



Open Enrollment Continues Through January 23, 2018

December 23

Last day to enroll for January coverage

January 23

Last day to enroll for February
coverage

Open Enrollment Operational Status

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Board of Directors Meeting, December 14, 2017

Overview



- During 2017 the Health Connector and its HIX vendor partners worked on increased stabilization of the system to:
 - Decrease manual workarounds and improve turnaround time associated with member record processing
 - Improve controls, throughput time and processes associated with batch runs
- Two additional releases (R12 on August 15 and R13 on October 25) were installed with functionality needed for Open Enrollment
 - Updates to SERFF templates to support the required storage of plan information
 - Closeout of high-impact defects
- Planning for Service Centers started in June
 - Included expansion to ~360 call center FTEs needed due to increase in membership
 - Revamp of training to have more hands on practice time and a fifth week of “buddy” work
 - 17 new hire classes sourced and trained between August 28th and November 20th

Overview

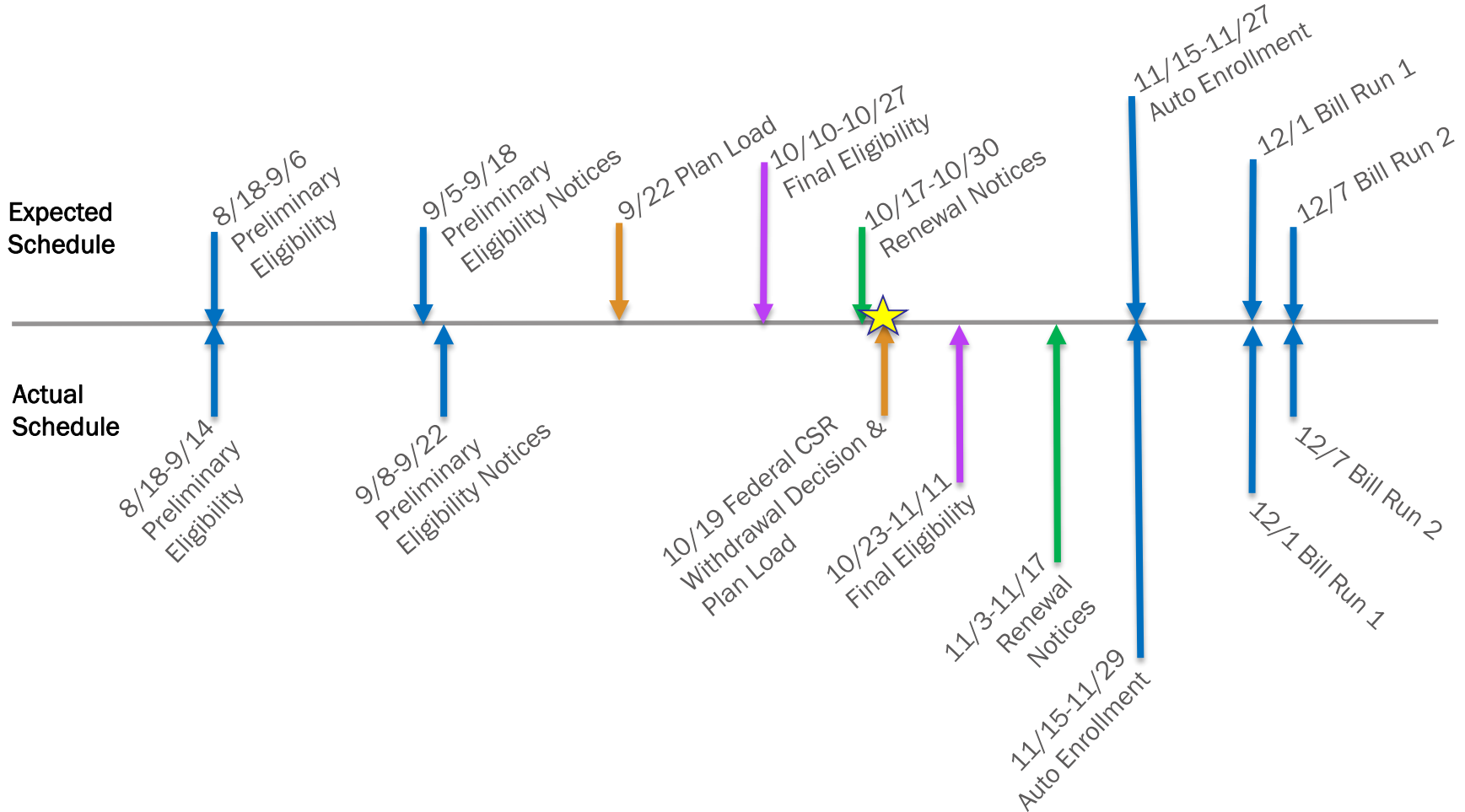


- Over the summer, the Connector, working with the Division of Insurance and carriers, developed a set of operational and system contingency plans in the event access to federal CSRs were disrupted either before, during or after Open Enrollment
- These contingency plans were invoked in October
- As a result, plan loading (with the higher rates) and notice mailings had to be delayed, but we have since “caught up” and issued bills for December on our usual time-frame
- Members are responding to our communications and we are seeing increased requests for shopping and application help

Open Enrollment 2018 Expected vs. Actual Timeline



August	September	October	November	December
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Final Eligibility



Due to Cost-Sharing Reduction uncertainty, we moved our final eligibility start date from September 22 to October 19.

