

COVERED CALIFORNIA POLICY AND ACTION ITEMS

August 21, 2014



Where Are California's Uninsured Now?

Wave 2 of the Kaiser Family Foundation California Longitudinal Panel Survey Presentation at the Covered California August 2014 Board Meeting

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Longitudinal Panel Survey of Uninsured Californians

- Multi-wave Panel Survey: pre-open enrollment 2013, spring/summer 2014, and 2015 (Wave 1 paid for by KFF; Additional waves by The California Endowment)
- Representative probability based random sample of 2,000 adults ages 18-64 living in California, who reported having been without health insurance coverage for at least two months (subsequent waves re-interview same respondents)
- Interviews conducted by landline and cellphone, in English & Spanish

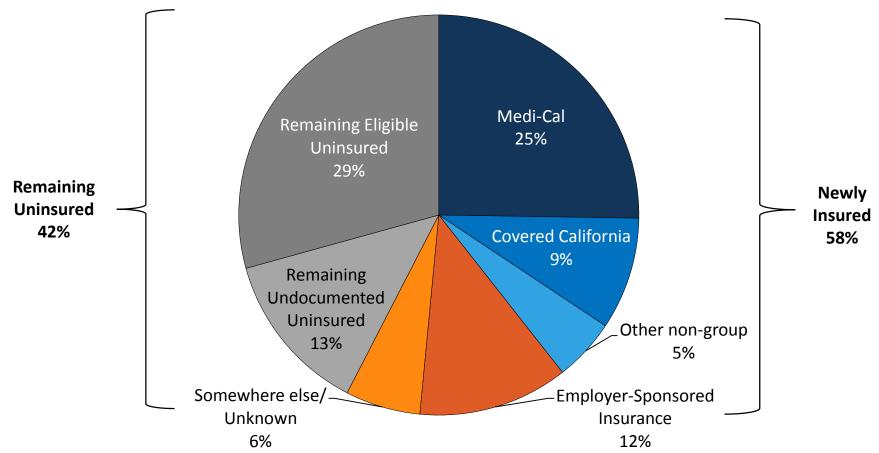
KEY QUESTIONS:

- Who gained coverage as of April 2014, and who remained uninsured?
- For those that gained insurance, where did they get their coverage, why did they buy it, do they feel it is affordable, what was their shopping experience like, how easy or difficult was the process of enrolling?
- For those who remained uninsured, did they try and obtain coverage, why did they remain uninsured, and what are their future plans?



Sources Of Coverage Among California's Previously Uninsured

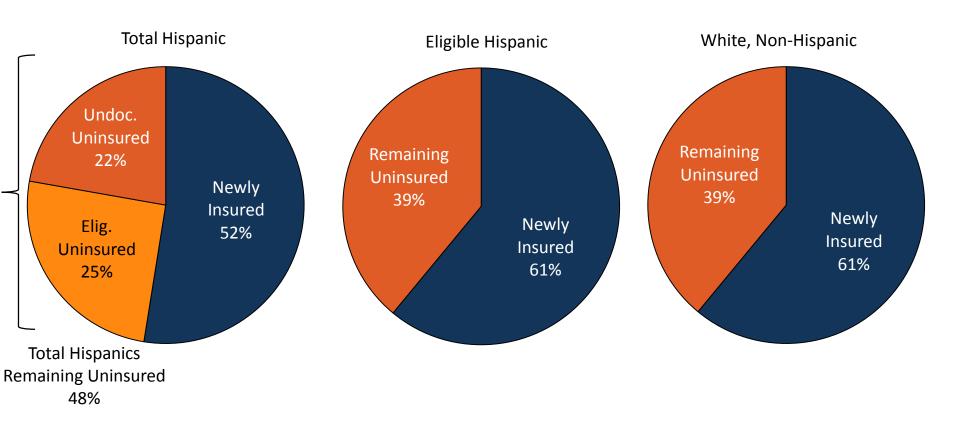
Are you, yourself, now covered by any form of health insurance or health plan including a private health insurance plan, a plan through an employer, or a plan through Medi-Cal, or do you not have health insurance at this time? Which of the following is your MAIN source of health insurance coverage?





In California, Previously Uninsured Whites and Eligible Hispanics Report Gains In Coverage At Similar Rates

Are you, yourself, now covered by any form of health insurance or health plan including a private health insurance plan, a plan through an employer, or a plan through Medi-Cal, or do you not have health insurance at this time?



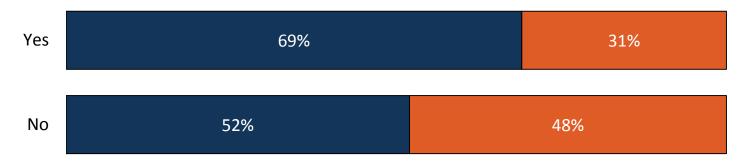
NOTE: "Eligible" refers to those who would be eligible for participation in the ACA coverage expansions based on their self-reported status as a citizen, permanent resident, or lawfully present immigrant.



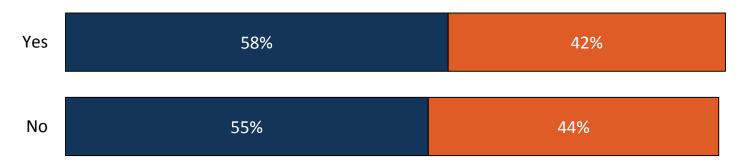
Seven In Ten Outreach Recipients in California Enrolled

■ Newly Insured ■ Remaining Uninsured

Since October 1st, have you been personally contacted by anyone about signing up for health insurance or Medi-Cal, through a phone call, email, text message, or door to door visit, or not?



In the past six months, have any of your friends or family encouraged you to sign up for health insurance, or not?



NOTE: Don't know responses not shown.

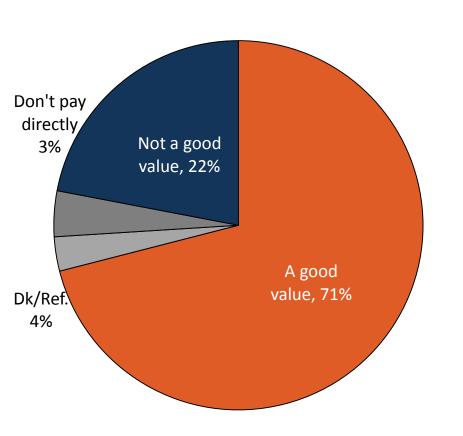


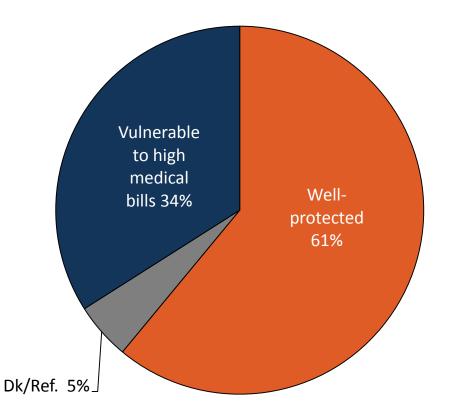
Most Newly Insured Through Covered California Say Their Plan Is A Good Value, Feel Well Protected

AMONG CALIFORNIA NEWLY INSURED THROUGH COVERED CALIFORNIA:

Would you say your health insurance is a good value for what you pay for it, or not?

In general, do you feel well-protected by your health insurance plan, or do you feel vulnerable to high medical bills?







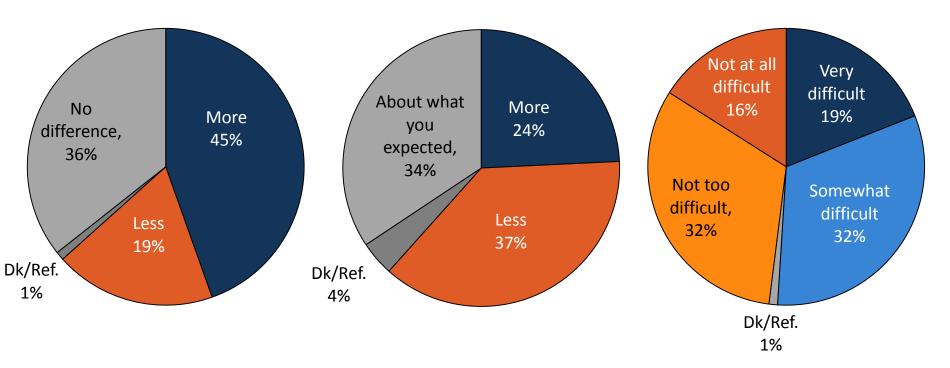
Perceptions Of Affordability Among The Newly Insured Through Covered California

AMONG CALIFORNIA NEWLY INSURED THROUGH COVERED CALIFORNIA:

Did gaining health insurance make you feel more or less financially secure, or did it make no difference in how financially secure you feel?

