



Connecticut's Health Insurance Marketplace

Board of Directors Meeting

October 17, 2013

Agenda

- A. Call to Order and Introductions
- B. Public Comment
- C. Review and Approval of Minutes
- D. CEO Report
- E. Operations Update
- F. Operational Risk Management
- G. Marketing Update
- H. Legal Update
- I. Finance Update
- J. Strategy Committee Update
- K. Adjournment



Connecticut's Health Insurance Marketplace

Welcome and Introductions



Connecticut's Health Insurance Marketplace

Public Comment



Connecticut's Health Insurance Marketplace

Review and Approval of Minutes



Connecticut's Health Insurance Marketplace

Vote



Connecticut's Health Insurance Marketplace

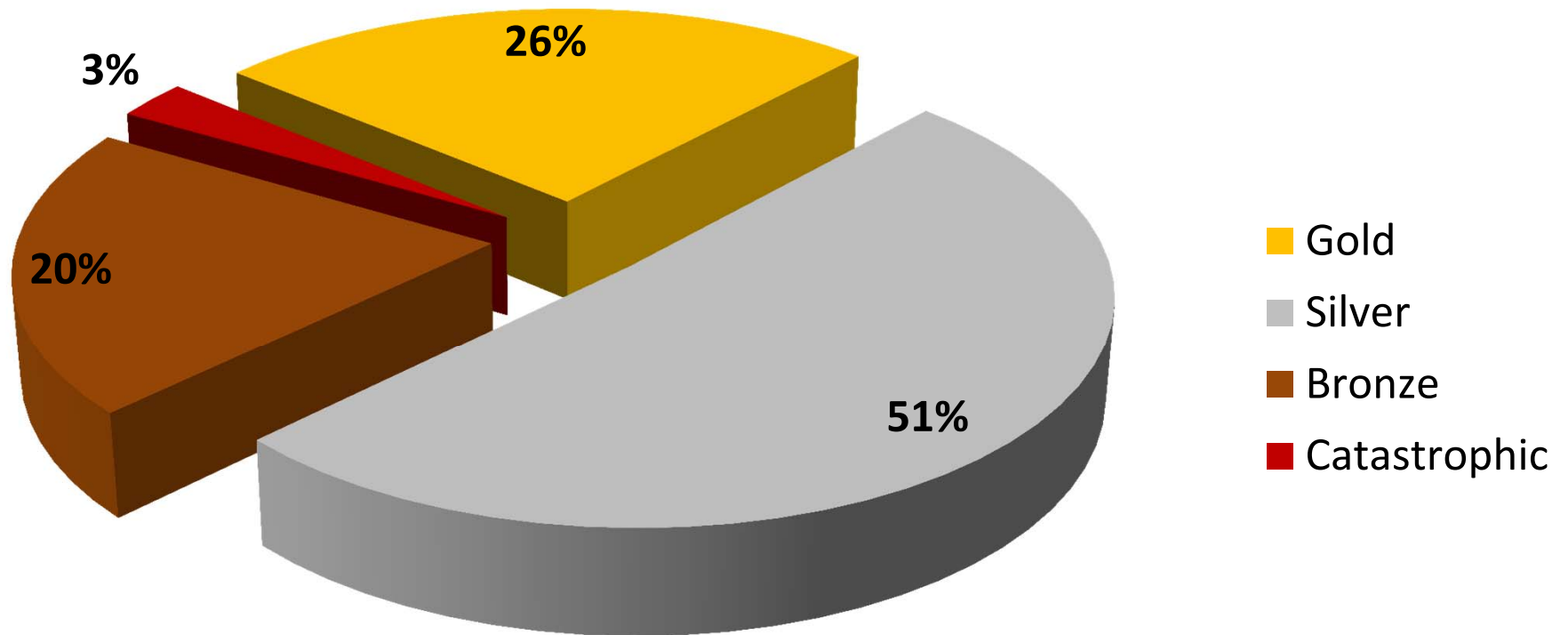
CEO Report



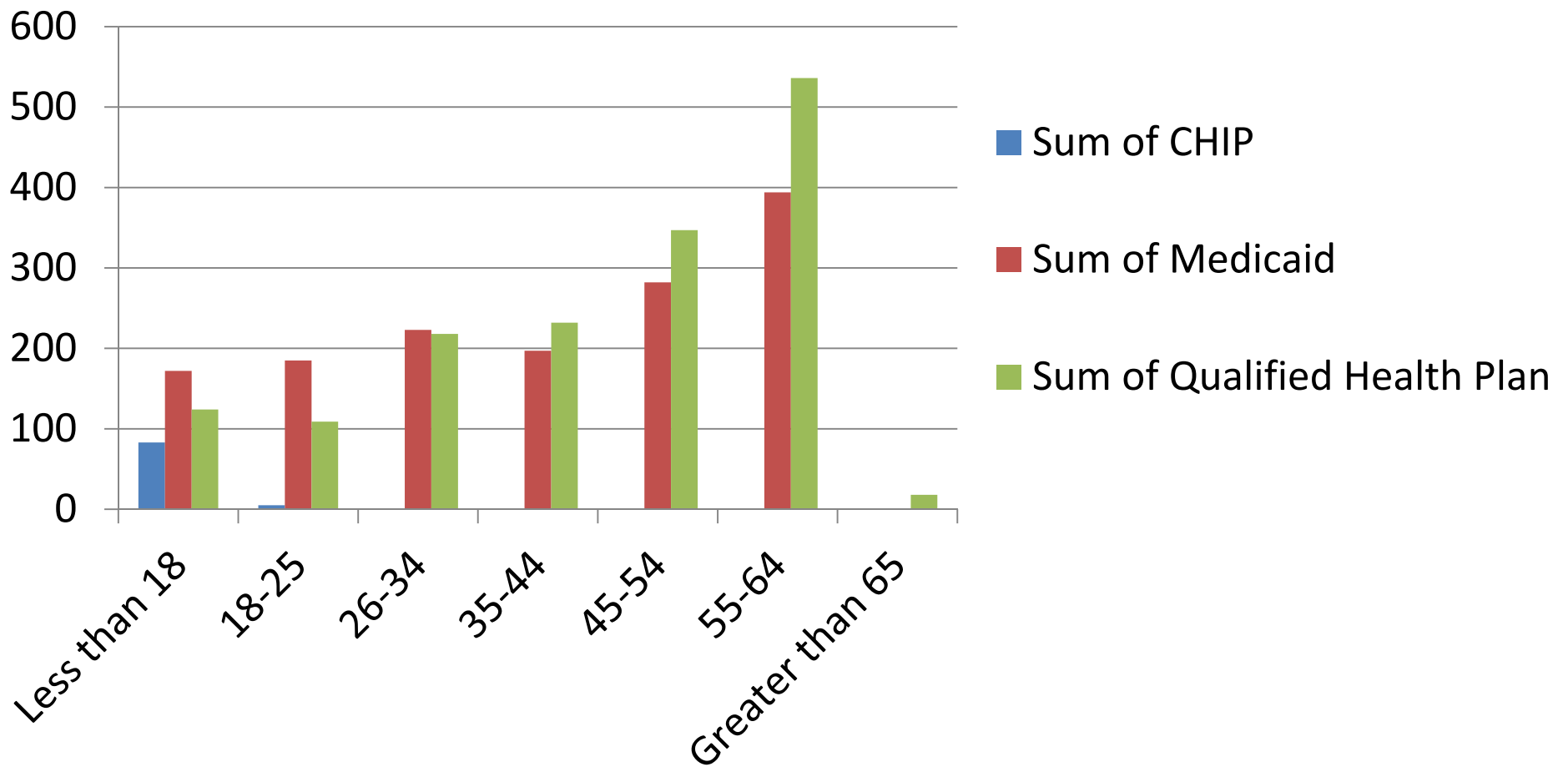
Connecticut's Health Insurance Marketplace