- During preliminary eligibility (August 18 – September 14), we processed 424,000 applications for 2018 eligibility
- September 22 was the originally scheduled date to plan load final rates; however, due to Cost-Sharing Reduction uncertainty, the Health Connector worked closely with the carriers to develop and test two sets of rates, one of which would be loaded into production
- While waiting for final rate approval, the Health Connector and its vendor partners put together a new final eligibility batch schedule timeline, taking into account the start of Open Enrollment, dates when members would receive notices, and ongoing billing activities
- Upon receiving the go-ahead to load rates on October 19, our final eligibility process began, starting with APTC calculation and plan mapping
- Between October 23 and November 11, the system finalized the preliminary eligibility determinations for those who did not come back to report any changes or those who did not self-finalize

Auto Enrollment

On November 29, we completed auto enrollment, our last major business process for member redeterminations & renewals.

- We processed 198,740 auto enrollments during 2018 Open Enrollment, passively enrolling 218,175 members into 2018 coverage who did not actively shop for a new plan

What Worked Well:

Maintained the auto enrollment processing schedule as planned

Started auto enrollment a few days earlier this year in comparison to last year

Increased testing improved the number of auto enrollment transactions from 2,913/hour to 11,641/hour

System stabilization resulted in fewer (<1%) transaction failures requiring manual intervention

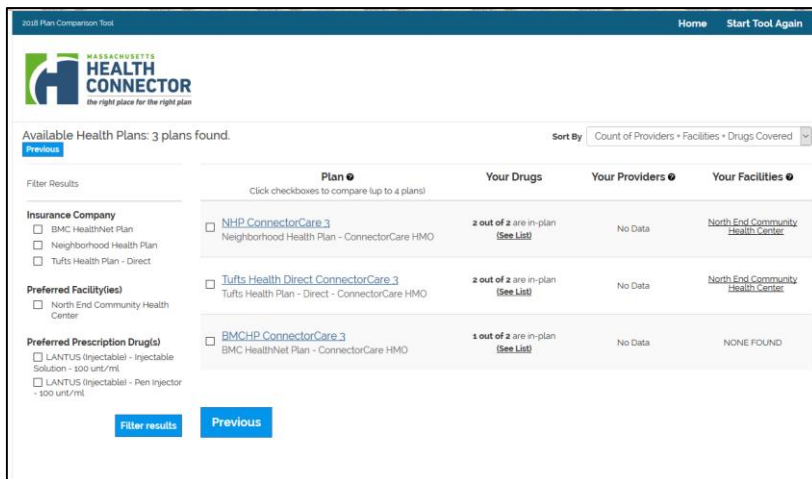
Lessons Learned:

Continue improving the speed of effectuations. While some processing times improved, effectuations into plan coverage were slower this year (56% slower) and we need to understand why

Develop additional testing scenarios to further reduce transaction failures requiring manual intervention

Online Performance and Tools

So far in 2018 Open Enrollment, system performance is meeting expectations and we are seeing extensive use of our web shopping tools.