Did your health insurance plan cost more or less than you thought it would, pay the cost of health insurance each or was the cost about what you expected?

How difficult is it for you to afford to month?



NOTE: Question wording abbreviated. See topline for complete wording.

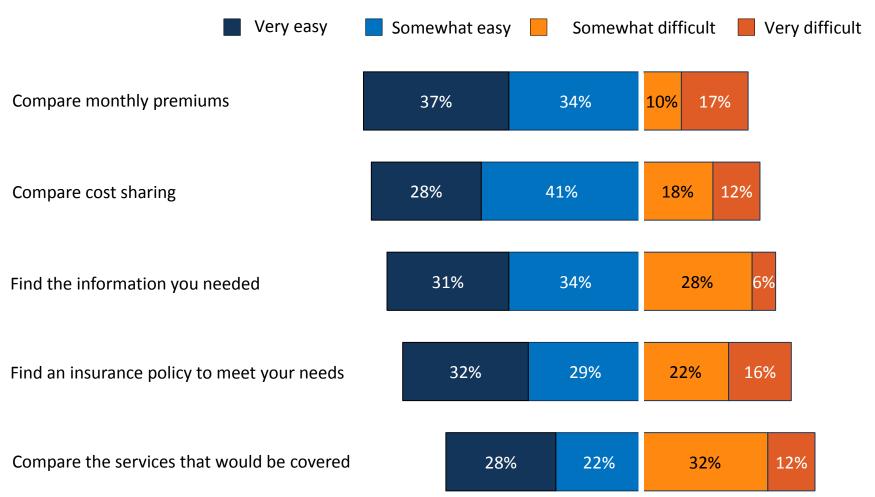
SOURCE: Where Are California's Uninsured Now? Wave 2 of the Kaiser Family Foundation California Longitudinal Panel Survey (April 1- June 15,

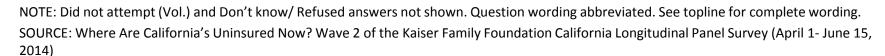
2014)



Large Shares Of Those Newly Insured Through Covered California Say Shopping Was Easy

AMONG CALIFORNIA NEWLY INSURED THROUGH COVERED CALIFORNIA: How easy or difficult was it for you to...

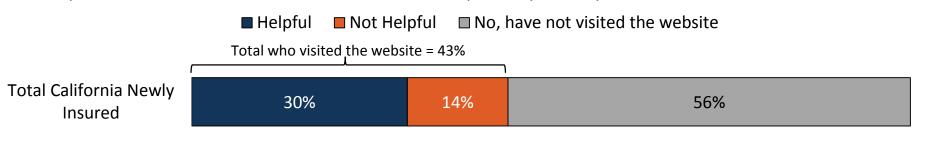


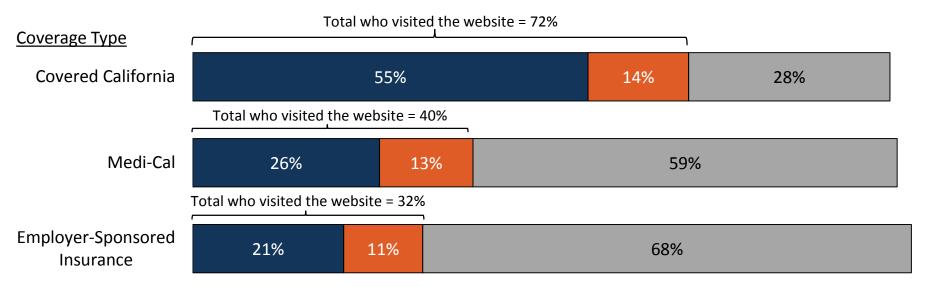




Most Of The Newly Insured Who Visited The Covered California Website Say It Was Helpful

AMONG CALIFORNIA NEWLY INSURED: Since October 1st, have you visited the website for the health insurance marketplace known as Covered California, or not?/ How helpful did you find your visit to the Covered California website?





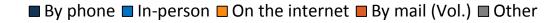
NOTE: Don't know/ Refused answers not shown.





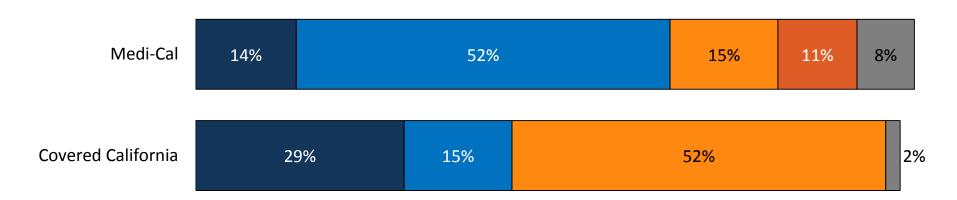
Enrollment Method Varies By Coverage Type

AMONG CALIFORNIA NEWLY INSURED, NOT THROUGH EMPLOYER: Did you (purchase/sign up for) your plan on the phone, in-person, on the internet, or some other way?





Coverage Type



NOTE: Don't know/ Refused answers not shown.



Many Newly Insured Had Assistance Enrolling, But From Varied **Sources**

Did someone help you enroll in health insurance or did you complete	Covered California	Medi-Cal	
the enrollment process on your own?			
Someone helped me	61%	60%	
Family member or friend	25%	9%	
Covered CA representative	26%	8%	
Health insurance broker or agent	8%	4%	
Community or county health worker	2%	31%	
Someone else	*	6%	
Completed it alone	39%	40%	
How easy or difficult was it for you to find someone to help you enroll			
or answer your questions?	200/	420/	
Very easy	28%	42%	
Somewhat easy	23	29	
Somewhat difficult	16	12	
Very difficult	21	13	
Did not attempt (vol.)	11	2	

NOTE: Don't know/Refused not shown.





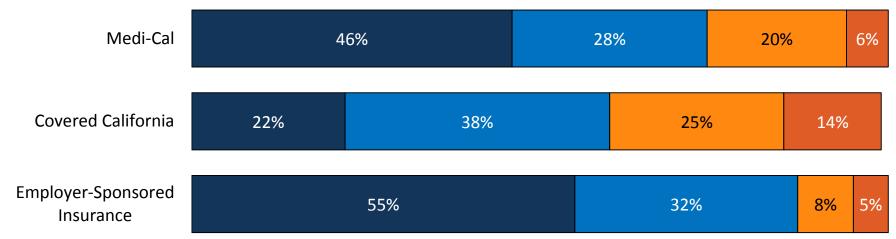
Most Say Process Of Signing Up For Coverage Was Easy

<u>AMONG CALIFORNIA NEWLY INSURED</u>: How easy or difficult was the process of signing up for (Medi-Cal/health insurance)?





Coverage Type



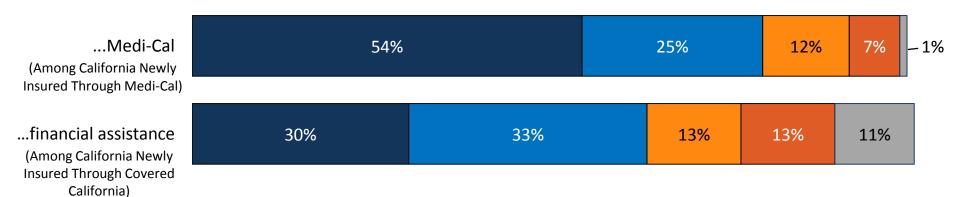
NOTE: Don't know/ Refused answers not shown.



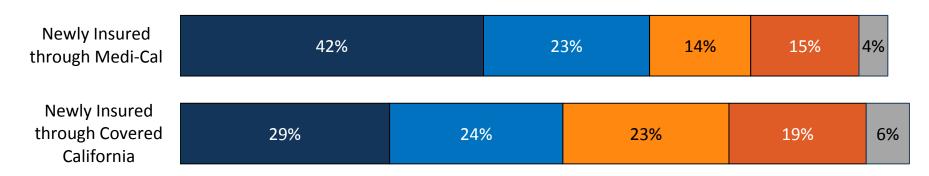
Enrollment Process Went Smoothly For Most, But Some Experienced Bumps in the Road

■ Very easy ■ Somewhat easy ■ Somewhat difficult ■ Very difficult ■ Don't know/ Refused

How easy or difficult was it for you to figure out if your income qualifies you for...



How easy or difficult was is for you to get confirmation from [the county/ Covered California] that your coverage has started?



NOTE: Did not attempt (Vol.) answers not shown.



