

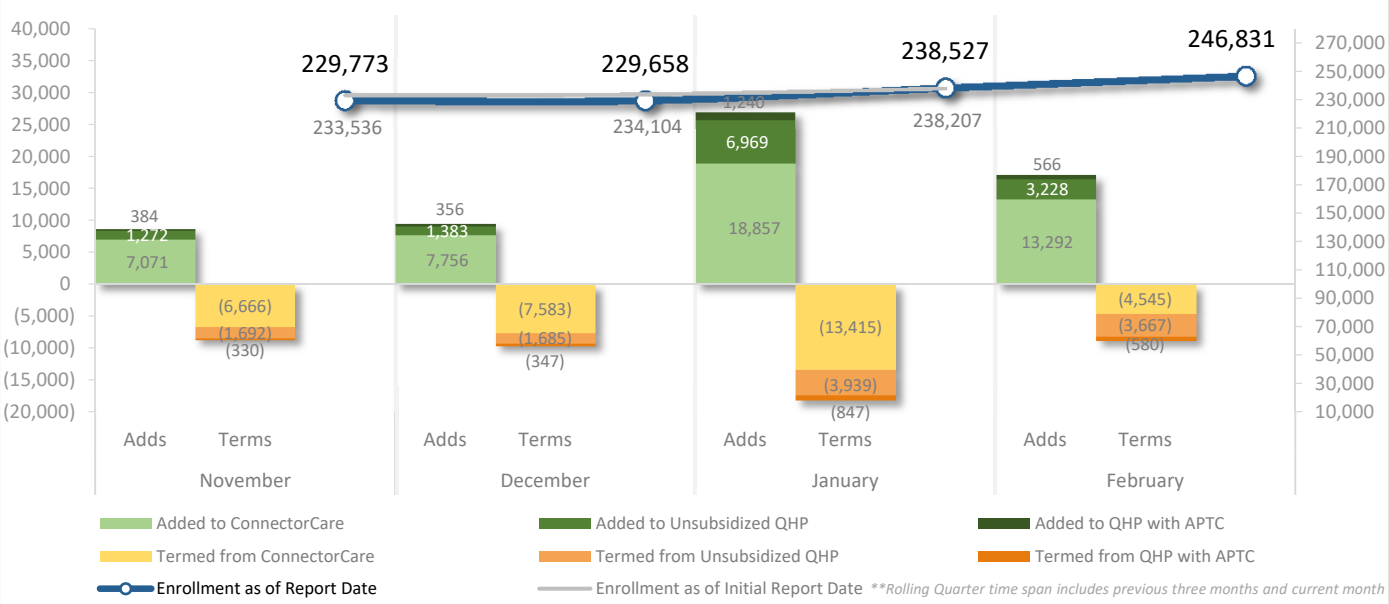
February 3, 2017*

CCA Board Report Metrics



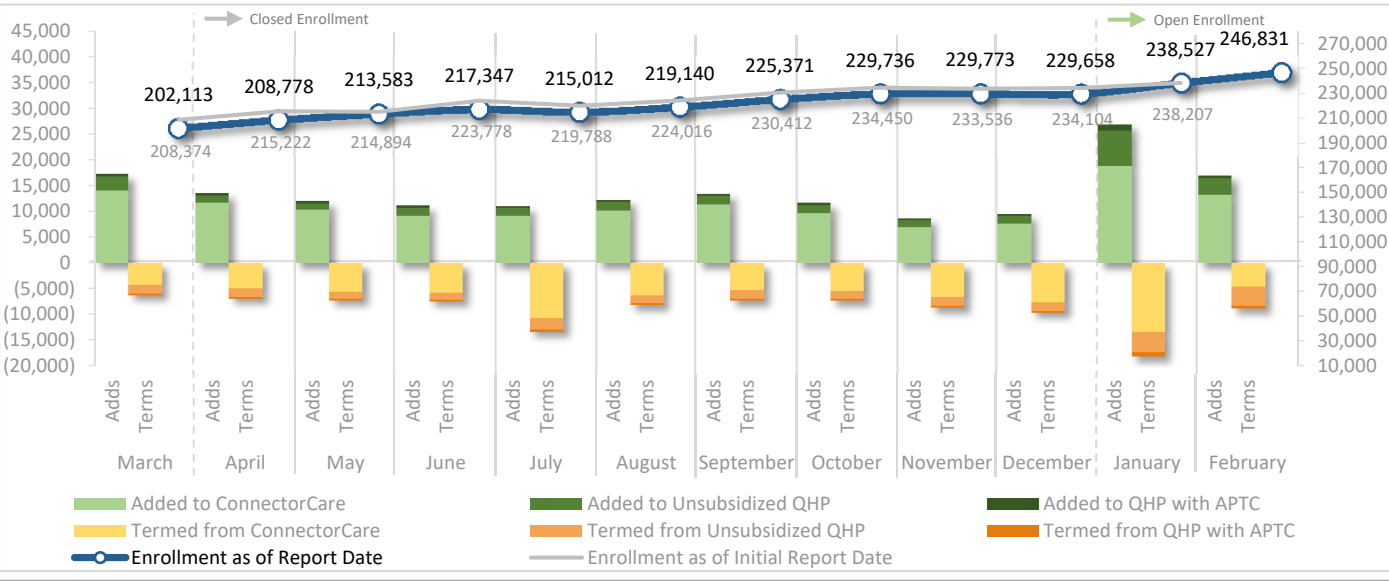
*Reporting period through February 1, 2017
Source: Dell Financial Management System (FMS) All Spans Extract – February 2, 2017

