



EXECUTIVE DIRECTOR'S REPORT
Peter V. Lee, Executive Director | October 8, 2015 Board Meeting

ANNOUNCEMENT OF CLOSED SESSION ACTIONS

OVERVIEW

Executive Director's Report

- Open Enrollment Update
- Renewal Update
- Non-Tax Filer Approach
- Health Plan Quality Reporting for Open Enrollment 2016
- Active Membership: An Evolving Picture
- Board Calendar

Covered California Policy and Action Items

- Agent Responsibilities
- Certified Insurance Agent Regulations
- Individual Eligibility and Enrollment Regulations Readoption

OPEN ENROLLMENT UPDATE

OPEN ENROLLMENT AND RENEWAL FOR 2016

Key dates:

- August 1st- Shop and Compare Tool includes 2016 rates
- October 7th – October 30th – Covered California sends renewal notice to consumers
- October 12th – Active renewal begins
- November 1st – Open enrollment begins
- November 13th – November 29th – Auto-renewal begins
- December 15th- Last day to select a plan for 1/1/2016 coverage
- January 31st – End of open enrollment

COVERED CALIFORNIA FOR SMALL BUSINESS UPDATE

COVERED CALIFORNIA FOR SMALL BUSINESS

- **Current Enrollment through August 2015**
 - Groups: 2,865
 - Members: 19,465
 - Average Group Size: 6.8

- **Agent Commissions**
 - Agents now paid on a regular basis
 - Agent commissions paid through July
 - August & September Commissions are in process

2016 RATE OVERVIEW

2016 North vs. South Rate Comparison			
Region	Enrollment	Avg Weighted Rate Increase	Avg Premium (40 y/o, straight avg of all products)
North (Regions 1-14)	56%	7.89%	\$434
South (Regions 15-19)	44%	7.94%	\$372

- **Statewide: 7.9% (weighted average)**
- **Small group rates are the same on/off exchange**

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- **2016 Small Business market expands to groups with up 100 employees**
 - **In Q4 most of Small Business market will adopt an ACA compliant plan**
 - **Exchange model is well positioned for growth**

SMALL BUSINESS MARKETING CAMPAIGN

September 2015 – January 2016

70-80% of insured small groups moving to ACA plans beginning January 2016.

Print, Digital and Radio ads running from September 2015 through January 2016 with messages about:

- Budget control for employers
- Health plan choices for employees
- Tax credits if qualified

Generate leads for certified insurance agents and **provide outreach toolkit** for agents & partners

Print Ads



Digital Ads



Videos



Covered California for Small Business: You Could Qualify for a Tax Credit

OPEN ENROLLMENT MARKETING UPDATE

Colleen Stevens, Director of Marketing

OPEN ENROLLMENT 2015-2016

MARKETING OBJECTIVES

Increase the number of insured Californians by:

1. Helping Californians understand the value of health insurance and being covered.
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. Supporting renewal and retention of existing Covered California members.
5. Coordinating efforts with the ground campaign to support all service channels (Agents, Navigators, CECs).

KEY RESEARCH INSIGHTS

Messages that Drive Brand Awareness & Motivation

- Acknowledging:
 - A balance in life wins
 - Need for believable moments
 - Desire for more information
- Giving consumers a way forward; a solution to the problems



Messages that Drive Consideration & Purchase

- Cost/price messages still resonate strongly
- The ‘dental’ message was highly motivating: either because it’s “new news” or related to actual dental needs
- Prevention and emergency messaging both continue to be motivating
- Phrases like “most” and “4 out of 5” that help people believe they could get it for less are effective
- A choice of plans also work well



PAID MEDIA CHANNEL BY SEGMENT

	 Multi-Segment	 In-Language Latino	 African American	 In-Language Asian
Spot TV/Cable	✓	✓	✓	✓
DRTV	✓	✓	✓	
Radio	✓	✓	✓	✓
Print	LGBT	✓	✓	✓
Premium Digital	✓	✓	✓	✓
Programmatic Digital	✓	✓	✓	
Out-of-Home		✓	✓	
Paid Social	✓	✓	✓	
Paid Search (SEM)	✓	✓	✓	
Direct Mail		✓		