2018 Plan Comparison Tool

Available Health Plans: 3 plans found.

Sort By: Count of Providers + Facilities + Drugs Covered

Plan	Your Drugs	Your Providers	Your Facilities
<input type="checkbox"/> NHP ConnectorCare 3 Neighborhood Health Plan - ConnectorCare HMO	2 out of 2 are in-plan (See List)	No Data	North End Community Health Center
<input type="checkbox"/> Tufts Health Direct ConnectorCare 3 Tufts Health Plan - Direct - ConnectorCare HMO	2 out of 2 are in-plan (See List)	No Data	North End Community Health Center
<input type="checkbox"/> BMCHP ConnectorCare 3 BMC HealthNet Plan - ConnectorCare HMO	1 out of 2 are in-plan (See List)	No Data	NONE FOUND

Filter Results

Insurance Company

- BMC HealthNet Plan
- Neighborhood Health Plan
- Tufts Health Plan - Direct

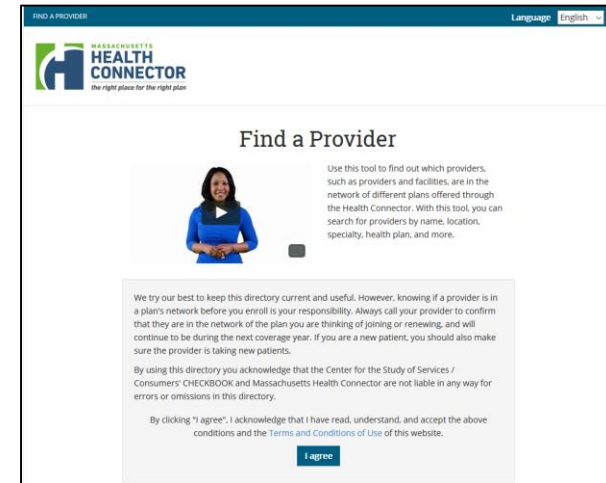
Preferred Facility(ies)

- North End Community Health Center

Preferred Prescription Drug(s)

- LANTUS (Injectable) - Injectable Solution - 100 unit/ml.
- LANTUS (Injectable) - Pen Injector - 100 unit/ml.

Filter results Previous



Find a Provider

Use this tool to find out which providers, such as providers and facilities, are in the network of different plans offered through the Health Connector. With this tool, you can search for providers by name, location, specialty, health plan, and more.

We try our best to keep this directory current and useful. However, knowing if a provider is in a plan's network before you enroll is your responsibility. Always call your provider to confirm that they are in the network of the plan you are thinking of joining or renewing, and will continue to be during the next coverage year. If you are a new patient, you should also make sure the provider is taking new patients.

By using this directory you acknowledge that the Center for the Study of Services / Consumers' CHECKBOOK and Massachusetts Health Connector are not liable in any way for errors or omissions in this directory.

By clicking "I agree", I acknowledge that I have read, understand, and accept the above conditions and the [Terms and Conditions of Use](#) of this website.

I agree

- During the month of November, 14,874 unique users searched for plans that cover their doctors & prescription drugs
- Users spend an average of 5.5 min/session

- Integrated provider search allows users to search within the shopping experience
- “See What You May Qualify For” tool was removed because it was not calculating APTCs correctly and was generating error messages. It is scheduled to be reinstated on December 15. There is no impact to program determinations within the application

Renewal Notice Activity



More than 200,000 renewal notices were sent to members over 15 days.

- 205,281 renewal notices were sent to members via mail or electronically
 - **Mail dates:** November 3 – November 17, currently mailing renewals for new December enrollees
 - Renewal notices were made available electronically to all members within 24 hours of production via the Payment Center implemented earlier this year

Production Issues and Resolutions

Barrier	Issue	Resolution
Delay in batch runs	Rate decisions caused notice production dates to move beyond November 1	Increased notice production capacity to deliver notices faster than last year
Slow notice production	Backend database issues and notice length led to slower than expected notice production in beginning of the schedule	Adjusted server capacity to handle more notices per hour; notice length will be addressed in OE19 planning
Defects	Defects related to premiums, service areas, and shopping groups found through production notice QC delayed batch runs – impacted <400 applications	Prioritized non-impacted groups and created exclusions for batch runs until fixes were implemented

Bill Run Testing and Improvements



Over 230,000 invoices were sent to members with premium amount due for January 2018 coverage.