Total Non-Group Medical Enrollment: Current Rolling Quarter**



- “Adds” is defined as the total number of members who begin coverage for that month and were not enrolled in coverage during the prior month as of the report date. Movement between program types is not considered an “Add”.
- “Terms” is defined as the total number of members who are no longer covered for that month and were enrolled in coverage during the prior month as of the report date. Movement between program types is not considered a “Term”.
- The enrollment lines show the total number of members who have coverage for that month.
 - “Enrollment as of Report Date” (blue line) is defined as the total number of members with coverage in that month as of the current report date and reflects retroactive adds and terms in the coverage month they take effect. These enrollment counts are dynamic.
 - “Enrollment as of Initial Report Date” (gray line) is defined as the total number of members who were enrolled in coverage as originally reported in the CCA Board Report Metrics published for that month, excluding retroactivity. These enrollment counts remain static month to month to visualize the effect of retroactivity.

Total Non-Group Medical Enrollment



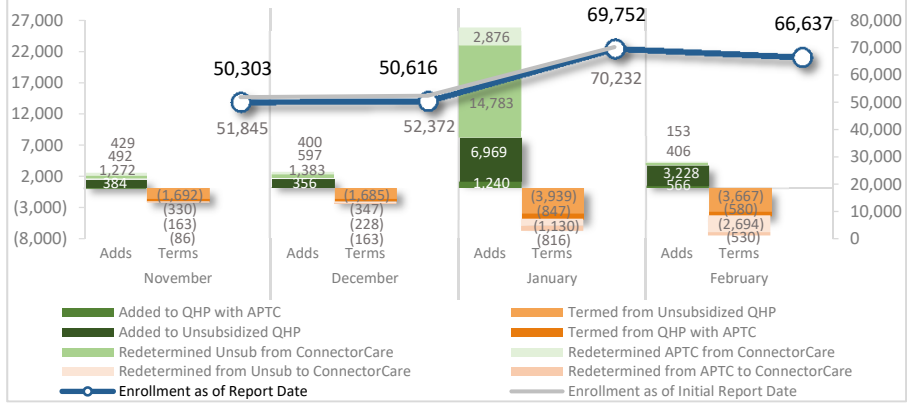
This report was reformatted in August 2016 with an updated methodology that tracks changes in enrollment (i.e., adds and terms) based on the member’s benefit start date. Previous reports tracked changes in enrollment as of the coverage month they took effect. For example, if an unsubsidized member began coverage in January and then failed to pay her premium for February and March coverage, in April she will be retroactively terminated as of February 1 and she will be reported as a term in the month of February; previously, she would have been reported as a term in April.

