

Executive Director's Report

Peter V. Lee, Executive Director | September 19, 2013 Board Meeting

ANNOUNCEMENT OF CLOSED SESSION ACTIONS



COVERED CALIFORNIA LAUNCH: GOALS AND ENROLLMENT FORECASTS





HAPPY BIRTHDAY, DR. ROBERT ROSS!!



COVERED CALIFORNIA'S VISION AND MISSION

Vision

The vision of Covered California is to improve the health of all Californians by assuring their access to affordable, high quality care.

Mission

The mission of Covered California is to increase the number of insured Californians, improve health care 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.



COVERED CALIFORNIA PROMOTION



OCTOBER 1: THE HISTORIC LAUNCH OF COVERED CALIFORNIA

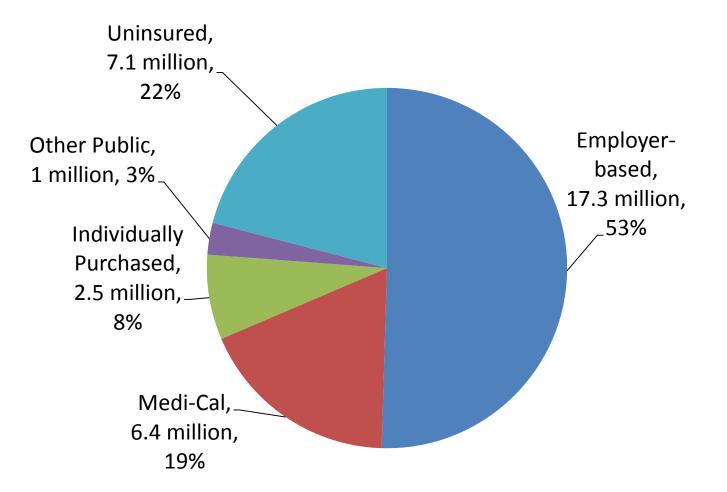
- Covering the state with educational and awareness events
 - Live press events in multiple cities
 - Supporting earned media and social media
 - Partners, educators, stakeholders and community members join us in celebrating opening of Covered California
 - "Launch" efforts continue throughout month: broadcast call-in shows, enrollment drives, community events, etc.

Statewide paid media launch

- Ads begin running in all California markets
- Paid media program will cover state geographically and demographically via broadcast print and other media



INSURANCE COVERAGE IN CALIFORNIA ON THE EVE OF COVERAGE EXPANSION

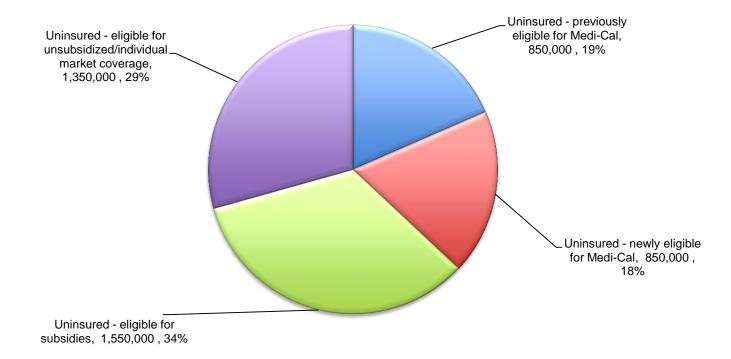


Non-elderly population; due to rounding and double coverage, percentages do not sum to 100. Source: "Sources of Health Insurance and Characteristics of the Uninsured: Analysis of the March 2012 Current Population Survey," *EBRI Issue Brief*, no. 376, September 2012.



PROMOTING INSURANCE COVERAGE IN CALIFORNIA IN 2014

Covering the Uninsured: What People will be Eligible for in 2014



Notes:

- 4.6 million currently uninsured eligible for coverage through Medi-Cal or Covered California.
- 1 million uninsured individuals will not be eligible for Medi-Cal or Covered California due to immigration status.



GOALS AND ENROLLMENT FORECASTS

Potential enrollees

- 2.6 million eligible for premium assistance
- 1.4 million newly eligible for Medi-Cal, but more currently eligible who will benefit from streamlined enrollment
- 2.7 million not eligible for subsidies, but all with guaranteed issue and new consumer protections



