

### **EXECUTIVE DIRECTOR'S REPORT** Peter V. Lee, Executive Director | November 20, 2014 Board Meeting

# ANNOUNCEMENT OF CLOSED SESSION ACTIONS



# **OVERVIEW**

- Renewal and Open Enrollment Updates
- Board Meeting Planning Calendar
- 2016 Qualified Health Plan Policies
- Re-adoption of Regulations



# LAUNCHING OPEN ENROLLMENT 2015



# **2014 BUS TOUR**

CoveredCA.com Enroll by February 15, 2015 COVERED COVERED COVERED	Mon., Nov. 10	Sacramento, Petaluma, San Francisco and San Jose
	Tues., Nov. 11	Gilroy, Fresno, Bakersfield
	Wed., Nov. 12	Pasadena, Riverside, Palm Springs, Moreno Valley
<image/> <image/> <complex-block><image/><image/><image/><image/><image/><image/><image/><image/><image/><image/><image/><image/></complex-block>	Thurs., Nov. 13	San Diego, Santa Ana, Downtown Los Angeles
	Fri., Nov. 14	Los Angeles
	Sat., Nov, 15	San Bernardino, Anaheim, Santa Ana, Carson, Los Angeles
	Sun., Nov. 16	Los Angeles (churches/faith-based)
	Mon., Nov 17	Santa Barbara, San Luis Obispo, Paso Robles, Salinas
	Tues., Nov. 18	Yuba City/Marysville, Chico, Redding





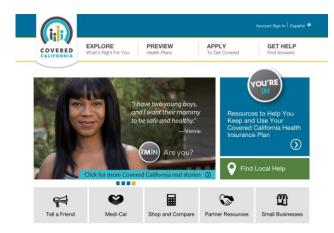




# COVERED CALIFORNIA WEBSITE RE-LAUNCH



# **NEW COVERED CALIFORNIA WEBSITE**



Resources	Featured Links	Other L	anguages	Covered California i powered by both
				CALIFORNIA Health Benefit Exchange
				PHCS
				HealthConfloredises

			Account Sign In   Español 오
EXPLORE	PREVIEW	APPLY	GET HELP
What's Right For You	Health Plans	To Get Covered	Find Answers

Home + Individuals and Families + Getting Covered

### Outck Links Coverage Basics The Application Process Health Care Costs and Cetting Help Paying for Coverage

#### Resources for Individuals and Families



**Getting Covered** 

Even those who are healthy today benefit from having health insurance. It's impossible to predict whether someone will get sick or have an accident, and with the average cost of a three-day hospital stay priced at \$30,000; it doesn't make sense to take the gamble of going without health insurance – particularly if it can be found at an affordable price.

Covered California makes it simple and more affordable for millions of Californians to get quality health insurance, including Medi-Cali, that can't be cancelled or denied because of a pre-wishing medical condition or if anomone gets sick. Covered California offers a range of plans so a consumer can choose the one that best meets their health needs and financial situation, and can be attained easily online, in person or by phone.

If a comsume has health insurance through their job already, coverage will only get better as a result of the Patient Protection and Atfordable Care Act, the federal health care law that created health insurance exchanges such as Covered California. And, should someone decide to leave high-rel job tomorrow, the Atfordable Care Act provides a sense of security and protection when it comes to health coverage.

All neely purchased insurance plans — even those sold outside of Covered California – must cover essential health benefits such as doctor visits, hospitalization, emergency care, maternity case, podatinic care for children, and prescriptions. This legislation also provides aliding-scale financial help, so almost all Americans can get quality health coverage at a fin price.

Open enrollment for Covered California health insurance plans happens once a year. For coverage that begins or Jan, 1, 2015, open enrollment begins on Nov. 15, 2014, and last until Feb. 15, 2015. [Medi-Cal enrollees are not limited to this period, and do not need to renew their enrollment in Medi-Cal during this time, because Medi-Cal enrollment is year-ound).

