - Reminder postcards
  - Fast Path letter (mentioned subsidies)
  - Reminder emails
  - Outbound calls (first question helped applicant determine whether or not they might be eligible for subsidies)

# Update on 834 Project

- At the last Board meeting, we also obtained the Board's authorization to transition development of the 834 file transfer functionality from the CGI project to Dell
- As part of that presentation, the Board requested that we provide an update today
- Overall we are on track, but we still need to complete testing with all remaining carriers
  - Completed requirements and design, test case development and internal quality assurance review as of 2/21
  - We began testing with our first carrier on 2/17. Additionally, we began testing with remaining carriers, both standard and non-standard, on 2/26, five days ahead of schedule
- We are targeting conversion from the current interim enrollment process to the automated 834s sometime after the end of Open Enrollment
  - Rollout for production is slated for end of March, but given the timing, it is risky to coincide the 4/1 member transition with the conversion from the interim enrollment reports (IERs) to the 834, so carrier preference is to continue to use the IER through the end of open enrollment and convert to 834s thereafter



# Strategic Roadmap

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## Near-Term

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## Long-Term

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- Stay the Course
- Partial Rebuild of Components
- Leverage State or Federal Exchange Functionality
- Start Over

# Next Steps

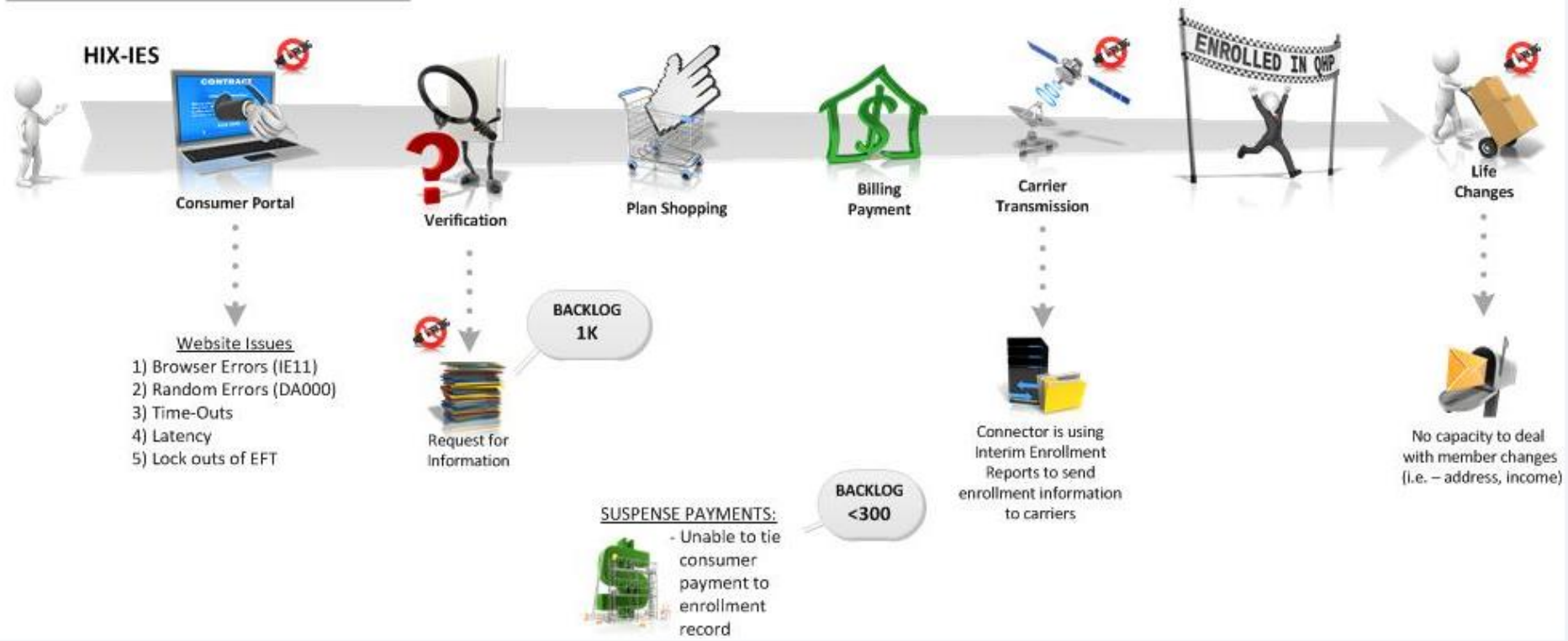
- At the March 13, 2014 Board meeting, we will provide the Board with details on the Commonwealth Care coverage extension plan and an update on the Optum engagement
- Refine short-term activities needed for open enrollment and coverage transitions
- Continue progress on operational improvements
- Continue development of strategic roadmap toward a fully-functional HIX

