



EXECUTIVE DIRECTOR'S REPORT

Peter V. Lee, Executive Director | October 27, 2016 Board Meeting

ANNOUNCEMENT OF CLOSED SESSION

OVERVIEW

Executive Director's Report

Covered California Policy and Action Items

- 2015/16 Year End Update Briefing
- Remote Identity Proofing Regulations Readoption
- Covered California for Small Business Eligibility and Enrollment Regulations Readoption
- Enrollment Assistance Regulations

PROPOSED 2017 BOARD MEETING DATES

Following are the proposed 2017 dates for the Covered California Board meetings. All meetings will be held at Covered CA Headquarters, 1601 Exposition Boulevard, Sacramento with the potential of off-site web-participation by board members

- January 26, 2017
- February – No Meeting this Month
- March 2, 2017
- April 20, 2017
- May 18, 2017
- June 15, 2017
- July 20, 2017 (Possibly no meeting this month)
- August 17, 2017
- September 21, 2017
- October 19, 2017 (Possibly no meeting this month)
- November 16, 2017
- December 21, 2017 (Possibly no meeting this month)

COVERED CALIFORNIA NOVEMBER BOARD MEETING 11/17: PANEL DISCUSSIONS – HELPING FRAME LONG TERM VISION

Panel 1: National and State Health Care Landscape and Trends

- John Bertko - *Chief Actuary, Covered California*
- Larry Levitt - *Sr. VP for Special Initiatives, Kaiser Family Foundation*
- Sandra Hernandez - *President, California Health Care Foundation*

Panel 2: Delivery System Reform, Improving Wellness and Population Health, Consumer Segment

- Ezekiel Emanuel - *UPenn, former White House Adviser on Health Policy*
- Karen Smith - *Director, California Department of Public Health*
- Doris Peter - *Director, Health Ratings Center, Consumer Reports*
(TENTATIVE)

COVERED CALIFORNIA FOR SMALL BUSINESS UPDATE

COVERED CALIFORNIA FOR SMALL BUSINESS

Current Group & Membership Update (9/30/16)

- Groups: 3,912
- Members: 29,143
- Average Group Size: 7.5 members

New Business Sales Update (YTD Sept.)

- 107% of YTD Membership Goal
- 62% of Annual Membership Goal

Operations Update (9/30/16)

- 99% of New Groups set up in 3 days or less
- 100% of New Groups sent initial invoice in 3 days or less
- 93% of Account Maintenance issues resolved in 3 days or less



1332 STATE INNOVATION WAIVER UPDATE

Brandon Ross, Assistant General Counsel

1332 STATE INNOVATION WAIVER

State	Proposal	Additional Information
Hawaii	Seeks to preserve its pre-ACA employer mandate which require employer with at least on full-time employee to provide health coverage to qualified employees and pay 90% of the individual premium cost.	Submitted 1332 Waiver Application
Massachusetts	Sought to maintain feature of its pre-ACA merged individual and small group markets. Prior to submission, CMS notified Massachusetts that a waiver was not needed to continue their merged market.	Letter from CMS granting Merged Market Flexibility
Vermont	Seeks to waive the ACA requirement to establish an internet portal for SHOP and to have enrollment continue to take place directly through insurers.	Draft 1332 Waiver Application
Ohio	Seeks to waiver the employer and individual mandate.	Governor signed legislation into law

SPECIAL ENROLLMENT PERIOD

James DeBenedetti, Director, Plan Management Division

BACKGROUND

- Consumers enroll outside the open enrollment period if they have a “triggering” Qualifying Life Event.
- Concerns that consumers may be selectively enrolling by use of attestation when they need medical care.
- Concerns of selective enrollment to preserve a good risk mix of enrollees and to minimize potential premium increases that will ultimately impact all consumers.
- Collaborate with Carriers and Stakeholders to identify options and process improvements to the verification process.

