

A photograph of a diverse family of four—mother, father, and two young children—laughing joyfully together on a couch. The mother is on the left, wearing a blue striped shirt. The father is on the right, wearing glasses and a dark shirt. The two children are in the center, laughing with their mouths open. A large orange banner is overlaid across the middle of the image.

# Strategy Committee Meeting

March 17, 2022

# Agenda

- A. Call to Order and Introductions
- B. Public Comment
- C. Vote
  - Review and Approval of Minutes
- D. Strategic Initiatives
- E. Mission and Vision Status Update
- F. Guiding Principles Update
- G. Advisory Committee Update
- H. Adjournment

# Public Comment

# **Vote**

## **Review and Approval of Minutes**

# Strategic Initiatives

*-Broker Academy*

# Broker Academy Updates

## Online Application

73 Applicants

## Outreach

Info sessions  
Events/Material drop off's  
Navigators

## Training

Secured a quote from a training vendor.

## Presentations

Over 60 Presentations throughout January and February

## Marketing

Mass email and newsletters to community partners and Brokers (over 3k contacts)

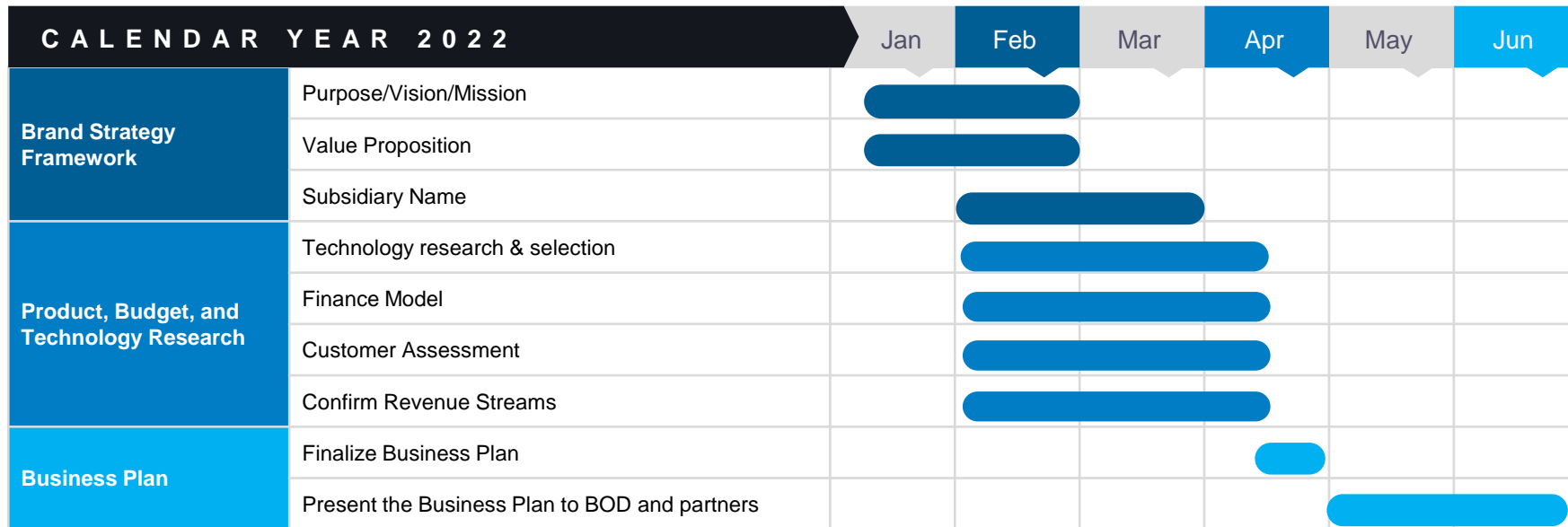
## Implementation Teams

Executing the project plan

# Strategic Initiatives

*-Subsidiary Updates*

# Subsidiary Business Plan Timeline\*



\*Tentative



# Q&A

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# Mission, Vision & Principles

March 2022

**Mission:**  
**What the company is *right now***

# Mission

## Statement adopted in 2012:

“To increase the number of insured residents, improve healthcare quality, lower costs and reduce health disparities through an innovative, competitive marketplace that empowers consumers to choose the health plan and providers that give them the best value.”

Mission  
Statements  
should define  
what the company  
is *right now*.

# Mission

## Statement adopted in 2012:

“To increase the number of insured residents, improve healthcare quality, lower costs and reduce health disparities through an innovative, competitive marketplace that empowers consumers to choose the health plan and providers that give them the best value.”