# **2015 OPEN ENROLLMENT ADS**



# I'M IN / TENGO UN PLAN - NEWSPRINT



I can't schedule an accident. So I got a health plan.















(i:ii

COVERED

# I'M IN / TENGO UN PLAN - BILLBOARDS





# THE CAMPAIGN TO PROMOTE ENROLLMENTS: I'M IN / TENGO UN PLAN

Email or Phone Password facebook Log In Keep me logged in 1 million are in. Recent **i**'MiN 2014 Are you? 2013 2012 Facebook I'M IN badge app Created Are you? COVERED CALIFORNIA **Covered California** i'Mir COVERED CALIFORNIA Timeline About i'MiN - from CoveredCA Photos More -Add the i'MiN badge to show your support for quality, affordable health care

look





# I'M IN!



Tengo Un Plan !



# **RENEWAL AND OPEN ENROLLMENT UPDATE**



## STARTING POINT: 2014 ENROLLMENT AND RETENTION UPDATE

- 1.4 million individuals enrolled in the 2014 plan year
- 200,000 individuals enrolled through a special enrollment event from June to September 2014.
- 1.14 million individuals paid their first month premium which is an 81% effectuation rate
- 1.2 million individuals were part of the initial renewal notice process that began in October



# 2015 OPEN ENROLLMENT AND RENEWAL: KEY DATES

Key Dates:	Key Activities:
November 15 <sup>th</sup>	Open Enrollment begins
December 15 <sup>th</sup>	Last day for open enrollment and renewal plan selection for January 1, 2015 coverage
February 15 <sup>th</sup>	Last day of open enrollment



# 2015 OPEN ENROLLMENT: EARLY PROGRESS FOR NEW SIGN-UPS



Individuals **determined eligible** for Covered California or Medi-Cal as of November 18, 2014



# 2015 OPEN ENROLLMENT: EARLY PROGRESS FOR NEW SIGN-UPS



# Covered California individual **plans selected** as of November 18, 2014

In October of 2013 it took 15 days to reach the same level of enrollment



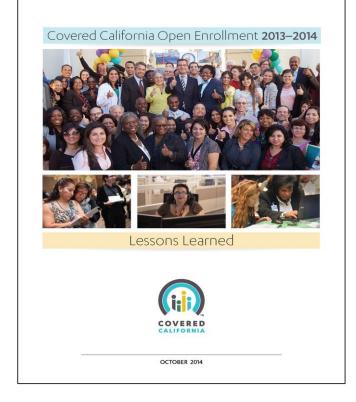
### **COVERED CALIFORNIA 2015 RENEWAL: EARLY PROGRESS**

- Covered California sent renewal notices in October
- Consumers had 30 days to renew before Covered California started the automatic renewal process
- Most eligible consumers who have not actively renewed will be automatically renewed by early December
- Consumers who were automatically renewed will be able to change plans through the end of open enrollment on February 15, 2015



### LESSONS LEARNED FROM THE FIRST OPEN ENROLLMENT

- The volume of consumer interest and interactions exceeded expectations and challenged all systems and service channels.
- Many consumers are new to insurance and need extensive education about health insurance terminology, how to enroll in coverage and how to use insurance.
- Most consumers relied on a variety of touch points, including in-person assistance, to successfully complete enrollment.





# **APPLYING LESSONS LEARNED TO 2015**

- Broadening outreach to African-Americans, Latinos and Asian-Americans through targeted advertising in ethnic media
- Awarding new grants supporting outreach and enrollment activities in groups anchored in African-American, Latino and Asian-American communities and new community-anchored activities throughout the state
- Increasing service center staffing with surge vendor and expanded service center hours
- Adding 200 storefront enrollment sites across the state operated by community groups in partnership with Covered California
- Providing ability to pay the first premium online
- Upgraded enrollment portal infrastructure to allow for greater user capacity and speedier page loads so that consumers do not have to return later to complete an application