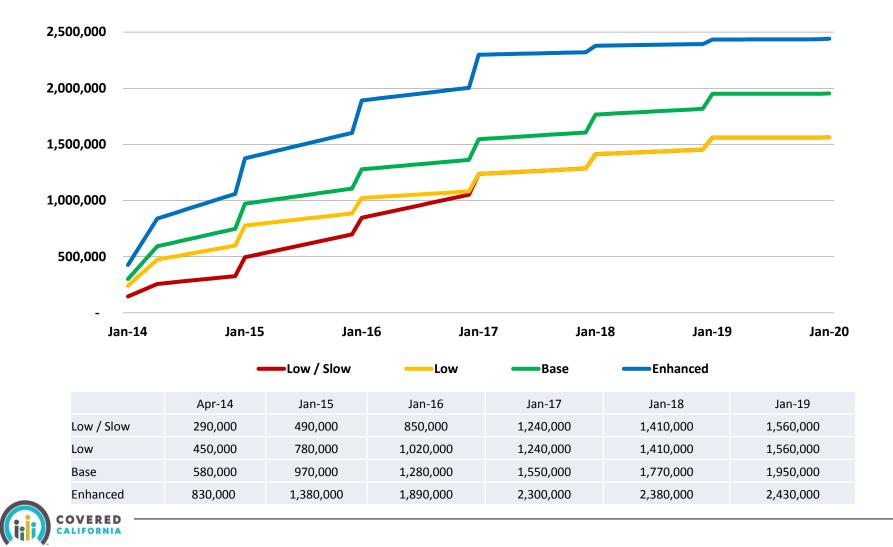
GOALS AND ENROLLMENT FORECASTS

- Covered California's goal is to enroll as many Californians in affordable health insurance coverage as possible; it has forecasted potential enrollment based on historical trends in launching coverage programs and national estimates; the Department of Health Care Services has forecasted new Medi-Cal Enrollment
- Covered California: Subsidy Eligible Individuals -- forecasted enrollment:
 - By the end of the first open enrollment (4/1/14): 487,000 to 696,000 subsidy eligible Californians enroll
 - By the end of the second open enrollment (1/1/15): 840,000 to 1.2 million subsidy eligible Californians enroll
- New Medi-Cal forecasted enrollment (Medi-Cal is not subject to "open enrollment"):
 - By the end of 2014: 1.1 million in new Medi-Cal enrollment
 - 700,000 newly eligible under the Affordable Care Act
 - 350,000 previously eligible, but benefiting from new streamlined application



COVERED CALIFORNIA: ANNUAL ENROLLMENT FORECASTS FOR SUBSIDIZED AND UNSUBSIDIZED CALIFORNIANS

Exchange Subsidized & Unsubsidized Enrollment Forecasts



ENROLLMENT FORECASTS

	April 2014 (Full Initial Open Enrollment)	Jan 2015	Jan 2016	Jan 2017	Jan 2018
CoveredCA Forecast of Subsidized Enrollment (Base-Enhanced) <1>	487,000 – 696,000	840,000 - 1,200,000	1,110,000 - 1,640,000	1,340,000 - 2,000,000	1,540,000 - 2,070,000
CoveredCA Forecast of Unsubsidized Enrollment <2>		1,700,000 - 1,720,000	1,800,000 - 1,820,000	1,930,000 - 2,000,000	2,010,000 - 2,080,000

<1> Covered California's enrollment forecasts were based on University of California CalSIM projection that were reviewed by an independent panel of methodology experts. The "Base" and "Enhanced" levels of potential enrollment are based economic simulations of enrollment, with the Enhanced figures reflecting successful multi-language outreach.

<2> Unsubsidized totals include all individuals who enroll in both Covered California and the individual market.



REPORTING STRATEGY

Weekly (starting Oct 8)

In-person Enrollment Support

- Certified County Eligibility Worker
- Certified Agent
- Certified Enrollment Entity
- Certified Enrollment Counselor

Service (For Individual and SHOP)

- Total call volume
- Avg Wait Time
- Avg Handle Time
- Web visits (.com)
- Avg web session time (.com)
- Referred to County Quick Sort
- Referred to County Other

Monthly (starting Nov 15)

Enrollments (and Effectuations, if applicable)

- Subsidized (Fed Tax Subsidy)
- Non-subsidized
- SHOP



REPORTING STRATEGY

To be Scheduled

Enrollment in Medi-Cal:

Newly Eligible – Effective 1/1/14

Enrollment by channel:

- Certified County Eligibility Worker
- Certified Agent
- Certified Enrollment Entity
- Certified Enrollment Counselor
- Service Center Representative
- Self-service Online

Enrollment by key enrollee attribute:

- Language
- Race/ethnicity
- Age groupings
- FPL Percentage Band
- Metal level
- Plan
- County



REACHING CONSUMERS: IN THEIR COMMUNITIES AND THEIR LANGUAGES ON OCTOBER 1, 2014

Communication	English	Spanish	Chinese	Vietnamese	Korean	Tagalog	Farsi	Russian	Armenian	Arabic	Hmong	Khmer
Application – web	~	~	*									
Application – paper	~	~	~	~	~	~	~	~	~	~	~	~
Dedicated Service Center 1-800 # Launching October 1	~	~	~	~	~	~	~	~	~	~	~	~
Collateral material	~	~	~	~	~	~	~	~	~	•	~	~

Launching ethnically and culturally tailored paid media advertising

* Undergoing review for potential development



UPDATE ON CONSUMER OUTREACH & ENROLLMENT ASSISTANCE



OUTREACH AND EDUCATION

- 1,774 Certified Educators
 - 576 outreach and education activities (July mid September)
 - Reached over 150,000 consumers, nearly 10% became leads (14,000)
 - Nearly 7,300 activities planned for October December; including community health fairs, cultural festivals, farmers markets, presentations at elementary and high schools, college fairs, presentations at places of worship, one-on-ones and workshops.
- Active engagement with over 360 community organizations that have expressed an interest in joining the Community Outreach Network
 - 60 organizations signed an MOU to partner with Covered California



ENROLLMENT ASSISTANCE: COUNTY ELIGIBILITY WORKERS AND CERTIFIED AGENTS

- County Eligibility Workers
 - Implementing training for 22,000 workers across California
- Licensed Agents
 - Over 13,500 agents have registered
 - Over 1,200 completed training
 - Trainings in process across the state



ENROLLMENT ASSISTANCE: CERTIFIED ENROLLMENT COUNSELORS

- Enrollment Entities
 - 120 Applications Accepted and 128 Pending (final review of documents)
 - 794 In Draft Applications (various stations of completion)
- Enrollment Counselors
 - 836 Applications approved
 - 1,517 Pending and in Draft Applications
 - Trainings scheduled through end of year (focus on October)
- Policy Changes
 - Removing auto liability insurance requirement immediately (with modification of regulations at future meeting)
 - Continuing to review \$1 million liability insurance requirement
 - Partners with the Community Clinic Association to train 1,500 Certified Counselors