OPEN ENROLLMENT PAID MEDIA SUMMARY

Campaign Objectives	Generate awareness & educate CA residents on the value of healthcare coverage through Covered California, and why they need it. Drive new enrollments & secure renewals			
Campaign Timing	Seeding: 10/19/15 – 10/31/15 Open Enrollment: 11/1/15 – 1/31/16			
Media Budget	\$29.0M			
Media Strategy	Concentration. Continuous Optimization. Maximize Resources			
Target Segments	Multi-Segment: Caucasian; LGBT African American English speaking Latinos English speaking Asians	African American In-culture	In-language Asians Chinese, Vietnamese, Korean, Hmong, Laotian, Cambodian, Filipino	In-language Latinos
Geography	Statewide with emphasis on Los Angeles*, Sacramento, San Diego*, San Francisco*, Fresno *LGBT markets			Statewide with emphasis on Los Angeles, Sacramento, San Diego, San Francisco, Fresno, Bakersfield

RENEWAL UPDATE

RENEWAL AND RETENTION

Objectives

- Maximize the retention and renewal of Covered CA members
- Keep our members insured and promote informed access to needed care

Strategies

Integrated multi-touch strategy with either email/direct mail

1. Email
2. Direct Mail for those that do not have an email address
3. Notices out of CalHEERS



2016 OPEN ENROLLMENT AND RENEWAL

Covered California Open Enrollment and 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 when possible.
4. Encourage consumer self-service through the website, Interactive Voice Response (IVR), and other tools.

Covered California has worked to improve the 2015-2016 online renewal consumer experience by increasing clarity as to how to proceed through renewals.

NON-TAX FILER APPROACH

RENEWAL HANDLING OF NON-TAX FILERS

Individuals who received tax credits in 2014 but did not file their 2014 federal income taxes are ineligible for tax credits in 2016. The upcoming renewals period will be the first time marketplaces must operationalize this rule.

- August 19 – Covered California sent email/mail to all enrollees reminding them to file their taxes.
- October 12 – Covered California will add language to the online application requiring consumers to attest to filing their 2014 taxes.
- November – Covered California will send a notice to individuals whom the IRS reports did not file 2014 taxes.
- Early 2016 – Contingent on system functionality, Covered California will re-determine APTC eligibility for those who have not filed their 2014 taxes and will prospectively remove tax credits in order to comply with federal regulations.

HEALTH PLAN QUALITY REPORTING OPEN ENROLLMENT 2016

Dr. Lance Lang, Chief Medical Officer

COVERED CALIFORNIA QUALITY RATINGS OVERVIEW

- For Open Enrollment 3 (OE3), the quality ratings will be based on the experience of *Exchange* enrollees. No other marketplace is reporting Exchange quality ratings this year.
- Covered California quality ratings currently reflect only one aspect of quality consumer's experience with their health plan and their experiences with doctors, hospitals and other healthcare providers.
- Quality on this metric varies across plans; scores are designed to serve as decision support for consumers during plan selection based on enrollee satisfaction but not yet clinical quality performance.
- Covered California is working with those plans whose consumer experience rating score lags and more importantly on other elements critical to deliver quality care.

CONSUMER EXPERIENCE RATING BASED ON TWO QUESTIONS: GLOBAL RATING OF HEALTH PLAN AND GLOBAL RATING OF HEALTHCARE

- Covered California did not use results from eight of the ten survey questions due to low reliability associated with rules limiting plans to survey only 1,000 enrollees
- The two global ratings questions distinguish plan performance with high reliability (low likelihood of error)
 - Plan level reliability is very high for all plans for both of these questions
 - The completed sample size is above or slightly below 100 respondents for all plans except for one plan
- The two questions capture more enrollee experience information than the single rating of plan item
 - Enrollee's health plan and healthcare experiences overlap but these two dimensions also represent distinct aspects of overall experience

CONSUMER EXPERIENCE RATINGS PERFORMANCE DISTRIBUTION: OPEN ENROLLMENT 2015 COMPARED TO OPEN ENROLLMENT 2014

Covered California Consumer Experience Rating Global Star Results	# Products	1 Star < 25 th PCT	2 Star 25 th -49 th PCT	3 Star 50 th -74 th PCT	4 Star >74 th PCT
Open Enrollment 2016 (10/15)	12 ^{1, 2}	1	5	3	3
Open Enrollment 2015 (10/14)	10	0	3	3	4

Notes to Table:

¹ Includes 11 individual products and one SHOP-only product

² Two Health Net products and two New Entrant products do not have star ratings and are not included here