# Appendix

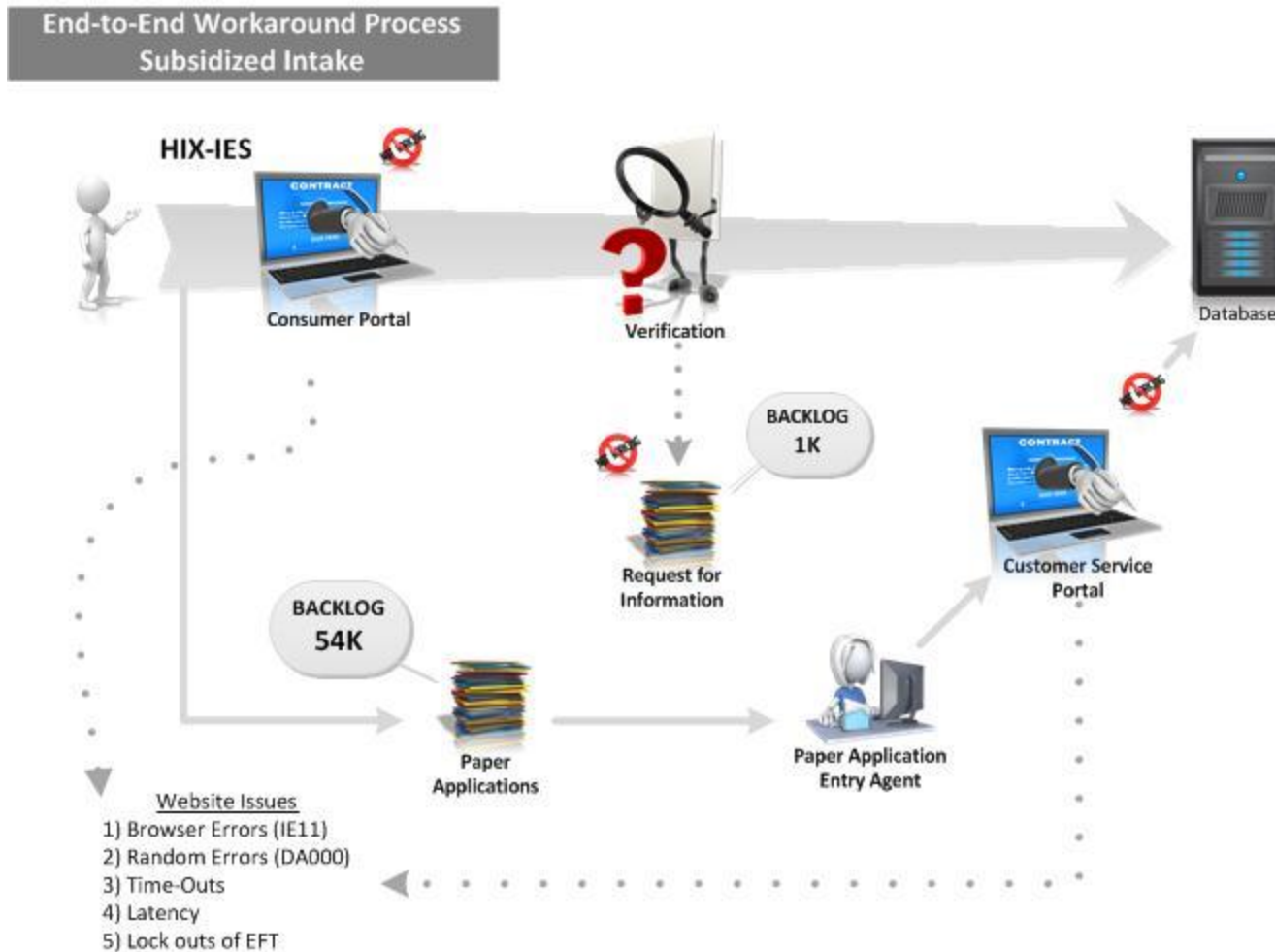


# End-to-End Workaround Process Unsubsidized

## End-to-End Workaround Process Unsubsidized



# End-to-End Workaround Process Subsidized (Intake)



# End-to-End Workaround Process Subsidized

