

COVERED CALIFORNIA HEALTH PLANS HAVE ARRIVED...AT LONG LAST

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California Health Benefit Exchange Board Meeting
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Covered California Health Plan Selection and Contracting Timeline (as of May 23 2013 subject to revision)

Activity	Date
Final Model Contract Released	May 22, 2013
Model Contract Attachments Released with Request for Board Approval of Performance Standards for 2014	May 22, 2013
Covered California Health Plans Tentatively Certified and Announced for Individual Exchange	May 23, 2013
Board Action Requested on Performance Standards in Model Contract	May 23, 2013
SHOP and Standalone Dental Plan Negotiations, Selections and Announcement (exact dates TBD)	June 2013
Reasonableness Rate Review by Regulators	May 23 – June 30, 2013
Final Contracts Signed and Certification of Covered California Health Plans	July 1, 2013
Covered California Plans Loaded into CalHEERS	Beginning July 2, 2013

Covered California Health Plans: Some Caveats and General Points

- Some plans serve part of the listed rating region; all partial service areas comport with DMHC approved geographic service areas.
- All issuers required to offer all metal levels but allowed to “mix and match” HMO and PPO offerings to meet this requirement.
- Plan rates accepted and announced today cover all Essential Health Benefits except pediatric dental which will be added very soon.
- HMO- Health Maintenance Organization
- PPO- Preferred Provider Organization
- EPO- Exclusive Provider Organization



Region 1 Alpine, Del Norte, Siskiyou, Modoc, Lassen, Shasta, Trinity, Humboldt, Tehama, Plumas, Nevada, Sierra, Mendocino, Lake, Butte, Glenn, Sutter, Yuba, Colusa, Amador, Calaveras, & Tuolumne.

Region 2 Napa, Sonoma, Solano, & Marin.

Region 3 Sacramento, Placer, El Dorado, & Yolo.

Region 4 San Francisco.

Region 5 Contra Costa.

Region 6 Alameda.

Region 7 Santa Clara.

Region 8 San Mateo.

Region 9 Santa Cruz, Monterey, & San Benito.

Region 10 San Joaquin, Stanislaus, Merced, Mariposa, & Tulare

Region 11 Madera, Fresno, & Kings.

Region 12 San Luis Obispo, Santa Barbara, & Ventura.

Region 13 Mono, Inyo, & Imperial.

Region 14 Kern.

Region 15 shall consist of the ZIP Codes in Los Angeles County starting with 906 to 912, inclusive, 915, 917, 918, & 935.

Region 16 shall consist of the ZIP Codes in Los Angeles County other than those identified in subparagraph (xv).

Region 17 San Bernardino & Riverside.

Region 18 Orange.

Region 19 San Diego.

Covered California Health Plans

- Region 1 counties:
 - Alpine, Del Norte, Siskiyou, Modoc, Lassen, Shasta, Trinity, Humboldt, Tehama, Plumas, Nevada, Sierra, Mendocino, Lake, Butte, Glenn, Sutter, Yuba, Colusa, Amador, Calaveras, Tuolumne
- Number of subsidy eligible individuals:
 - 97,000
- Plans:
 - Anthem PPO, Blue Shield EPO, Kaiser HMO

Covered California Health Plans

- Region 2 counties:
 - Napa, Sonoma, Solano, Marin
- Number of subsidy eligible individuals:
 - 44,000
- Plans:
 - Blue Shield EPO, Anthem PPO, Kaiser HMO, Western Health Advantage HMO, Health Net PPO

Covered California Health Plans

- Region 3 counties:
 - Sacramento, Yolo, Placer and El Dorado
- Number of subsidy eligible individuals:
 - 126,000
- Plans:
 - Anthem PPO, Blue Shield PPO, Kaiser HMO, Western Health Advantage HMO, Anthem HMO

Covered California Health Plans

- Region 4
 - San Francisco
- Number of subsidy eligible individuals:
 - 28,000
- Plans:
 - Chinese Community Health Plan HMO, Anthem EPO, Blue Shield PPO, Kaiser HMO, Health Net PPO