- 230,425 invoices were sent to members via mail or electronically
- **December Bill Run Dates:**
 - December 1: 228,119 invoices generated
 - December 7: 2,306 invoices generated
- Invoices were made available electronically to all members via the Payment Center

Testing Efforts and Improvements

Testing Effort	Improvement in Testing
Testing in test environment	We increased the number of batches of invoices and quotes that were tested during pre-production. CCA testers were cross functionally selected.
Increased testing in production	We are increased testing efforts and production quality control volume to ensure all bills for new and renewing enrollments are 100% accurate and mailed as soon as possible.

Call Center Activity

The Call Center is capably handling higher volumes of customers seeking assistance during Open Enrollment.

- Through the month of November 2017, the call center has received 14% more calls as compared to November 2016, due to overall increase in membership
- Calls are taking longer in 2017, due to the nature of the calls (callers seeking assistance with updating applications and plan shopping), as well as the increase of new CSRs hired to support Open Enrollment
- While Call Center metrics have increased, they are still within SLA range

Call Center	SLA	2017	2016	% Increase
Calls Received	N/A	111,837	97,782	14%
Calls Answered	N/A	108,465	96,168	13%
Average Speed of Answer (sec)	60	72	21	343%
Abandonment Rate	< 3%	2.3%	.7%	329%
Average Handle Time (min)	N/A	16:27	13:21	23%

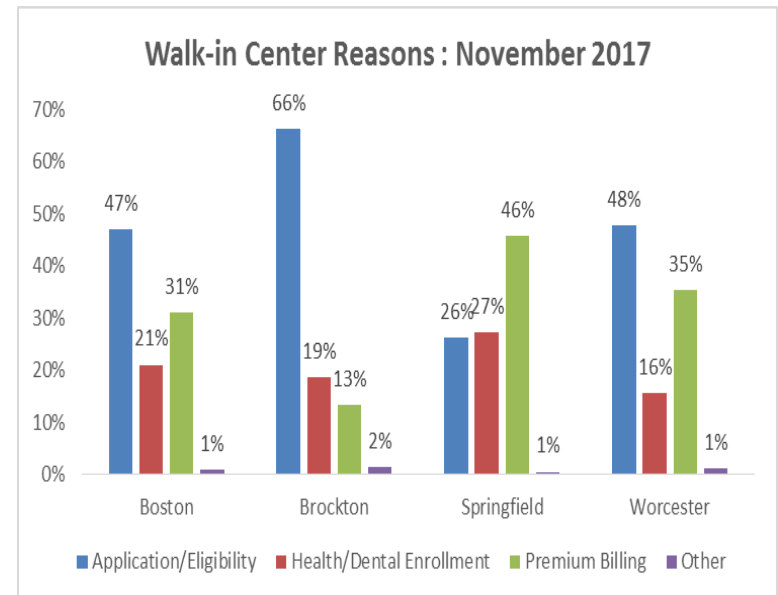
- Of total calls handled, application/eligibility calls have increased from 27% in November 2016 to 36% in November 2017
- Callers have cited our communications as a motivation for calling, but have also expressed concerns about how federal activity will impact their coverage for 2018 and beyond

Walk-in Center Activity

Centers have assisted 22% more customers during November 2017 than November 2016.

- Consistent year over year increase in foot traffic across all locations
- Reasons vary by site, but application/eligibility and premium billing were primary reasons for walk-in center visits