CONSUMER EXPERIENCE RATINGS: COMPARING OE 2015 TO OE 2014

	Summary Rating Fall 2015	Summary Rating Fall 2014
Summary Rating Methodology	Historical CAHPS – 2 questions 2014 Exchange experience Region IX benchmark Product-specific ratings	Historical CAHPS – 10 questions 2013 Non-Exchange experience Region IX benchmark Blended product ratings by plan
Anthem Blue Cross HMO	★★	★★★ (HMO/PPO blended score)
Anthem Blue Cross PPO	★★	
Blue Shield PPO	★★★	★★★
Blue Shield HMO (CCSB)	★★★	N/A
Chinese Community HMO	★★★	N/A
Health Net of California, Inc. (HMO)	★★	★★★ (HMO/PPO blended score)
Kaiser Health Plan Inc. (North and South)	★★★★	★★★★
LA Care Health Plan	★★	★★
Molina Healthcare of California	★	★★
Sharp Health Plan	★★★★	★★★★
Valley Health Plan	★★	N/A
Western Health Advantage	★★★★	★★★★

NEXT STEPS

- Covered California is working with all QHPs on a range of clinical quality, important payment and patient engagement strategies
- Covered California has already started working with the lower scoring carriers to develop an action plan and projected timeline for improving the Consumer Experience Rating scores
 - Due to the look back survey period, there may not be substantial improvement to the survey score used for OE 2017 in October 2016
- Covered California will work with CMS and issuers on lessons learned from the 2015 beta test and how to improve methodology
 - larger sample size
 - regional level rating
- The Qualified Health Plan (QHP) contract requires carriers to satisfy other Quality measures and Covered California will consider additional opportunities to portray this information as an additional decision point for health plan choice

ACTIVE MEMBERSHIP: AN EVOLVING PICTURE

TELLING THE STORY OF COVERAGE

Research released today:

- Active Member Profile:
 - First full data profile of active membership (“effectuated” data)
 - Active member = premium is paid and coverage is effective
 - Snapshot: active membership within one coverage month
 - Updated regularly on hbex.coveredca.com
 - Minimum 3 month lag to account for transactions on terminations from carriers
- **Research release later in October:**
 - Independent survey results from University of Chicago
 - Review of enrollment and renewal forecasts

COVERED CALIFORNIA'S CORE REPORTING DIMENSIONS

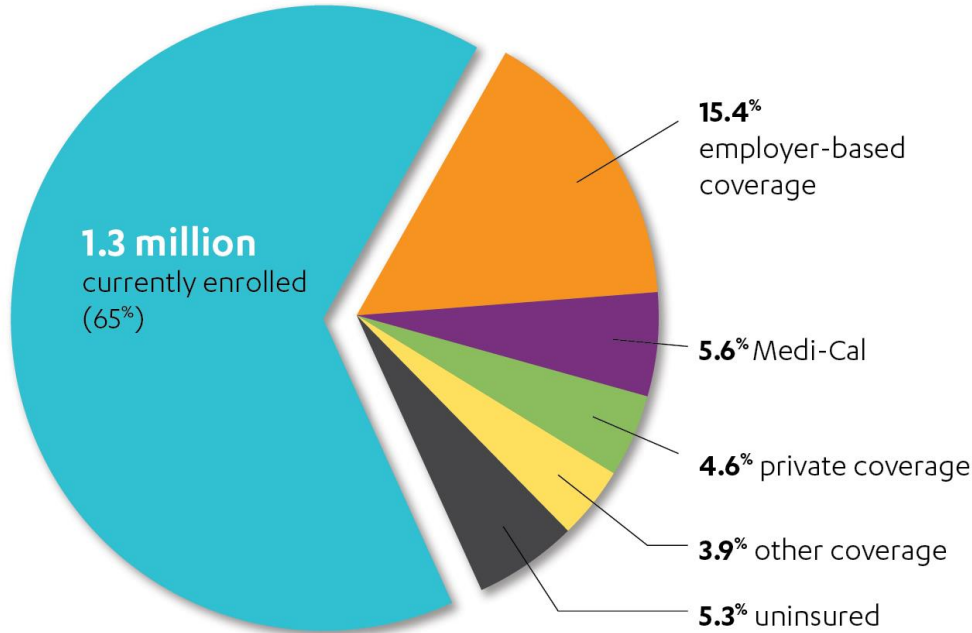
Core Dimensions	Demographics	Cut by
<ul style="list-style-type: none">• Issuer• Tier (includes enhanced silver breakouts)• Service Channel• Premiums (policy level)	<ul style="list-style-type: none">• Gender• Age• Race• Ethnicity• Race/ethnicity (roll-up dimension)• Language preferences	<ul style="list-style-type: none">• QHP• Region• County• Zipcode (totals only)

INTERPRETING THE DATA

- Covered California enrollment is dynamic – point-in-time data provides only a part of the story.
- Data can be analyzed in the context of:
 - Covered California's forecast ranges
 - Trends over time
 - CalSIM 1.91
 - Other models of Affordable Care Act take-up
- Data is always evolving due to ongoing system reconciliations (with carriers) – prior month's releases will be refreshed each month.