CCA Board Report Metrics



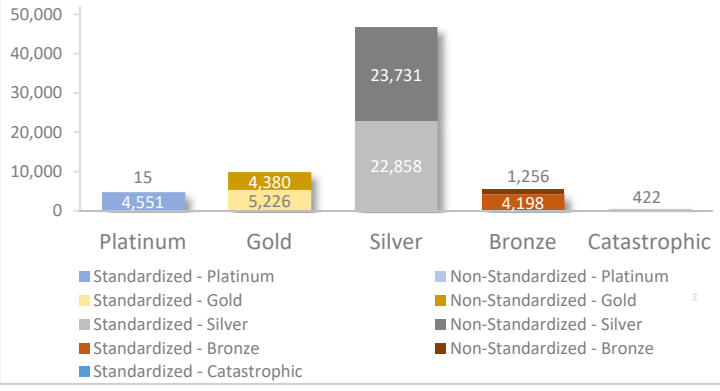
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Source: Dell Financial Management System (FMS) All Spans Extract – February 2, 2017

Non-Group Medical Enrollment – Unsubsidized QHP and APTC

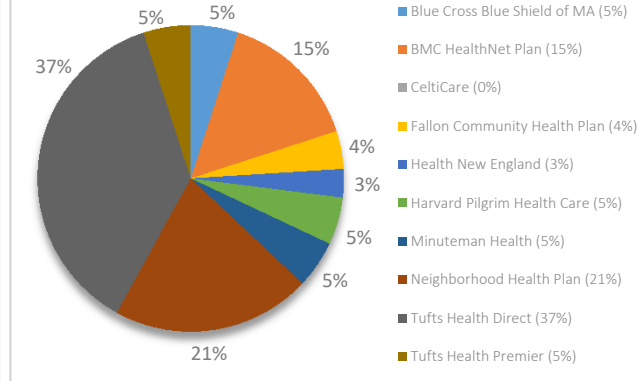


- 66,637 individuals are enrolled in non-group medical Unsubsidized QHP (56,516) or QHP with APTC (10,121) plans.
- 559 January ConnectorCare members lost ConnectorCare eligibility and are now enrolled in February Unsubsidized QHP or APTC coverage. Conversely, 3,224 January Unsubsidized/APTC members are now eligible and enrolled in February ConnectorCare coverage.
- 73% of members are enrolled in either Neighborhood Health Plan (21%), Tufts Health Direct (37%), or BMC HealthNet Plan (15%), with all other carriers each representing less than 10% of the enrolled population.

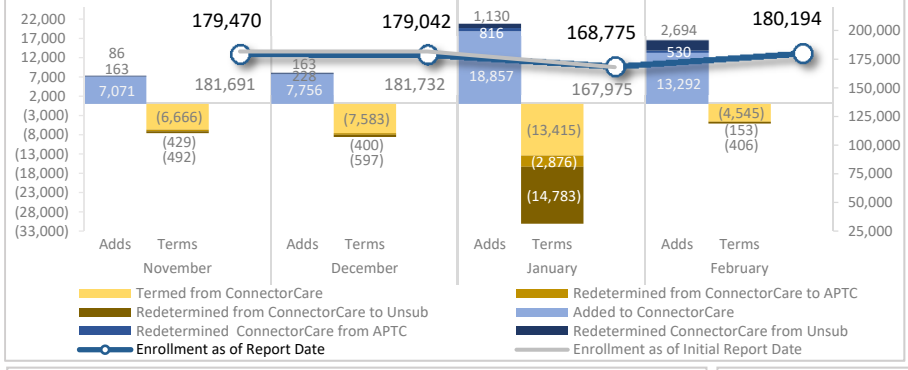
Enrolled Members by Metallic Tier and Standardization



