ANNOUNCEMENT OF CLOSED SESSION
MEETING OVERVIEW

• Executive Director’s Report
  o Update on Cost Sharing Reduction (CSR) Policies
  o Open Enrollment Update
  o Report on “Marketing Matters”
  o Report on Consumer Survey in Advance of Open Enrollment
  o Report on New Single Streamlined Application

• Covered California Policy and Action Items

  Action
  o 2018 Dental Copayment Standard Benefit Design Revision
  o Individual Eligibility and Enrollment Regulations Emergency Readoption
FEDERAL AND STATE POLICIES
UPDATE ON COST SHARING REDUCTION (CSR) POLICIES
COST SHARING REDUCTION CONTINGENCY PLAN:

• Covered California issuers submitted two rates: (a) a base rate assuming current CSR payments; and (2) a second set of rates they would charge if the CSR program is not funded. The rate increase attributable to the CSR surcharge is only for the standard Silver Qualified Health Plan (QHP), including the mirrored Silver plan sold off-exchange. Both rates were submitted to California insurance regulators in July and made public on August 1.

• In addition, as a condition of participation in Covered California, issuers are required to offer an additional, separately rated, non-mirrored Silver plan outside of Covered California that is nearly identical to the on-exchange plan – if the CSR program is not funded. This product will not include any surcharge for the CSR program. This is necessary in California because nearly all off-exchange plans are mirror versions of on-exchange plans.

• In the absence of clear and reliable federal guidance, Covered California will have plans move forward with rates for 2018 on the assumption that CSR’s will not be directly funded through 2018 and the costs for the program will be built into rates.
COST SHARING REDUCTION PAYMENT CONTINGENCY PLAN: SILVER ALTERNATIVE WITHOUT CSR SURCHARGE

- The nearly identical off-exchange Silver plan has the same provider network and cost-sharing for all services as the on-exchange Silver plan, with one difference: Emergency medical transportation increases from a $250 to $255 copay after deductible.
- By providing for an off-exchange nearly identical product without the CSR surcharge, Covered California is mitigating the impact on unsubsidized individuals.
  - California health plans will automatically enroll off-exchange Silver plan enrollees into their nearly identical Silver plan that is not subject to the CSR surcharge – without any action required by the consumer.
  - Covered California will encourage on-exchange Silver plan enrollees that are not receiving APTC to consider moving off-exchange to the new (nearly identical) Silver product. Some Covered California enrollees without APTC may actually qualify for APTC based on income changes or other events that occur in 2018, but will not be eligible for APTC if they leave the exchange, so it is critical to make this population aware of other options like enrolling in a Gold or Bronze plan to avoid paying the surcharge. Covered California will communicate directly with this population and work with health plans, agents, and other enrollment assisters to help educate these consumers on the options available to them.
OPEN ENROLLMENT UPDATE
Open Enrollment Activities in Full Swing

• **Finished 5-Week Tour for Agents and Community Partners**

• **17 cities, 19 meetings across California**
  - 3 meetings – Northern California: Redding, Santa Rosa, and Sacramento
  - 1 meeting – Bay Area: San Francisco
  - 3 meetings – Central Coast: San Luis Obispo, Watsonville, and Camarillo
  - 2 meetings – Central Valley: Modesto and Clovis
  - 3 meetings – Los Angeles: San Fernando Valley, Whittier, and Torrance
  - 2 meetings – Inland Empire: Rancho Cucamonga and Palm Springs
  - 1 meeting – Orange County: Anaheim
  - 2 meetings – San Diego County: San Diego and Escondido

• **Facilitated by the Outreach and Sales Division – Field Operations and Account Services Teams**

• **Attended by over 1,800 Agents and other Certified Enrollment Representatives, Carrier Representative, Local County workers, Community Leaders, etc.**

• **Helping those on the front lines prepare for open enrollment**
OPEN ENROLLMENT 5 BUS TOUR

“Covered In Art Tour”
November 1–7, 2017

- Day 1: San Diego/Los Angeles
- Day 2: Long Beach/Ventura
- Day 3: Santa Barbara/Santa Maria
- Day 4: Bakersfield/Fresno
- Day 5: Sacramento/San Jose/Santa Cruz
- Day 6: Monterey/Oakland
Covered California will be commissioning artists’ murals across the state, each with a theme of promoting health, wellness, coverage and that Covered California is woven into the fabric of local communities.
MARKETING MATTERS REPORT

- Report unveiled in Washington D.C. on September 13, 2017 details how significant investments in marketing and outreach are key elements to stabilizing individual insurance markets.