GUIDING PRINCIPALS

- Implement special enrollment policy to assure that eligible individuals are enrolled, preserving the integrity mix of the individual market and supporting long-term affordability.
- Special enrollment policy will not be overly burdensome to members
 - (e.g., maximize use of electronic verification and alternative forms of documentation or attestation).
- Verification to be completed prior to effectuation of coverage and not take an unreasonable amount of time.
- Process must consider technology capabilities and resource limitations.

WORK IN PROGRESS

- Over 500 statistically valid random sample cases that we are analyzing and researching to inform future SEP policy discussions.
 - Focusing on two Qualifying Life Event at this time:
 - Loss of Minimal Essential Coverage
 - Moved to / or within California
 - Random samples do not include:
 - Consumers who add new members to their coverage
 - Consumer who are transitioning from MAGI Medi-Cal to Covered California

WORK IN PROGRESS

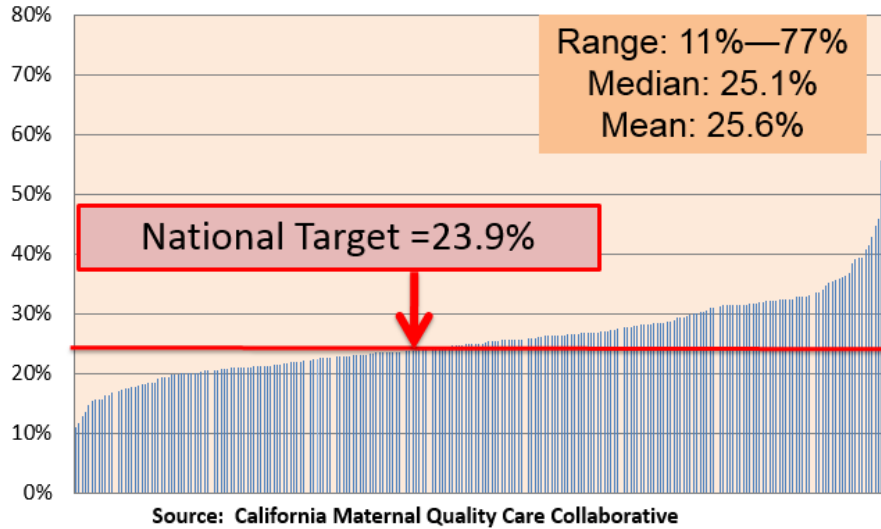
- Enterprise-wide Internal SEP Workgroup formed to discuss priorities, future policies, and process improvements related to the Special Enrollment Period.
- Request for Information published September 12, 2016 to determine solutions that may be available to provide electronic verification of all Qualified Life Events.
 - Responses are due October 26, 2016
 - Request for Proposal – Targeted for late 2016 or early 2017
- Ongoing collaborative meetings with the Advocates and the Health Plans.

RECENT COST AND ENROLLMENT DATA

- 2016 data is through the end of June or August, depending on the plan
- Enrollment
 - Varies by plan – generally 5-20% of total enrollment for 2016 YTD
 - Two are plans rising modestly (2%), but one plan has a 20% growth in SEP%
 - 4-6 months remaining for growth in 2016, so numbers could increase
- Claims cost relativity (SEP vs. OE members)
 - 10-15% higher claims cost per member for 2016 YTD
 - Compares to 20% higher claims cost per member for 2015
- Combined Enrollment and Claims Cost
 - Rough estimate of 2016 YTD premium impact is 1% for one plan, ranging up to 5% for the highest increase
 - Greatest impact is on the larger network plans

C-SECTION RELEASE

C-SECTION RATE FOR LOW RISK PREGNANCIES AMONG CA HOSPITALS: 2015



Data now on CalHospitalCompare.org

- If not medically necessary, C-sections expose mothers and babies to unwarranted risk
- 42% (104/248) of CA Hospitals were honored this week by Secretary Dooley for meeting the national target for C-sections for low risk pregnancies
- Hospitals and their physicians are now signing up for a proven Quality Program open to all
- Covered California target: All hospitals in QHP networks to meet target by end of 2019