# **SHOP UPDATE**



# **SHOP UPDATE**

- Average premium increase for Small Business consumers is 5.2 percent in 2015
- Some consumers can expect to see an increase of less than 2 percent
- New to SHOP in 2015:
  - Dual-tier option for employers
  - Embedded children's dental coverage:
    - Chinese Community Health Plan
    - Sharp Health Plan
    - Western Health Advantage.
  - Optional family dental plans
- SHOP Health Insurance and Dental plan carriers: <u>http://news.CoveredCA.com/2014/09/covered-california-announces-insurance.html</u>



# CITIZENSHIP AND IMMIGRATION INCONSISTENCIES UPDATE



### COVERED CALIFORNIA ADDRESSING CITIZENSHIP AND IMMIGRATION ELIGIBILITY INCONSISTENCIES

- In September, notices were sent to 98,900 families (148,000 individuals) in an effort to resolve eligibility inconsistencies in the 2014 enrollment documents
- These inconsistencies were related to being lawfully present in the United States or a U.S. citizen, national or eligible immigration status
- Consumers were given the option to reinstate throughout 2014
- Covered California has been able to clear 82,000 of those families
- Termination notices were sent in early October 10,500 individuals
- Covered California is in the process of reinstating coverage for those who did not provide documents before termination notices were sent

# BOARD MEETING PLANNING CALENDAR



### **BOARD PLANNING CALENDAR: DECEMBER - MARCH**

DECEMBER 18	JANUARY 15	MARCH 5
BOARD MEETING Cancelled	<ul> <li>BOARD MEETING</li> <li>Policy and Action Items</li> <li>1. Reconciliation Update</li> <li>2. 2016 Standard Benefit Designs</li> <li>3. 2016 Qualified Health Plan</li> </ul>	BOARD MEETING Policy and Action Items 1. TBD
ADVISORY MEETINGS • Plan Management Advisory Group. Note: Proposals for benefit design and new entrant policy will be presented for discussion and input at this meeting. Board action will be taken on these items in January.	Recertification and New Entrant Policies	

Note: Covered California plans to cancel the December Board Meeting and combine February and March in to one.



### COVERED CALIFORNIA REPORT ON DEPARTMENT OF MANAGED HEALTH CARE: NON-ROUTINE PROVIDER DIRECTORY SURVEY OF ANTHEM BLUE CROSS AND BLUE SHIELD OF CALIFORNIA RELEASED NOVEMBER 18, 2014

Anne Price, Director, Plan Management



### SUMMARY OF THE DEPARTMENT OF MANAGED HEALTH CARE NON-ROUTINE SURVEY OF TWO PLANS PROVIDER DIRECTORIES

- In June of 2014, the Department of Managed Health Care (DMHC) initiated a formal *Non-Routine Survey* to assess the accuracy of the provider directories of two of the ten Qualified Health Plans ("plans") participating in Covered California: Anthem Blue Cross ("Anthem") and Blue Shield of California ("Blue Shield"). The Final Reports were released on November 18, 2014.
- The survey was designed to duplicate a "consumer's experience" with finding in-network physicians using the plans provider directories as source of potential contracting physicians.
- Telephonic surveys of physician offices included in the plans provider directories were conducted to assess:
  - Does the Doctor accept any of the plan's products
  - Does the Doctor "accept the plan's Covered California products"
  - o Does the Doctor accept New Patients with the plan's Covered California coverage
- Survey samples included 3272 Anthem physicians and 1360 Blue Shield physicians.
- Four Deficiencies were identified for each plan, with three of the four "not corrected" as of the date of the report all are being disputed by the health plans.
- DMHC will initiate a *Follow-Up Survey* in six months, and will submit the Reports to its Office of Enforcement for potential additional corrective action and other remedies as needed.