Operations Update

QHP Enrollment by Metal Level



Program Enrollment by Age Group

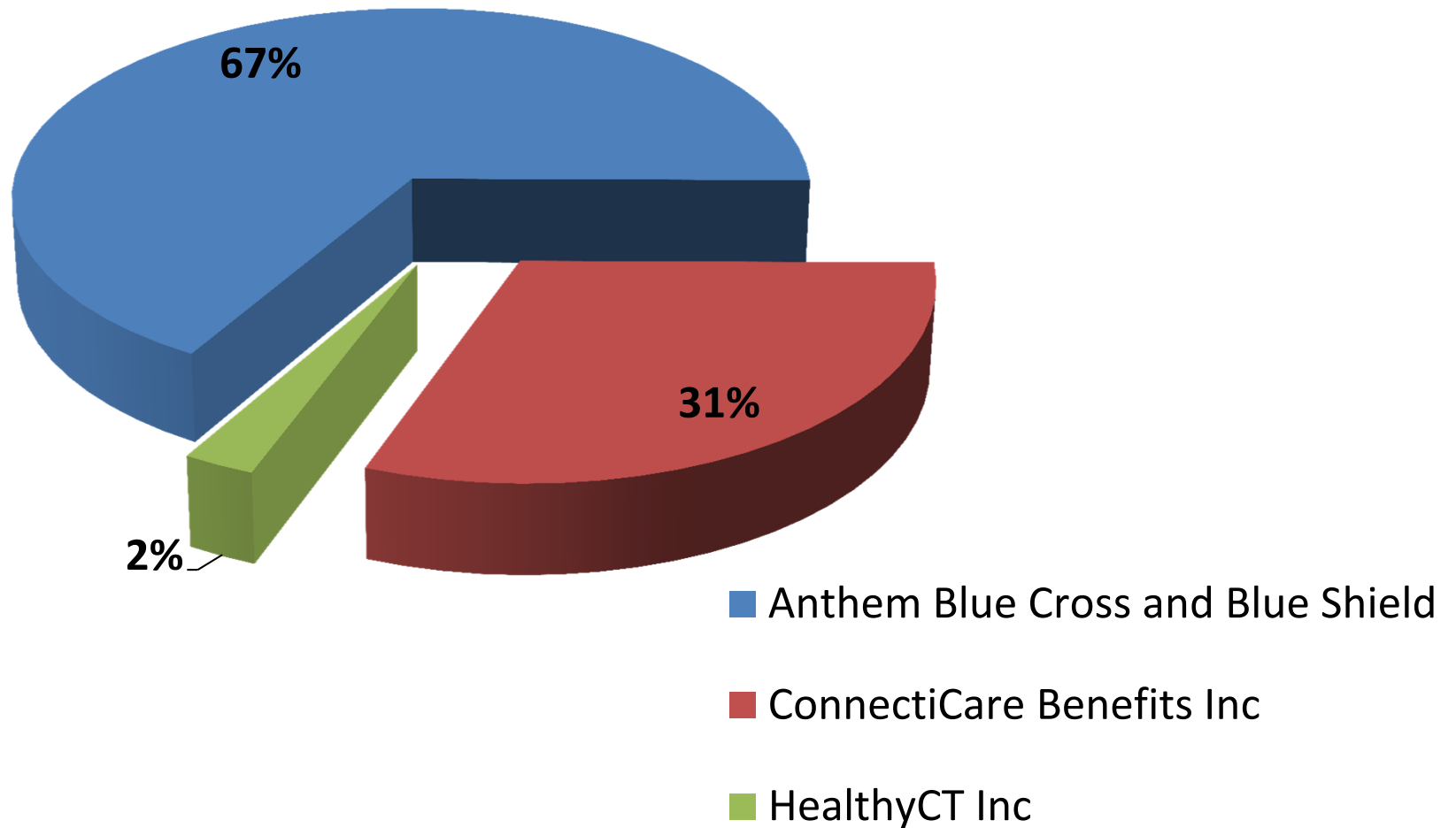


	Oct 1 st – 6 th	Oct 7 th – 13 th	Total through Oct 15 th
Contact Center			
Call answered	6,429	5,213	12,908
Average call durations (<i>minutes</i>)	10.52	10.57	10.52
Average wait time (<i>minutes</i>)	2.41	1.23	1.97
Abandoned calls	714	212	1,003
Abandonment rate	9.63%	3.70%	6.91%
Individual Web Activity			
Number of Web Visitors	138,449	60,781	215,573
Number of Unique Web Visitors	97,902	44,265	143,346
Accounts Created	7,738	3,824	12,547
Individuals Enrolled in Programs			
Medicaid enrolled	740	718	1,857
CHIP enrolled	43	43	93
QHP enrolled without APTC	352	265	772
QHP enrolled with APTC	448	378	1,125

	Oct 1 st – 6 th	Oct 7 th – 13 th	Total through Oct 15 th
SHOP - Small Employer Health Options			
Website Visits	4,683	1,909	7,058
Unique Visitors by day	4,050	1,291	5,870
Number of Calls Received	89	82	186
Average Call Duration (minutes)	6.60	8.25	7.24
New Employer Group Application Submitted	4	3	11
Number of Employees	12	14	47
Sir Speedy			
Applications Requested	505	505	1,083
Applications Sent	75	561	1,026
Voter Registrations Forms Requested	21	137	232
Voter Registrations Forms Sent	370	156	222
Exemption Forms Requested	32	18	42
Exemption Forms Sent	5	32	40
Notices Sent	0	6,580	7,179