OPEN ENROLLMENT 4 – 2017

2017 OPEN ENROLLMENT

Lay of the land heading into the fourth open enrollment period:

- Enrollment heading into renewal is consistent with budget forecast:
 - Over 1.3 million individuals actively enrolled in early October and slated for renewals process
- Churn is a constant dynamic in the marketplace:
 - *Monthly outflows*: rates of members ending their Covered California coverage are relatively steady throughout the year
 - *New plan selections*: while Special Enrollment sign-ups are steady, the majority of new growth occurs during the Open Enrollment period
 - Enrollment peaks immediately following open enrollment
- Modeling about the subsidy eligible is evolving:
 - Both recent Kaiser Family Foundation results for 2016 and CalSIM 2.0 preliminary analysis suggest a lower overall subsidy-eligible population than previously believed
 - Consistent with Covered California budget forecast informed by PwC analysis of penetration rate
- New plan selections during fourth open enrollment:
 - Covered California estimates it will see enrollment similar to last year, in the range of 400,000 new (non-renewal) plan selections

OPEN ENROLLMENT 4 BUS TOUR

“Being Covered is the Best Plan”

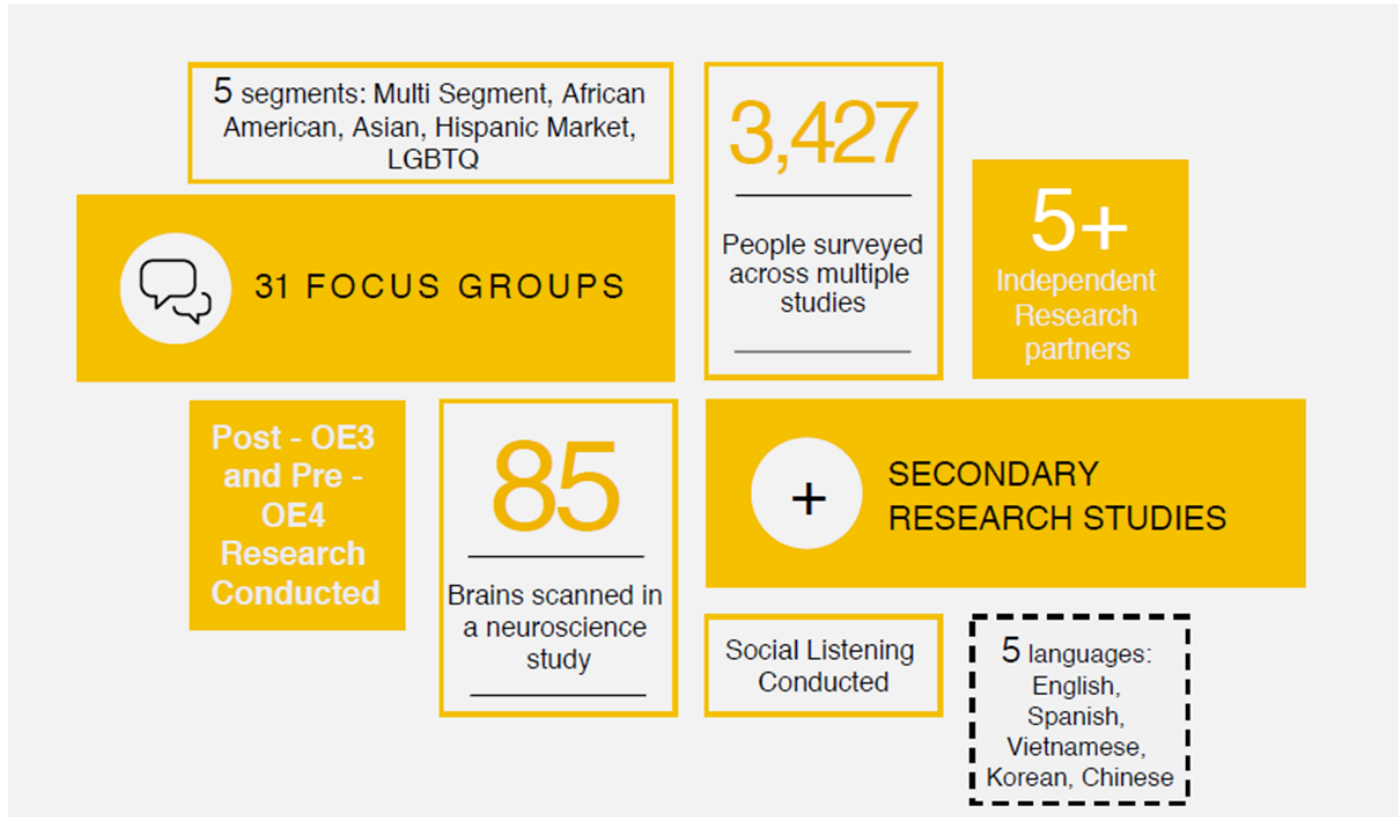
- November 12-19, 2016
 - Day 1: San Diego
 - Day 2: Los Angeles
 - Day 3: Palm Springs
 - Day 4: Inland Empire
 - Day 5: Bakersfield/Fresno
 - Day 6: Sacramento
 - Day 7: San Francisco/San Jose
 - Day 8: Salinas/Santa Cruz