# MAJOR FINDINGS OF THE DMHC AUDIT

- A substantial portion of front-office staff for physicians listed in the directories of the two plans for last year's open enrollment period indicated that the physician did not take Covered California products:
  - For Anthem 13% of responders who were listed in the plan's directory said they did not accept Covered California plans.
  - For Blue Shield 9% of responders who were listed in the plan's directory said they did not accept 0 Covered California plans:
- For each plan, an even larger portion of those surveyed indicated that the provider was no longer at the office that was called:
  - For Anthem 13% of responders who were listed in the plan's directory said the provider was no 0 longer at the office.
  - For Blue Shield 18% of responders who were listed in the plan's directory said the provider was no 0 longer at the office :
- For each plan, a very high percentage of those who reported accepting a Covered California product reported "accepting new patients:"
  - For Anthem 91% of responders reported they were accepting new patients. For Blue Shield 88% of responders reported they were accepting new patients. 0
  - 0



# MAJOR FINDINGS OF THE DMHC AUDIT CONT.

- For each of the two plans, DMHC found that they have "not corrected" deficiencies in the following areas:
  - The plans informed consumers of numerous physicians were participating in the plans products when they were not.
  - The plans failed to correct inaccuracies in their directories.
  - The plans failed to provide accurate provider directories.
- Both plans were found to have failed to submit required updated provider lists to DMHC for review and have corrected that deficiency.
- The audit includes descriptions of substantial efforts by both plans to update and improve the accuracy of their directories and their communications with providers.



### **DMHC AUDIT: COVERED CALIFORNIA ANALYSIS AND OBSERVATIONS**

- These surveys confirm Covered California's early indicators in last year's open enrollment about the accuracy of the provider directories for these two plans. Covered California was aware of the Provider Directory challenges -- shutting down our combined on-line directory at the first Open Enrollment in order to not perpetuate the problem – and has engaged actively with these two plans to push them to improve the accuracy of their data and communications with physicians. The DMHC reports validates that this was an issue for two of Covered California's ten plans being offered in the current open enrollment period.
- The framing of the question about providers accepting "Covered California plans" could have been misleading because a plan purchased through Covered California mirrors those plans purchased from the off-Exchange market; this issue is a major focus of communication by Covered California and its' contracted plans with clinician.
- Given the sample sizes, the survey yields important and interesting findings on a statewide basis, but sample sizes make analysis on a county or regional basis very unreliable for most of California.
- The results of health plans corrective actions and better communication between plans and physicians should lead to far greater accuracy for the current open enrollment period; the scheduled six month review will be an important marker to assess progress in improving the directories and physician office understanding of plans contracted.



# **COVERED CALIFORNIA ACTIONS AND FUTURE STEPS**

- As an Active Purchaser, Covered California worked throughout 2014 to assure that these and other plans not only improved the accuracy of their directories but also had sufficient capacity in their networks to assure consumers would have access to needed care. Network size and stability were discussed at length in the recent recertification negotiations, and multiple plans (included the two that were the subjects of this audit) have expanded their networks since last year.
- Covered California is working with providers and provider organizations, such as the California Medical Association, to continue to educate physicians and their offices about the Affordable Care Act and when Covered California has contracts that with plans that are part of those plans' individual market products.
- Covered California continues to monitor these provider directory accuracy, provider communications and network issues to assure that the consumers we serve get both accurate information and timely access to needed care.
- Covered California will monitor future corrective actions taken by the health plans, any orders issues by the DMHC and the results of the six-month updated audit.



# **CONSUMER WEBSITE UPDATE**

Karen Ruiz, CalHEERS Project Director



# **KEY WEB INITIATIVES**

- Providing System Support to Aid in Medi-Cal Processing
   This is continuing work.
- Performance Improvements
  - $_{\circ}~$  Infrastructure expansion completed first week of November.
- Functional Improvements
  - ° Release 8 for Medi-Cal and Covered California Renewals implemented.
  - Release 9 including Open Enrollment improvements implemented on November 12.
- Open Enrollment Release
  - Scaled back to ensure complete testing of all new functionality.
  - Deferred items will be implemented following Open Enrollment.