UPDATE ON CONSUMER WEBSITE FUNCTIONALITY

Karen Ruiz, CalHEERS Project Director Keith Ketcher, Accenture Project Manager



COVERED CALIFORNIA ROLLOUT SCHEDULE

Planned Date	Description	Current Status		
Currently in place	Calculator for potential Premium Assistance Lead Collection	Completed		
August 19	Initiate registration for Licensed Insurance Agents seeking Covered California Certification	Completed; More than 12,000 agents registered to-date		
August 26	Initiate registration and continue enrollment entity registration (for Certified Enrollment Counselors)	 Completed Service Center Opening and continued entity and counselor registration Counselor web account creation to begin September 20 		
Early September	Launch – "Shop and Compare Tool" (allow consumers to review plan-specific options and costs)	Completed		
Early September	Decisions about October 1 rollout process steps	Completed – decision to launch with full eligibility and enrollment functions		



LAUNCH CONSIDERATIONS

- Centers for Medicare & Medicaid Services (CMS) conducted its Operational Readiness Review (ORR) on September 9-10, 2013
 - $_{\circ}$ CMS pleased with progress and status
 - Awaiting Authority to Connect
- CalHEERS website will be unavailable from September 21 through September 30 to prepare for October 1 launch
 - Performance test, and other technical setup and configuration activities will continue through October 1 launch
 - Will accommodate Agents and Certified Enrollment Counselors through alternate means
- Self-service and assisted enrollment functionality will launch October 1
- Some features not critical for Day 1 enrollment will roll out in scheduled maintenance releases in the weeks following October 1
 - Capacity will be reserved in maintenance releases for any undiscovered issues
 - Periodic "down-time" will be used for updates in off hours



PREVIEW OF UPCOMING ENHANCEMENTS

- The CalHEERS Application will continue to evolve with scheduled enhancements and new enhancements
- Some of the features we will be adding between now and January 1 include:
 - Calculations for Access for Infants and Mothers (AIM)
 - MRMIB will continue to administer this program, but will use the CalHEERS business rules engine for the new MAGI Medi-Cal calculations for AIM
 - Deemed Eligibility for Infants
 - $_{\circ}$ $\,$ Will be built into CalHEERS to ensure continuity of services
- We are also planning updates to address:
 - Enrollments for families with premium assistance into multiple plans
 - Medi-Cal plan selection



COLLECTING FEEDBACK

- Our goal is to provide the best experience possible for consumers through our website
- Consumers, stakeholders, and staff will find lots of way to improve the experience
- We are identifying the best way to collect feedback from consumers
 - A survey or mailbox option will be available to consumers at or shortly after launch
- We will work with programs and stakeholders to implement enhancements through our scheduled maintenance and major releases



SERVICE CENTER UPDATE

Carene Carolan, Deputy Director of the Service Center



SERVICE CENTER PERFORMANCE GOALS

Service Center Metrics	Goal
Service Level	80% of calls answered within 30 seconds
Abandoned Calls	5% or less of calls abandoned
Busy Signals Presented to Callers	1% or less of calls receive busy signal



SINGLE-STREAMLINED PAPER APPLICATION UPDATE

Thien Lam, Deputy Director, Eligibility and Enrollment



SINGLE-STREAMLINED PAPER APPLICATION: OVERVIEW

- Paper application is 3 pages per individual
 - -Total application package (including introductory material, privacy statement, optional questions, attachments and FAQs) is 33 pages
 - -Web version of the application allows consumers to skip questions that aren't relevant to them
- Draft application has been tested through one-on-one consumer interviews in several cities around California in five languages



SINGLE-STREAMLINED PAPER APPLICATION BACKGROUND INFORMATION



GUIDING PRINCIPLES

ELIGIBILITY AND ENROLLMENT GUIDING PRINCIPLES:

- Through a "No Wrong Door" approach, promote maximum enrollment into coverage.
- Facilitate a smooth enrollment process beginning with the use of a single-streamlined application and seamless renewal process.
- Present information in a manner that is accurate, accessible, understandable and transparent to consumers to inform and educate them.
- Continue to learn and adjust strategies and tactics based on input from our national partners, California stakeholders, ongoing research, evaluation and measurement of the programs' impact on awareness and enrollment.

SINGLE-STREAMLINED APPLICATION GUIDING PRINCIPLES:

- Center for Medicare & Medicaid Services federal single-streamlined application data elements and draft paper application prototype.
- Questions currently identified on the Healthy Families and Medi-Cal for Families Application (MC 321 HFP) and the Application for Medi-Cal (MC 210).
- Covered California's Eligibility and Enrollment Guiding Principles
- Center for Medicare & Medicaid Services guidance and recommendations
- Consumer focused specific questions needed to make eligibility determinations for full array of insurance affordability programs.
- Not asking questions that make it more burdensome for the consumer to apply for coverage.