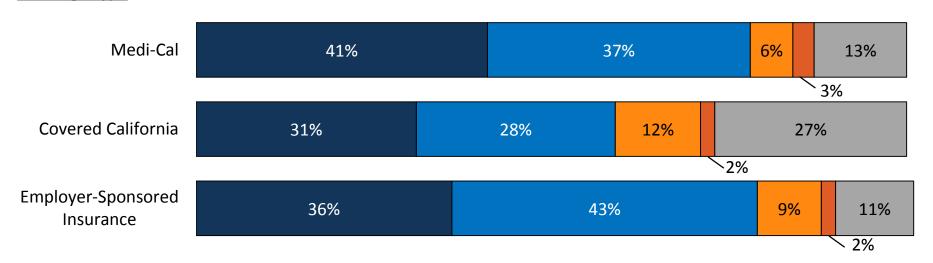
So Far Most Newly Insured Report Positive Experiences With Their Plan

<u>AMONG CALIFORNIA NEWLY INSURED</u>: Overall, would you say your experiences with your current health insurance plan have been very positive, somewhat positive, somewhat negative, or very negative?

■ Very positive ■ Somewhat positive ■ Somewhat negative ■ Very negative ■ Haven't used plan yet (vol.)



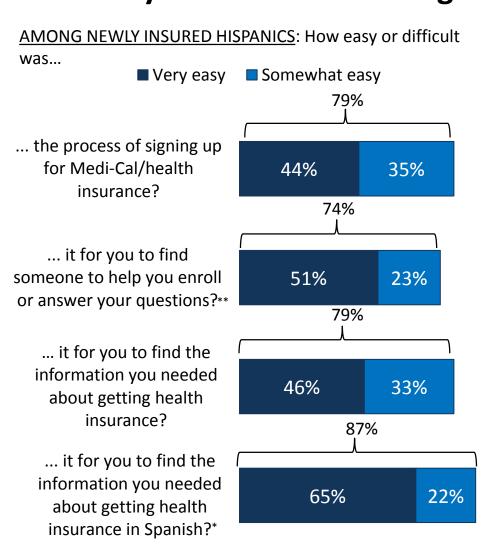
Coverage Type



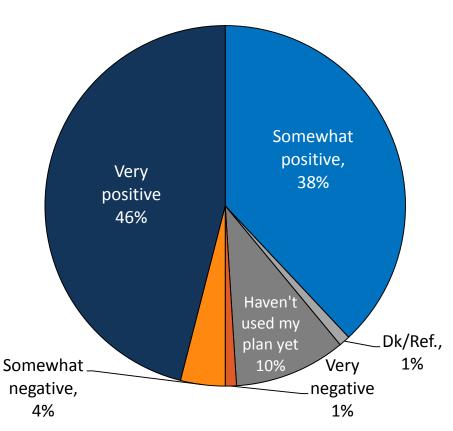
NOTE: Don't know/ Refused answers not shown.



Newly Insured Hispanics Say Enrolling Was Easy And Feel Positively About New Coverage



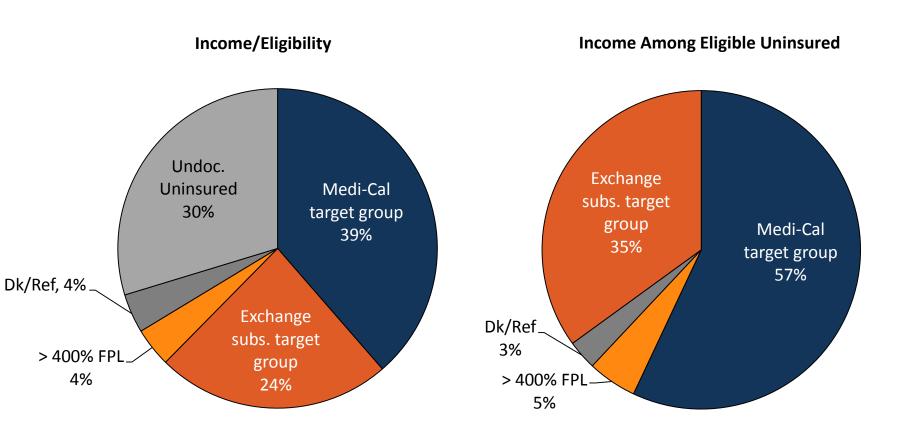
AMONG NEWLY INSURED HISPANICS: Overall, would you say your experiences with your current health plan have been...



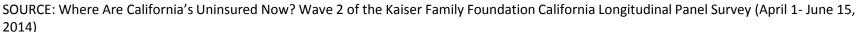
^{*}Among newly insured Spanish-speaking Latinos **Among newly insured other than through an employer SOURCE: Where Are California's Uninsured Now? Wave 2 of the Kaiser Family Foundation California Longitudinal Panel Survey (April 1- June 15, 2014)



California Remaining Uninsured By Income And Eligibility

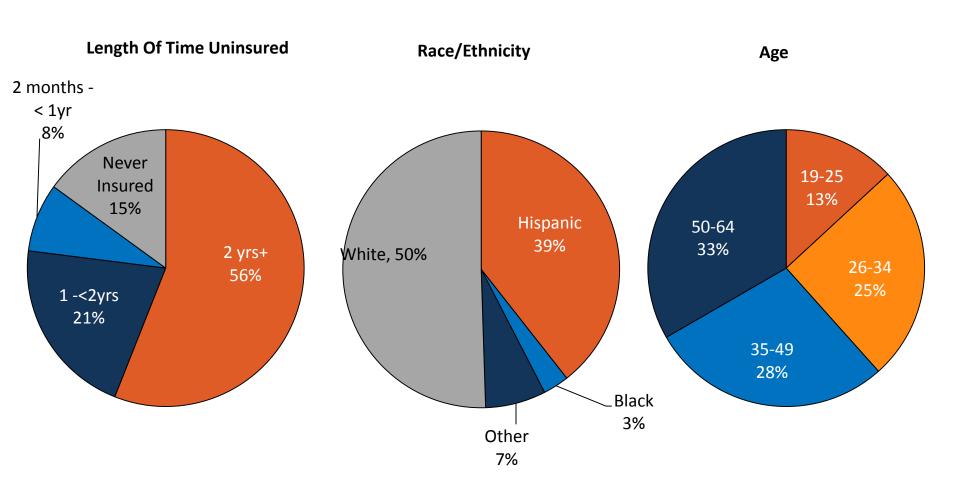


NOTE: For those who report being U.S. citizens or permanent residents, "Medi-Cal target group" refers to those with incomes 138% FPL or less and "exchange subsidy target group" refers to those with incomes greater than 138% and up to 400% FPL.





Demographics Of Exchange Subsidy Target Group

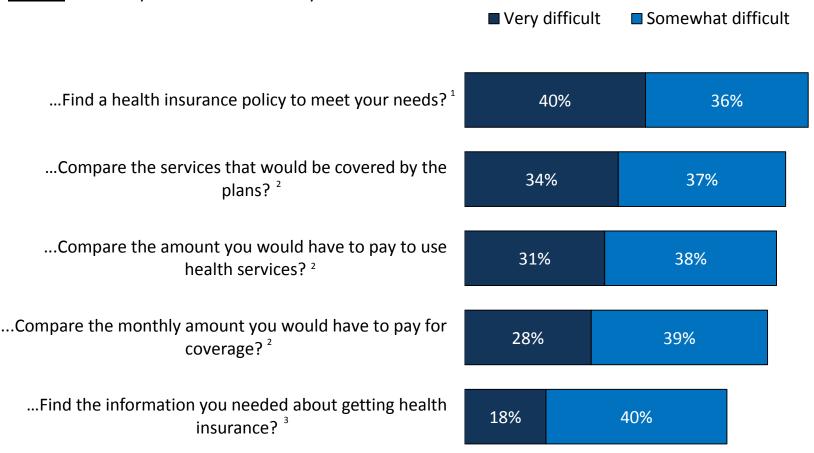


NOTE: For those who report being U.S. citizens or permanent residents, "Exchange subsidy target group" refers to those with incomes greater than 138% and up to 400% FPL.