MARKETING UPDATE

Colleen Stevens, Director, Marketing

MARKETING: OE4 RESEARCH OVERVIEW



OE4 RESEARCH—KEY LEARNINGS

- To help inform OE4 creative and planning, Covered California conducted qualitative and quantitative research with uninsured Californians in the Multi-Segment, African American, Hispanic, Asian and LGBTQ communities.
- What we learned across all segments:
 - The new **brand campaign**, “**It’s life care.**” which emotionally conveys the value of coverage, tested very well.
 - **Remaining uninsured are even harder to convince** and they have found ways to cope
 - **Awareness of Covered California** is good, but there’s still confusion about what Covered California is, what we offer. Audiences want specifics.
 - **Affordability** remains as the #1 barrier
 - Consumers feel overwhelmed. **Health insurance is complicated** and they face difficulties with the shopping and enrollment process.

APPLYING THE RESEARCH LEARNINGS TO OE 4 CREATIVE

- Continue with the current brand campaign

**IT'S MORE THAN
JUST HEALTH CARE.
IT'S LIFE CARE.**

APPLYING THE RESEARCH LEARNINGS TO OE 4 CREATIVE

- To address the finding that the **uninsured are harder to convince and have found ways to cope** we are developing a new brand TV spot, “The Scene.”



APPLYING THE RESEARCH LEARNINGS TO OE 4 CREATIVE

- To address the learning that there is still confusion about what Covered California is and what we offer. To address this, we will bring back an updated version of the educational platform, **Welcome to Answers**.



APPLYING THE RESEARCH LEARNINGS TO OE 4 CREATIVE

- To address the **need for more specific information** we are doing the following across segments and media channels:
 - Feature QHP logos to show that we offer a choice of quality brand name health plans