MORE THAN 2 MILLION CONSUMERS SERVED

The majority of those served have continuous coverage and of those who have left Covered California, the vast majority (85%) continue to have health insurance.



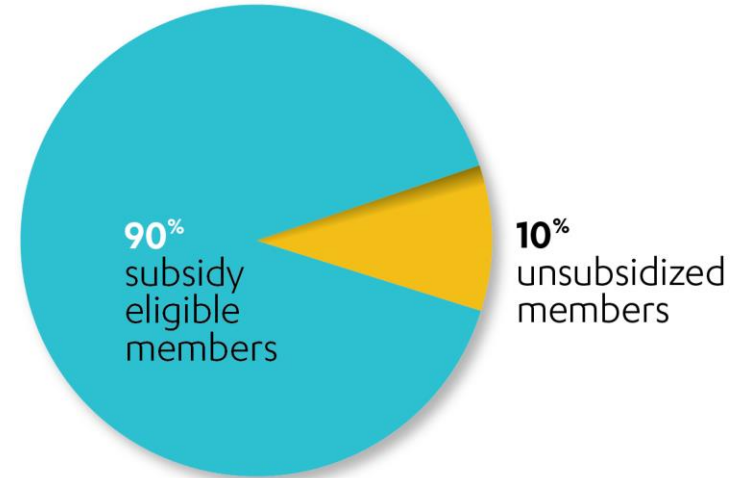
- Prior to 2014, Covered California forecast that ~ 1/3 of enrollees would leave coverage on an annual basis.
- In the period from January 2014 through September 2015, more than 2 million Californians have had coverage for some period of time, with ~ 700,000 of those no longer active in June.
- As of June 2015, the actual annual rate of disenrollment is about 33%.
- Based on recently completed survey conducted of Covered California members who left (“disenrolled”), the vast majority (85% of those terminating) left to get employer-based, Medi-Cal, Medicare or other coverage.

Estimated from Covered California enrollment data and 2015 Member Survey (n=3,373).

ACTIVE MEMBERS

- **Active membership is strong and meeting projections:**
 - ~1,307,000 members in June 2015
- **Special Enrollment sign-ups above expectations**
 - Rate of churn out of exchange to other coverage also higher than forecast
- **Enrollment model is still evolving:**
 - Based on less than one full cycle of experience — especially true when focusing on “churning” consumers.

Vast Majority of Active Members Receive Financial Help

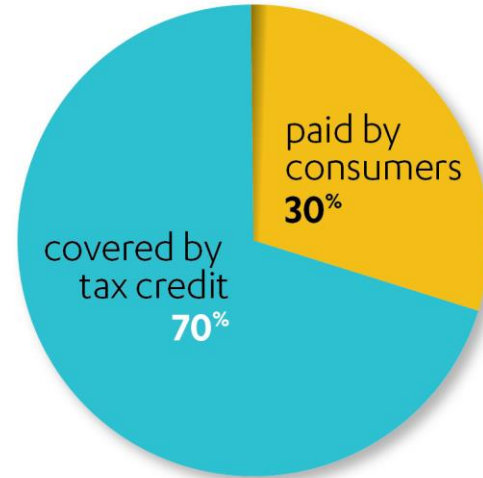


AFFORDABLE COVERAGE THROUGH PREMIUM ASSISTANCE

Average Premiums, Average APTC, and APTC as % of Gross Premium by Subsidy — Policy level Month of June 2015

Subsidy Eligible	
Number of policies	777,758
Average Gross Premium	\$ 594
Average Net Premium	\$ 157
Average APTC	\$ 436
Average Net Premium as percent of Gross	70%
Unsubsidized	
Number of policies	83,677
Average Gross Premium	\$ 516

Average Premium Assistance Reduces Monthly Cost by 70 Percent



Premium data is at the "policy" level, which is not necessarily the member level: many policies include more than one member.

CHOOSING PLANS WITH BEST VALUE

Cost-sharing subsidies help reduce the cost of getting services and the enrollees who are eligible for the largest cost-sharing subsidies are overwhelmingly enrolled in enhanced silver health plans, which means they have reduced copayments when going to the doctor, getting lab tests, and more.