	Oct 1 st – 6 th	Oct 7 th – 13 th	Total through Oct 15 th
All Applications			
Applications Initiated	6,506	2,558	10,768
Total Apps. Completed Enrollment	1,358	621	2,372
Scan Optics			
Number of Applications Received by Scan Optics	2	57	93
Number of Notices Received	16	95	227
Number of Exemptions/Appeals Received	0	5	5
Undeliverable Mail Received	0	0	30
Total Pieces of Paper Scanned	44	711	2,316
Xerox			
Number of AHCT Calls	109	137	286
Number of Applications in Queue	0	0	0
Number of Applications Completed	1	13	25

QHP Enrollment by Carrier



Operations Update

- AccessHealthCT.com went live on Tuesday, October 1st at 9:30 AM
- Significant interest through October
 - More than expected
- Quick transition from IT build and process development to customer service
 - Continuing IT build
 - Finetuning processes
 - Customer Service
- Consumers have concerns about
 - Price
 - Complexity of law

Operations Issues

- Brokers:
 - Getting certified brokers into the system
 - Training brokers desiring training
 - Team dedicated to keying in brokers and solving computer issues
- Reporting:
 - Initially deferred bulk of reporting to focus on implementation
 - Higher level of business generates more immediate information to manage and report
 - Deloitte and AHCT RPM team working to expand scope of information
- Clarity of Benefits Presentation:
 - Federal templates limited full explanation of benefits
 - CID support on consumer communication
 - Following up individually by letter and phone
 - Screen improvements by end of month
- Applicant Information to Carriers:
 - Held data to allow for quality check
 - Carriers clamoring for information to serve clients
 - Spreadsheet information sent to carriers
 - Expedited electronic transaction improvement



Connecticut's Health Insurance Marketplace

Operational Risk Management

Operational Risk Management (ORM)

- **What is it?**

- An approach for identifying, analyzing, responding to and monitoring risks to the organization
- It generally begins with a Risk Assessment; an inventory and evaluation of things that could go wrong....from the plausible to less likely, but impactful scenarios
- The objective is to position the organization to prevent or respond quickly and positively to adverse events

Operational Risk Management (ORM)

- **Management selects a risk response strategy for each scenario that may include:**
 - *Reduction*: taking action to reduce the likelihood or impact related to the risk
 - *Alternative Actions*: deciding and considering other feasible steps to minimize risks
 - *Avoidance*: exiting the activities giving rise to risk
 - *Share or Insure*: transferring or sharing a portion of the risk
 - *Accept*: no action taken, due to a cost/benefit decision

Operational Risk Management (ORM)

- **AHCT Goals:**

- Protect the Consumer
- Assure Health Plan Integrity
- Assure sustained operations
- Protect the integrity & marketplace reputation of Access Health CT

- **Scope**

- Access Health CT Operations
- Vendors, Partner Agencies and Health Plans
 - e.g., Maximus, bSwift,

Operational Risk Management (ORM)

- **How did we conduct the risk assessment?**
- **Create a Risk Inventory**
 - Identify scenarios that could cause harm to our customers and/or to the Operations (storm events, system outage, personnel loss, etc.)
 - Collect inputs from AHCT staff, vendors, health plans, partner agencies
- **Prioritize the Risks**
 - Rank each scenario for “Impact” and “Probability” on a scale of 1 – 10
 - 1 = “Lowest Impact” or “Lowest Probability”, 10 = “Highest...”
 - “Impact times Probability” = Risk Score
 - Impact of 5 x Probability of 4 = Risk Score of 20

Operational Risk Management (ORM)

- **Prioritize the Risks (con't)**
 - Sort Scores into Low, Medium and High risk categories
 - Low Risk = Scores of 30 and lower
 - Medium = greater than 30 but less than 66
 - High Risk = Scores greater than 65
- **Develop Mitigation and Contingency Strategies**
 - Initially focus on “High” and “Medium” risk categories....
 - ...then work the “Low” risks in sequential order
 - Determine & take preventive actions
 - “install the generator before the storm”
 - Establish recovery plans (contingency)
 - e.g., Business Continuity Plan, remote capability

Operational Risk Management (ORM)

- **Assign ownership and track execution and plan completion**
- **ORM is an ongoing process; Re-assess risk as conditions change:**
 - Business Processes
 - Personnel
 - Technology
 - Regulations
 - Vendors
 - Health Plans
 - Competition

Operations Risk Management (ORM)

EXECUTIVE SUMMARY - 2013 AHCT Risk Assessment					
					DRAFT 10/3/2013
Risk ID's	AHCT Vendor/Partner	AHCT Dept	Risk Scenario	Mitigation Opportunity	Contingency Considerations
A2 I x P = Risk 5 x 3 = 15 Low Risk	ScanOptics	Operations	Electronic file failure (Scan Optics to Xerox): Filenet feed to Xerox is disrupted. "Lost" images will delay application processing.	Yes. Full scale volume testing.	Scan Optics will have to retain and re-run electronic files following resolution of file execution failure. Worst case: re-scan and re-send.
E4 I x P = Risk 7 x 5 = 35 Medium Risk	NIPAs	Marketing	IPA experience - Web Portal: Lack of Web Portal experience/expertise leads to lengthier app sessions or dissatisfied customers & IPAs	Yes. Training, certification process in place. Maximus call support established.	Consideration: Create "hot-line" function to handle IPA & Navigator calls on demand with experts re the Web portal process
G1 I x P = Risk 10 x 4 = 40 High Risk	Insurance Carriers	Plan Mgt	Premium Billing: IRS payments to carriers delayed or incorrect. AHCT does not have a process to support reconciliation.	Still researching.	Still researching.