Report:  

Issue Brief:  
MARKETING MATTERS FINDINGS

• Covered California’s extensive marketing and outreach helped the state’s individual market have one of the best take-up rates and lowest risk scores in the nation. As a result, premiums were between $850 million and $1.3 billion lower than they would have been if the state had the national average risk mix in 2015 and 2016.

• Covered California estimates that every marketing dollar it has spent has yielded more than a three-to-one return on investment (ROI). Efforts to promote the value of coverage and the options available to consumers boosted the enrollment of healthy consumers and likely lowered premiums by 5 to 8 percent in 2015 and 2016.
OPEN ENROLLMENT – 2017/18
RESEARCH AND CREATIVE

Jennifer Miller, Senior Marketing Specialist
EXTENSIVE RESEARCH CONDUCTED

- 5 Segments: Multi Segment, African American, Hispanic, Asian, LGBTQ
- 46 FOCUS GROUPS
- Social Listening Conducted
- 5 Languages: English, Spanish, Vietnamese, Korean, Chinese
- 4,017 People surveyed across multiple studies
- 6+ Independent Research partners
- 85 Brains scanned in a neuroscience study
- 2016 Message, Motivators and Barriers Testing
VIRTUALLY EVERY CALIFORNIAN KNOWS ABOUT COVERED CALIFORNIA

Awareness of Covered California and the ACA continues to rise.

Awareness of Covered California and ACA - 96% Each - 2017

Heard of  
Haven't heard of

94-97% Brand Recognition
CONTINUED EDUCATION IS STILL NEEDED – NEARLY ¾ SUBSIDY ELIGIBLE DON’T KNOW IT

73% of uninsured subsidy eligible Californians don’t know that they are eligible for subsidies or wrongly think they are not eligible.

Understanding of Eligibility for Subsidies Among Subsidy Eligible Californians

- Know they are eligible: 26%
- Not sure if they are eligible: 54%
- Wrongly assume they are not but are eligible: 19%

73% TOTAL
THOSE WHO ARE ELIGIBLE FOR A SUBSIDY ARE MORE LIKELY TO ENROLL

People who expect to be eligible for subsidies are much more likely to enroll.

Uninsured: Expectation of Subsidy Eligibility is Associated with Higher Intent to Enroll - 2017

- 71% Expect Subsidy
- 34% Unsure/Don't Expect Subsidy

Uninsured, intend to enroll

Uninsured, intend to enroll: Expectation of Subsidy Eligibility is Associated with Higher Intent to Enroll - 2017

2x more likely
CONFIDENCE POSITIVELY IMPACTS NEW ENROLLMENT

61% of uninsured say “the future of Covered California is uncertain.” For uninsured, those who are “confident” in the future of Covered California are twice as likely to intend to enroll in Covered California as those who are uncertain or “concerned.”
Members who expect to be eligible for subsidies are much more likely to renew.

88% Renewal Intent of Members
4 OUT OF 5 OF THOSE WHO ARE UNCERTAIN OR “CONCERNED” STILL INTEND TO RENEW

67% of members say “the future of Covered California is uncertain; however, confidence in the future of Covered California is associated with high renewal intent.

Members: Confidence in the Future of Covered California is Associated with Higher Renewal Intent - 2017

- 96% Confident
- 81% Uncertain/Concerned
MARKETING ADJUSTMENTS

• We’ve adjusted the marketing campaign based on evidence:
  
  o Research found those who remain uninsured don’t feel they need insurance – they are not sick or old
    ▪ New creative shows “life can change in an instant, be covered when it does”
  o Amplified financial help message across all channels
  o Adjusted financial help message to:
    ▪ “Financial help is available, so check for yourself to see what savings you qualify for.”
  o New message on stability and confidence
  o Vertical integration among creative elements
“INSTANT” TV ADS

“Instant”

English, Spanish, Asian languages (4)
VERTICALLY INTEGRATED MARKETING CAMPAIGN

Life can change in an instant.