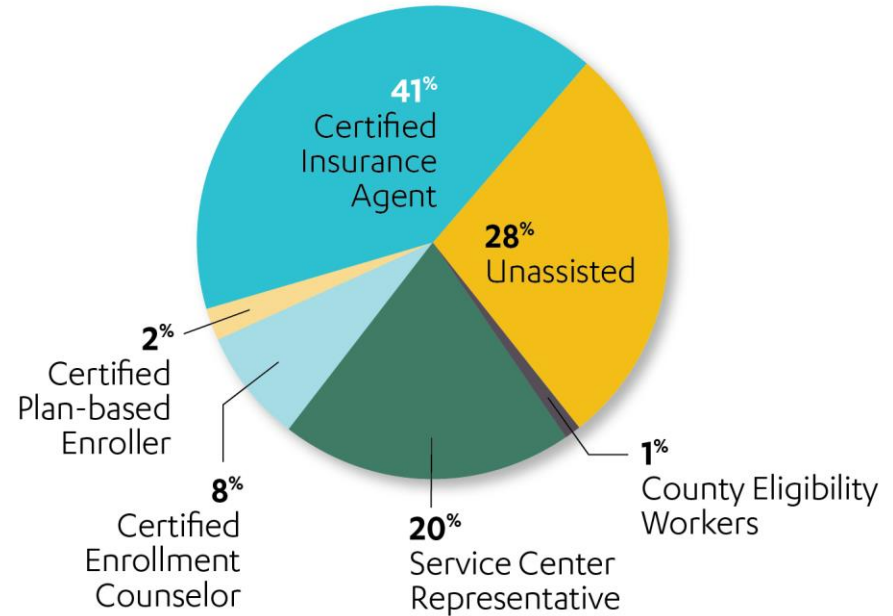
Tier of Health Plan by Federal Poverty Level Members in June 2015				
	138% FPL to 150% FPL	150% FPL to 200% FPL	200% FPL to 250% FPL	250% FPL to 400% FPL
Metal Level	(column %)	(column %)	(column %)	(column %)
Minimum Coverage	0%	0%	0%	1%
Bronze	8%	17%	33%	39%
Silver	91%	79%	56%	43%
Gold	1%	2%	6%	10%
Platinum	1%	2%	5%	7%
Total (n)	196,990	442,450	224,870	303,770

- Over 670,000 Covered California enrollees benefit from cost-sharing subsidies that make accessing care more affordable.
- Over 90% of consumers eligible for Enhanced Silver 94 coverage are choosing Silver over Bronze.
- Similarly, over three quarters of individuals who are between 150% and 200% of the federal poverty level are also choosing an Enhanced Silver plan.

DIVERSE SERVICE CHANNELS PROVIDE KEY ASSISTANCE

- **Certified Insurance Agents and Certified Enrollment Counselors continue to reach key populations:**
 - Certified Enrollment Counselors continue to reach Latinos, and especially consumers who prefer Spanish, in large numbers.
 - Asian consumers much more likely to enroll with Certified Insurance Agents.
- **Unassisted enrollment through the website remains method of choice for 26-34 year olds.**

Active Members in June 2015
by Enrollment Service Channel



DIVERSE SERVICE CHANNELS PROVIDE KEY ASSISTANCE

Race/Ethnicity by Service Channel – Members in June 2015

	Certified Enrollment Counselors	Certified Insurance Agent	Certified Plan-based Enroller	County Eligibility Workers	Service Center Representative	Unassisted	TOTAL
Race/Ethnicity	(row %)	(row %)	(row %)	(row %)	(row %)	(row %)	(row %)
American Indian/Alaska Native	12%	28%	4%	2%	26%	28%	100%
Asian	6%	54%	1%	1%	14%	24%	100%
Black or African American	8%	19%	2%	2%	32%	37%	100%
Latino	19%	29%	2%	2%	21%	27%	100%
Multiple Races	3%	18%	1%	1%	24%	54%	100%
Native Hawaiian or Pacific Islander	6%	26%	2%	3%	29%	33%	100%
Other	5%	46%	2%	2%	23%	22%	100%
White	3%	28%	1%	2%	26%	41%	100%
(nonrespondent)	6%	58%	5%	0%	16%	15%	100.0%
Grand Total	101,740	526,350	31,910	17,460	262,740	367,520	1,307,720
Grand Total	8%	40%	2%	1%	20%	28%	100%

All % calculations except the non-respondents calculated out of respondents only. Non-respondent % is of total population of enrollees.