### Still Relevant

Improve healthcare quality

Reduce health disparities

innovative, competitive marketplace that empowers consumers to choose the health plans that give them the best value

Mission Statements should define what the company is *right now*.

# Mission

## Statement adopted in 2012:

“To increase the number of insured residents, improve healthcare quality, lower costs and reduce health disparities through an innovative, competitive marketplace that empowers consumers to choose the health plan and providers that give them the best value.”

Still Relevant	Consider Reworking
Improve healthcare quality	Increase the number of insured residents (reframe to reduce uninsured residents)
Reduce health disparities	Lower costs (reframe to affordability)
innovative, competitive marketplace that empowers consumers to choose the health plans that give them the best value	Providers

Mission Statements should define what the company is *right now*.

# Mission: Suggested Revision

## Statement adopted in 2012:

“To increase the number of insured residents, improve healthcare quality, lower costs and reduce health disparities through an innovative, competitive marketplace that empowers consumers to choose the health plan and providers that give them the best value.”

## Suggested revision for 2022:

“To decrease the number of uninsured residents, improve the quality and affordability of healthcare, and reduce health disparities through an innovative, competitive marketplace that empowers consumers to choose the health plans that give them the best value.”

Mission Statements should define what the company is *right now*.

**Vision:**  
**What the organization wishes to  
be like *in the future***



# Vision

## Statement adopted in 2012:

“The CT Health Exchange supports health reform efforts at the state and national level that provide CT residents with better health, and an enhanced and more coordinated healthcare experience at a reasonable, predictable cost.”

Vision Statements  
should define  
what the  
organization  
wishes to be like  
*in the future.*

# Vision

## Statement adopted in 2012:

“The CT Health Exchange supports health reform efforts at the state and national level that provide CT residents with better health, and an enhanced and more coordinated healthcare experience at a reasonable, predictable cost.”

### Still Relevant

Supports health reform efforts at the State and National level

Provide CT residents with better health, and an enhanced and more coordinated healthcare experience at a predictable cost

Vision Statements should define what the organization wishes to be like *in the future.*

# Vision

## Statement adopted in 2012:

“The CT Health Exchange supports health reform efforts at the state and national level that provide CT residents with better health, and an enhanced and more coordinated healthcare experience at a reasonable, predictable cost.”

Still Relevant	Consider Reworking
Supports health reform efforts at the State and National level	Replace CT Health Exchange with Access Health CT
Provide CT residents with better health, and an enhanced and more coordinated healthcare experience at a predictable cost	The AHCT brand has evolved beyond “supporting health reform efforts”
	“Reasonable costs” are subjective

Vision Statements should define what the organization wishes to be like *in the future.*

# Vision: Suggested Revision

## Statement adopted in 2012:

“The CT Health Exchange supports health reform efforts at the state and national level that provide CT residents with better health, and an enhanced and more coordinated healthcare experience at a reasonable, predictable cost.”

## Suggested revision for 2022:

“Provide Connecticut residents with access to the most equitable, simple and affordable health insurance products to create healthier communities.”

Vision Statements  
should define  
what the  
organization  
wishes to be like  
*in the future.*

**Principles:**  
**Foundational statements adopted  
by an organization to *guide  
decision making***

# Principles Adopted in 2012

- An exceptional consumer experience
- Sustainability
- Flexibility
- Transparency

**Business Principles** are foundational statements adopted by an organization to *guide decision making*.

# Principle Adopted in 2012: An exceptional consumer experience

Objectives	Measures
Accessibility. The Exchange should strive to reduce the number of residents without health insurance and improve access to health care for all residents.	Board decisions and HIX implementation led to the greatest number being insured and remaining insured.
Integration. The Exchange should be designed to integrate public program information, eligibility and enrollment outreach and operations to ensure maximum healthcare coverage for Connecticut residents and seamless transitions between public programs and the Exchange.	Minimal number of complaints from consumers entering the system, transitioning between coverage.
Equity. The Exchange should work to address longstanding, unjust disparities in health access and health outcomes in Connecticut.	Number of enrollees with continuous health coverage
	HIX should strongly address the needs of CT's most disadvantaged residents.

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# Principle Adopted in 2012: Sustainability

Objective	Measures
Affordability. Access to health care is only possible when it is affordable. Affordability of coverage, within the Exchange and within the state, is essential to improving the state's health care system and economy.	Board decisions and HIX operations lead to the highest number of residents being able to afford health insurance and enrolling in healthcare coverage.
Viability: Board decisions should lead to health insurance which is viable for the state and the health care industry as well as for residents.	All payments by carriers should be based on effective, evidence-based care, or improved quality of health for a panel or population.
Stability: The Exchange should promote solutions that respect existing strengths of our state's health care system and promote stability within the Exchange.	Most Board decisions and HIX implementation should be designed, once made, to require only incremental further changes, but allowing for flexibility within a stable exchange.