• Out-of-Home
• Radio
• Print
• Digital
APPENDIX: WAVE 2 SENTIMENT RESEARCH

• Conducted by Greenberg Strategy

• June 9-30, 2017

• Online survey, continuation of December 2016

• English and Spanish, 500 respondents

Report released on October 4, 2017 titled “Wave 2: A Quantitative Study on Current Attitudes of Uninsured and Select Insured Californians Toward Health Insurance Coverage”
REPORT ON NEW SINGLE STREAMLINED APP

Amanda Hutchinson, CalHEERS Project
WELCOME, TIFFANY

You may be eligible for a $0 premium plan, or a new kind of tax credit that lowers your monthly premiums right away.

Apply Now

THE COVERED CALIFORNIA MARKETPLACE

When you shop at Covered California, everything you need is laid out for you. Information about prices and benefits is written in simple terms, so you don’t have to guess about your costs. You get a clear picture of what you’re paying and what you’re getting before you make a choice.

APPLY FOR COVERAGE

Private insurance companies compete for your business in the Covered California marketplace. By law, insurance companies can’t deny you coverage because of pre-existing or chronic conditions like cancer or diabetes. Watch the video tutorials on how to apply, or click Apply Now.
HUMAN CENTERED DESIGN

Places the user at the center of the design process to better understand their needs, resulting in an improved online experience.
DESIGN PILLARS

Personalize
Adapt flows in response to user input, and provide flexible controls to refine content based on user needs.

Simplify
Define sections with simple, focused, and approachable content with clear wayfinding and progress indicators.

Humanize
Supplement content with visual aids, remove stigma by socializing the culture, and provide hints and tips throughout the journey.

The foundation of the design is unique to the needs of Covered California users.
NEW HOME PAGE — PERSONALIZED BASED ON THE USER’S DATA
NEW CONTENT - SIMPLIFIED AND APPROACHABLE ON ANY SIZE SCREEN
NEW NAVIGATION — HUMANIZED WITH VISUAL AIDS AND TIPS TO GUIDE THE USER
PROVIDER SEARCH TOOL
Amanda Hutchinson, CalHEERS Project
ADDITIONAL FEATURE FOR OPEN ENROLLMENT — PROVIDER SEARCH TOOL

Tell us about your health care needs

Your answers are used to find the best plan option for you.

Search for a [DOCTOR] that you may want to use in your health plan (Select up to 5)

Search by doctor name

DOCTOR

Dr. Sean Nealon
Pediatrics
4400 Duckhorn Dr
Sacramento, CA 95834

Dr. David Lehman
Internal Medicine
5025 J St
Sacramento, CA 95819

Dr. Punit Sarna
Internal Medicine, Internal Medicine - Cardiovascular Disease
3037 Q St
Sacramento, CA 95816

DENTIST

Mark Redford
Dentist-General Practice
79 Scripps Dr
Sacramento, CA 95825

HOSPITAL

Mercy General Hospital
General Adult Care Hospital
401 J St
Sacramento, CA 95819

The Covered California provider directory can help you select a health plan. The directory is updated monthly and may not be a current or complete list of the health plan’s providers.

The health plan you select will have the most current provider directory. You may not have coverage or may have higher costs if you visit a provider who is not in your plan’s network. To avoid this, you must verify with your health plan if the provider is in-network before you seek care.