### CALHEERS UPDATED RELEASE PLAN

July 2014 – December 2014

#### **Clear Medi-Cal Pending Cases and eHIT Improvements**

- Income Reporting Enhancements (Completed)
- Remote Identity Proofing (Completed)
- Provide ability to Determine Retro Eligibility ("Prior Months Pending") (Completed)
- Send Notice of Withdrawal of Apps in CalHEERS to SAWS (Completed)
- Special Batch Processing for Missing Verifications (Ongoing)
- Verification Plan Updates (including Caching values to reduce hits to Fed Hub) (Completed – Experiencing 75% reduction in hits to Fed Hub)
- Provide Eligibility Workers Ability to Remove "Soft Pause" (Moved to Post Open Enrollment)
- Real-time Error Reporting to Eligibility Workers (Moved to Post Open Enrollment)



### CALHEERS UPDATED RELEASE PLAN

August 2014 – December 2014

**MAGI Medi-Cal and Covered California Renewals** 

- Pre-notifications to consumers to update on-line accounts (Completed) and everification authorizations (Completed)
- Renewal notices for Covered California and Support for SAWS pre-populated renewals (Completed)
- Mixed household (APTC and MAGI) renewals (Ongoing)
- Support for carrier renewal transactions and notices (Ongoing)
- Eligibility notices for 2015 enrollment (Ongoing)



## **CALHEERS UPDATED RELEASE PLAN**

#### November - December 2014

#### Second Year Open Enrollment for QHP

- Full scope voter registration requirements (Completed)
- On-line payments for QHP enrollments (Completed)
- New 1095 (APTC Credit notices) to IRS and consumers for 2014 Tax Year (January 2015)
- Updates to align paper and on-line application (Partial Implementation, remainder deferred to Post Open Enrollment)
- Updates based on advocate feedback (Partial Implementation, remainder deferred to Post Open Enrollment)
  - Examples include updating wording and instructions for pregnant women and foster youth
- Updates based on consumer / usability feedback (Partial Implementation, remainder deferred to Post Open Enrollment)
  - Usability experts have been engaged and are building a more unified website incorporating learning opportunities and more streamlined access to application for insurance
- CalHEERS / SAWS eHIT Enhancements
  - Enhanced renewal (Completed), soft pause and single streamlined application (SSA) features (Deferred to Post Open Enrollment)



### APPENDIX OUTREACH UPDATE



### **ENROLLMENT SUPPORT: KEY METRICS**

### As of November 3, 2014:

- 12,671 Certified Insurance Agents
  - 0 16% Spanish; 5% Korean; 4% Mandarin; 4% Vietnamese; 3% Cantonese
- 6,078 Certified Enrollment Counselors
  - o 57% Spanish; 3% Cantonese; 3% Mandarin; 2% Vietnamese; 1% Korean
- 2,648 Certified Educators
- 10,000 County Eligibility Workers



#### **ENROLLMENT SUPPORT: COMPENSATION**

#### Total CEE Payments through August 27, 2014

	# Certified Enrollment Entities Paid	Total Paid	
Covered CA Plans	542 \$2,352,248		
Medi-Cal Payments	468 \$1,184,650		
	Total Payments made to CEEs \$3,536,898		
Next CEE Payments			
	# Certified Enrollment Entities Paid	Total Paid	
Covered CA Plans (ETA 11/21)	428	\$.5M	
Medi-Cal Payments (ETA 11/25)	547	\$3M	
	Total Payments to be made to CEEs	\$3.5M	



#### **ENROLLMENT SUPPORT: COMPENSATION**

### **Agent Payments**

- Medi-Cal:
  - Payments being disbursed in batches between November and December for enrollments that occurred through July 2014
  - Payments scheduled for early March 2015 for enrollments that occurred in August and September 2014
- SHOP:
  - Payments to be disbursed early December for enrollments that occurred through June 2014
  - Payments to be disbursed early to mid-December for enrollments that occurred in July and August 2014