Connecticut's Health Insurance Marketplace

Marketing Update

Contents

- Update on Media Efforts
- Overview of Outreach Program
- Navigator and In Person Assister Update

New Testimonial Campaign

Existing media to be augmented with new creative

- Current series of 3 “animated” spots (as well as radio) being updated to include call center 800#
- New series of testimonial ads to be introduced in the last week of October



New Testimonial Campaign



Overview of Media Plan

Strategic focus and media buy highlights

- Given heavy media focus surrounding the national exchange launch, media activity was pushed too mid-October.
- Overall media buy will be focused on key enrollment milestones (12/15/13 and 3/31/14 deadlines) with increased activity 12/1-12/15 and 3/1-3/31
 - March Madness heavy up buy to enhance Young Invincible focused efforts
- Media will be light the week of Thanksgiving as well as the last week of the year
- Additional effort for small business have been included
 - Business journals November through March
 - Business focused radio spots on key programming across the state

Call Center Activity

Call Center Results

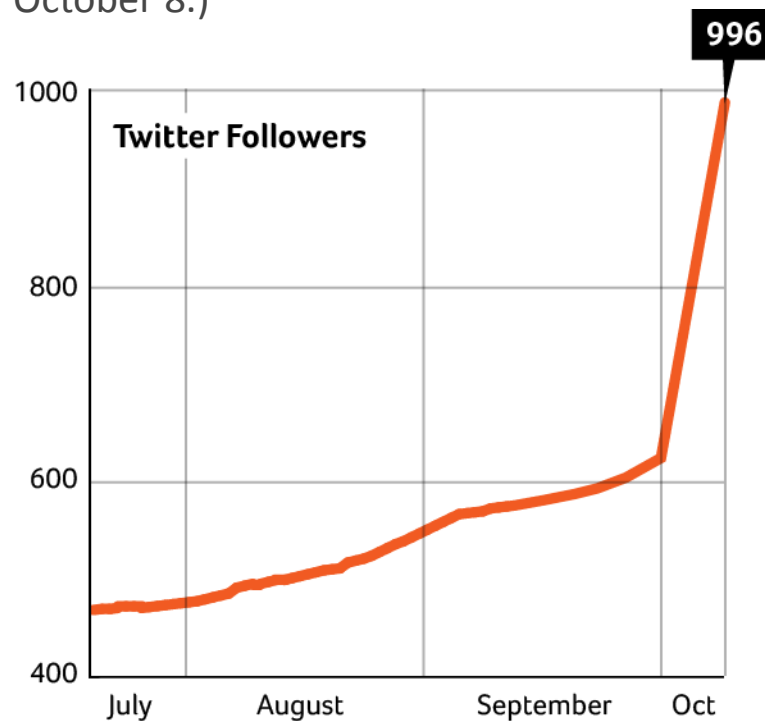
Directed activity is driving nearly 70% of call volume

Channel	% of Total
TV	28%
Website	20%
Newspaper	8%
AHCT material	7%
Radio	2%
E-mail	1%
Billboard	1%
Facebook	1%
Twitter	1%
Health Plan	4%
Social Worker	2%
Broker	1%
Federally Facilitated Exchange	1%
Other (word of mouth, unspecified)	23%
Grand Total	100%

Social Media

Social media results (cont'd)

Since we added to AHCT's Twitter presence in mid-July, our number of Followers has grown steadily, to almost 1,000. (As of October 8.)





Connecticut's Health Insurance Marketplace

Overview of Outreach

New Britain Enrollment Center

A work in progress



New Britain Enrollment Center

Soon ready for business (Oct. 29th)



Enrollment Infrastructure

Identifying leads... and driving leads to enroll

Focus will shift from education to enrollment as we head into the October – March time period.

- We will continue to generate leads throughout the Fall and Winter as a means to build a base of individuals to drive towards enrollment activity
 - Leads will be driven to visit Enrollment Centers and Fairs across CT
- Outreach Workers will recruit and confirm consumers to attend Centers and Fairs, and ensure that they bring all required materials
- Assisters and brokers will be present in Centers and Fairs to enroll
- We will ensure follow-up appointments for consumers who do not enroll on site

Outreach Lead Generation

We will continue to educate and engage consumers where they socialize and shop

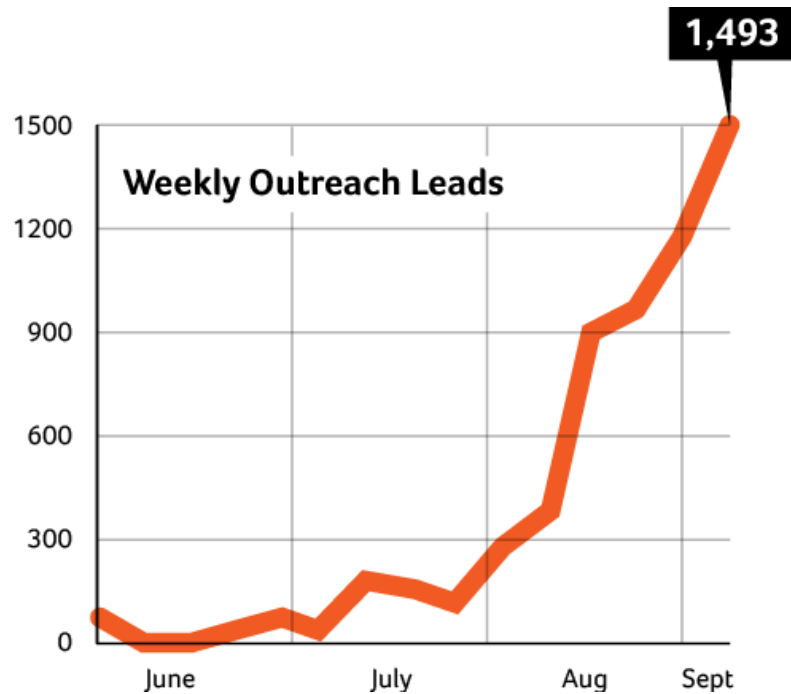
- Fairs and festivals
 - On the weekend of 10/12-10/13, we had a presence at the Feria de la Familia, Haley Harvest Festival in West Haven, Southington Apple Harvest Festival
 - As we move indoors during winter months, we will focus more on health fairs, concerts and community forums
- Ongoing Tabling Examples
 - Bridgeport and Waterbury Farmers Markets
 - Bristol and Stamford Public Libraries
- Retail Intercepts
 - Super Stop and Shop, Walgreens, Wal-Mart, supermarkets across CT



Leads through Outreach

Community outreach

The trend in leads generated has been steadily upward, accelerating dramatically in the past month.