PAPER SINGLE-STREAMLINED APPLICATION IMPLEMENTATION TIMELINE

SINGLE-STREAMLINED APPLICATION ACTIVITY	DATE
AB 1296 Stakeholder Review	March 8, 2013
1 st Stakeholder Webinar to Solicit Public Feedback and Input: Application Data Elements	March 14, 2013
Readability & Usability Evaluation Began for Paper Application	April 2013
2 nd Stakeholder Webinar to Solicit Public Feedback and Input: Proposed State Regulations	May 10, 2013
AB 1296 Stakeholder Meeting	May 24, 2013
One-On-One Testing/Field Testing Began: 1 st round of one-on-one interviews in San Francisco, Sacramento, and Los Angeles (English, Spanish)	June 20, 2013
AB 1296 Stakeholder Meeting	July 10, 2013
One-On-One Testing/Field Testing Began: 2 nd round of one-on-one interviews in San Francisco and Los Angeles (English, Spanish, Vietnamese, Mandarin Chinese and Cantonese Chinese)	August 12, 2013
Draft Prototype for Paper Single-Streamlined Application	Ongoing
Written Translations Begins (to produce application in culturally and linguistically appropriate manners)	Ongoing
Federal Review and Approval of DRAFT Paper Application Prototype	August 8, 2013
AB 1296 Stakeholder Meeting	September 9, 2013
Federal Review and Approval of FINAL Paper Application Prototype	Late-September 2013
Paper Application Available	October 1, 2013



SINGLE-STREAMLINED PAPER APPLICATION DEVELOPMENT



- Covered California utilized the following applications as a baseline to develop the Single-Streamlined Paper Application:
 - Federal Application for Insurance Affordability Programs
 - Healthy Families and Medi-Cal for Families Application (MC 321 HFP)
 - Application for Medi-Cal (MC 210)
- Covered California worked with the Department of Health Care Services and with Stakeholder advocacy groups to review and solicit feedback on the single-streamlined paper application. Collaboration and engagement efforts included meetings with:
 - AB 1296 Workgroup
 - Several advocate groups



PAPER APPLICATION READABILITY AND TRANSLATION

Getting help in other languages

You can get help with this application in other languages. Call 1-800-300-1506.

Podemos ayudarle en español a llenar esta solicitud. Llame al 1-800-300-0213. SPANISH

您可以透過其他語言 獲得此申請的幫助。 請致電 1-800-300-1533. TRADITIONAL CHINESE

Quý vị có thể được trợ giúp về đơn đăng ký này bằng tiếng Việt. Hãy goi 1-800-652-9528. VIETNAMESE

이 응용 프로그램에 대한 한국어 지원을 받으실 수 있습니다. 전화: 1-800-738-9116.

KOREAN

Maaari kang kumuha ng tulong para sa aplikasyong ito sa Tagalog. Tumawag sa 1-800-983-8816.

TAGALOG

Koj txais tau kev pab nrog kev tso npe no ua lus Hmoob. Hu 1-800-771-2156. HMONG

'Like" Covered California on Facebook! Go to: Facebook.com/CoveredCA

Вы можете получить помощь в оформлении этой заявки на русском языке. Звоните по телефону 1-800-778-7695. RUSSIAN

Դուք կարող եք հայերենով օգնություն ստանալ այս դիմումի ձևը լրացնելու հարցում։ Զանգահարեք 1-800-996-1009. ARMENIAN

می توانید در ارتباط با این فرم تقاضا به زیان های دیگر کمک دریافت كنيد. با شماره 8879-921-800 تماس بگیرید.

FARSI

ARABIC

អនកអាចទទួលបានជំនួយចំពាះ ពាកុយសុំនរ៉េជាភាសាខ័មវែ។ សូមទូរស័ពទមកលខេ 1-800-906-8528. KHMER

بمكنك الحصول على مساعدة خاصة بهذا التطبيق باللغة العربية اتصل بـ 1-800-826-6317.

Follow us! @CoveredCA

- The Center for Health Literacy (CHL) worked with Covered California and with the Department of Health Care Services to develop and design an easy-to-use paper application to help promote a positive consumer-focused and consumerfriendly experience.
- CHL staff also performed readability services and provided recommendations for appropriate language levels.
- Overall application is at a 9th grade reading level.
- The paper application will be available in the 12 Medi-Cal threshold written languages.
 - English

- Russian
- Spanish
- Chinese
- Vietnamese
- \geq Korean
- \geq Tagalog

- Armenian \geq
- Farsi \geq
- Khmer \geq
- \geq Hmong
- Arabic >

PAPER APPLICATION SECTIONS

COVERED CALIFORNIA

Things to know Wild you need to know when the second promises for applicants who are U.S. others, or downeed to know when the invergence with authority should be and insurants.	Application Section	Application Section Summary
Bud and a classifier of any mergenise class is required only for experiments Set apply Bud any set of a set of any set	Things to Know (1 page)	 Provides consumers with information on: What consumer may need to know when applying; Where to securely apply online; Where to send their paper application; and How a consumer can get help completing the application.
Point come Point and marker Point and	Application Questions (3 pages per Individual)	 Optional and required data elements such as: Contact information; Personal information (e.g., including demographic data); and Income information. NOTE: Application Accommodates a family size of 4.
Televandy prive that gen of homeson that any application: Step 2: Tell use about yourself and your family Tell use about yourself and your yourself and yourself Tell use about yourself and your yourself about yourself Tell use about yourself and yourself Tell use about yourself and yourself Tell use about yourself Tell use about yourself and yourself Tell use about youre	Privacy Statement and Rights & Responsibilities (3 pages)	 Authorize Representative information Privacy Statement Rights & Responsibilities Certified Enrollment Entity, Certified Insurance Agent and Certified Plan-Based Enroller information
Attachment B: Tell us about your family's health insurance (cond) Englight health insurance, is an experient with the graph health insurance (cond) Image: Cond (Cond) ** The first head health insurance your data with the graph health insurance (cond) Image: Cond (Cond) ** The man of the graph watch is an experient health insurance in the second health insurance insurance (cond) Image: Cond (Cond) ** The man of the graph watch is an experient health insurance insurance (cond) Image: Cond (Cond) Image: Cond (Cond) ** The man of the graph watch is an experient health insurance insurance (cond) Image: Cond (Cond) Image: Cond (Cond) Image: Cond (Cond) ** The man of the displaced health insurance insurance (cond) Image: Cond (Cond) Image: Cond) Image: Cond (Cond) Image: Cond) Image: Cond (Cond) <		 Questions related to: Special Enrollment for Covered California; How the consumer heard about Covered California; Referral to CalFRESH and CalWORKS programs; and Other types of programs that may benefit the consumer.
Paran 1: Image: Image	Attachments A - E	 Attachments are included in the event the consumer needs to provide information regarding their: Status as a federally recognized American Indian or Alaska Native (2 pages) Family's health insurance status (2 pages) Their employer coverage status (2 pages) Covered California Plan Selection (1 page) Step 2 references (1 page)
he subture used gatebild: (* (hereause based) tarkets the discourts' hereau subture and tarbatebild: (* (hereause based) tarbatebild: (* (hereause based)) hereause based and tarbatebild: (*	Frequently Asked Questions (5 pages)	Over 30+ answers to help consumers with questions they may have regarding the application process, array of Insurance Affordability Programs, general program requirements and more.