**BEING COVERED
IS THE
BEST PLAN**

CoveredCA.com

 **COVERED CALIFORNIA** | *It's LIFE CARE.*

 **Anthem.**
BlueCross

blue  of california

 **Health Net**

 **KAISER PERMANENTE**

 **Western Health Advantage**

*Greater Sacramento example

APPLYING THE RESEARCH LEARNINGS TO OE 4 CREATIVE

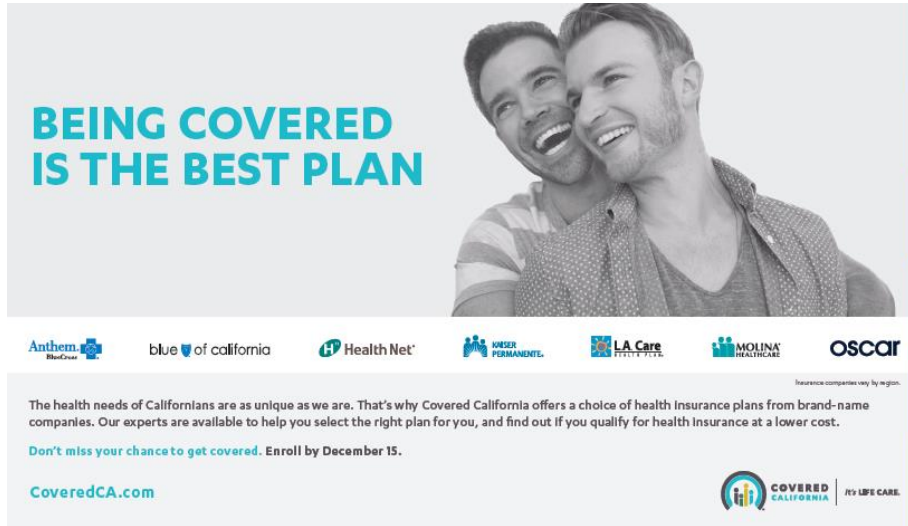
- To address the Affordability barrier, we'll promote the lower cost message which resonated well across all groups. This message will be present across all segments and channels.



Translation: Medical Insurance at a Lower Cost

APPLYING THE RESEARCH LEARNINGS TO OE 4 CREATIVE–LGBTQ

- Learning:
 - LGBTQ focus group participants preferred images and messages that are clear and unambiguously LGBTQ.
 - In testing, the rainbow image resonated.
 - New LGBTQ print ads will include the rainbow as well as imagery that is unambiguously LGBTQ.



**BEING COVERED
IS THE BEST PLAN**


Anthem BlueCross | blue of california | Health Net | KAISER PERMANENTE | LA Care | MOLINA HEALTHCARE | OSCAR

Insurance companies vary by region.

The health needs of Californians are as unique as we are. That's why Covered California offers a choice of health insurance plans from brand-name companies. Our experts are available to help you select the right plan for you, and find out if you qualify for health insurance at a lower cost.

Don't miss your chance to get covered. Enroll by December 15.

CoveredCA.com

 COVERED CALIFORNIA | IT'S LIFE CARE.

MEDIA PLAN—PAID MEDIA CHANNELS BY SEGMENT

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

RETENTION AND RENEWAL

- Segment member base into message specific groups to address 2017 plan year changes i.e. rate increases, carrier exits, carrier expansion
- Primary message will be “Shop and Compare plan options to be sure you have the plan that provides you the best value in 2017”
- Messages will be focused around key dates and specific calls to action



COVERED CALIFORNIA | It's LIFE CARE.

**Stay Covered in 2017,
Renew Your Health Coverage!**

Dear **First_Name_default_Friend_1**

It's time to renew your health coverage for 2017!

Each year there are changes in rates, plan availability and eligibility for financial help. This year is no exception. With the recently announced increases in health coverage rates for 2017, and new additions to the plan options in your area, you could potentially save money by shopping for a new plan. Renewal is the perfect time to compare your current plan with others available in your area to find the best value for your 2017 coverage – it only takes a few minutes.

In the first weeks of October, you will receive an important renewal notice about your health coverage from Covered California. This notice will help you understand your choices for 2017, so it is important for you to review it carefully. If you take no action to actively renew or change plans, you will automatically be renewed, 30 days after the date on your renewal notice, into the same plan you had in 2016.

Shopping for Health Coverage for 2017 is Easy!