# APPENDIX SERVICE CENTER UPDATE



# **SERVICE CENTER UPDATE**

- Improving Customer Service
  - Increase cross-trained SCRs from 22 to 97 to assist in both voice and chat channels to service the anticipated increased contact volumes during the renewal and open enrollment periods
  - Additional staff hiring continues to increase at multiple sites and with focus on addition of bilingual staff to better support the diverse California population
    - Currently multi-lingual resources has increased of over 140% from October 2013 for the 2014 open enrollment launch
- Enhance Technology Solutions
  - Continued IVR enhancements will improve self-service and native language support
- Clarifying channels and improved communications
  - Service Center hours of operation have been extended through the open enrollment period to 8am to 8pm Monday through Friday and 8am to 6pm on Saturdays
  - Active hiring and training underway to provide support for renewal and open enrollment activities

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# **SERVICE CENTER STAFFING UPDATE**

- Rancho Cordova, Fresno and Contra Costa Service Centers are receiving general inquiry, application & enrollment and ongoing support contact volumes in support of the Covered California marketing efforts statewide.
- Currently on track to increase staff by 68% from current actual staff of 742 to projected staff of 1,249 by December 1<sup>st</sup>.

Staff Group	11/1/2014 Target	11/1/2014 To Date	12/1/2014 Target	12/1/2014 Projected To Date
Service Center Full Time Equivalent Representatives	1031	742	1192	1249
Other staff (Management, Back Office, Quality Assurance, etc)	280	210	280	217
Total	1311	952	1472	1466

- All three Covered California Service Centers are set up to handle statewide calls using the "first available Service Center Representative model."
  - ∘ Fresno 460 SCRs, 47 leads
  - Rancho Cordova –214 SCRs, 14 dedicated chat SCRs, 27 Hotline SCRs & 20 leads
  - Contra Costa- 44 CSAs & 19 leads

\* Some Rancho and Fresno resources redirected to support multiple consumer assistance activities

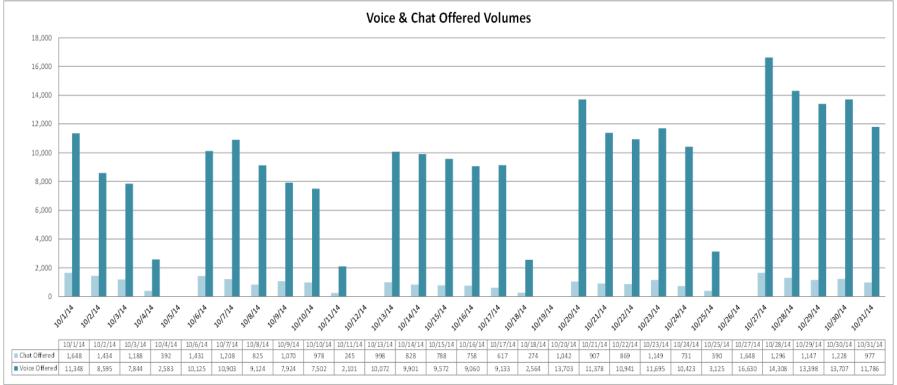
# **SERVICE CENTER PERFORMANCE UPDATE\***

Service Center Metric	Goal	September 2014 Stats	October 2014 Stats
Total Calls Offered		238,789	259,472
Service Level	80% of calls answered within 30 seconds	3.2% of calls answered within 30 27.2% of calls answered within seconds seconds	
Abandoned Calls	3% or less of calls abandoned	57.8% of calls abandoned	30.7% of calls abandoned
Total Dialed Attempts		430,580	371,729
Busy Message Presented to Callers	0% or less of calls receive busy message	22% or less of calls receive busy message	1% or less of calls receive busy message
	Top Inqu	iries	
1. Consumers calling in to have their p	assword reset		
2. Consumers calling with questions re	egarding re-enrollment		
3. Consumers calling to check status o	f their status with Medi-Cal, and re	garding mixed household	
4. Consumers calling in with questions	s regarding open enrollment		
5. Report a change calls			
*Performance metrics are measure			