PAPER APPLICATION TESTING

- The Center for Health Literacy (CHL) researchers conducted a series of one-on-one consumer testing with adults between June 2013 and August 2013. Interviews were conducted in the following areas:
 - Sacramento;
 - San Francisco; and
 - Los Angeles.
- One-on-one interviews occurred in the following languages:
 - English;
 - Spanish;
 - Mandarin Chinese;
 - Cantonese Mandarin; and
 - Vietnamese.
- One-on-one consumer testing focused on finding out if participants:
 - Understood the purpose of the application;
 - $_{\circ}$ $\,$ Had difficulty completing the application; or
 - Had difficulty understanding what information was needed.



PAPER APPLICATION TESTING KEY FINDINGS

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Application for Health Insurance



Your destination for affordable health insurance, including Medi-Cal



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Covered California is where individuals and families can get affordable health insurance. With just one application, you'll find out if you qualify for free or low-cost health insurance, including Medi-Cal.

The state of California created Covered California" to help you and your family get health insurance.

Having health insurance can give you peace of mind and help make it possible for you to stay healthy. With insurance, you'll know you and your family can get health care when you need it.

Use this application to see what insurance choices you qualify for:

- Free or low-cost insurance from Medi-Cal
- Affordable private health insurance plans
- Help paying for your health insurance
- You can use this application to apply for anyone in your family, even if they already have insurance now.

Call: 1-800-300-1506 (TTY: 1-888-889-4500)

You can call Monday to Friday, 8 a.m. to 6 p.m. and Saturday, 8 a.m. to 5 p.m.

Apply now through Covered California at Apply.CoveredCA.com

You can get this application in other languages

Español	1-800-300-0213
繁體字	1-800-300-1533
Tiếng Việt	1-800-652-9528
한국어	1-800-738-9116
Tagalog	1-800-983-8816
Русский	1-800-778-7695
Հայերեն	1-800-996-1009
فارسى	1-800-921-8879
ភាសាខ្មែរ	1-800-906-8528
Hmoob	1-800-771-2156
المعربية	1-800-826-6317

Call 1-800-300-1506 to get this application in other formats such as large print.

Application look and feel:

- Widely accepted from most participants from the English and Spanish-speaking and Asian communities.
- Most participants did, however, find the application somewhat lengthy.
- Covered California and the Department of Health Care Services consolidated data elements and revised instructions and questions in order to reduce the application length as much as possible.

Application purpose:

- All English speaking participants and most non-English-speaking participants understood that the State of California created Covered California.
- Most understood that they could use the application to see if they qualified for Medi-Cal and for financial assistance through Covered California.



PAPER APPLICATION KEY CONCERNS

• Social Security Number:

- Most consumer testing participants understood about providing their Social Security Numbers (SSN), but several participants questioned why their SSN was necessary or stated that they would be uncomfortable providing it.
- Stakeholders requested that SSNs should only be required and verified for applicants applying for coverage and not for other individuals. The application filer should be notified that their SSN will be used <u>only</u> for purposes of income verification and cannot be shared for any other purposes and will only be used for eligibility determination.
- Covered California added clarifying and reassuring language regarding the use of a consumer's SSN to help reduce consumer concerns regarding safeguarding personal and financial information.
- Co-Branding of the Single-Streamlined Application:
 - Based on Stakeholder feedback, Covered California added explicit language that informs the consumer that the application is also for the Medi-Cal program.



PAPER APPLICATION KEY CONCERNS

Authorized Representative Language:

- All of the Spanish language participants understood the use of the term "authorized representative." Several English and Chinese speaking participants and most of the Vietnamese speaking participants could not explain this term.
 - Covered California reworded this section of the application and included language that clearly defines the role of an "authorized representative."

Optional Race or Ethnicity:

- Stakeholders request using the U.S. Census 2010 question on race which includes the new Department of Health and Human Services (HHS) categories to expand the race category options by adding three additional categories (Hmong, Laotian, and Cambodian).
- Covered California supports the use of the ethnicity options contained in the Healthy Families and Medi-Cal for Families Application (MC 321 HFP); however, online application functionality does not currently allow for additional race options. Covered California will continue to work with stakeholders and make efforts to include additional race options in future iterations of the online and paper application.