Majority Of The Remaining Uninsured Who Tried To Enroll Had A Difficult Time Exploring Their Options

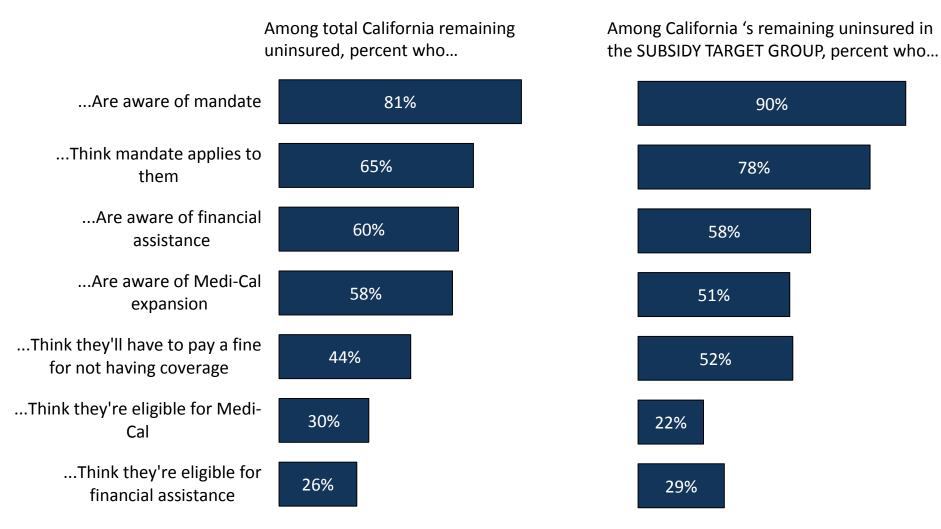
AMONG CALIFORNIA REMAINING UNINSURED WHO TRIED TO GET COVERAGE (36 percent of remaining uninsured overall): How easy or difficult was it for you to...



¹Among remaining uninsured who tried to get coverage through Medi-Cal or a plan purchased themselves directly from an insurer or through Covered California ²Among remaining uninsured who tried to get coverage through a plan they purchased themselves directly from an insurer or through Covered California ³ Among remaining uninsured who tried to get coverage NOTE: Very easy, somewhat easy and Don't know/ Refused answers not shown. SOURCE: Where Are California's Uninsured Now? Wave 2 of the Kaiser Family Foundation California Longitudinal Panel Survey (April 1- June 15, 2014)



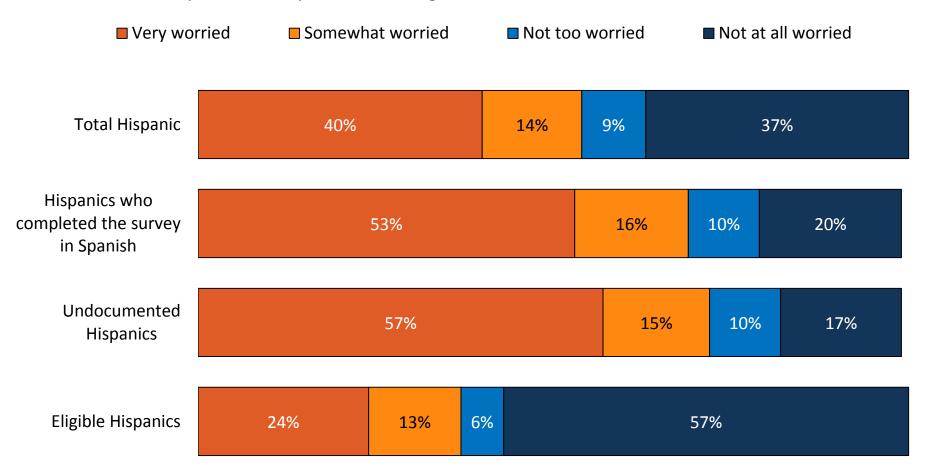
Large Majority Of Remaining Uninsured Are Aware Of Individual Mandate; But Smaller Shares Know About Other ACA Provisions





Many Remaining Uninsured Hispanics Worry Signing Up For **Health Insurance Will Draw Attention To Immigration Status**

AMONG CALIFORNIA REMAINING UNINSURED: How worried, if at all, are you that if you sign up for health insurance you will draw attention to your or a family member's immigration status?



NOTE: Don't know/ Refused answers not shown.





2015 OPEN ENROLLMENT AND RENEWAL CONSUMER JOURNEY



2015 TARGET POPULATION



2015 TARGETS BASED ON CALSIM (SUBSIDIZED ONLY)

	CalSIM Estimate of 2015 ELIGIBLES	Percent of Eligibles (Column %)	Plan Selections Through 4/15/2014	Percent of Total Plan Selections (column %)
TOTAL				
Subsidy eligible	2,530,000	100%	1,222,320	100%
Gender				
Male	1,450,000	57%	581,917	48%
Female	1,080,000	43%	640,403	52%
Race and Ethnicity*				
Latino	950,000	38%	367,000	31%
Asian	520,000	21%	265,000	22%
African American	130,000	5%	44,000	4%
White	850,000	34%	458,000	37%
Other	90,000	4%	88,000	7%
Income**				
Under 200% FPL	900,000	36%	671,625	55%
201-250% FPL	640,000	25%	235,756	19%
251-400% FPL	980,000	39%	310,038	25%

TAKEAWAYS:

Disproportionate target group for second open enrollment are:

- Men
- Latinos
- African Americans
- "Higher" low-income: 201-250% and 251-400% of Federal Poverty Line

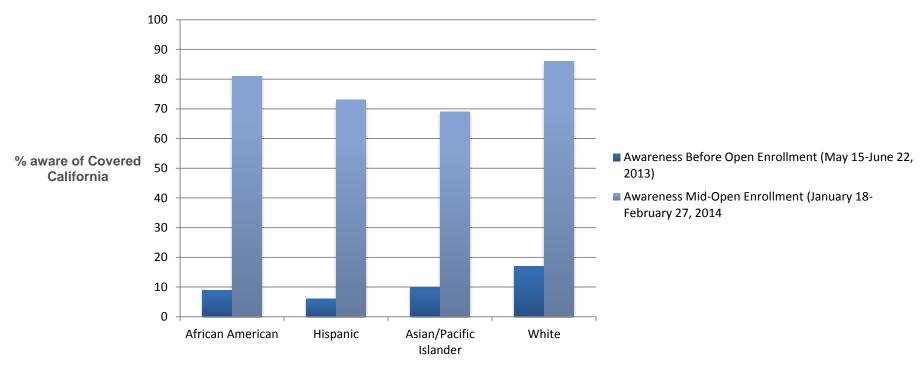


CONSUMER EXPERIENCE AND KNOWLEDGE FROM COVERED CALIFORNIA'S EFFORTS



GENERAL AWARENESS OF COVERED CALIFORNIA

General Awareness of Covered California: Before Open Enrollment vs. Mid-Open Enrollment



Source: NORC at the University of Chicago, Covered California Consumer Tracking Survey (January 17-February 27, 2014)

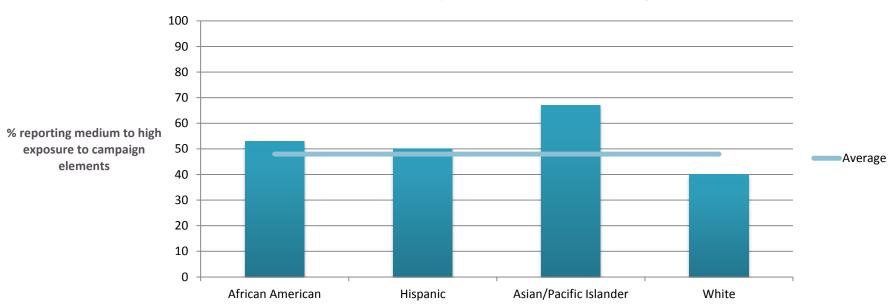
TAKEAWAYS:

- 1. Very strong increase in awareness of Covered California in six months, across all ethnic groups.
- 2. Slight gap with Latinos and Asian/Pacific Islanders compared to other groups



CONSUMER EXPOSURE TO COVERED CALIFORNIA OUTREACH

Exposure to Campaign Elements (CEC, Agent, Community Event)



Source: NORC at the University of Chicago, Covered California Consumer Tracking Survey (January 17-February 27, 2014

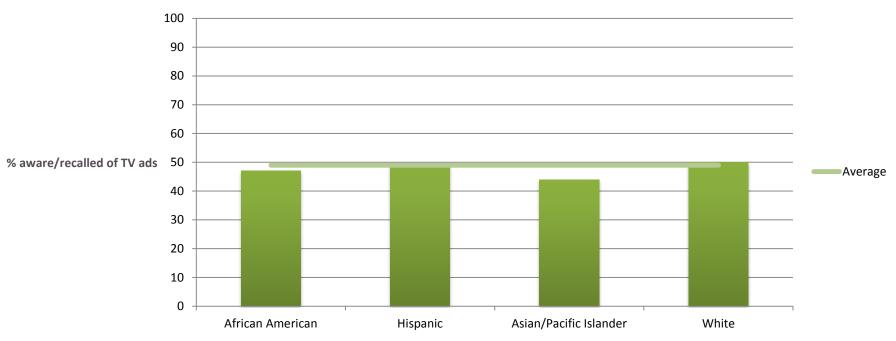
TAKEAWAY:

- 1. Campaign exposure was successful across ethnic groups, reaching 50% and more of minority populations.
- 2. Consumers with campaign exposure more likely to purchase a plan: 40% of consumers with high exposure enrolled, vs. 8% with no exposure



COVERED CALIFORNIA TV AWARENESS AND RECALL





Source: NORC at the University of Chicago, Covered California Consumer Tracking Survey (January 17-February 27, 2014)

TAKEAWAYS:

- 1. TV ads reached half of the population across all ethnic groups
- 2. According to NORC, consumers are twice as likely to purchase a plan when aware of Covered California ads



MARKETING AND OUTREACH LESSONS LEARNED AND 2015 STRATEGIES

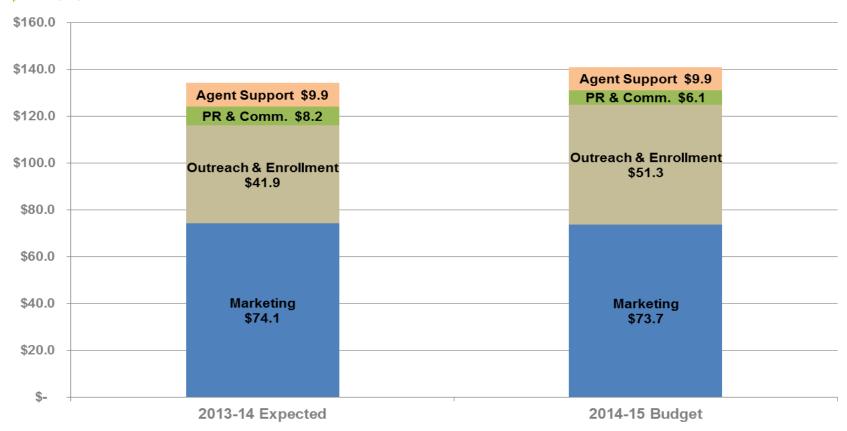
Colleen Stevens - Marketing Chief Armando Azarloza - President, Axis Agency Patricia Chambers - Media Director, Identity



COVERED CALIFORNIA ENROLLMENT ACTIVITIES

Includes Marketing, Outreach and Enrollment, Agent Support, Eligibility Administration, and Communications and Public Relations

\$ millions



TAKEAWAY:

Marketing spending will remain close to the same. Covered California is increasing funding for outreach and enrollment activities.



MARKETING OBJECTIVE

Increase the number of insured Californians by:

- 1. Supporting renewal and retention of existing Covered California members.
- 2. Promoting enrollment among the subsidy-eligible uninsured.
- 3. Continuing to build brand awareness and positioning Covered California as the trusted health insurance comparison resource for Californians seeking health coverage.
- 4. Helping Californians understand the value of health insurance and being covered.
- 5. Coordinating efforts with the ground campaign to support all service channels (Navigators, Grantees, CECs, Agents).



TARGET AUDIENCE

- 1. Existing Covered California members
- 2. Uninsured Californians
 - Core: Subsidy-eligible adults age 18-64
 - Other: While not the core audience, we'll also target the uninsured with household income up to \$100K, regardless of subsidy level
 - These segments are price sensitive, and cost of healthcare is one of major factors in acquiring and using health insurance

ISKIYOU .	морос			
SHASTA	LASSEN			
TEHAMA GLENN BUTT	PLUMAS SIERRA			
KE E	WEN PLACER			
NAPA SOLANDO	AMANOR CALAYERAS	.P/NE		
SAN	STANISLANS MAR	MONO		
S.LA	A MERCED MAI			
	SAN FRESH BENITO MONTEREY KING	TULARE	INYO	
	SAN JUI			
	SANT BARBA	A VENTURA LOS	10000000	RNARDINO
			RI	VERSIDE
			SAN DIEGO	IMPERIAL

Hispanic	African American	Asian	Multi- segment	LBGT	Millennial
Spanish Preferred	English	Chinese Korean	English	English	English
Bilingual		Vietnamese Filipino			
		Bilingual			



RETOOLED OPEN ENROLLMENT STRATEGIES BASED ON LEARNINGS

- 1. Integrated campaign with local ground efforts (Grantees, CECs, Agents, Navigators) complemented by full spectrum of advertising, social and earned media.
- 2. Anchor plan in ethnic, regional, and language diversity. Tailor media tactics and creative elements by segment for culture-specific campaigns to effectively reach each population.
- 3. Build momentum prior to Open Enrollment to (a) build brand awareness, and (b) communicate the value of Covered California and health coverage.
- 4. Promote local, in-person enrollment channels (agents, grantees, CEEs and navigators), as well as self-enrollment and call center services.



MESSAGING The strategic duo...

Continue to leverage the two established messaging platforms: "Welcome to Answers" and "I'M IN / Tengo un Plan de Salud"

 Motivate consumer by driving the value benefits/core position of the Covered CA brand and also encourages people to get coverage

"I'm in/Tengo un Plan de Salud" Educate consumers and provide in depth information about Covered CA/ACA and what it means to Californians, encouraging the uninsured to enroll

"Welcome to Answers"

 Enroll - Use a mix of brand and direct response mechanisms to drive enrollment leveraging the "I'M IN" and "Welcome to Answers" campaigns

Strategic mix



KEY MESSAGING OVERCOMING ENROLLMENT BARRIERS

Covered California is the only place that offers financial assistance and an objective and reliable way to comparison shop for quality health care plans.

<u>Affordability</u> - Covered California helps make quality health care more affordable by offering financial assistance for those who qualify.

<u>Accessibility</u> - Covered California gives Californians the power to access and choose the health care plan that fits their needs.

<u>Security/Peace of Mind</u> - Acquiring health insurance from Covered California protects Californians from the what-ifs of life.

<u>How to enroll</u> - Promote self-enrollment and the availability of local, in-person enrollment assistance that is free and confidential.

<u>Immigration concerns</u> – Promote the fact that immigration information is not shared with immigration services.



SEGMENT MEDIA CONSUMPTION

- With the exception of Asians, all segments spend considerably more time with
 - TV than any other medium
- Lower miles driven among Hispanics and African Americans probably due to higher use of public transportation

Average # of total **Television** Hours Viewed in a Week

Average # of Hours Listened to **Radio** in a Week

Average # of Hours Spent on the Internet in an Average Week

Average	# of No	ewspapers	Read in	28 Day	Period
711000		citopapeis	ricaa iii	,	i ciioa

Outdoor: Average # of Miles Drivenin Past 7 Days

Adults 18-49						
Hispanic	lispanic Black Asian White					
23	(30)	16	21	21		
(15)	(15)	10	13	13		
12	18	(21)	16	17		

b	5	5	6	6	5
S	122	122	132	148	129



Source: 2013 Gfk MRI Doublebase, California

MARKET COVERAGE BY SEGMENT

Maximize market coverage across targets, as afforded.

	MULTI-SEGMENT	HISPANIC	ASIAN	AFRICAN AMERICAN
		← In-lan	guage>	Segment-Specific
San Diego	✓	✓	✓	✓
Los Angeles	✓	✓	✓	✓
Palm Springs	✓	✓		
Santa Barbara	✓	✓		
Bakersfield	✓	✓		✓
Fresno	✓	✓	✓	✓
Salinas	✓	✓		
San Francisco	✓	✓	✓	✓
Sacramento	✓	✓	✓	✓
Chico	✓			
Eureka	✓			
El Centro	✓	✓		



SEEDING PERIOD SPOTLIGHT

STRATEGY

Purchase high reach vehicles at sustaining levels to support renewal & retention as well as build momentum leading up to Open Enrollment

CAMPAIGN TIMING

9/8 - 11/5

BUYING DEMO

Adults 18-49

MEDIA BUDGET

\$8.6MM

SEGMENTS

Hispanics, African American, Asian and Multi-Segment

MARKETS

SD, LA, PS, SB, BAK, FRE, SAL, SF, SAC, CHI, EUR, EC

	MULTI- SEGMENT*	SPANISH LANGUAGE	ASIAN- LANGUAGE	AFRICAN AMERICAN
TV	✓	✓		✓
RADIO	✓	✓	✓	✓
PREM. DIGITAL	✓	✓		✓

^{*}Multi-Segment includes: White, Millennial and LGBT, as well as bi-lingual Latinos, Asians & other ethnic populations



OPEN ENROLLMENT PERIOD SPOTLIGHT

STRATEGY

Purchase high reach vehicles and targeted media to provide program exposure and key consumer interface to drive enrollments and help retain existing members