Service Channel reflects the latest assister type to submit an application or enroll a consumer, including change reports.

DIVERSE SERVICE CHANNELS PROVIDE KEY ASSISTANCE

Race/Ethnicity by Service Channel – Members as of June 2015

	Certified Enrollment Counselors	Certified Insurance Agent	Certified Plan-based Enroller	County Eligibility Workers	Service Center Representative	Unassisted	TOTAL
Race/Ethnicity	(column %)	(column %)	(column %)	(column %)	(column %)	(column %)	(column %)
American Indian/Alaska Native	0%	0%	1%	0%	0%	0%	0%
Asian	15%	35%	15%	19%	15%	16%	22%
Black or African American	2%	1%	3%	3%	4%	3%	2%
Latino	65%	24%	40%	32%	27%	24%	28%
Multiple Races	1%	1%	1%	2%	3%	4%	2%
Native Hawaiian or Pacific Islander	0%	0%	0%	0%	0%	0%	0%
Other	3%	6%	7%	4%	5%	3%	5%
White	13%	32%	33%	38%	47%	50%	39%
(nonrespondent)	19%	37%	53%	9%	20%	13%	25%
Grand Total	101,740	526,350	31,910	17,460	262,740	367,520	1,307,720
Grand Total (row %)	8%	40%	2%	1%	20%	28%	100%

All race/ethnicity % calculations except the non-respondents calculated out of respondents only. Non-respondent % is of total population of enrollees.

Service Channel reflects the latest assister type to submit an application or enroll a consumer, including change reports.

For this measure, prior contact with a CEC, PBE, or agent overwrites a more recent activity that was unassisted or performed by SCRs.

MEMBERSHIP BY RACE/ETHNICITY

Race / Ethnicity Roll-up by Subsidy Eligibility		
	Subsidy Eligible	
Race / Ethnicity	Members in June 2015	CalSIM estimate of eligible population
Asian	22.9%	20%
Black or African American	2.4%	5%
Latino	29.8%	37%
Other	7.4%	4%
White	37.6%	33%
(nonrespondent)	25.4%	
Grand Total	100%	100%

- Covered California’s enrollment has improved to better reflect the demographic mix of subsidy eligible Californians, this improvement will take time to be fully reflected in active membership, which is a point-in-time that reflects all enrollment since January 2014.
- Covered California is also in the process of seeking to better understand of the extent to which there may be demographic differences in:
 - (1) rates of “effectuation” (paying premium after enrolling);
 - (2) enrolling during Special Enrollment;
 - (3) disenrollment and where people go upon disenrolling (employer-based coverage, Medi-Cal, etc.)

* All % calculations for race/ethnicity, except the non-respondents, are calculated out of respondents only. Non-respondent % is of total population of enrollees.

MEMBERSHIP BY AGE

While Covered California's active members are somewhat older than the subsidy eligible population, the second year open enrollment was younger than the first and – more importantly – the health status mix of all enrollees is healthy leading to lower than expected risk mix and low premium increases.

Age Roll-up by Subsidy Eligibility		
	Subsidy Eligible	
Age Bracket	Members in June 2015	CalSIM estimate of eligible population
Age 0 to 18	4.1%	2%
Age 19 to 29	17.8%	26%
Age 30 to 44	23.1%	25%
Age 45 to 64	53.5%	47%
Age 65+	1.5%	
Grand Total	100.0%	100.0%

COVERED CALIFORNIA BOARD CALENDAR 2015 AND 2016

2015 BOARD MEETING DATES / UPCOMING ADVISORY COMMITTEES

- Thursday, January 15, 2015
- No meeting in February
- Thursday, March 5, 2015
- Thursday, April 16, 2015
- Thursday, May 21, 2015
- Thursday, June 18, 2015
- No meeting in July
- Thursday, August 20, 2015
- No meeting in September
- **Thursday, October 8, 2015 (New Date)**
- Thursday, November 19, 2015
- **Thursday, December 17, 2015**
(Tentatively no meeting in December)

Marketing/Outreach Advisory

- Tuesday, December 15, 2015

Plan Management Advisory

- Thursday, October 15, 2015
- Tuesday, November 10, 2015
- Thursday, December 10, 2015

Small Business (SHOP) Advisory

- TBD

PROPOSED 2016 BOARD MEETING CALENDAR

All meetings will be held at Covered California's Headquarters with the potential of off-site web-participation by board members. All are on the third Thursday of the month