PAPER APPLICATION KEY CONCERNS

Sexual Orientation and Gender:

- The application only identifies a male or female gender as data elements. Stakeholders request that where appropriate, the application should collect a comprehensive range of demographic information, including sexual orientation and gender identity. This information is an important to identify lesbian, gay, bisexual, and transgender (LGBT) populations for:
 - Outreach planning;
 - Compliance with non-discrimination requirements; and
 - Customer satisfaction evaluations.
- Based on Stakeholder feedback, Covered California is working with the Department of Health Care Services to:
 - Conduct surveys to gather additional demographic information that is currently not collected on the application; and
 - Add optional questions to collect comprehensive sexual orientation and gender identify data elements. However, implementation of additional sexual orientation and gender questions is targeted to take place in 2015 benefit year.



PAPER APPLICATION FREQUENTLY ASKED QUESTIONS

- Based on Stakeholder feedback, the Frequently Asked Questions (FAQ) section:
 - Revised to add additional questions to help consumers through the applications process and provide additional Insurance Affordability program information. Covered California and the Department of Health Care Service added over 10 additional questions and answers to assist consumers
- One-on-one consumer testing participants felt the FAQs were helpful and informative.
- The majority of participants stated that they would likely read the FAQ section when applying for coverage.

Frequently Asked Questions

Getting help through Covered California

1. What is Covered California?

Covered California is the new marketplace that makes it possible for individuals and families to get free or lowcost health insurance through Medi-Cal, or to get help paying for private health insurance.

Our goal is to make it simple and affordable for Californians to get health insurance. Covered California is a partnership of the California Health Benefit Exchange and the California Department of Health Care Services.

2. What is Medi-Cal?

Medi-Cal is California's version of the federal Medicaid program. It is free or low-cost health insurance for California residents who qualify.

3. How can Covered California help me?

Covered California can help you choose a private insurance plan that meets your health needs and budget. We offer some of the state's best known health plans, and some regional or local plans too.

We can explain the costs and benefits of health insurance plans clearly, so you can compare the different choices available to you. You will know exactly what you're getting and how much you have to pay before you choose your plan.

4. What health insurance is offered through Covered California?

You will have a wide variety of health plans to choose from. Health insurance companies **cannot refuse to cover you** because you have been sick before or could not get coverage.

Covered California offers four groups of private health insurance plans: platinum, gold, silver, and bronze, plus a minimum coverage plan.

Each group offers a different level of coverage, from high to low. Health insurance plans that cover more of your medical expenses will usually have a higher premium but allow you to pay less when you receive medical care.

Platinum plans have the highest premium, but they pay 90% of your health care expenses. Gold plans pay pay 80% and silver plans pay 70% of your health care expenses. Bronze plans have the lowest premium but pay just 60% of covered health expenses.

If you qualify for Medi-Cal, the coverage and costs are different and may be free for you.

Need help?

5. Can I get health insurance through Covered California?

Any Californian can get health insurance through Covered California if he or she is a state resident and cannot get affordable health insurance through a job.

Applicants may qualify for a free or low-cost health plan, or for financial help that can lower the cost of premiums and co-pays. The amount of financial help is based on household size and family income. Applicants qualify if their income meets the income limits.

6. Can I get health insurance even if my income is too high?

Yes. Any Californian who qualifies can purchase private health insurance through Covered California regardless of income. We use your income to help us find the health insurance that is most affordable for your family.

7. How do I apply?

Call Covered California at 1-800-300-1506 (TTY: 1-888-889-4500). The call is free. You can call

Monday to Friday, 8 a.m. to 6 p.m. and Saturday, 8 a.m. to 5 p.m. Or visit CoveredCA.com.

You can apply for health insurance through Covered California in the following ways:

- Online: Visit CoveredCA.com. We provide information about each health insurance plan, explained in clear and simple terms.
- By phone: Call Covered California at 1-800-300-1506 (TTY: 1-888-889-4500). You can call Monday through Friday, 8 a.m. to 6 p.m. and Saturday, 8 a.m. to 5 p.m. The call is free!
- By fax: Fax your application to 1-888-329-3700.
- By mail: Mail the Covered California application to: Covered California P.O. Box 989725 West Sacramento, CA 95798-9725
- In person: We have trained Certified Enrollment Counselors or Certified Insurance Agents who can help you. Or you can visit your county social services office. This help is free! For a list of places near where you live or work, visit CoveredCA.com or call 1-800-300-1506 (TTY: 1-888-889-4500).

Frequently Asked Questions continued on next page

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CONSUMER PROTECTION UPDATE



CONSUMER PROTECTION & FRAUD PREVENTION

Fraud Risks for Consumers:

- Misconduct by Covered California affiliated individuals
- Fraudulent scams perpetrated by individuals with no connection to Covered California
 Consumer Protection Measures:
- Fingerprint-based criminal background checks
- Office of Consumer Protection housed within the Covered California Service Center:
 - Complaint tracking
 - $_{\circ}$ Investigation
 - Referral to law enforcement
 - Consumers can report potential fraud by calling the service center (1-800-300-1506) or emailing <u>stopfraud@covered.ca.gov</u>
- Collaborations underway with counterparts in state government and local law enforcement

Enterprise-wide Efforts:

- Information Technology and Privacy Security
- Financial Audit Unit
- RFP for review and assessment of consumer protection/fraud prevention measures



VOTER REGISTRATION UPDATE



VOTER REGISTRATION ASSISTANCE: UPDATE

- For October 1, 2013 launch, CalHEERS includes two opportunities for consumers to register to vote:
 - On their homepage
 - At the end of the application
- Covered California affiliated personnel receive training on voter registration.
- Covered California continues to work with the Secretary of State and stakeholders to further develop and improve voter registration.
 - Identifying a voter registration coordinator.