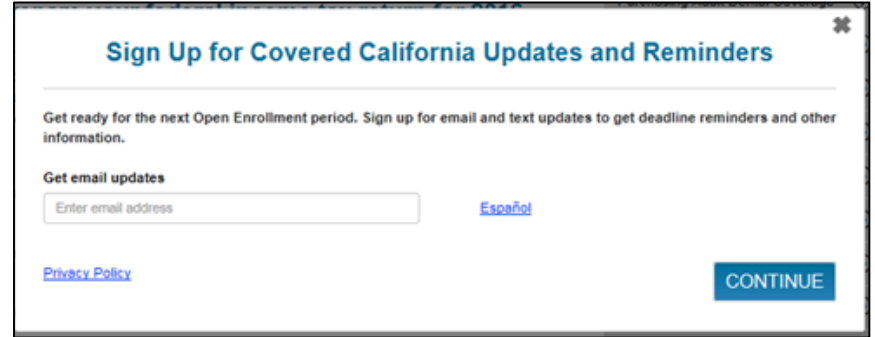
You have two options:

1) **See what other options are available to you for 2017. You can compare rates and shop for a new health plan.**

Your current plan will have a significant rate increase for 2017.

WEBSITE ENHANCEMENTS

- Email subscription form
 - Mobile and Desktop version
 - Option to subscribe to CoveredCA email updates
- Since October 3, about 900 consumers have subscribed to receive updates



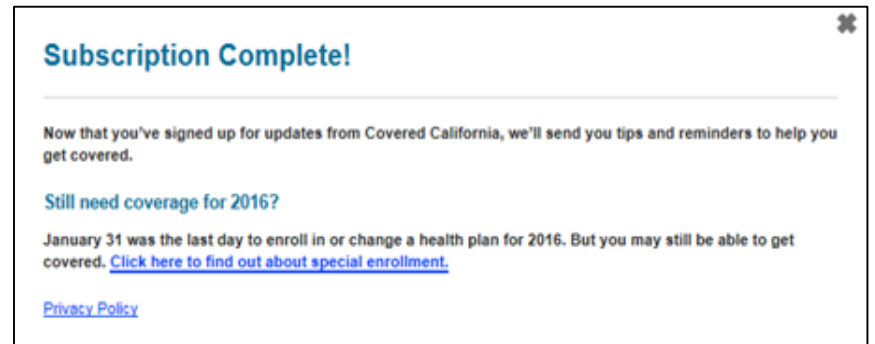
Sign Up for Covered California Updates and Reminders

Get ready for the next Open Enrollment period. Sign up for email and text updates to get deadline reminders and other information.

Get email updates

Enter email address [Español](#)

[Privacy Policy](#) [CONTINUE](#)



Subscription Complete!

Now that you've signed up for updates from Covered California, we'll send you tips and reminders to help you get covered.

Still need coverage for 2016?

January 31 was the last day to enroll in or change a health plan for 2016. But you may still be able to get covered. [Click here to find out about special enrollment.](#)

[Privacy Policy](#)

NEW ENROLLMENT EXPERIENCE (CALHEERS UPDATE)