Enrolled Members by Carrier

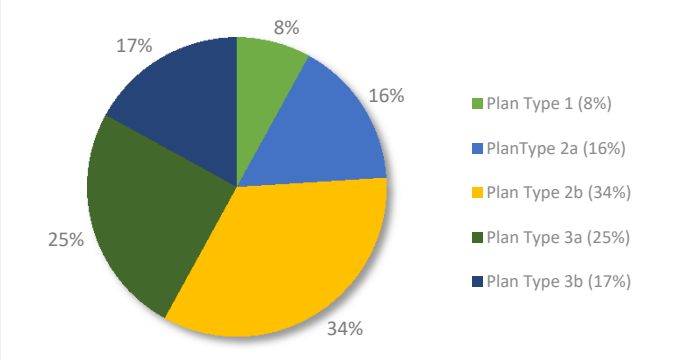


Non-Group Medical Enrollment – ConnectorCare

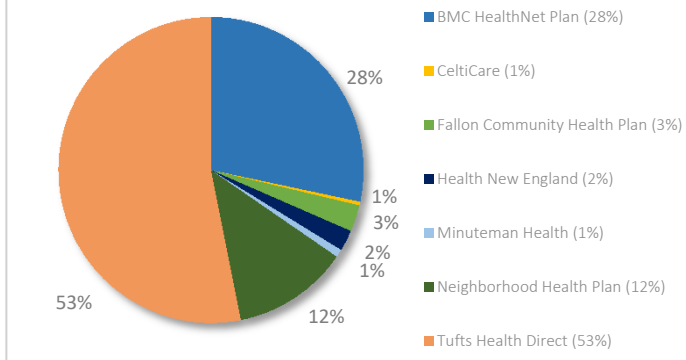


- Non-group ConnectorCare enrollment increased by 11,419 (6.8%) between January and February.
- 31% of February ConnectorCare adds applied for coverage through the HIX for the first time during 2017 OE.
- 2016 ConnectorCare members who lost ConnectorCare eligibility for January coverage decreased from 18,214 to 17,659 as the result of eligibility updates.
- BMC HealthNet Plan's ConnectorCare market share increased by 2% between January and February and Neighborhood Health Plan's market share decreased by 2% during this time.

Enrolled Members by Plan Type



Enrolled Members by Carrier



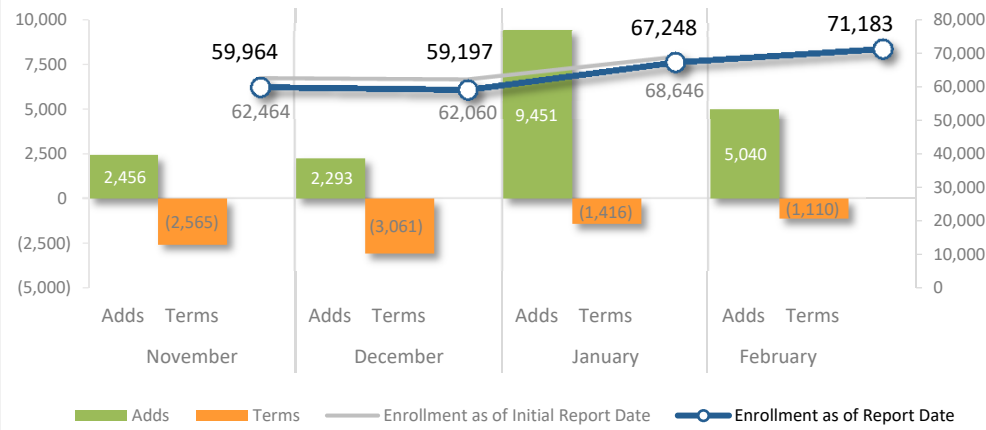
February 3, 2017*

CCA Board Report Metrics



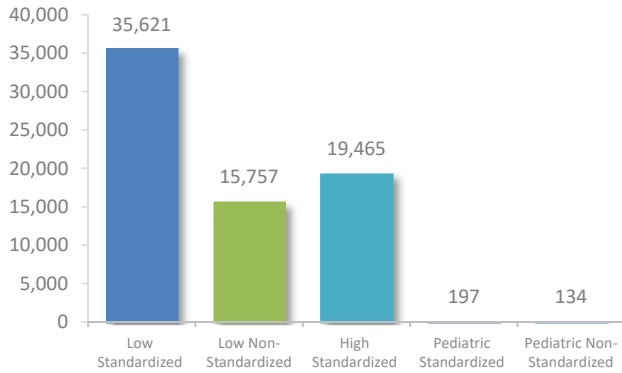
*Reporting period through February 1, 2017
Source: Dell Financial Management System (FMS) All Spans Extract – February 2, 2017

Non-Group Dental Enrollment

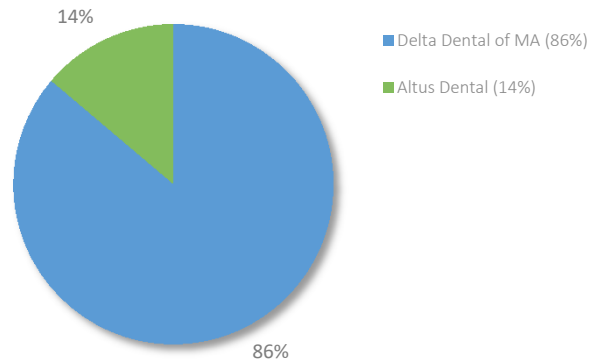


- 71,183 individuals are enrolled in non-group dental plans.
- 50% of enrolled dental members have selected Low Standardized plans.
- 86% of dental members are enrolled in Delta Dental of Massachusetts plans, with Altus Dental representing the remaining enrolled population.