Educational and Engagement Events

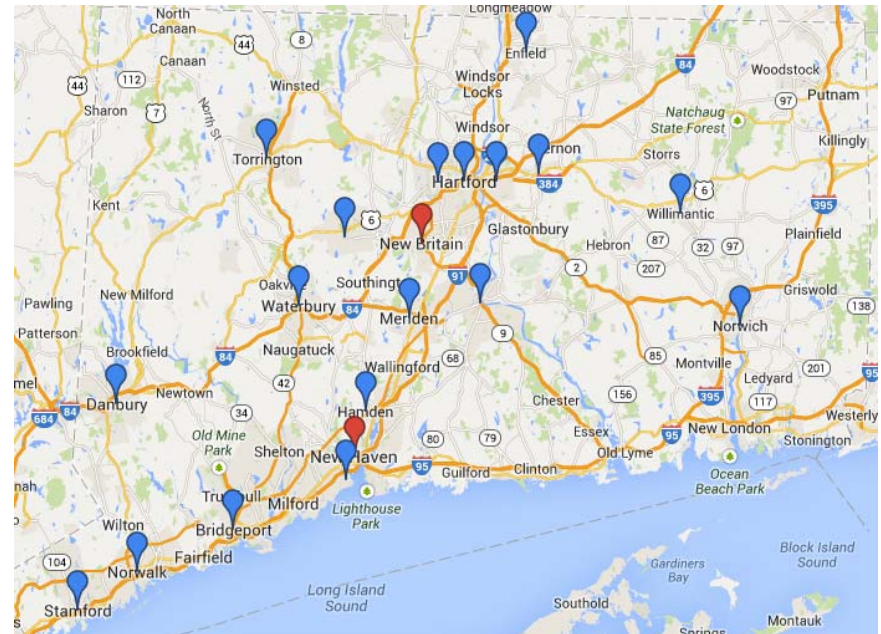
Targeted outreach events will reach key communities across CT

- Healthy Chats
 - Build on success of previous Healthy Chats
 - Norwalk (October 10), Middletown (October 17), Willimantic (October 21), Danbury (October 22)
 - Additional Healthy Chats in Stamford and other cities to be announced
- Supermarket Tours
 - Outreach events at supermarkets in Latino communities
 - Partner with Spanish-language radio stations who will broadcast on site
 - First event planned for October 19 at C-Town in East Hartford
- Winter Concerts
 - Exploring winter concert events across CT to reach young adults

Enrollment Fairs

Enabling consumers to get help and enroll in their home communities

- Over 100 Enrollment Fairs planned in 18 cities, with frequency based on number of uninsured residents
- Fairs located in trusted community locations
- Examples of Fair locations are:
 - Bridgeport Public Library
 - Charter Oak Health Center, Hartford
 - Meriden Public Library
 - Manchester Community College
 - Community Health Center, Inc.
 - Otis Library, Norwich
 - Tully Health Center (Stamford Hosp.)

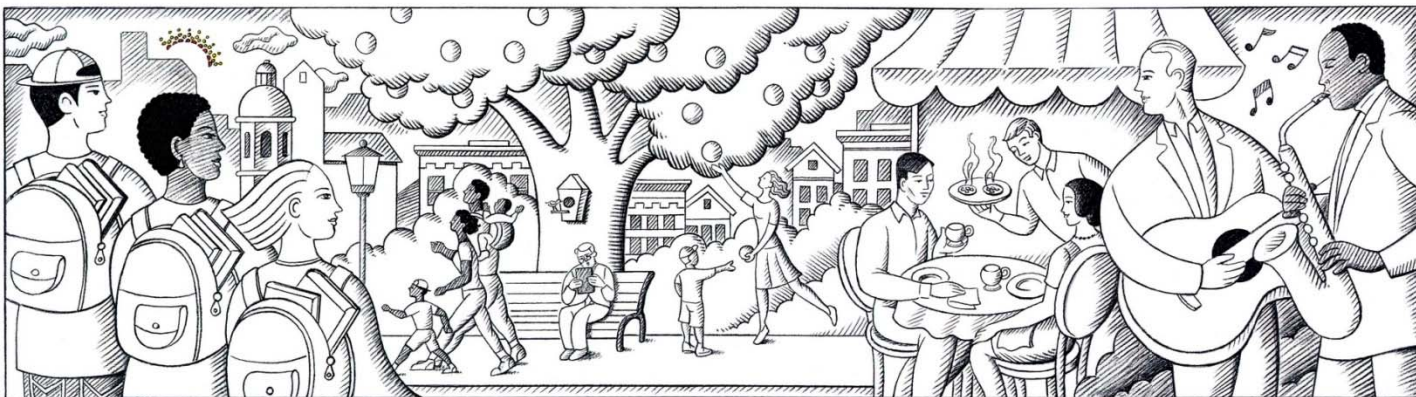


New Haven, Bridgeport and Hartford Murals

Community focused awareness and enrichment project coming to completion with unveiling events:

- New Haven: October 19, 2013 (Katro Storm, Stetson Branch Library)
- Bridgeport: October 26, 2013 Rafael Cornier, Jr., Optimus Health Care)
- Hartford: November 2, 2013 Adam Niklewicz, Hispanic Health Council)
- Celebration Activities Include:
 - Access Health CT and municipal speakers, Youth Group Dance & Singing Performances, Face Painting & Balloon Sculptors, Health Screenings, Nutrition Information