Karen Ruiz, Director, Information Technology

APPENDIX

SERVICE CHANNEL UPDATE

CERTIFICATION SERVICES SECTION

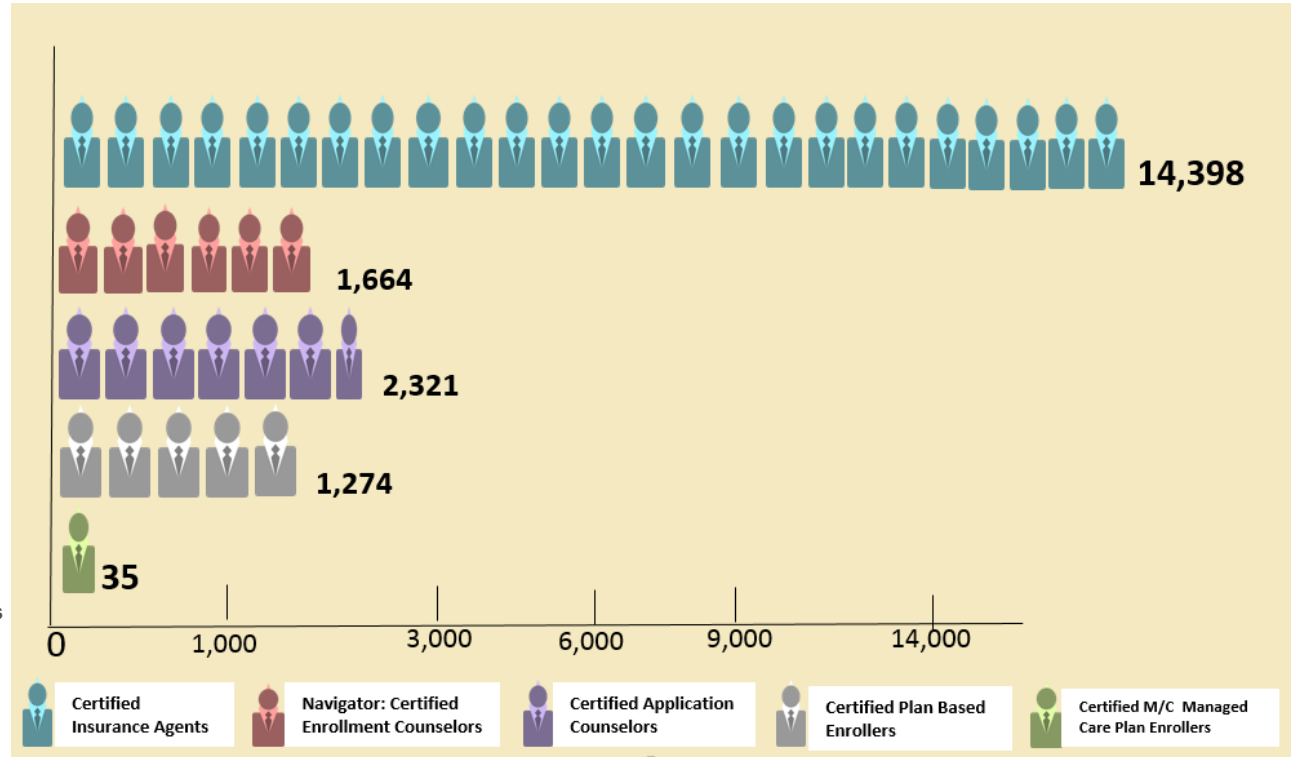
- Uncompensated partners supporting enrollment assistance efforts

CERTIFICATION SERVICES SECTION	ENTITIES	COUNSELORS
Certified Application Counselor	408	2,321 Certified
Plan-Based Enroller	12 Plans	1,274 Certified
Medi-Cal Managed Care Plan	2 Plans	35 Certified

OUTREACH & SALES ENROLLMENT SUPPORT: KEY METRICS

Data as of October 3, 2016

- 14,398** Certified Insurance Agents
 - 17% Spanish
 - 7% Cantonese
 - 7% Mandarin
 - 4% Korean
 - 4% Vietnamese
- 1,664** Navigator: Certified Enrollment Counselors
 - 63% Spanish
 - 4% Cantonese
 - 3% Mandarin
 - 3% Vietnamese
 - 2% Korean
- 2,321** Certified Application Counselors
 - 59% Spanish
 - 5% Cantonese
 - 4% Mandarin
 - 1% Vietnamese
 - 1% Korean
- 1,274** Certified Plan Based Enrollers
 - 45% Spanish
 - 10% Cantonese
 - 2% Mandarin
 - 7.5% Vietnamese
 - 7.3% Korean
- 35** Certified Medi-Cal Managed Care Plan Enrollers
 - 44% Spanish
 - 36% Cantonese
 - 31% Mandarin
 - 1% Russian