Note: Abandoned Calls: includes callers who may listen to FAQ messaging while on hold and release the call prior to speaking with an SCR

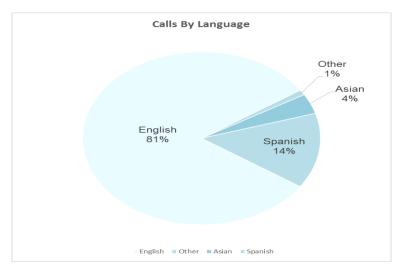
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### **SERVICE CENTER PERFORMANCE UPDATE\***



Note: Performance metrics are measured monthly. Voice queues open for consumers Monday through Saturday.

#### LANGUAGE DISTRIBUTION OF CALLS HANDLED: OCTOBER 2014

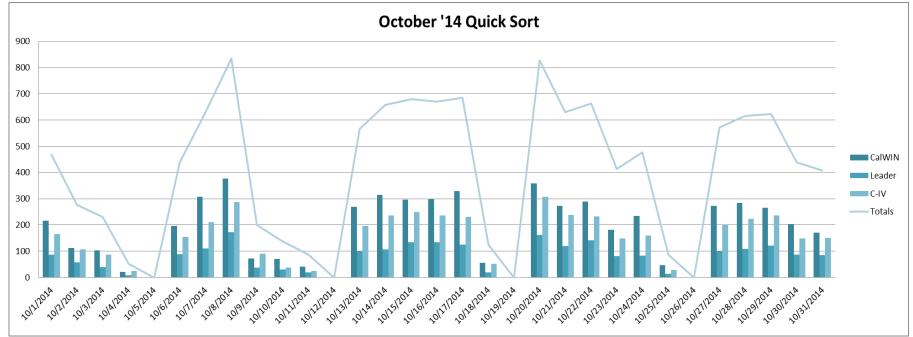


- Service Centers are supporting calls in all 13 languages and using an interpreter service when an inlanguage Service Center Representative is not available.
  - Service Center Representatives are handling 77% of non-English calls
  - Contracted language line representatives are handling 23% of non-English calls
  - The Non-English calls have been concentrated in Spanish (15-18%), Cantonese (1 2%), Vietnamese (.5 1%)
- 139 Covered California Service Center Representatives or 19% are skilled to handle multi-lingual calls and chat



Note: Performance metrics are measured monthly.

### **QUICK SORT VOLUMES**



#### Weekly Quick Sort Transfers to County/Consortia

Weekly Transfers Weekly Transfers We 1,028 2,327 Partial Week	ekly Transfers Weekly Tra 3,385 3,98	0.050
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Note: Voice queues open for consumers Monday through Saturday.



#### **COVERED CALIFORNIA/COUNTY WORKFLOW COORDINATION QUICK SORT PERFORMANCE**

Quick Sort Metrics	Service Level Standards	C-IV	CalWIN	Leader
Average Speed of Answer		3 Seconds	18 Seconds	8 Seconds
Service Level	80% of calls answered within 30 seconds	98.1% of calls answered within 30 seconds	93.4% of calls answered within 30 seconds	97.3% of calls answered within 30 seconds
Abandoned Calls	3% or less of calls abandoned	.17% of calls abandoned	1.31% of calls abandoned	.5% of calls abandoned
Busy Signals Presented to Callers	0% or less of calls receive busy signal	0% of calls received busy signal	0% of calls received busy signal	0% of calls received busy signal

- Continued refinement of Quick Sort processes with the Consortia and Service Center have shown continued improvement in process accuracy and delivering a seamless customer experience
- County/Consortia, DHCS and Covered California weekly operational meetings implemented to maintain operational focus

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