8' H X 32' L

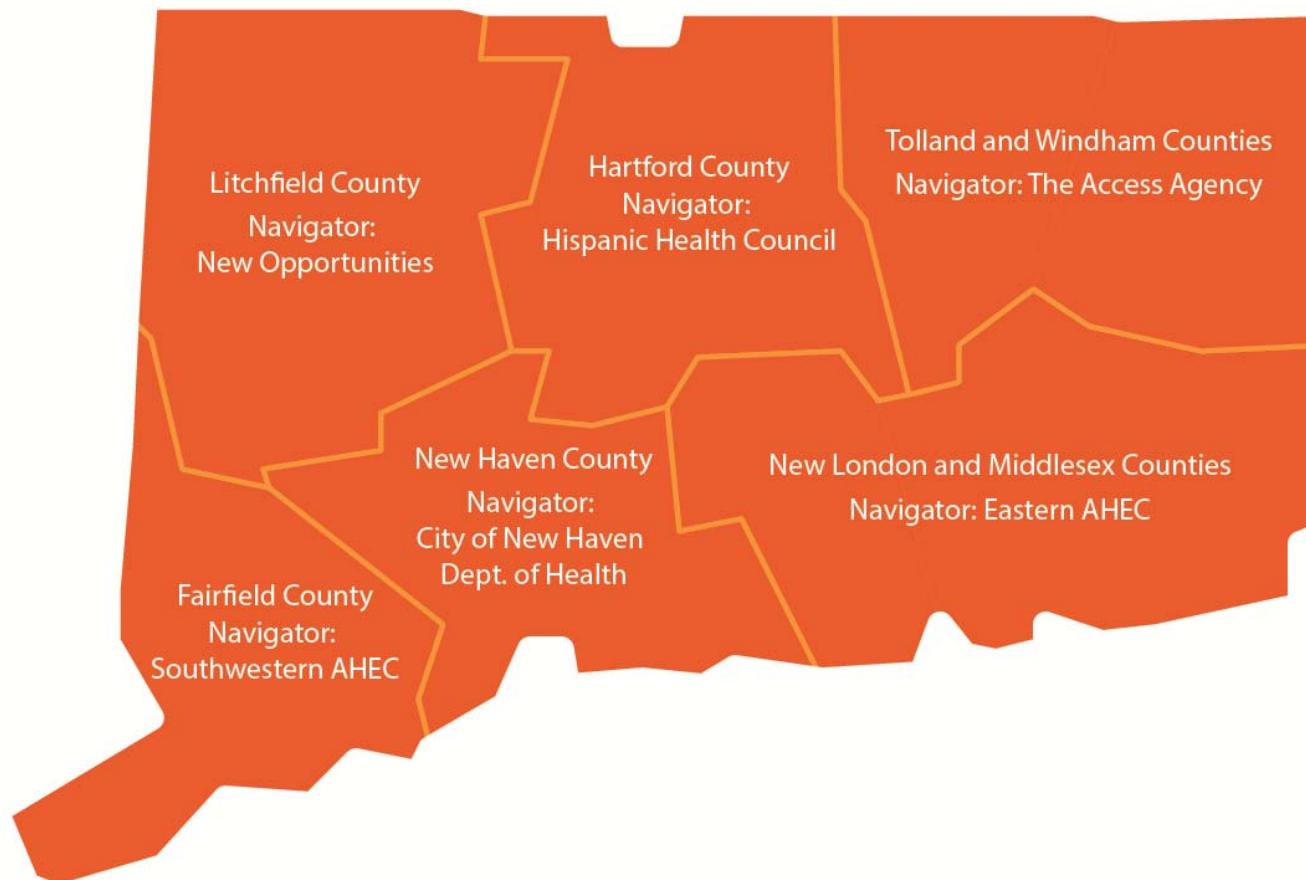




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NIPA Update

Navigators Across the State



Navigator Regional Meetings

- Navigators met with all Assisters in their region September 23-30th
- Assisters took photo for special ID badges created by Department of Administrative Services (DAS)
- Received outreach tools and materials
- Discussed regional outreach strategies
- Established regional meetings calendar



Certified Assistors

- Assistors are cleared for certification once they have completed the following:
 - Passed background check
 - Completed 40 hours of online and in-person training
 - Passed the certification exam with a score of at least 80%
 - Signed Privacy & Security Agreement

In addition, their Assister organizations must have submitted:

- Completed contract
 - State of Connecticut Nondiscrimination Certification Form B for organizations with contracts under \$50,000 (Ethics Form)
 - Submit certificate of insurance
 - Contract Signature Page
 - Organization's W-9 Tax Form
- Consumers can view contact information for Certified Assistors in the "Assistance Search" under the "Get Help" menu option

Materials Received

- All Navigators and Assisters received Outreach Tools
- Upon certification, Navigators and Assisters were provided with Enrollment Tools

Outreach Tools	Enrollment Tools
Access Health CT Flyers (English & Spanish)	Photo ID Badge
Enrollment Checklists (English & Spanish)	AHCT Issued Laptop
Business/Appointment Cards	
Healthy Chat Presentation & Speaker Notes	
Public Relations Kit	
Social Media Guide & Policy	
AHCT Banners for Navigators	

Photo ID Badges

- Must be worn by Certified Assisters at all times
- Features hologram state seal
- Unique ten digit certification number on the back



Organizations with Certified Assisters

Action for Bridgeport Community Development
AIDs
AmeriCares Free Clinics
Bridgeport Child Advocacy Coalition
Bristol Community Organization
Bristol Family Resource Center
Brookfield Social Services
Career Resources, Inc.
Catholic Charities Archdiocese of Hartford
Central AHEC
Chatham Health District
Child and Family Agency
Christian Activities Council
Christian Community Action, Inc.
City of New Britain Community Services Department
City of Stamford Dept of Health & Social Services
Community Action Agency of New Haven
Community Renewal Team
Coram Deo, Inc.
CSEA SEIU Local 2001
Family Strides, INC
GBAPP, Inc.
Gifts of Love
Hartford Public Library
Hispanic Coalition of Waterbury
Jamaica Renaissance Society
Jewish Family Service of New Haven, Inc.

John J. Driscoll United Labor Agency
Junta for Progressive Action
Ledge Light Health District
Liberty Community Services
LULAC Head Start, Inc.
Marrakech, Inc.
Milford Health Department
Mount Aery Development Corporation
New Britain - Berlin YMCA
New Britain Health Department
New Financial Life, Inc.
New Haven Free Public Library
New Opportunities
One Eleven Group
Parker's Pampering LLC
Right Now Ministries
Southwestern AHEC
Southwestern CT Agency on Aging
Spanish Community of Wallingford
TEAM, Inc.
The Access Agency
Town of Enfield for Enfield Family Resource Center
Town of Plymouth Human Services
Town of Stratford
Town of Windsor, Social Services
Uncas Health District
Valley Parish Nursing Program AND Griffin Hospital



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Legal Update



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Finance Update

Finance Update

- Finance focus is transitioning to tasks needed to effectively operate as a “going concern”.
- Managing financial impacts of delays being caused by the Federal Government shutdown. The impacts are manageable.
- Responded to several questions and challenges to the new Level One grant application by CMS that is requesting \$21,877,158 in funding. All challenges were successfully met and the award is pending final approval, but is delayed by the Federal Government shutdown. Sequestration is expected to reduce the award by 7%.
- The request for a lifting of restrictions on additional funding from awarded grants is also delayed by the Federal Government shutdown.
- Progress continued on several Finance tasks, including the audit of the 2013 AHCT financial statements, fixed asset physical inventory, end user reporting tools and the market assessment process.



Connecticut's Health Insurance Marketplace

Jul-Sept
Finance Dashboard
Q1 - 2013

FY-Q1 2013 Finance Dashboard Overview

Fiscal Year to Date Budget Results

- After timing adjustments, YTD Expenses are favorable by \$180K
- YTD Expenses are trending to budget
 - FY Net Budget is ~\$75M
 - Includes approximately \$12M in Allocations to DSS
- Development, Design & Implementation Expenses have ramped to budget levels as application moved to “Go Live” October 1
- Operating costs are Higher than Budget
 - Primarily driven by Marketing costs running higher (\$700k) , but are expected to normalize
 - Salary & Fringe are slightly below budget; driven by difference in fringe costs

Grant Funding

- Utilization is on track to projection
- New Level One application in pending approval status

Finance Dashboard

Fiscal Year to Date Budget Results
Q1 2013

Reported Vs. Adjusted

Categories	Reported	Budget	Variance B (W)
Salaries & Fringe	\$ 1,743,024	\$ 1,784,127	\$ 41,103
Consultants	\$ 20,230,504	\$ 14,336,407	\$ (5,894,097)
Equipment	\$ 198,446	\$ 131,246	\$ (67,200)
Supplies	\$ 3,904	\$ 3,825	\$ (79)
Travel	\$ 36,534	\$ 42,479	\$ 5,945
Other Administrative	\$ 1,002,674	\$ 631,975	\$ (370,699)
Grand Total	\$ 23,215,087	\$ 16,930,059	\$ (6,285,028)