CAMPAIGN TIMING 11/6 – 2/15 BUYING DEMO Adults 18-49 MEDIA BUDGET* \$28.8MM

SEGMENTS

Hispanic, African American, Asian, Millennial, LGBT and Multi-Segment

MARKETS

SD, LA, PS, SB, BAK, FRE, SAL, SF, SAC, CHI, EUR, EC

	MULTI- SEGMENT**	SPANISH- LANGUAGE	ASIAN- LANGUAGE	AFRICAN AMERICAN	MILLENNIAL	LGBT
TV/DRTV	✓	✓	✓	✓		
RADIO	✓	✓	✓	✓		
PREM & PROG DIGITAL	✓	✓		✓	✓	✓
PRINT / NEWSPAPER		✓	✓	✓		✓
OUT-OF-HOME	✓	✓	✓	✓		✓
SOCIAL MEDIA	✓	✓		✓	✓	
DIRECT RESPONSE	✓	✓		✓	✓	

^{*}Month over month, media budget is up by 10% compared to last OEP

^{**}Multi-Segment includes: White, Millennial and LGBT, as well as bi-lingual Latinos, Asians & other ethnic populations



OUTREACH, EDUCATION AND ENROLLMENT LESSONS LEARNED AND 2015 STRATEGIES

Sarah Soto-Taylor, Deputy Director of Community Relations Diane Stanton, Deputy Director of External Affairs



COMMUNITY WORK FORCE

- Outreach and Education: 2,461 Certified Educators
 - 50 organizations and over 250 subcontractors
 - 3 small business focused organizations
 - 4 medical professional organizations
- Enrollment Assistance: 5,776 Certified Enrollment Counselors
 - Over 800 Entities
 - 58% Spanish; 3% Cantonese; 3% Mandarin; 2% Vietnamese; 1% Tagalog; 1% Korean Speaking
- Agents: 12,347 Certified Insurance Agents
 - 15% Spanish; 5% Chinese; 5% Korean; 4% Mandarin; 3% Cantonese;
 3% Vietnamese Speaking
- Covered California Plans: 1,271 Certified Plan Based Enrollers
- Community Outreach Network: Over 160 organizations



LESSONS LEARNED

- Build on Outreach in a more focused way.
 - Partner the Outreach and Education Grantees with Counselors and Certified Insurance Agents to collaborate at events and to provide both education and enrollment assistance.
- Providing education in workshop sessions prior to setting-up an enrollment appointment.
- Aligning services at convenient times and locations for the consumer.
- Importance of powerful stories; tailoring messages to specific segments of the target communities.
- Need to assure availability of multi-language, culturally relevant collateral materials.
- Need to increase health literacy for those who have been uninsured.



LESSONS LEARNED (CONTINUED)

 Community exposure elements (i.e., events, communication from work force) highly correlated to enrollment

Outreach was relatively successful across demographics – those who had community exposure are five times as likely to enroll than those with no

exposure			
	No O elements	Medium 1 or 2 elements	High 3+ elements

	No Exposure	Med Exposure	High Exposure
Covered CA Purchase	8.7%	24.3%	39.8%
African American	47.4%	38.1%	14.5%
Hispanic	49.9%	34.7%	15.4%
Asian/Pacific Islander	33.1%	40.6%	26.4%
White/Other	59.6%	29.2%	11.2%





2015 STRATEGIES

Guiding Principles

- Consumer-focused; supporting self-enrollment as well as enrollment with assistance.
- Ensure the broadest outreach to individual consumers and small businesses by synchronize sales, marketing, customer service, and technical support efforts while driving both renewal and enrollment.
- 3. Use analytics, local intelligence, local alliances, and coordination of local activities to drive renewals and enrollment.
- 4. Establish support network for service channels, including the dissemination of language and culturally appropriate information to increase consumer understanding of the financial and practical need for health coverage.
- 5. Use service channel progress reports to track toward enrollment goals.



2015 STRATEGIES Goal and Objective

Goal:

The Covered California ground effort is the primary vehicle to identify, promote, and support new opportunities for connecting with, recruiting and retaining subsidy eligible customers and small businesses.

This will be accomplished by leveraging and maximizing the Community Work Force; *all* Certified Enrollment Counselors, Agents and Navigators, Educators, Community Outreach Network, Plan Based Enrollers and County Eligibility Workers.

Objective:

End the 2014-15 Open Enrollment period with at least 1,700,000 consumers enrolled in Covered California Plans.



2015 STRATEGIES Plan

Regional work plan that includes enrollment goals based on analysis of data of the remaining uninsured and local research.

Dedicated resources to manage regional sales programs and events within targeted segments:

- No California: Rating Regions 1, 2, 3
- Bay Area: Rating Regions 4, 5, 6, 7, 8
- Central Coast: Rating Regions 9, 12
- Central Valley: Rating Regions 10, 11, 13, 14
- Los Angeles: Rating Regions 15, 16
- Inland Empire: Rating Region 17
- Orange: Rating Region 18
- San Diego: Rating Region 19



CALHEERS 2015 STRATEGIES

Karen Ruiz, CalHEERS Project Chief



CALHEERS 2015 STRATEGIES

- Improve usability and readability English and Spanish
- Improve Self-Service functionality for resetting a Consumer password and retrieving a username.
- Improve the verification process by reducing requirements for manual verification and providing improved instructions when documents are required.
- Improve collection of tax household and income information by:
 - Aligning more closely to tax forms
 - Improving clarity and precision of questions
- Add the ability for consumers to switch from a non-subsidized application to a subsidized without having to re-enter application data.
- Add contextual help videos and FAQ's on each application page.
- Build a budget worksheet to help SCR's troubleshoot income errors.
- Expand the ability to collect the binder payment at check out from two to seven carriers.
- Improve security by implementing remote identity proofing.



SERVICE CENTER LESSONS LEARNED AND 2015 STRATEGIES

Carene Carolan, Deputy Director, Service Center



SERVICE CENTER LESSONS LEARNED

- Much higher-than-anticipated consumer interest led to significantly greater contact volume than was forecast. Over 2,180,000 calls were offered.
- Enrolling in affordable health coverage requires multiple contacts with consumers—the "one touch and done" approach was not realized.
- Performance goals must balance consumer expectations with budgetary and facilities constraints.
- System performance is critical to the consumer experience as it impacts consumers' ability to self-serve as well as Service Center employees' ability to serve customers.
- There is a need for a streamlined process to work with carriers, regulators and advocates to assist consumers enrolling in coverage and navigating the health care system post-enrollment.



SERVICE CENTER 2015 STRATEGIES

- Maintain goal of 80% of calls answered within 30 seconds.
- Promote first call resolution through training and Knowledge Management System enhancements so consumers don't have to call multiple times to get their questions answered.
- Improve consumer notices of action to reduce confusion that results in calls to the Service Center.
- Continue to expand bilingual staffing. Approximately 76% of recent hires (103) were bilingual
- Hire to fill all available seats in Rancho Cordova and Fresno Service Centers.
- Extend contract with Contra Costa County to take advantage of fully trained staff.
- Initiate a short term contract with an outside vendor to meet peak workload demands.
- Enhance Technology Solutions
 - Continued development to identify key areas of opportunity to leverage the IVR and enhance self-service utilization based on lessons learned from open enrollment
 - CalHEERS defect remediation and systems modifications are critically needed to improve consumer navigation and application usability.
 - CalHEERS, Customer Relations Management (CRM) and Knowledge Management systems stability will reduce staff time spent performing manual workarounds, tracking those workarounds, and remedying defects.



RENEWAL CONSUMER JOURNEY

Thien Lam, Director of Eligibility and Enrollment



COVERED CALIFORNIA 2015 RENEWAL PRINCIPLES

- 1. Focus on the consumer experience by offering service options and making the process easy.
- 2. Engage and leverage our certified delegates, partners, and plans.
- 3. Maximize retention by providing an automatic renewal option where possible.
- 4. Encourage consumer self-service through the website, Interactive Voice Response (IVR), and other tools.



2015 RENEWAL: POLICY DECISION SUMMARY

- 1. Implement renewal capabilities in October. Start renewal noticing early in October.
- 2. Auto-renew consumers that do not take action for more than 30 days after projected eligibility calculated in current plan.
- 3. Allow automatic renewal for consumers who can remain in the same product type or move to a different enhanced silver level, <u>regardless</u> of premium rate or Advance Premium Tax Credit (APTC) change.
- 4. Allow automatic renewal for consumers who do not provide consent to access federal hub into non-subsidized plan.
- 5. Promote online and in-person renewal process.
- 6. Close renewal for consumers who does not complete active renewal by December 15th. Consumers who miss this deadline date will have to re-apply for 2015 during the Open Enrollment period. Consumer may have at least a one-month break in coverage under these circumstances.