<BACK

VIEW PLANS

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ADDITIONAL FEATURE FOR OPEN ENROLLMENT — PROVIDER SEARCH TOOL
QUALITY RATING SYSTEM
FALL 2017

Dr. Lance Lang, Chief Medical Officer
Covered California Quality Rating System (QRS) is comprised of the following elements:

1. Report four ratings: a summary quality rating and three summary component ratings
2. Summary quality rating is a roll-up of three summary components per following weighting:

<table>
<thead>
<tr>
<th>Summary Components</th>
<th>Weights</th>
</tr>
</thead>
<tbody>
<tr>
<td>Getting Right Care (HEDIS)</td>
<td>66%</td>
</tr>
<tr>
<td>Members’ Care Experience (CAHPS)</td>
<td>17%</td>
</tr>
<tr>
<td>Plan Services* (HEDIS and CAHPS)</td>
<td>17%</td>
</tr>
</tbody>
</table>

3. Summary ratings constructed by aggregating CMS produced standardized scores
4. CMS standardized scores based on national, all-product type benchmarks
5. CMS case-mix adjustment for CAHPS measures
6. 1–5-star performance classification
7. Scores are displayed in CalHEERS and will be available on CoveredCA.com starting in November 2017 (Individuals and Families Page)
ADJUSTED QRS RATING FORMULA

- Covered California diverges from CMS in computing the overall summary rating by applying differential weights to the three CMS computed summary indicator scores. CMS equally weights the three summary indicator scores.
- Two-thirds of QRS weight is assigned to clinical care; the remaining one-third weight is equally allocated to the member-reported care experiences (17%) and to the plan services, efficient care results (17%).
  - The California Marketplace adopted these differential weights a year ago for Open Enrollment 2017 — the same method is used for 2018
  - CMS has adopted this same differential weighting formula starting with Open Enrollment 2019
  - The differential weighting formula follows the approaches taken by all of the major U.S. healthcare performance rating programs.
- Covered California, paralleling the CMS approach, provides consumers with 3 topics that accompany the summary quality rating to convey 3 major aspects of health plan performance that matter to consumers:
  - Clinical care
  - Member experience with their doctors and care
  - Health plan services to members and efficient care
## FALL 2017 QRS RATING DETAIL

<table>
<thead>
<tr>
<th>Issuer</th>
<th>Product</th>
<th>2016 ratings</th>
<th>2017 Summary Rating</th>
<th>Getting the Right Care</th>
<th>Members' Care Experiences</th>
<th>Plan Services for Members</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Anthem</strong></td>
<td>EPO</td>
<td>★★</td>
<td>Quality Rating in Future</td>
<td>Quality Rating in Future</td>
<td>Quality Rating in Future</td>
<td>Quality Rating in Future</td>
</tr>
<tr>
<td><strong>Blue Shield</strong></td>
<td>HMO</td>
<td>Quality Rating in Future</td>
<td>Quality Rating in Future</td>
<td>Quality Rating in Future</td>
<td>Quality Rating in Future</td>
<td>Quality Rating in Future</td>
</tr>
<tr>
<td><strong>Blue Shield</strong></td>
<td>PPO</td>
<td>★★</td>
<td>★★</td>
<td>★★</td>
<td>★★</td>
<td>★★</td>
</tr>
<tr>
<td>CCHP</td>
<td>HMO</td>
<td>★★★</td>
<td>★★★</td>
<td>★★★</td>
<td>★★</td>
<td>★★</td>
</tr>
<tr>
<td>Health Net</td>
<td>HMO</td>
<td>★★</td>
<td>★★★</td>
<td>★★</td>
<td>★★</td>
<td>★★</td>
</tr>
<tr>
<td>Health Net</td>
<td>EPO</td>
<td>Quality Rating in Future</td>
<td>★★</td>
<td>★★</td>
<td>★★</td>
<td>★★</td>
</tr>
<tr>
<td>Health Net Enhanced Care PPO †</td>
<td>PPO</td>
<td>N/A</td>
<td>Quality Rating in Future</td>
<td>Quality Rating in Future</td>
<td>Quality Rating in Future</td>
<td>Quality Rating in Future</td>
</tr>
<tr>
<td>Kaiser</td>
<td>HMO</td>
<td>★★★★</td>
<td>★★★★</td>
<td>★★★★</td>
<td>★★★★</td>
<td>★★★★</td>
</tr>
<tr>
<td>LA Care</td>
<td>HMO</td>
<td>★★</td>
<td>★★</td>
<td>★★</td>
<td>★★</td>
<td>★★</td>
</tr>
<tr>
<td>Molina</td>
<td>HMO</td>
<td>★★</td>
<td>★★</td>
<td>★★</td>
<td>★★</td>
<td>★★</td>
</tr>
<tr>
<td>Oscar</td>
<td>EPO</td>
<td>Quality Rating in Future</td>
<td>Quality Rating in Future</td>
<td>Quality Rating in Future</td>
<td>Quality Rating in Future</td>
<td>Quality Rating in Future</td>
</tr>
<tr>
<td>Sharp</td>
<td>HMO</td>
<td>★★★</td>
<td>★★★★</td>
<td>★★★★</td>
<td>★★★★</td>
<td>★★★★</td>
</tr>
<tr>
<td>Valley</td>
<td>HMO</td>
<td>★★</td>
<td>★★</td>
<td>★★</td>
<td>★★</td>
<td>★★</td>
</tr>
<tr>
<td>WHA</td>
<td>HMO</td>
<td>★★★</td>
<td>★★★</td>
<td>★★★</td>
<td>★★</td>
<td>★★</td>
</tr>
</tbody>
</table>