APPENDIX WEBSITE UPDATE

24 MONTH COVEREDCA.COM ROADMAP UPDATES

- The last major release for CalHEERS was deployed September 28, 2016 and included:
 - A major upgrade to the platform for consumer choice/plan selection
 - Includes the ability for consumers to “shop” and save their selections through the application process
 - Enhancements to the renewal process, including Family Dental
 - Ability for consumers to “opt in” to receiving in-person assistance if needed in the future
 - A long-term solution for duplicate cases between CalHEERS and SAWS
 - Improvements to data reporting for CMS

24 MONTH COVEREDCA.COM ROADMAP UPDATES

- The first release for 2017 planned for the first quarter is planned to include:
- Translations of Eligibility Notices into Additional Threshold Languages
- Enhancements to information shared with the SAWS
 - MAGI income information passed to the SAWS (“Business Rules Exposure”)
- Enhancements to Income Data Quality and Usability
- Enhancements to Delegations
 - Add ability to maintain CEC delegations to allow for continued assistance to consumers
- Enhancements to Document Management
 - Ability for Service Center Representatives to upload documents to a consumer case outside of the initial application
 - Ability for Service Center Representatives to reprint and re-mail documents to consumers through the print vendor
- Enhancements for the Service Center to allow improved assistance to consumers (deferred from the September 2016 release)
 - Automated workflow
 - Ability to correct consumer or other errors independently (without reliance on submitting “tickets” and waiting in queue)

24 MONTH COVEREDCA.COM ROADMAP UPDATES

- Outside of CalHEERS, several changes and accomplishments impacting consumers have been implemented for the upcoming Open Enrollment:
 - In conjunction with the marketing team, implemented a new “opt-in” program for consumers on the CoveredCA.com website
 - In conjunction with the communications team, launched an updated design and content for CoveredCA.com

APPENDIX

SERVICE CENTER UPDATE

SERVICE CENTER UPDATE

- Improving Customer Service
 - All staff received training on:
 - Plan Changes 2017
 - Customer Relationship Management (CRM) Upgrade
 - CalHEERS release 16.9
- Enhancing Technology Solutions
 - Courtesy Callback feature was lowered to 5 minutes to give more consumers the option of being called back rather than wait in queue
- Staffing Updates
 - Continue filling open positions to be staffed to budgeted levels for open enrollment

SERVICE CENTER PERFORMANCE UPDATE*

- September 2016 Call Statistics

	Calls to IVR	Calls Offered to SCR	Abandoned %	Calls Handled	ASA	AHT	Service Level %
Totals	261,722	148,171	3.51%	142,124	0:01:10	0:16:30	70.30%

Does not include outbound, SHOP, or internal consults

Top 5 Call Dispositions

1. Individual · Current Customer · Application/Case Status · Inquiry/Assistance
2. Individual · New Enrollment · Inquiry/Assistance
3. Individual · Current Customer · Disenrollment/Termination · Requesting to be Terminated
4. Individual · Medi-Cal · Medi-Cal/Enrollment Inquiries
5. Individual · Medi-Cal · Provided County Contact/Number Info

**Performance metrics are measured monthly.*

SEPTEMBER INDICATORS

- September's contact volume was 148,171 calls, which is about 5.64% decrease from August.
- Service Level decreased in September to 70.30% from August's level of 82.96%.
- The percentage of Abandoned calls was 3.51%, up from 2.20% in August.
- Average Handle Time for September was 0:16:30, which increased from 0:16:01 in August.

QUICK SORT VOLUMES

- September Weekly Quick Sort Transfers

Week 1*	Week 2*	Week 3	Week 4	Week 5	Total
245	481	577	598	501	2,402

* Partial Week – 9/5/2016 All Service Centers closed in observance of Labor Day.

- September Consortia Statistics

	Calls Offered	Service Level	Calls Abandoned %	ASA
C-IV	477	97.49%	0.00%	0:00:06
CalWIN	1,267	85.41%	1.26%	0:00:26
LRS	811	99.70%	0.20%	0:00:06

Effective 9/22/2016 – LA County Consortia has moved to a different system name, Leader to LRS.

QuickSort Transfer September 2016