Enrollment by Benefit Configuration



Enrolled Members by Carrier



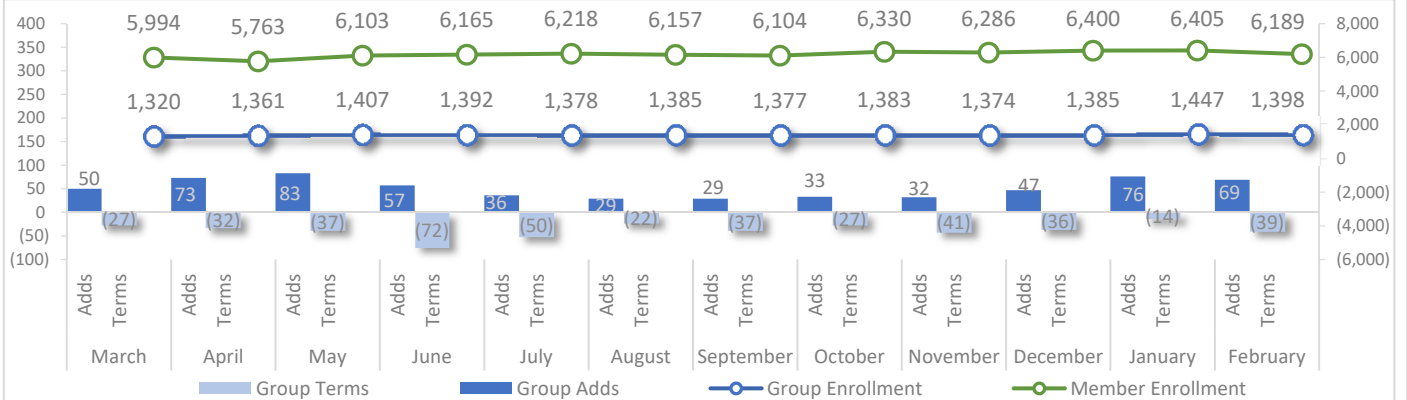
February 3, 2017*

CCA Board Report Metrics

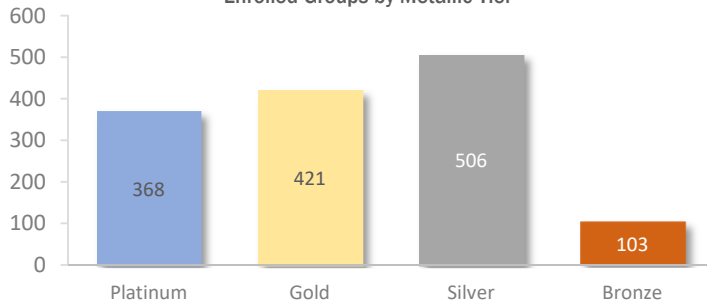


*Reporting period through February 1, 2017
Sources: SBSB SHOP Database – February 1, 2017; Dell Financial Management System (FMS) – February 1, 2017