APPENDIX MARKETING AND OUTREACH LESSONS LEARNED AND 2015 STRATEGIES



TV STILL KING BUT DIGITAL & MOBILE CONSUMPTION ON THE RISE



MULTI-SEGMENT

Contemporary

hit radio

Adult

contemporary

Modern Rock

In-culture Media Insights

- ✓ General Market is watching more TV than ever. Time-shifted viewing is up by nearly 15% while average time spent on Live TV has decreased by only 3 minutes
- ✓ In 2010, the General Market spent just 24 minutes a day consuming media on their phones. In 2013, the rate catapulted to two hours and 22 minutes of phone media consumption (more than five times higher)
- ✓ 90% of people stated they listen to traditional radio while 53% said they listen to digital radio. Digital music consumption is on the rise

Source: E-marketer U.S. Consumes More Digital Media Than TV for First Time 2013; Edison Research The Infinite Dial, 2013; Nielsen 2013

TV PROGRAMS





RADIO GENRES / FORMATS

















DIGITAL





















DUAL CONSUMPTION WITH HIGHER ENGAGEMENT IN-LANGUAGE



HISPANIC

In-culture Media Insights

- ✓ 70% of Hispanics think a product or service is for them when they see advertising in Spanish
- ✓ 69% pay more attention to media created specifically for Hispanics or media created for the general population that includes Hispanics
- ✓ 59% of Hispanics think it is important for brands to have an understanding and appreciation of their cultural history

Source: Yankelovich Statements for CC, 2014

TV PROGRAMS











RADIO GENRES / FORMATS

Spanish AC

Regional Mexican

Spanish Oldies











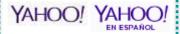


KJOR 104.1





DIGITAL











PRINT NEWSPAPERS









*Note: Where insertable

AFRICAN AMERICAN

LEANING INTO CULTURE...HEAVY CONSUMPTION ACROSS CHANNELS



AFRICAN AMERICAN

In-culture Media Insights

- ✓ 91% of Blacks believe that Black media is more relevant to them
- ✓ Blacks watch 37% more television than any other group
- ✓ Blacks heavily use sites with content related to Education and Careers, Entertainment, Family and Lifestyle (especially Religion and Spirituality), as well as websites that are specifically focused on Black consumers.

Sources: Yankelovich Statements for CC, 2014; Nielsen African-American Consumer Report, 2013

TV PROGRAMS











RADIO GENRES / FORMATS





Old School Music



















DIGITAL









PRINT NEWSPAPERS









57



AFFINITY TO IN-LANGUAGE CONTENT, BOTH ON TRADITIONAL & DIGITAL



In-culture Media Insights

- ✓ Ads featuring culturally relevant situations and characters make up 65% of top ads among Asian Americans
- ✓ Asian Americans visit in-language website portals and are more likely to use services with the most culturally relevant, in-language offerings
- ✓ While Asian Americans are tech savvy, many still use traditional media such as TV, radio, and print to get culturally relevant entertainment and information.

Source: Nielsen State of the Asian American Consumer, 2013

ASIAN

TV PROGRAMS







Mostly News/ Talk not many

music

formats

RADIO GENRES / FORMATS















DIGITAL









PRINT NEWSPAPERS











CONTENT ON THE GO ACROSS PLATFORMS



MILLENIALS

In-culture Media Insights

- ✓ Millennials watch 50% less TV than other segments
- ✓ Millennials more likely to watch content on the go; laptops (42% VS. 18%), with DVR (40% VS 36%) or On-Demand (26% VS. 18%)
- ✓ User-generated content makes up 30% of media content consumed by Millennials in terms of time spent. UGC also considered more trustworthy and memorable than other media sources
- ✓ Spanish language ads have strong emotional engagement and recall than those in English among Hispanic Millennials

Sources: Crowdtap, Ipos Media CT and the Social Media Advertising Consortium, Univision and Neilsen "The Bilingual Brain: Language Matters", Yume & IPG Lab 2013

TV PROGRAMS







*Note: Where insertable

DIGITAL



PANDORA











PLATFORMS

Average of 96 hours spent on digital platforms a month Ranking of devices used to view video:









50

DIGITAL REMAINS CORE SOURCE OF TARGETED CONTENT



In-culture Media Insights

- ✓ Highest consumption among LGBT remains targeted content sites and blogs; 67% of gay men and 58% of lesbian women
- ✓ More than one-third of LGBT web users said they'd increased their
 visits to these sites in the past year
- √ 41% of gay men had read LGBT email newsletters during the past week, and 50% had read regional LGBT publications E-marketer, 2013

TV NETWORKS



DIGITAL

















PRINT NEWSPAPERS









APPENDIX RENEWAL CONSUMER JOURNEY



2015 RENEWAL KEY DATES

Key Dates:	Key Activities:
Starting July 28 th	Send frequent e-mail and direct mail to consumers with messaging to help them prepare for the annual renewal process (e.g., setting up a on-line account, consent to electronically verify their information with the federal services hub, etc.)
July 23 rd – August 15 th	Notification to consumers who have not set up CalHEERS accounts
July 30 th	Shop and Compare Tool with new 2015 rates made available
September 2 nd – 9 th	Notification to consumers who have not provided consent to verify against federal hub
Starting in September	Covered California TV and radio ads will start
September 30 th	Individual market rates approved by regulators
October 7 th – November 15 th	Covered California sends targeted outreach notices to consumers
By November 1st	Carriers send renewal notices including 2014 APTC amount with and 2014 and 2015 premium amounts
November 15 th	Open Enrollment begins
October 10 th - December 15 th	Covered California sends final eligibility determination notice including 2015 APTC
November 14 th – December 16 th	Covered California sends plan selection notice including 2015 APTC and 2015 premium. Consumers auto-renewed into current plan if no action taken
December 15 th	Last day for renewal plan selection for January 1, 2015 coverage



RENEWAL NOTICE: CONTENT

Notice Timing	Content	Recipients
Covered California Account Creation Notice Jul. 23 rd – Aug. 15 th	Notice that explains how consumers can set-up a Covered CA On-Line Account in order to help them self-serve. This allows members to check their account and make changes without assistance. Notice includes: • Case Number • Access Code • Account creation information and instructions to complete the process	Consumers without a CalHEERS account
Covered California Federal Hub Notice Sept. 2 nd – Sept. 9 th	Notice that asks authorization to electronically verify household income with the federal services hub. Explains the importance to provide consent to help facilitate a seamless renewal process for subsidy program. Notice includes: • Case Number • Instructions to complete the process	2014 enrolled and effectuated population
Covered California Renewal Notice Oct. 7 th - Nov. 15 th	Notice that informs and explains the renewal process to the consumers. Explains the importance to retain health insurance. Notice includes: Case Number 2014 APTC amount and plan selection Certified Agent/Entity delegated on 2014 application Referral to carrier notice for 2015 rate that will be sent to consumer Instructions to complete the renewal process Date by which coverage will be auto-renewed if no action is taken and what happens if the consumer does not respond	2014 enrolled and effectuated population



RENEWAL NOTICE: CONTENT (CONTINUED)

Notice Timing	Content	Recipients
Co-branded Carrier Renewal Notice By November 1 st	 Notice that informs and explains the renewal process to the consumers. Explains the importance to maintain health insurance. Notice includes: 2014 APTC calculation, 2014 gross and net premium amounts 2015 gross premium amount before 2015 APTC is applied Reason for premium change Benefit change explanation Referral to Covered California to report changes 	2014 enrolled and effectuated population
Covered California Eligibility / Welcome Notice Oct. 10 th – Dec. 15 th	 Notice that informs and explains the renewal eligibility determination for consumers. Notice includes: Case Number Final 2015 APTC calculation amount Final program specific eligibility determination outcome for each member 	2014 enrolled and effectuated population where a renewal determination occurred for the 2015 plan year
Covered California Information Renewal Notice Nov. 14 th – Dec. 16 th	Notice that informs and explains the renewal eligibility determination for consumers who passively renewed coverage. Notice includes: Case Number 2015 APTC Calculation Amount 2015 Gross Premium Amount 2015 Net Premium Amount Explains Open Enrollment process if consumers prefer to shop around Plan Contact Information	2014 enrolled and effectuated population who passively renewed (e.g., did not take any action) for 2015 plan year



RENEWAL NOTICE: CONTENT (CONTINUED)

Notice Timing	Content	Recipients
Carrier Invoice Dec. 5 th – Jan. 1 st *	Billing statement sent from issuer to consumers that identifies consumer premium. • Final 2015 APTC Amount • 2015 Net Premium • Payment Due Date	