*Anthem EPO does not have a score due to substantial differences between products offered in 2017 and 2018

**Blue Shield’s Trio HMO in both the individual and CCSB markets will have a score starting in Fall 2019

†Health Net’s Enhanced Care PPO in both the individual and CCSB markets will have a score starting in Fall 2020
UPDATE ON ANTHEM AND HEALTH NET TRANSITION
2018 TRANSITIONS OF COVERAGE

Messaging
• Transitioning members will receive several communications from Covered California, their previous health plan, and later their newly assigned health plan letting them know about the change, how to shop, and how to get help. (Starting on ~10/11.)
• Covered California is encouraging transitioning Anthem and Health Net members to contact their new health plan if they are in the middle of treatment and may be eligible for Continuity of Care. (In fact sheet used by all service channels.)

Health Plan Data transfer
• Covered California and health plans are working on agreements that are expected to provide for transferring member health data from previous plan to new plan. Timing, process, level of detail and legal issues are still being assessed.
  o Expectation is that member diagnosis and key issues in the following categories would be sent from previous plan to new plan upon new member effectuation:
    ▪ Members in the middle of acute treatment (e.g. hospital, chemotherapy) or in third trimester pregnancy
    ▪ Members in case management
    ▪ Members with chronic conditions in disease management programs
    ▪ Maintenance prescription drugs especially if already completed step therapy process
    ▪ Name of primary care physician for all enrollees
APPENDICES
APPENDICES: TABLE OF CONTENTS

• Covered California for Small Business Update
• Service Channel Update
• Website Update
• Service Center Update
Current YTD Group & Membership Update (8/31/17)
- Groups: 4,613
- Members: 35,513
- Retention: 86.1%
- Average group size: 7.6 members
- YTD net membership growth: 15%

Information Technology Update:
- Employer portal launch: September 2017

Operations Update (5/31/17)
- 100% of new groups set up in 3 days or less
- 91% of new groups sent initial invoice in 3 days or less
ENROLLMENT ASSISTANCE PROGRAMS

- Uncompensated partners supporting enrollment assistance efforts.

<table>
<thead>
<tr>
<th>ENROLLMENT ASSISTANCE PROGRAM</th>
<th>ENTITIES</th>
<th>COUNSELORS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Certified Application Counselor</td>
<td>321</td>
<td>1,999 Certified</td>
</tr>
<tr>
<td>Plan-Based Enroller</td>
<td>11 Plans</td>
<td>1,034 Certified</td>
</tr>
<tr>
<td>Medi-Cal Managed Care Plan</td>
<td>2 Plans</td>
<td>31 Certified</td>
</tr>
</tbody>
</table>
OUTREACH & SALES ENROLLMENT SUPPORT: KEY METRICS