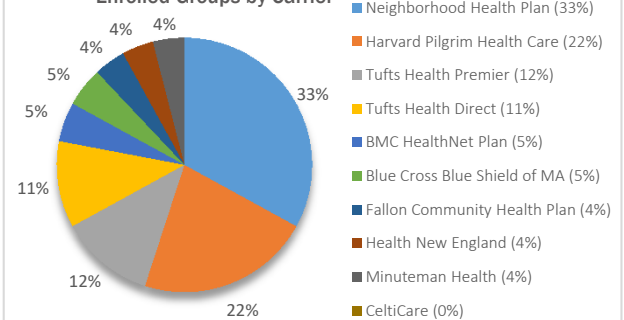
Small Group Medical Enrollment**



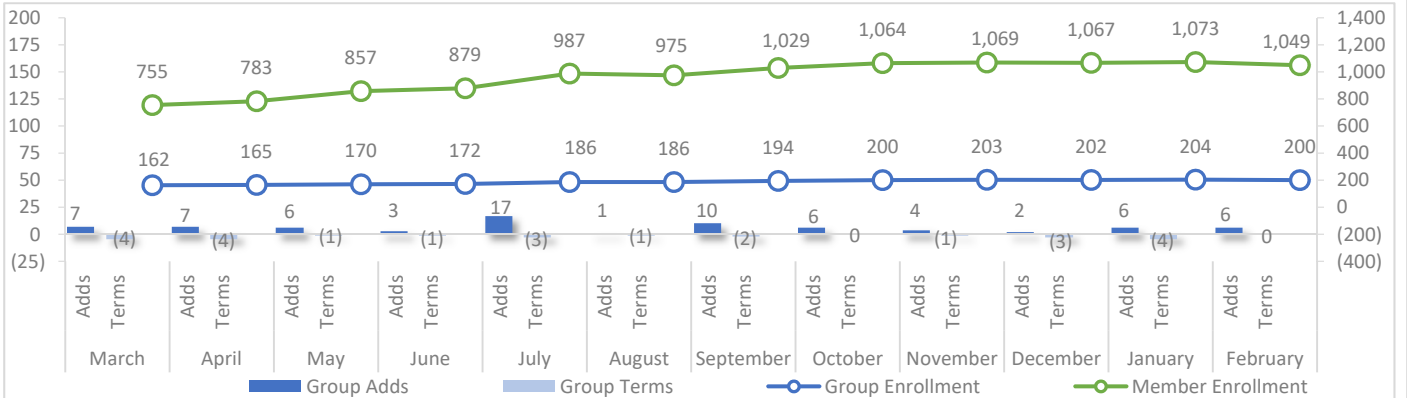
Enrolled Groups by Metallic Tier



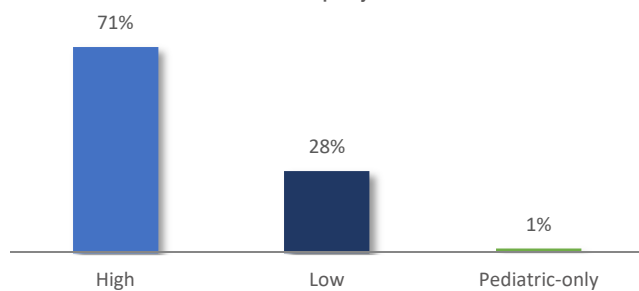
Enrolled Groups by Carrier



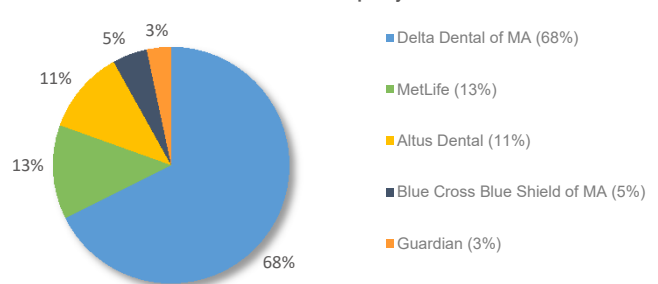
Small Group Dental Enrollment**



Enrolled Groups by Metallic Tier



Enrolled Groups by Carrier



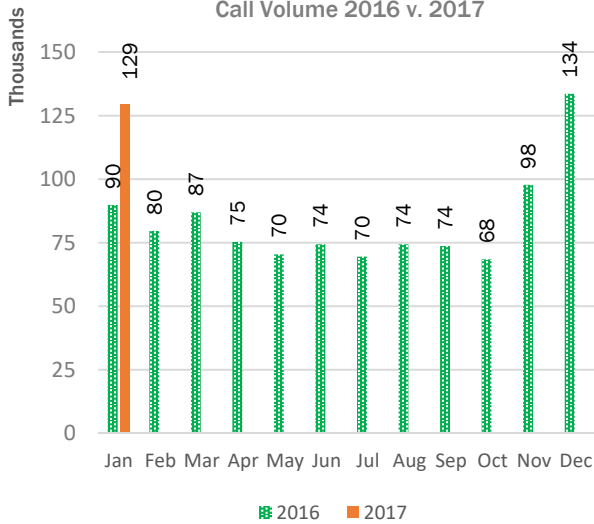
** February counts do not include BCBS membership and reference a subset of data resulting in preliminary enrollment counts
** Group adds and terms represent a point-in-time snapshot of small group membership and may not include membership retroactivity