- January 21
- February 18
- March 17
- April 21
- Tentatively no May meeting
- June 16
- Tentatively no July meeting
- August 18, 2015
- September 15
- Tentatively no October meeting
- November 17
- December 15

APPENDIX

SERVICE CHANNEL UPDATE

ENROLLMENT ASSISTANCE PROGRAMS

Uncompensated partners positioned to support enrollment assistance efforts during Open Enrollment No. 3 include:

ENROLLMENT PROGRAM NAME	ENTITIES	COUNSELORS
Certified Application Counselor	208	595 Certified - Applications Complete <u>1,856</u> Certified - Applications Pending 2,451 Total
Medi-Cal Managed Care	3	68 Prospective
Plan-Based Enroller	10 Plans - 2015 11 Plans - 2016	1,323 Active & Certified

ENROLLMENT SUPPORT: COMPENSATION

Total CEE Payments through September 30, 2015

	# Certified Enrollment Entities Paid	Total Paid
Covered CA Plans	610	\$3,701,908
Medi-Cal Payments	889	\$11,205,426
Total Payments made to CEEs		\$14,907,334

Total Agent Commissions Paid through September 30, 2015

	# Certified Insurance Agents Paid	Total Paid
Medi-Cal Payments	~10,280	\$9,724,681
Total Medi-Cal Commissions paid to CIAs		\$9,724,681

OUTREACH & SALES ENROLLMENT SUPPORT: KEY METRICS

Data as of September 30, 2015

➤ **13,112** Certified Insurance Agents

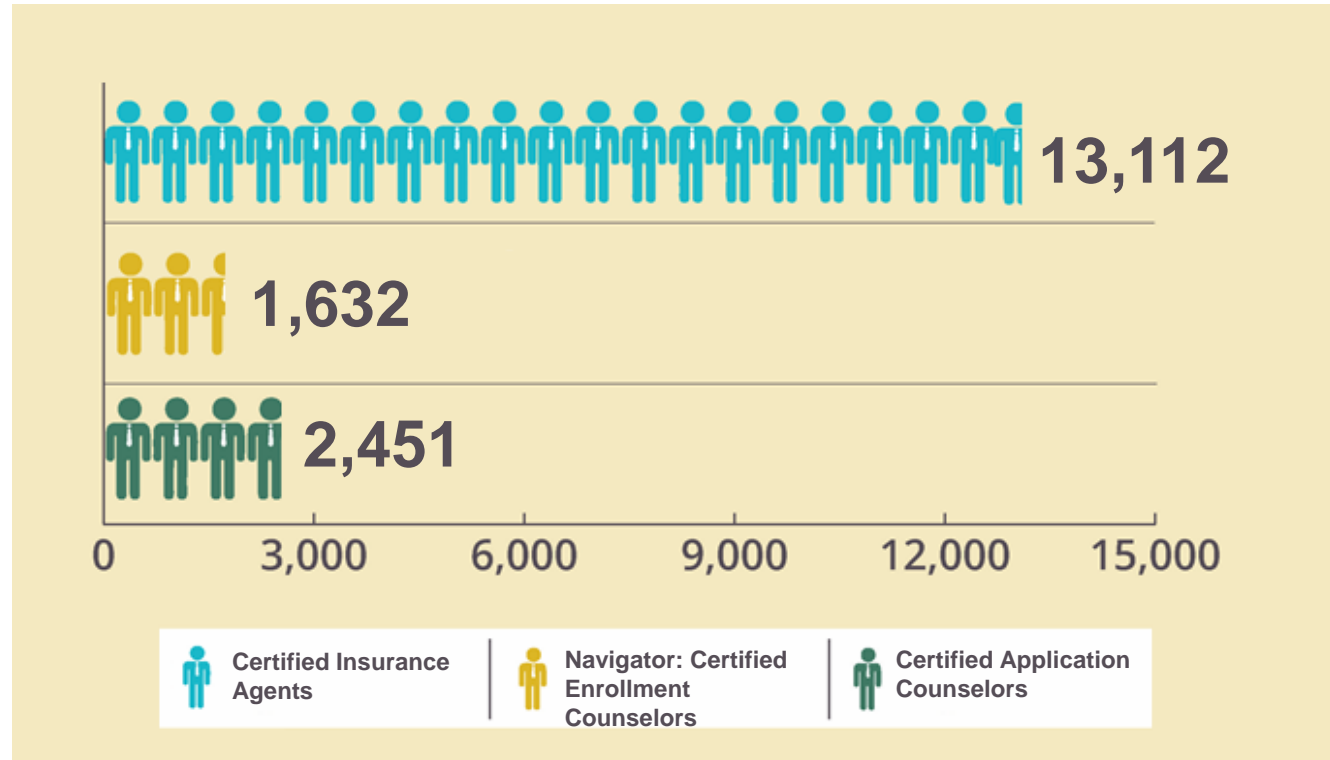
- 17% Spanish
- 4% Korean
- 4% Vietnamese
- 4% Mandarin
- 3% Cantonese