Data as of September 7, 2017

<table>
<thead>
<tr>
<th>Role</th>
<th>Total</th>
<th>Language Proficiency</th>
</tr>
</thead>
<tbody>
<tr>
<td>13,656 Certified Insurance Agents</td>
<td>13,656</td>
<td></td>
</tr>
<tr>
<td>• 17% Spanish</td>
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<td></td>
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<tr>
<td>• 7% Cantonese</td>
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<tr>
<td>• 7% Mandarin</td>
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<tr>
<td>• 4% Korean</td>
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<tr>
<td>• 4% Vietnamese</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1,289 Navigator: Certified Enrollment Counselors</td>
<td>1,289</td>
<td></td>
</tr>
<tr>
<td>• 63% Spanish</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• 4% Cantonese</td>
<td></td>
<td></td>
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<tr>
<td>• 3% Mandarin</td>
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<td>• 3% Vietnamese</td>
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<td>• 2% Korean</td>
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<td></td>
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<tr>
<td>1,999 Certified Application Counselors</td>
<td>1,999</td>
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<tr>
<td>• 59% Spanish</td>
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<tr>
<td>• 5% Cantonese</td>
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<td>• 4% Mandarin</td>
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<td>• 1% Vietnamese</td>
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<tr>
<td>• 1% Korean</td>
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<tr>
<td>1,034 Certified Plan Based Enrollers</td>
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<tr>
<td>• 45% Spanish</td>
<td></td>
<td></td>
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<tr>
<td>• 10% Cantonese</td>
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<td></td>
</tr>
<tr>
<td>• 2% Mandarin</td>
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</tr>
<tr>
<td>• 7.5% Vietnamese</td>
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<tr>
<td>• 7.3% Korean</td>
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</tr>
<tr>
<td>31 Certified Medi-Cal Managed Care Plan Enrollers</td>
<td>31</td>
<td></td>
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<tr>
<td>• 44% Spanish</td>
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<tr>
<td>• 36% Cantonese</td>
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<td></td>
</tr>
<tr>
<td>• 31% Mandarin</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• 1% Russian</td>
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</tr>
</tbody>
</table>
The last release for CalHEERS, Release 17.9, was deployed September 25, 2017 and included the following features:

- Implementation of a major upgrade to the usability of the Online Single Streamline Application for consumers, including user interface updates for Renewals
- A fully mobile experience for consumers
- Changes to allow the application to be more dynamic (and easier to use), depending on the information provided by a consumer
- Eligibility updates based on immigration status which will make the application process easier for lawfully present immigrants (non-citizens) to be determined eligible for both APTC and Medi-Cal.
- Reconciliation functions between CalHEERS and MEDS
The next release of CalHEERS, Release 17.10, is planned for October 23, 2017. This release will include:
  o Additional updates required prior to completing 2018 plan renewals

CalHEERS also has a release planned for December 18, 2017 (Release 17.12). This release will include:
  o Providing consumers a message to access their 1095 on the homepage of the Consumer Portal during the tax season
OTHER TECHNOLOGY UPDATES

• Enhancements planned for the CoveredCA.com website for Open Enrollment:
  o CoveredCA.com underwent a mobile redesign to allow consumers to access the website and use all features on any mobile device. Performance has also been improved so there will be noticeably faster upload times for consumers.
  o Creating a webpage and a customer relations tool to track incoming correspondence and calls for the Ombudsman Customer Relations unit

• Other Improvements:
  o Implemented enhanced executive and management dashboards to improve operations during renewals and open enrollment
OE5 MOBILE VERSIONS

Health insurance that’s right for you.

How to Enroll
See If You Qualify for Financial Help
Shop and Compare
Apply for Coverage
Medi-Cal Information
SERVICE CENTER TECHNOLOGY TRANSITION UPDATES

Project Status:
• Covered California successfully transitioned Service Center technologies and technical support on Monday September 18th. All milestones and goals were met with minimal impact to staff and consumers.

Value:
• Covered California leveraged modern cloud services technologies to transition the Contact Center solution that will offer opportunities for greater flexibility, more innovation, better service for current and prospective Covered California consumers and easier functionality for our front-line customer service representatives.