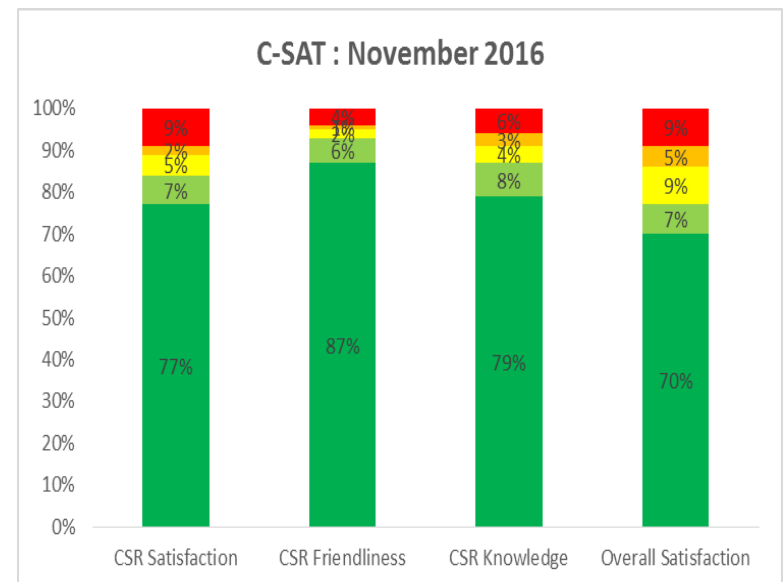
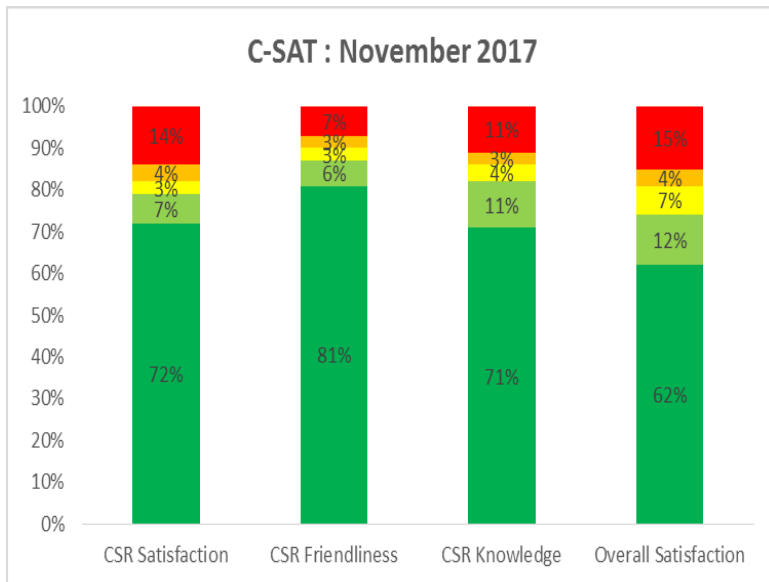
Walk-in Center	2017	2016	% Increase
Boston	2,938	2,025	45%
Brockton	715	734	-3%
Springfield	1,037	591	75%
Worcester	1,402	981	43%
Total	6,092	4,985	22%



Customer Satisfaction

74% Overall Customer Satisfaction for November 2017.

- Slight decrease in overall satisfaction for November 2017 (74%) compared to November 2016 (77%); this may be due to increase in premiums, but further review is needed in order to identify reasons for dissatisfaction
- A C-SAT workgroup has been created to review results, improvement opportunities and survey methods



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?



Navigator Outreach and Enrollment

Implementing the second part of a two-year cycle, 16 Navigators with 81 individuals are helping people in their community find new coverage and ensure current clients are in their best plans for 2018.

- In the first month of Open Enrollment, Navigators:
 - Completed 1,638 applications
 - Enrolled 1,728 people into Health Connector coverage
 - Helped current members with coverage retention questions 8,626 times
- Monthly Navigator training featured Open Enrollment readiness, handling advanced cases and plan option details, with regular updates during Open Enrollment
- Navigators have scheduled 10 enrollment events during Open Enrollment, with stronger advance visibility from Archipelago Strategies Group
- Organizations participated in public events and signage placement efforts before Open Enrollment



Our Focus in the Weeks Ahead

Focus on helping members “cross the finish line.”

- Continue to outreach new and existing members regarding the deadlines to make plan selection and payment for January and February 2018 coverage
- Continue direct communications, through the end of Open Enrollment and beyond, to impacted members who have not taken suggested actions regarding their 2018 eligibility and enrollment
- Continue to monitor shopping activity among populations of interest and add/change communication strategy as needed
 - Members enrolled in plans affected by federal CSR-loaded premiums
 - New members

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