Covered California Health Plans

- Region 5
 - Contra Costa
- Number of subsidy eligible individuals:
 - 36,000
- Plans:
 - Blue Shield PPO, Kaiser HMO, Contra Costa Health Plan HMO, HealthNet PPO, Anthem PPO

Covered California Health Plans

- Region 6
 - Alameda
- Number of subsidy eligible individuals:
 - 80,000
- Plans:
 - Blue Shield EPO, Anthem PPO, Kaiser HMO, Alameda Alliance for Health HMO

Covered California Health Plans

- Region 7
 - Santa Clara
- Number of subsidy eligible individuals:
 - 80,000
- Plans:
 - Anthem PPO, Anthem HMO, Valley Health Plan HMO, Health Net PPO, Blue Shield PPO, Kaiser HMO

Covered California Health Plans

- Region 8 :
 - San Mateo
- Number of subsidy eligible individuals:
 - 25,000
- Plans:
 - Chinese Community Health Plan HMO(north only), Kaiser HMO, Blue Shield PPO, HealthNet PPO, Anthem PPO

Covered California Health Plans

- Region 9 counties:
 - Santa Cruz, Monterey, San Benito
- Number of subsidy eligible individuals:
 - 47,000
- Plans:
 - Blue Shield EPO, Anthem PPO, Health Net PPO

Covered California Health Plans

- Region 10 counties:
 - San Joaquin, Stanislaus, Merced, Mariposa, Tulare
- Number of subsidy eligible individuals:
 - 108,000
- Plans:
 - Anthem PPO, Blue Shield PPO, Kaiser HMO, HealthNet PPO

Covered California Health Plans

- Region 11 counties:
 - Madera, Fresno, Kings
- Number of subsidy eligible individuals:
 - 65,000
- Plans:
 - Blue Shield PPO, Anthem PPO, Kaiser HMO, Anthem HMO

Covered California Health Plans

- Region 12 counties:
 - San Luis Obispo, Santa Barbara, Ventura
- Number of subsidy eligible individuals:
 - 95,000
- Plans:
 - Blue Shield PPO, Anthem PPO, Kaiser HMO, Ventura County Health Care Agency HMO(Ventura county only)

Covered California Health Plans

- Region 13 counties:
 - Mono, Inyo, Imperial
- Number of subsidy eligible individuals:
 - 18,000
- Plans:
 - Kaiser HMO, Blue Shield PPO, Anthem PPO

Covered California Health Plans

- Region 14
 - Kern
- Number of subsidy eligible individuals:
 - 52,000
- Plans:
 - Blue Shield PPO, Anthem PPO, Health Net PPO, Kaiser HMO

Covered California Health Plans

- Region 15:
 - Los Angeles County Zip Codes starting with 906 to 912, inclusive, 915, 917, 918
- Number of subsidy eligible individuals:
 - 779,000 (combined with Region 16)
- Plans:
 - HealthNet HMO, Blue Shield PPO, LA Care HMO, Anthem HMO, Molina PPO, Anthem EPO, Kaiser HMO, HealthNet PPO (Bronze and Catastrophic only)

Covered California Health Plans

- Region 16 :
 - Los Angeles County Zip Codes – all others not included in region 15
- Number of subsidy eligible individuals:
 - 779,000(combined with Region 15)
- Plans:
 - HealthNet HMO, Anthem HMO, Molina PPO, LA Care HMO, Blue Shield PPO, Anthem EPO, Kaiser HMO, HealthNet PPO (Bronze and Catastrophic only)

Covered California Health Plans

- Region 17 counties:
 - San Bernardino, Riverside
- Number of subsidy eligible individuals:
 - 341,000
- Plans:
 - Health Net HMO, Molina PPO, Blue Shield PPO, Anthem HMO, Anthem PPO, Kaiser HMO, HealthNet PPO (Bronze and Catastrophic only)