Short term goals:
• The Covered California team will leverage the new environment by:
  o Increasing the number of Californians that can be serviced by the service center during OE5.
  o Enhancing data analytics and reporting
  o Improving system resiliency
  o Streamlining dated processes and procedures
SERVICE CENTER UPDATE

• Improving Customer Service
  o Initiated discussions with Los Angeles county to create efficiencies within the Appeals resolution process
  o Trained Consumer Relations and Resolutions staff on overall Appeals processes and procedures
  o All Service Center staff received training to ensure seamless customer service experience
  o Celebrated Customer Service Appreciation Week

• Enhancing Technology Results
  o Transition of Service Center Information Technology tools to increase efficiencies
  o Implemented new Work Force Management and Quality Management tools

• Staffing Updates
  o Service Center continues ongoing recruitment efforts for various classifications
  o Surge vendor began hiring to support Open Enrollment period
  o New hire classes ongoing for various classifications
  o Vacancy rate down to 8.9 percent
# SERVICE CENTER PERFORMANCE UPDATE*

## September 2017 Call Statistics

<table>
<thead>
<tr>
<th></th>
<th>Calls to IVR</th>
<th>Calls Offered to SCR</th>
<th>Abandoned %</th>
<th>Calls Handled</th>
<th>ASA</th>
<th>AHT</th>
<th>Service Level %</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Totals</strong></td>
<td>260,563</td>
<td>146,711</td>
<td>2.13%</td>
<td>136,440</td>
<td>0:00:21</td>
<td>0:16:22</td>
<td>83.33%</td>
</tr>
</tbody>
</table>

*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 — New Enrollment
3. Individual · Current Customer · Disenrollment/Termination · Requesting to be Terminated
4. Individual · Medi-Cal · Provided County/Contact Number Information
5. Individual · Medi-Cal · Medi-Cal/Enrollment Inquiries

*Performance metrics are measured monthly.
SEPTEMBER 2017 SERVICE VOLUMES DURING SPECIAL ENROLLMENT

- Total calls offered to the IVR: 260,563 (Compared to 261,722 for September 2016; a decrease of 0.44%)
- Calls handled by automated system responding to specific inquiries with recorded messages: 113,852 (Compared to 113,551 for September 2016; an increase of 0.27%)
- Calls handled by Covered California Service Center Staff: 136,440 (Compared to 142,124 for September 2016, a 4.0% decrease)
- Service Level increased in September to 83.33% of calls answered within 30 seconds (compared to 70.30% for September 2016)
- The percentage of Abandoned calls was 2.13% (compared to 3.51% for September 2016)
- Average Handle Time for September was 16 minutes and 22 seconds (compared to 16 minutes and 30 seconds for September 2016; a 0.81% decrease)
Quick Sort refers to the calculator tool used to determine if a consumer is eligible for CoveredCA or should be referred to Medi-Cal. The tool also determines which consortia the consumer should be referred. This volume represents the total of those transfers.

### September Weekly Quick Sort Transfers

<table>
<thead>
<tr>
<th>Week 1*</th>
<th>Week 2*</th>
<th>Week 3</th>
<th>Week 4</th>
<th>Week 5**</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>78</td>
<td>336</td>
<td>466</td>
<td>387</td>
<td>427</td>
<td>1,694</td>
</tr>
</tbody>
</table>

*Partial Week – Service Centers closed on 9/4/17 in observance of Labor Day
**Data through September 29, 2017

### September Consortia Statistics

<table>
<thead>
<tr>
<th>SAWS Consortia</th>
<th>Calls Offered</th>
<th>Service Level</th>
<th>Calls Abandoned %</th>
<th>ASA</th>
</tr>
</thead>
<tbody>
<tr>
<td>C-IV</td>
<td>320</td>
<td>99.06%</td>
<td>0.31%</td>
<td>0:00:07</td>
</tr>
<tr>
<td>CalWIN</td>
<td>762</td>
<td>84.65%</td>
<td>0.13%</td>
<td>0:00:24</td>
</tr>
<tr>
<td>LRS</td>
<td>449</td>
<td>99.60%</td>
<td>0.40%</td>
<td>0:00:08</td>
</tr>
</tbody>
</table>

SAWS = Statewide Automated Welfare System (consortia). California has three SAWS consortia's to provide service to the counties.

C-IV = SAWS Consortium C-IV (pronounced C 4)
CalWIN = California Welfare Information Network
LRS = formally LEADER = Los Angeles Eligibility Automated Determination, Evaluation and Reporting Systems