➤ **1,632** Navigator Certified Enrollment Counselors

- 64% Spanish
- 4% Cantonese
- 3% Mandarin
- 3% Vietnamese
- 2% Korean

➤ **2,451** Certified Application Counselors*

- 57% Spanish
- 4% Cantonese
- 3% Mandarin
- 2% Vietnamese
- 1% Korean



* Includes certified counselors with counselor applications complete and in progress.

APPENDIX

24 MONTH COVEREDCA.COM ROADMAP

24 MONTH COVEREDCA.COM ROADMAP UPDATES

- New Storefront Application launched first week of October.
- Updated Shop & Compare tools will be released on October 12, with an enhancement on November 1 for Dental Plans
- CalHEERS major release October 12 to address a number of changes required for Open Enrollment and to enhance Medi-Cal case processing including:
 - Renewal Enhancements
 - New Carrier additions for 2016 plan year
 - Option to purchase Family Dental Plans
 - Add Cantonese language to IVR
 - Referrals for Former Foster Youth for Non-MAGI Medi-Cal
 - MAGI Eligibility Determination for C-CHIP

APPENDIX

SERVICE CENTER UPDATE

SERVICE CENTER UPDATE

Improving Customer Service

- SCR refresher training has been implemented focusing on the following areas:
 - Effective Customer Service
 - CRM Documentation
 - Eligibility for Families and Individuals
 - Intro to ACA
 - Introduction to Health Insurance
 - Privacy, Security and Compliance

Enhancing Technology Solutions

- Command Center and Work Force Management successfully transitioned to Covered California

Staffing Updates

- Surge Vendor contract finalized – hiring and training currently underway

SERVICE CENTER PERFORMANCE UPDATE*

September 2015 Call Statistics

	Calls Offered	Calls Handled	Calls Abandoned	Abandoned %	Service Level %	AHT
Totals	162,633	135,256	27,253	16.69%	43.44%	0:15:35

Does not include outbound, SHOP, or internal consults

Top 5 Call Dispositions

1. Inquiry/Assistance
2. Request Termination
3. Income Change
4. Provided County Contact/Number Info
5. Medi-Cal/Enrollment Inquiries

**Performance metrics are measured monthly.*

SEPTEMBER INDICATORS

- September's contact volume was 162,633 calls, which is a 2.24% decrease from August.
- Service Level increased in September to 43.44% from August's level of 31.51%.
- The percentage of Abandoned calls was 16.69%, which is an 4.11% increase from August.
- Average Handle Time for September was 16:46, which increased from 15:52 in August.

QUICK SORT VOLUMES

September Weekly Quick Sort Transfers

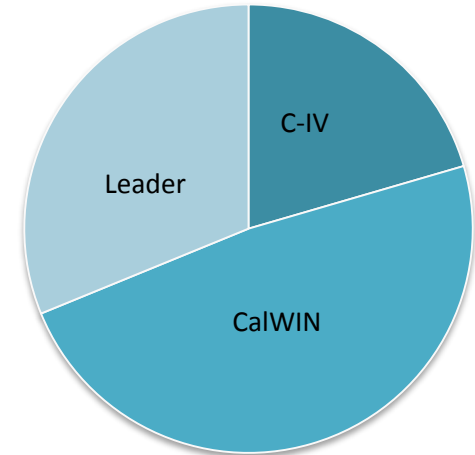
Week 1*	Week 2*	Week 3	Week 4*	Week 5*	Total
603	609	678	802	309	3,001

* Partial Week

September Consortia Statistics

	Calls Offered	Service Level	Calls Abandoned	ASA
C-IV	698	99.00%	0.00%	0:00:05
CalWIN	1,646	94.82%	1.14%	0:00:18
Leader	1,062	98.70%	1.00%	0:00:07

Quick Sort Transfers September 2015



Performance metrics are measured monthly. Voice queues normal days of operation for consumers are Monday through Saturday.