^{*}Need to discuss invoicing timing with carriers



COVERED CALIFORNIA REGULATIONS



CERTIFIED INSURANCE AGENT REGULATIONS READOPTION (ACTION)

Dan Frey, Policy Advisor



CHANGES TO AGENT REGULATIONS AND AGENT AGREEMENT

Highlights of Changes:

Regulations

- § 6404 Administrative Fee increased from \$10.25 to \$12.00
- § 6406 Remove four (4) hour recertification requirement for Certified Insurance Agents

Agent Agreement

- Change Contract Term from one (1) to five (5) years
- Add "For the Benefit of" language so Agent can provide Agency Name if commission is to be paid to the Agency
- Prohibit Agent from receiving gifts or compensation for enrollment assistance
- Agent shall ensure voter registration assistance is available
- Allow payment to Agents for Medi-Cal Enrollment Assistance
- Audit Provision maintenance of records for a minimum of ten (10) years
- Privacy and Security Requirements revised to strengthen and align with State and Federal Privacy and Security Laws, including fingerprinting and background check for non-licensed agent support staff
- Updates to Marketing and Branding Guidelines for stronger consumer protection

Required Actions

Readopt Certified Insurance Agent regulations



REMOTE IDENTITY PROOFING REGULATIONS (ACTION)

Katie Ravel, Program Policy Director



REMOTE IDENTITY PROOFING REGULATIONS

Federal Guidance Requires Identity Proofing

- Federal guidance released in June 2013 requires identity verification for all consumers applying for health insurance through the individual Marketplace.
- Identity proofing ensures applicants are who they say they are.
- The Remote Identity Proofing Service is a federally sponsored service that uses Experian to verify applicants' identities based on correct answers to security questions, which may pertain to applicants' credit history, residential history, or other identifying attributes.



REMOTE IDENTITY PROOFING REGULATIONS (CONTINUED)

Covered California has implemented the identity proofing process which includes use of the federal identity proofing service:

- Applicants in the individual marketplace will be able to verify their identity via one of the following methods:
 - Paper application: Signature under the penalty of perjury
 - Visual Verification: Verification of identity through in-person review of proof of identity with Certified Representative which will be uploaded to CalHEERS <u>OR</u> mail or electronic transmission of proof of identity
 - Remote Identity Proofing: Experian generated questions through the Federal Data Services Hub.
- SHOP Marketplace identity verification process will remain unchanged

Required actions

Readopt identity proofing regulations



REGULATION RE-ADOPTIONS OF QHP AND DENTAL RECERTIFICATION AND NEW ENTRANT AND SHOP APPEALS (ACTION)

Katie Ravel, Program Policy Director



REGULATION READOPTIONS: ACTION

- Today staff requests a re-adoption of the following program regulations:
 - QHP Recertification and New Entrant Regulations
 - Dental Recertification and New Entrant Regulations
 - SHOP Appeals
- No changes have been made to these regulations since the last adoption by the Board.
- Staff are working with stakeholders on a parallel track to make these regulations permanent.



BOARD ACTION REQUIRED

- Board Action Required:
 - Certified Insurance Agents Resolution #2014-69
 - Identity Proofing Regulations Resolution #2014-70
 - QHP and Dental Recertification and New Entrant Regulations – Resolution #2014-71
 - SHOP Appeals Resolution #2014-72



ELIGIBILITY AND ENROLLMENT REGULATIONS (DISCUSSION)

Thien Lam, Director of Eligibility and Enrollment



ELIGIBILITY AND ENROLLMENT PROPOSED STATE REGULATIONS

Regulation Section	Summary
§ 6498. Annual Eligibility	 Covered California shall send an annual renewal notice to all qualified individuals. The notice will include the following information:
Redetermination.	 Explanation of the annual renewal process
	Requirements to report changes
	 The last day in which a plan can be selected for a January 1st start date of coverage
	 For individuals who <u>provided consent</u> to obtain their tax data through electronic sources, the notice will also include:
	 The enrollee's most recent monthly Advance Premium Tax Credit (APTC) amount and level of Cost-Sharing Reductions (CSR)
	 Data used in the enrollee's most recent eligibility determination
	 An explanation to the enrollee that their 2015 eligibility will be identical to their recent eligibility determination for 2014 if they do not complete the renewal process to obtain updated eligibility determination
	 An explanation to the enrollee that the enrollee should contact Covered California and complete the Exchange's renewal process in order to obtain the most accurate eligibility determination.
	 A description of the tax credit reconciliation process
	 For individuals who <u>did not provide consent</u> to obtain their tax data through electronic data sources, the notice will include:
	An explanation that (unless the enrollee completes renewal process to obtain an updated eligibility determination) their APTC and CSR will end on the last day of the current benefit year. If consent is not provided, the consumer's coverage in a QHP will be renewed for the following benefit year without APTC and CSR.



ELIGIBILITY AND ENROLLMENT PROPOSED STATE REGULATIONS

Regulation Section	Summary
Redetermination. (Continued)	 To complete a renewal process, an application filer must: Log into their CoveredCA.com account Check their application information for accuracy Confirm their information to get an eligibility determination Select a plan for 2015, if applicable In circumstances in which the plan product (e.g., EPO/HMO/PPO) that a consumer is enrolled in continues to be available, Covered California shall ensure that renewal in coverage occurs as follows: Enrollee will be renewed within the same exact issuer, product and metal tier, if applicable; If the enrollee's eligibility changes their enhanced Cost Sharing Reductions (CSRs), they will be renewed into the same metal tier with different CSRs (e.g., Silver 73 to Silver 94) or in a non-CSR silver product; If the enrollee's current Qualified Health Plan (QHP) (e.g., metal tier) is no longer available in the enrollee's rating area, the enrollee's coverage shall be renewed in a QHP (within the same product – e.g., EPO/HMO/PPO) that is one metal tier higher or lower than the enrollee's current QHP; or If a QHP (e.g., metal tier) within the same product (e.g., EPO/HMO/PPO) at one metal tier higher or lower is not available, the enrollee will be renewed in any other QHP (e.g., any metal tier) offered under the same product for which the enrollee is eligible.



ELIGIBILITY AND ENROLLMENT PROPOSED STATE REGULATIONS

Regulation Section	Summary
§ 6498. Annual Eligibility Redetermination. (Continued)	 In circumstances in which the product (e.g., EPO/HMO/PPO) that a consumer is enrolled in is no longer available, Covered California shall ensure that re-enrollment in coverage occurs as follows: The enrollee shall be re-enrolled in a QHP product provided by the same issuer at the same metal tier. The QHP product will be the one most similar to the enrollee's current product; If the issuer no longer offers a product with the same metal tier as the enrollee's current QHP, the enrollee shall be re-enrolled in a QHP at one metal tier higher or lower than the enrollee's current QHP in the same product offered by the issuer. The QHP product will be the one most similar to the enrollee's current product; If the issuer does not offer another QHP at the same metal tier, or one metal tier higher or lower than the enrollee's current plan, then – the enrollee shall be re-enrolled in any other QHP (e.g., any metal tier) offered by the enrollee's current issuer; or If the issuer no longer offers any QHP in the Exchange, the enrollee may be re-enrolled in a plan offered outside the Exchange by the issuer under the product that is the most similar to the enrollee's current Exchange product. However, the tax credits and cost sharing reductions shall not be available for enrollment that is not through the Exchange. In circumstances in which the issuer of the QHP in which he or she is enrolled has discontinued offering all health insurance coverage in the individual market in the State, consistent with 45 CFR Section 147.106 and the applicable State law, the enrollee's current coverage shall be terminated on the last day of the current benefit year, and the enrollee's coverage shall not be renewed unless he or she completes the Exchange's renewal process, obtains an updated eligibility determination, and selects a QHP with a different issuer through the Exchange.



VOTER REGISTRATION REGULATIONS (DISCUSSION)

Katie Ravel, Program Policy Director



VOTER REGISTRATION REGULATIONS

- Covered California is required to offer its consumers voter registration services each time a consumer seeks service or assistance with a new application, a renewal or reenrollment of their application, or a change of address. These regulations:
 - Detail the process for Covered California Assisters and Certified Insurance Agents to provide applicants with voter registration services using the CalHEERS portal and the paper application.
 - Outline the in-person and phone procedures for Assisters and Agents assisting applicants with voter registration services.
 - Describe the process for Plan-Based Enrollers using the CalHEERS portal to assist applicants with voter registration services.
 - Clarify that Assisters and Agents are prohibited from interfering with, or attempting to influence, an applicant's right to register to vote or decline voter registration services.