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# Principle Adopted in 2012: Flexibility

Objective	Measures
The Exchange should be nimble and flexible in responding to the quickly changing insurance market, health care delivery system, and general economic conditions in Connecticut, while being sensitive and responsive to consumer demands.	Number of innovative products offered. Match payments to effective innovations in healthcare delivery to encourage their adoption broadly.
Board decisions should be designed to support transformative change in the delivery of healthcare through the collaboration of all constituents in the system.	New partnerships with providers, plans and the exchange (e.g., ACO's, community outreach and clinics, sharing of data and technology like EHR's). Expansion of delivery system payment methodologies, ensuring high quality care and services.

**Business Principles are foundational statements adopted by an organization to *guide decision making.***

# Principle Adopted in 2012: Transparency

Objective	Measures
The Exchange is accountable to the public, and its activities should be transparent, its services easily available, and its information easily understandable by the populations it assists.	Frequency, consistency and timeliness of posting Exchange deliberations, pending policies and decisions, contracts and vendor materials, etc. on the website.
The Board should design its governance arrangements and operations to be the simplest and most open way of delivering its functions, having regard to its vision, mission and principles.	Ensuring that the Public Comment period remains on the board's agenda going forward.

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# Suggested Revisions to Principles for 2022

- Provide Connecticut residents with *an exceptional consumer experience*, promoting accessibility, integration and health equity for all.
- Maintain a valuable place within the State's healthcare ecosystem for the benefit of Connecticut residents, with a focus on *sustainability*, *flexibility* and affordability.
- Uphold *transparency* through accountable communications with Access Health CT stakeholders.
- Seek Access Health CT Values-based input from employees.

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# Suggested Revision for 2022

**Provide Connecticut residents with an exceptional consumer experience, promoting accessibility, integration and health equity for all.**

- **Accessibility.** Strive to reduce the number of residents without health insurance and improve access to healthcare for all residents.
- **Integration.** Integrate public program information to ensure continuous healthcare coverage for Connecticut residents and seamless transitions between public programs and Qualified Health Plans (QHP).
- **Health equity for all.** Work to address longstanding, unjust disparities in access to healthcare in Connecticut that influence health outcomes.

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# Suggested Revision for 2022

Maintain a valuable place within the State's healthcare ecosystem for the benefit of Connecticut residents, with a focus on sustainability, flexibility and affordability.

- **Sustainability.** Promote sustainability and long-term viability of Access Health CT, building on previous success toward mission-driven goals and seeking new, diverse solutions that help to reduce the rate of the uninsured and health disparities throughout the State.
- **Flexibility.** Be nimble and flexible in responding to the quickly changing insurance market, healthcare delivery system and general economic conditions in Connecticut, while being sensitive and responsive to consumer demands.
- **Affordability.** Play a crucial role in the affordability of health insurance for Connecticut residents and the industry through well-informed plan designs and certification.

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# Suggested Revision for 2022

**Uphold transparency through accountable communications to Access Health CT stakeholders.**

- **Accountable communications.** Ensure that business activities are shared transparently, services are easily available, and information is easily understandable.
- **Access Health CT stakeholders.** Key stakeholders include the public, board of directors, insurance carriers, state and federal legislature, and state- and federal-based agencies, brokers, community partners and employees.

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# Suggested Addition for 2022

Seek Access Health CT Values-based input from employees.

- **Access Health CT Values:** Authenticity, Integrity, Excellence, Ownership, One Team and Passion.

Authenticity	Integrity	Excellence	Ownership	One Team	Passion
Act with sincerity, credibility and self-awareness.	Commit to doing the right thing with genuine intention.	Aim high and challenge the status quo.	Take responsibility and initiative.	Collaborate to succeed.	Dedication to creating opportunities for greater health and well-being.

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# Q&A/Next Steps



# Advisory Committee Update

# Advisory Committee Update

## Health Equity, Outreach and Consumer Experience Advisory Committee

- AHCT Lead – Tammy Hendricks, Director – Health Equity and Outreach
- Met with Committee Chair Ted Doolittle– discussed membership and path forward
- Letter to current members advising of new expanded focus for Health Equity, Outreach and Consumer Experience Advisory Committee
- Potential new candidates for membership
- Board Vote on membership – May/June 2022
- Next steps

## Brokers, Agents & Navigators Advisory Committee

- Letter to members advising of dissolution of Advisory Committee

# Adjournment