Health Connector Open Enrollment
Operational Readiness: Walk-in Centers (VOTE)

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Open Enrollment Operational Readiness: Walk-In Centers

Today we are coming to the Board to seek a vote to relaunch temporary walk-in centers for the 2017 Open Enrollment period.

- Last year, we launched a pilot initiative where we co-located Dell resources with Community Health Centers (CHCs) in areas throughout the state with among the largest concentrations of Health Connector members and uninsured individuals.

- Through this initiative, we were able to support staff at these CHCs that already provide enrollment assistance to our members by offering additional back-office customer service to give our members a true one-stop shopping, in-person experience.

- We served upwards of 7,000 individuals at these locations during the 2016 Open Enrollment, with high levels of customer satisfaction and positive feedback from participating CHCs.

- For the 2017 Open Enrollment period, we would like to again operate these “pop-up” sites, and are asking the Board today to vote to approve a work order with Dell Marketing, LLP (Dell), to operate these temporary walk-in centers for an amount not to exceed $290,811.
Walk-In Centers: Background

In addition to three permanent walk-in centers, the Health Connector operated three pop-up sites during Open Enrollment 2016, serving nearly 15,000 customers overall with an average customer satisfaction rate of 99%.

- In addition to our year-round sites in Boston, Worcester and Springfield, we partnered with three CHCs to open temporary sites in Brockton, Fall River and Lowell, offering a full range of customer service support services.

- Our presence at the participating CHCs meant that we were able to handle billing questions, process payments, process verifications and identity-proofing, unlock accounts, and otherwise handle all manner of questions or requests that can only be performed by a call center representative with access to our back-office systems.

- These capabilities complemented the support already available at CHCs, where financial counselors are on staff and trained to help individuals apply for coverage but do not have the requisite tools or access to our systems to fully service a member.

- We also received great feedback from our partners at the health centers, noting that our presence was a “really great fit” and a “seamless integration into [their] operations” – Julie Almond, CEO, HealthFirst Family Care Center, Inc.

![OPEN ENROLLMENT 2016: REASONS FOR WALK-IN](chart.png)

- Billing & Payments: 34%
- Applications: 23%
- Accounts Changes: 9%
- Document Processing & Verification: 10%
- Plan Selection & Shopping Questions: 12%
- Notices/Others: 12%
The majority of walk-in center visitors were or became Health Connector members.

Moreover, we were able to successfully transition many of the unenrolled or eligible-but-unenrolled individuals that visited us into coverage by the end of Open Enrollment.
2017 Open Enrollment Walk-In Center Approach

The 2016 walk-in center approach proved to be a valuable component of the Health Connector’s customer service strategy and will play a vital role for the 2017 Open Enrollment.

- For 2017, we would like to re-open at least three pop-up sites, located again in areas of the Commonwealth where the greatest concentration of our members, and the uninsured, live and are not otherwise well served by our permanent centers or our other assister partners.
- We will once again partner with Brockton Neighborhood Health Center and HealthFirst Family Care Center of Fall River.
- We are currently working to confirm a site in the Greater Lowell/Merrimack Valley region and are also exploring other expansion opportunities across the state, based on need.
- As with last year, our goal is to recruit multi-lingual staff that are best positioned to support the individuals that reside in the communities where the health center is located.
- Based on experience last year, we expect to support each site with a supervisor and at least two customer service agents, coordinated by a single manager that will oversee activity at all of the temporary sites.
- Hours of operation will align with the CHCs so that we are best able to support their on-site application and enrollment assistance staff.
In order to implement temporary walk-in centers during the 2017 Open Enrollment period, we are asking the Board to authorize a work order with Dell in an amount not-to-exceed $290,811. As with last year, we hope to come in under that ceiling, and if we are able to we will either extend operations for additional time after Open Enrollment or add additional sites during Open Enrollment.

The costs roughly break down to $24K per site, per month for a period of four months. The scope of work includes training for staff, equipment, technical infrastructure and support, security, travel for staff to the sites, and up to 12 customer service representatives (with assumed attrition), three supervisors and one senior manager.

The budget related to this work order is accounted for within the Fiscal Year 2017 Health Connector administrative budget, which will come before the Board for consideration at the July 14, 2016 meeting. Payment for work under this work order will occur only if funding for it is approved in the budget by the Board.
Health Connector staff recommends authorizing the Executive Director to enter into a work order with Dell Marketing, LLP to implement temporary walk-in centers, on the terms set out in this presentation.