QUALIFIED HEALTH PLAN ISSUER MARKETING GUIDELINES



QHP ISSUER MARKETING GUIDELINES

- Marketing Guidelines have been developed for the Covered California contracted health insurance companies (Qualified Health Plan (QHP) Issuers).
- The purpose of the Marketing Guidelines is two-fold:
 - Ensure mutual coordination and cooperation between Covered California and the contracted QHP Issuers in regards to marketing strategies and plans to promote the maximum enrollment possible; and
 - Provide guidance and references for the QHP Issuers related to marketing materials and activities.
- These Marketing Guidelines have been shared with the Covered California contracted QHP Issuers and with other stakeholders and we are seeking to finalize for release in September 2013.
- Marketing Guidelines will be refined on an annual basis to incorporate lessons learned and reflect any changes in policy, technology and marketing practices.



QUALITY RATING SYSTEM (QRS) UPDATE

Jeff Rideout, Senior Medical Advisor



QUALITY RATING SYSTEM (QRS) UPDATE: STATUS

- There will be no Quality Rating System (QRS) information displayed at the outset of open enrollment for October 2013. This decision is consistent with the memo issued by Covered California on August 2, 2013 and the information provided at the August 8, 2013 Board meeting.
- Covered California is working to add health plan Quality Information as soon as possible, with current target of having information available for enrollees on or about January 1, 2014 in time for the second half of open enrollment.
- A general link to the Office of the Patient Advocate (OPA) website has been created and available on the enrollee selection page; it is not part of the consumer plan selection process.
- The collection of HEDIS and CAHPS information beginning in 2014 remains a contractual commitment for each plan partner and is necessary for the availability of QRS information for open enrollment 2015 and for compliance with plan performance standards as outlined in Attachment 14 to the model contract.



QUALITY RATING SYSTEM (QRS): NEXT STEPS

- In implementing quality reporting system, Covered California staff recommendation is to implement a system that would have the following elements:
 - Report using existing quality information in cases where the network is "substantially similar" to the plan's existing network.
 - Use as marker of "substantially similar" 80% network similarity (some have commented that 70% is a more appropriate benchmark)
 - Covered California work with plans to review/assess network similarity; but the basis of inclusion for quality reporting would be based on Covered California review of data, not health plans' preference or "voluntary" opt-in to report
 - The display for plans that do not have substantially similar networks would read "First rating in 2015" and Covered California will test that language
 - The quality information would be used for consumer display and sorting (at consumer preference), it would not be used as part of any algorithm to determine the order of plan-display absent consumer selection.
- Covered California welcomes comments on this structure or alternatives. Comments should be sent to <u>info@covered.ca.gov</u> by 10/1/13.
- Seek Board action at the 10/24/13 Board meeting.



FINANCIAL UPDATE

John Hiber, Chief Financial Officer



YEAR END BUDGET & EXPENDITURE REPORT (FISCAL YEAR 2012-13)

Expenditures versus Budget *											
	F	FY 2012-13 Budget	-	FY 2012-13 Year End		Variance	Percent Expended				
Positions		677		179		498					
Salaries & Benefits	\$	28,407,155	\$	9,456,557	\$	18,950,598	33%				
Contractual Costs	\$	362,901,317	\$	263,470,709	\$	99,430,608	73%				
Travel	\$	1,116,530	\$	143,151	\$	973,379	13%				
Supplies	\$	1,715,638	\$	608,407	\$	1,107,231	35%				
Equipment	\$	1,057,680	\$	3,463,830	\$	(2,406,150)	327%				
Facilities	\$	2,738,860	\$	1,177,526	\$	1,561,334	43%				
Other	\$	3,018,106	\$	374,353	\$	2,643,753	12%				
Expenses	\$	400,955,286	\$	278,694,534	\$	122,260,752	70%				
CalHEERS Cost Sharing	\$	(34,568,734)	\$	(43,915,742)	\$	9,347,008	127%				
Total Operating Costs	\$	366,386,552	\$	234,778,792	\$	131,607,760	64%				

Commentary

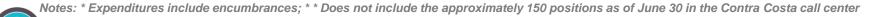
For Fiscal Year 2012-13, total year end expenditures were \$234.8 million. Expenditures represented 64% of the \$366.4 million budgeted for the year, with \$131.6 million carried forward for future expenditure.

Activities in Fiscal Year 2012-13 were focused on preparing the Exchange to become operational. During the year it became apparent that the rate of hiring and the timing of significant expenditures would be later than originally anticipated, and would result in delaying some of these expenditures to FY 2013-14. This shift in timing resulted in the underspend in salaries and benefits and contracts.

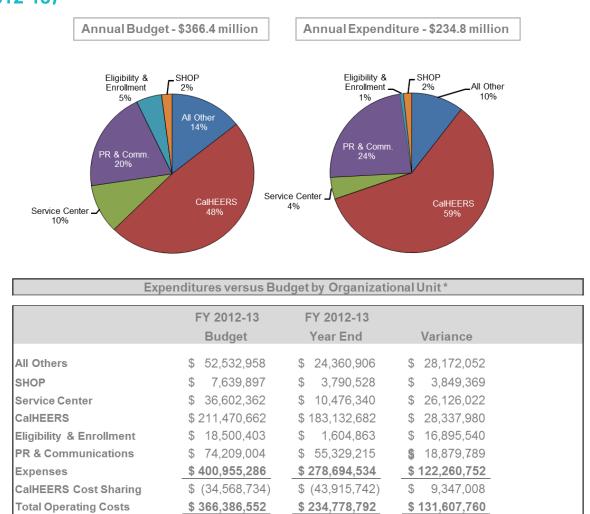
Hiring occurred at a slower pace than originally budgeted in most organizational units and was noticeably impacted due to the delay in timing and challenges associated with onboarding high numbers of staff in the Service Center.