Adjustments to YTD Actuals				
Categories	Adjustment	YTD Sept. Budget	Variance B (W)	Dec. Budget
Consultants (SHOP & Call	\$ (6,465,535)		\$ (6,465,535)	\$ 6,465,535
Center Start-Up Costs				
Grand Total	\$ (6,465,535)	\$ -	\$ (6,465,535)	\$ 6,465,535

Budgeted in December; incurred in August

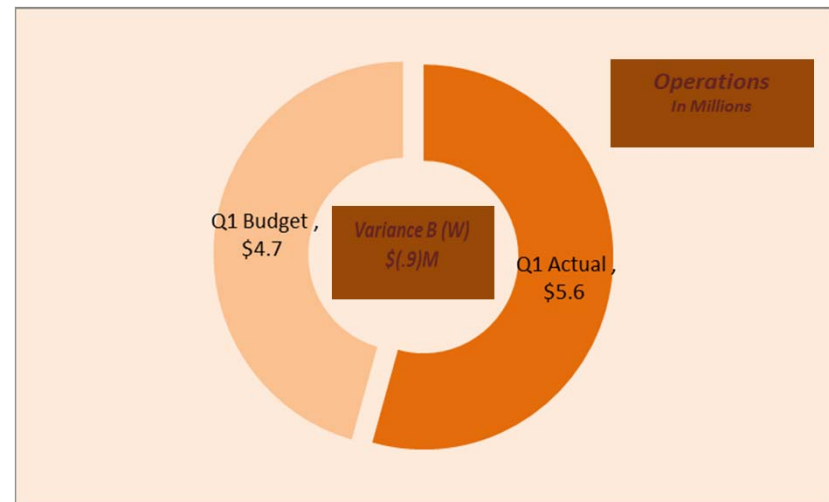
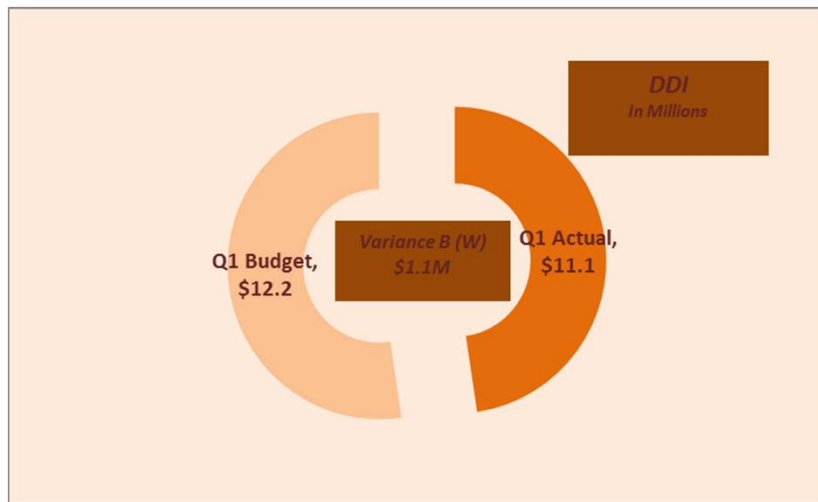
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Salaries & Fringe	\$ 1,743,024	\$ 1,784,127	\$ 41,104
Consultants	\$ 13,764,970	\$ 14,336,407	\$ 571,438
Equipment	\$ 198,446	\$ 131,246	\$ (67,200)
Supplies	\$ 3,904	\$ 3,825	\$ (79)
Travel	\$ 36,534	\$ 42,479	\$ 5,945
Other Administ	\$ 1,002,674	\$ 631,975	\$ (370,699)
Grand Total	\$ 16,749,552	\$ 16,930,059	\$ 180,508

Finance Dashboard

Fiscal Year to Date Budget Results

Q1 - 2013

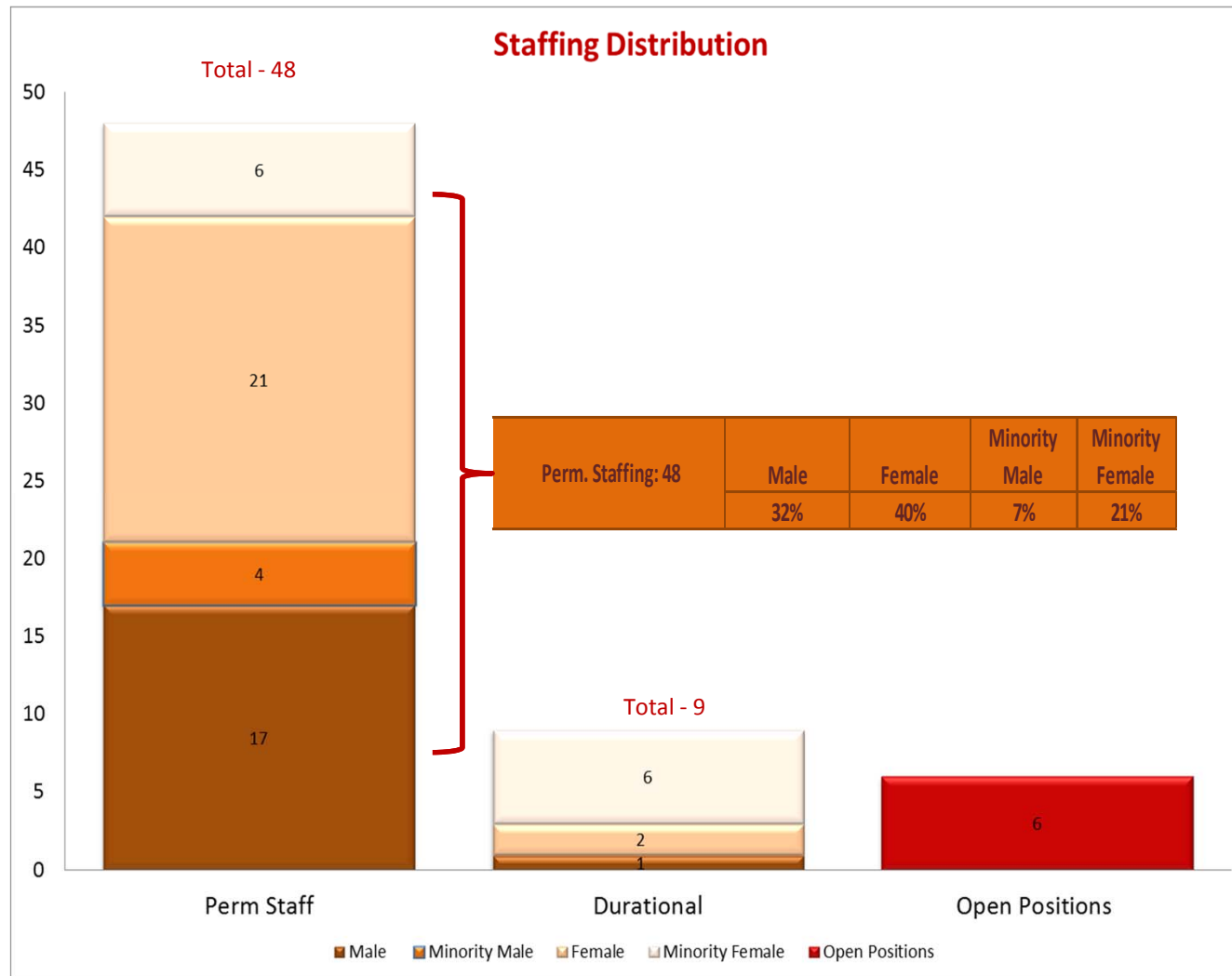
Design, Development & Implementation Vs. Operations