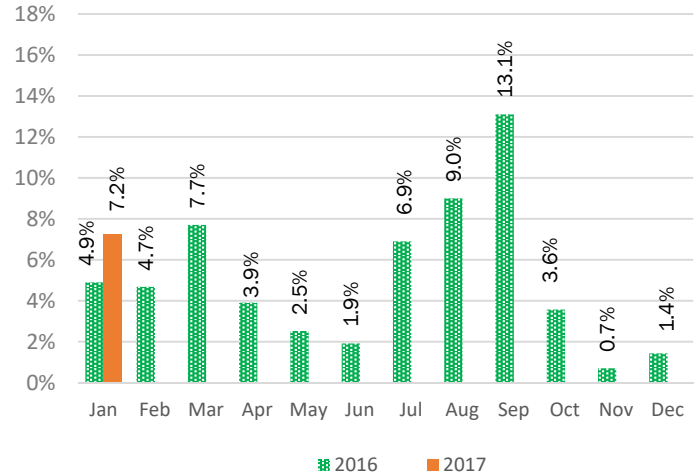
*Reporting period through January 31, 2017
Source: NTT Data

Customer Experience

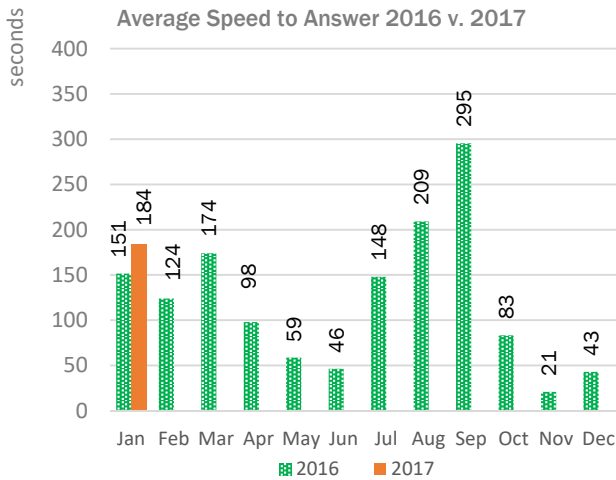
Call Volume 2016 v. 2017



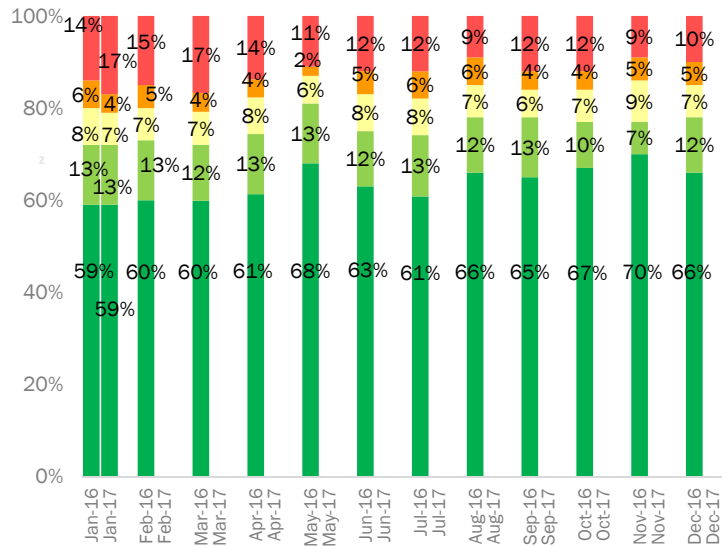
Abandonment Rate 2016 v. 2017



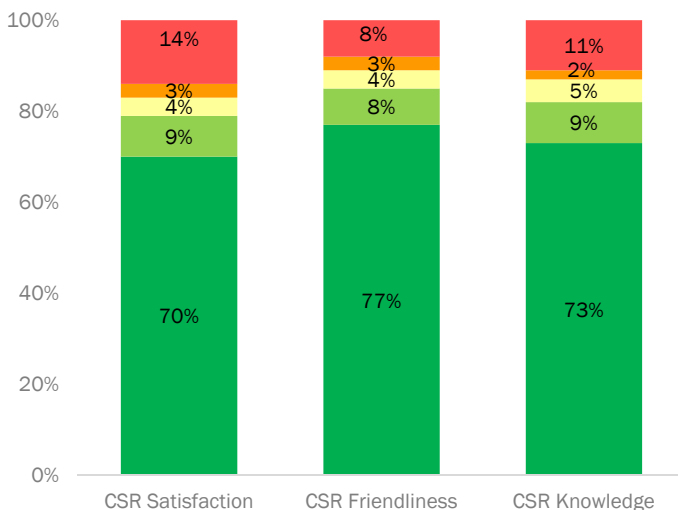
Average Speed to Answer 2016 v. 2017



Overall Customer Satisfaction 2016 v. 2017



Customer Satisfaction Score - January 2017



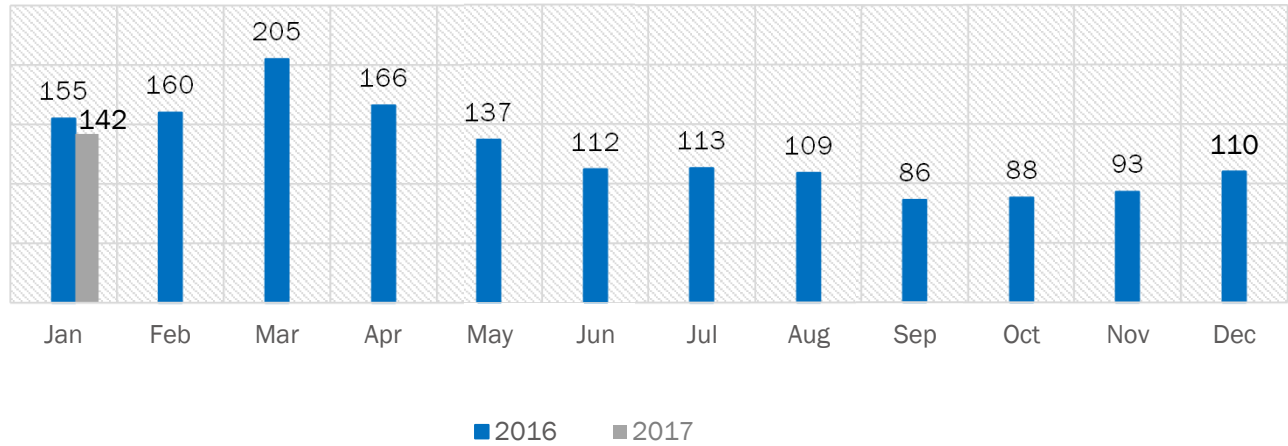
Questions