Contractual spending also occurred at a slower pace primarily due to the timing of media campaigns, the timing of Service Center and other activities.

OVERED ALIFORNIA



YEAR END BUDGET & EXPENDITURE REPORT (FISCAL YEAR 2012-13)



Notes: * Expenditures include encumbrances, and also include expenditures funded by the Level 1.1 grant that are distributed amongst organizational units



FISCAL YEAR 2013-14 YEAR-TO-DATE BUDGET & EXPENDITURE REPORT (PERIOD ENDING JULY 31, 2013)

				Performanc	e ver	sus Budget					
	E	Budgeted		Filled *	Cu	rrent FTE *					
Positions		1,230		240		237					
	Annual Budget		Current Month Expenditures		Year-to-Date Expenditures		% Expended YTD	Encumbrances		Encumbrances	
										& E	xpenditures
Salaries & Benefits	\$	80,992,522	\$	1,722,510	\$	1,722,510	2%			\$	1,722,510
Contractual Costs	\$	291,286,812	\$	955,488	\$	955,488	0%	\$	93,263,364	\$	94,218,852
Travel	\$	905,783	\$	2,413	\$	2,413	0%			\$	2,413
Supplies	\$	3,320,311	\$	27	\$	27	0%	\$	22,996	\$	23,023
Equipment	\$	2,123,303	\$	-	\$	-	0%	\$	90,035	\$	90,035
Facilities	\$	14,659,487	\$	78,313	\$	78,313	1%	\$	103,334	\$	181,647
Other	\$	6,402,051	\$	-	\$	-	0%	\$	15,240	\$	15,240
Expenses	\$	399,690,269	\$	2,758,751	\$	2,758,751	1%	\$	93,494,969	\$	96,253,720
CalHEERS Cost Sharing	\$	(15,742,641)	\$	35,850	\$	35,850	0%	\$	51,120	\$	86,970
Total Operating Costs	\$	383,947,628	\$	2,794,601	\$	2,794,601	1%	\$	93,546,089	\$	96,340,690

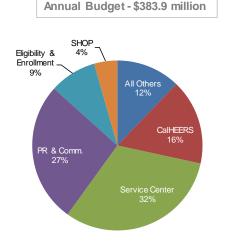
Commentary

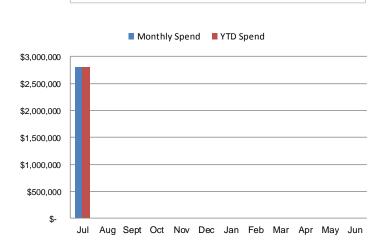
- Salaries and benefits are currently low as Covered CA is still building up its employee base. This is particulary impacted by business units such as the Service Center which are continuing to add staff to be fully operational.

Notes: * Does not include the approximately 150 positions in the Contra Costa call center



FISCAL YEAR 2013-14 YEAR-TO-DATE BUDGET & EXPENDITURE REPORT (PERIOD ENDING JULY 31, 2013)





Spending Trend

Ar		Annual	Current Month Expenditures		Year-to-Date Expenditures		% Expended YTD	Encumbrances		Encumbrances & Expenditures	
SHOP	Budget										
	\$	16,899,206	\$	156,855	\$	156,855	1%	\$	12,844,122	\$	13,000,977
Service Center	\$	121,080,758	\$	238,726	\$	238,726	0%	\$	4,962,269	\$	5,200,995
CalHEERS	\$	78,152,275	\$	219,795	\$	219,795	0%	\$	284,000	\$	503,795
Eligibility & Enrollment	\$	34,281,294	\$	114,110	\$	114,110	0%	\$	715,792	\$	829,902
PR & Communications	\$	102,575,501	\$	1,033,950	\$	1,033,950	1%	\$	71,914,256	\$	72,948,206
All Others	\$	46,701,235	\$	995,315	\$	995,315	2%	\$	2,774,530	\$	3,769,845
Total Expenses	\$	399,690,269	\$	2,758,751	\$	2,758,751	1%	\$	93,494,969	\$	96,253,720
CalHEERS Cost Sharing	\$	(15,742,641)	\$	35,850	\$	35,850	0%	\$	51,120	\$	86,970
Total Operating Costs	\$	383,947,628	\$	2,794,601	\$	2,794,601	1%	\$	93,546,089	\$	96,340,690



LEGISLATIVE UPDATE

David Panush, Director of External Affairs



KEY LEGISLATION

- Stop-Loss Insurance Coverage SB 161 (Hernandez)
- **Transparency** SB 332 (Emmerson & DeSaulnier)
- Health Care Coverage Cost Sharing SB 639 (Hernandez)
- Exchange Eligible Parents of Medi-Cal/Healthy Families kids
 SB 800 (Lara)



FEDERAL RULES UPDATE

Katie Ravel, Director of Program Policy



COVERED CALIFORNIA KEY ISSUES

Program Integrity (Final Rule)

- Details appeals processes.
- Requires that QHP issuers offer payment options that do not discriminate against individuals without bank accounts or credit cards.

Shared Responsibility Payment for Not Maintaining Minimum Essential Coverage (Final Rule)

- Clarifies that pregnancy-related Medicaid / Medi-Cal coverage does not qualify as Minimum Essential Coverage.
- Waives Minimum Essential Coverage requirement for 2014 for women who only obtain pregnancy-related Medicaid / Medi-Cal coverage.

Tax Credit for Small Employers' Expenses for Employee Health Insurance (Proposed Rule)

• Outlines that small employers may qualify to receive a tax credit for expenses related to offering their employees health insurance.