Finance Dashboard

Fiscal Year to Date Budget Results

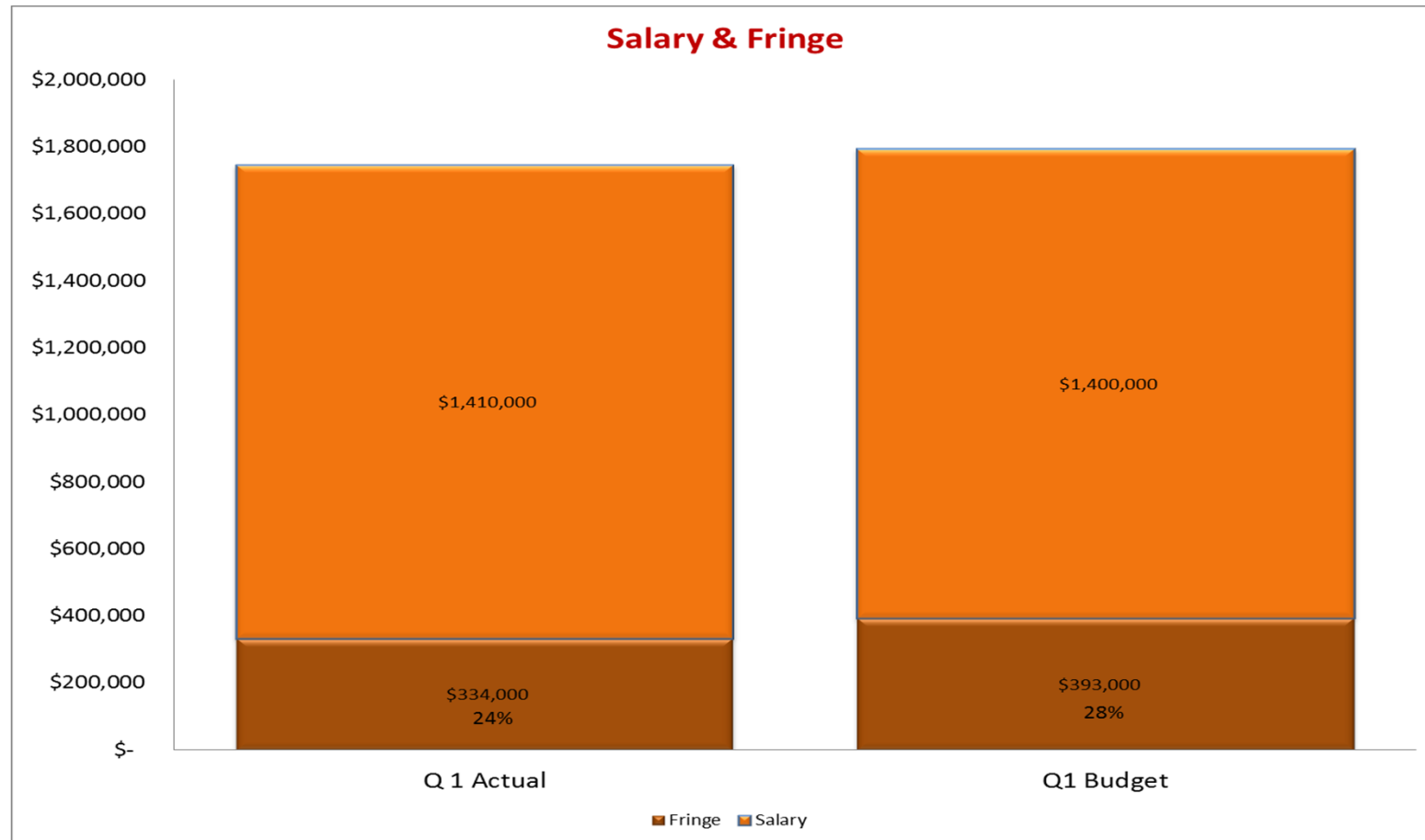
Q1 - 2013



Finance Dashboard

Fiscal Year to Date Budget Results

Q1 - 2013



Finance Dashboard

Grant Award Summary Q1 - 2013

Awarded Vs. Pending

Expense Category	Grants Awarded					Pending	Total
	Level 1*	Level 2	Level 2 Supp	IPA	IPA Supp	New Level 1 (assumes 7% Seq.)	Total
Salaries & Fringe	\$ 1,157,350	\$ 12,614,150	\$ -	\$ 330,200	\$ 265,009	\$ -	\$ 14,366,709
Contractual	\$ -	\$ 91,614,649	\$ 24,055,694	\$ 1,469,321	\$ 196,232	\$ 20,345,757	\$ 137,681,653
Equipment	\$ -	\$ 651,557	\$ -	\$ 27,778	\$ -	\$ -	\$ 679,335
Supplies	\$ -	\$ 18,930	\$ -	\$ 237,120	\$ -	\$ -	\$ 256,050
Travel	\$ -	\$ 132,937	\$ -	\$ 5,500	\$ -	\$ -	\$ 138,437
Other	\$ -	\$ 2,326,453	\$ 905,198	\$ 70,948	\$ 36,500	\$ -	\$ 3,339,099
Total	\$ 1,157,350	\$107,358,676	\$ 24,960,892	\$2,140,867	\$ 497,741	\$ 20,345,757	\$ 156,461,283

* Grant Closed



Connecticut's Health Insurance Marketplace

Strategy Committee Update



Connecticut's Health Insurance Marketplace

Adjournment