- How satisfied are you with how our customer service representative resolved your issue today?
- How friendly and courteous our customer service representative was today?
- How satisfied are you with the knowledge of the customer service representative you spoke with today?
- How satisfied are you with the overall service provided to you by the Health Connector today?

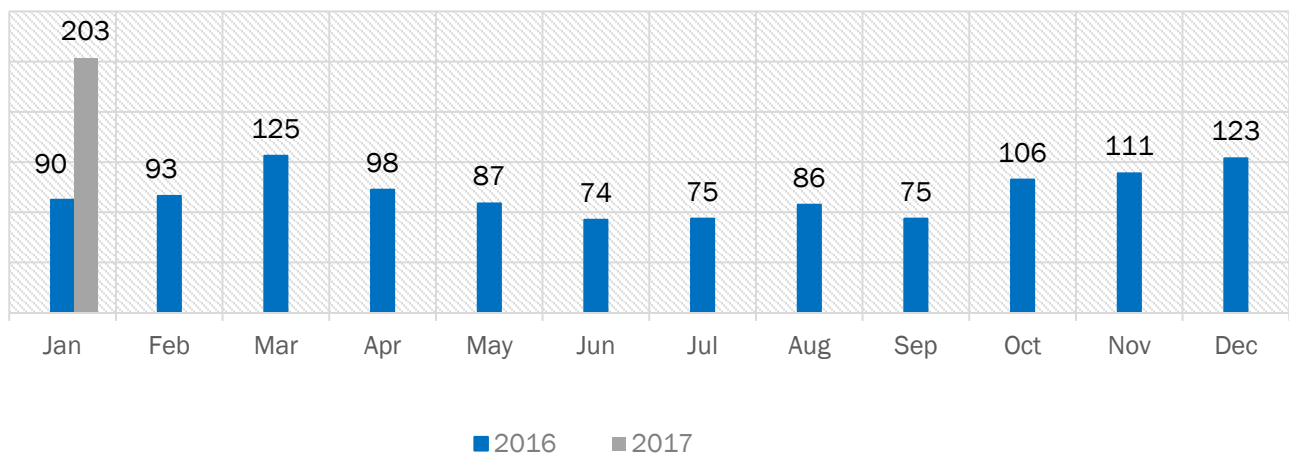


Customer Experience

Number of Urgent Services Cases Received (Monthly)



Number of Ombudsman Cases Received (Monthly)



Inventory Aging