Covered California Health Plans

- Region 18 :
 - Orange
- Number of subsidy eligible individuals:
 - 199,000
- Plans:
 - Health Net HMO, Anthem HMO, Anthem EPO, Blue Shield PPO, Kaiser HMO, HealthNet PPO (Bronze and Catastrophic only)

Covered California Health Plans

- Region 19 counties:
 - San Diego
- Number of subsidy eligible individuals:
 - 193,000
- Plans:
 - Health Net HMO, Anthem EPO, Kaiser HMO, Molina PPO, Sharp HMO, Blue Shield PPO, Sharp PPO, Anthem HMO, HealthNet PPO (Bronze and Catastrophic only)

PERFORMANCE STANDARDS FOR COVERED CALIFORNIA HEALTH PLANS AND COVERED CALIFORNIA

Model Contract Attachment 14

PERFORMANCE STANDARDS-BRIEF DESCRIPTION

- 3 Groups of Performance Standards for Covered CA Health Plans
 - Customer Service; 5 measures
 - Operations; 8 measures
 - Quality; 9 measures
- 1 Group of Performance Standards for Covered California
 - Customer Service; 4 measures
 - Mirrors Covered CA Health Plans requirements and provides potential credits
- Up to 10% of Covered CA Health Plan management fee at risk
- Derived from survey of multiple large purchaser standards including PERs, OPM, PBGH member purchasers
- 100% of penalty/credit based on Customer Service and Operations Standards for 2014/2015
- 50% of penalty/credit based on Customer Service and Operations standards and the remaining 50% based on Quality for 2015/2016 and beyond
- Ability for Plans to earn credits for superior performance or Covered California performance misses (up to zero penalty level)

PERFORMANCE STANDARDS-

GROUP 1 Customer Service Standards

- 5 Measures
 - Call answer timeliness
 - Processing ID cards
 - Telephone abandonment rate
 - Initial call resolution
 - Grievance resolution
- 50% of total Performance Assessment in 2014/2015
- 25% of total Performance Assessment in 2015/2016 and beyond

PERFORMANCE STANDARDS-

GROUP 2 Operational Standards

- 8 Measures
 - Enrollment and payment transactions
 - Effectuation of enrollment
 - Member payment
 - Enrollment change upon non-receipt of member payment
 - Member email or written inquiries
 - Member call volume
 - Data submission
 - Reporting
- 50% of total Performance Assessment in 2014/2015
- 25% of total Performance Assessment in 2015/2016 and beyond
- Enrollment and payment standards (4 total)-2014 pilot measures with no penalty assessment- “test and learn”

PERFORMANCE STANDARDS-

GROUP 3- Quality Standards

- 9 Measures Total
 - 4 HEDIS/CAHPS related: Clinical Care, Access, Prevention, Plan Standards
 - eValue8 performance
 - 4 model contract areas of focus: health status, preventive health & wellness visits for new enrollees, management of “at risk” enrollees, use of new care models
- Track/measure only for 2014 measurement/2015 assessment
 - No performance penalty assessment in 2014-“Test and Learn”
 - 2015 and beyond- 50% of total performance assessment
- HEDIS/CAHPS related (4 measures) to be based on a single, national benchmark
 - Sets high bar with enough data points to create meaningful comparisons
 - reflects commitment to a single standard of care regardless of product and/or network model type
- Covered California specific CAHPS in 2014 expected; CC specific HEDIS to be determined based on QHP networks and federal expectations
- Consumer facing HEDIS/CAHPS comparisons WILL be presented in 2014 as part of the Quality Rating System (QRS) for enrollee choice support

PERFORMANCE STANDARDS-

GROUP 4- Covered CA Customer Service Standards

- 4 Measures
 - Call answer timeliness
 - Telephone abandonment rate
 - Initial call resolution
 - Grievance resolution
- Identical performance expectations for Covered California as for Covered CA Health Plans
- Ability for Covered CA Health Plans to be given credit back if Covered California fails to meet the same standards (up to 25% credit)