







## 2017 – 2020 STRATEGIC PLAN UPDATE

December 18, 2017

### **Areas of Focus for 2017 – 2018**

- Initiatives to better manage health care costs.
- Targeted, data-supported outreach.
- Enhanced broker and Assister education, communication, training and support.
- Improved customer experience.
- Carrier process and reporting improvements.
- New/refined financial policies, processes and dashboards.
- Finalization/approval of key finance mechanisms.
- Employee survey completed



## Goal #1: Update

Advocate to improve access to coverage in rural areas of Colorado.

#### **STRATEGIES**

## Encourage carrier participation in rural areas.

- Increase awareness among rural Coloradans on the benefits available through the Marketplace.
- Work with stakeholders to address the high cost of health coverage and improve provider access in rural areas.

#### **KEY ACTIVITIES COMPLETED**

- DOI stakeholder meetings on reinsurance/high-risk pool options.
- Targeted outreach and marketing to high EBNE areas for OE5.
- Hired an additional FTE to focus on county engagement.



## Goal #2: Update

Maximize the number of consumers and employers who shop and enroll through the health insurance marketplace, and apply for available financial assistance.

#### **STRATEGIES**

- Use available data to improve retention and target new customers.
- Refine education and outreach mechanisms.
- explore alternative product/benefit solutions.
- Identify new types of customers for Marketplace products and services.
- Explore partnerships with organizations that could help the Marketplace attract new customers (e.g. healthcare and wellness vendors).
- Increase customer, broker, Assistor and carrier satisfaction.

#### **KEY ACTIVITIES COMPLETED**

- For OE5, used data to send targeted notifications to subsidy-eligible but not enrolled customers.
- Used appointment outcome tracking to help reduce the number of visits required for enrollment.
- Implemented the "Preferred Plan" option for customers not eligible for auto-renewal.
- Successfully implemented Enrollment Centers across the state.
- Establishment of an in-house MA Site team to serve Assistance channels has shown strong early success.
- re-enrollment process.
- First broker survey sent.

## Goal #3: Update

Improve the ability of customers to attain and retain the right coverage for their needs.

#### **STRATEGIES**

- Assist consumers in better understanding their coverage and how to use it.
- Improve the customer eligibility and enrollment experience.
- Ensure that customers continue to have choice in selection of carriers and Qualified Health Plans by improving the value proposition that the Marketplace offers to carriers.

#### **KEY ACTIVITIES COMPLETED**

- QCPFT enhancements (i.e. prescription drug costs, screen reductions and updates); QCPFT featured at Building Better Health conference.
- Educational activities, including:
  - additional emphasis on CSR
  - updated broker and Assister training and certification modules
  - continuous improvement of roadshows, newsletters and forums
  - Refined Service Rep tools and training
- Service Center restructuring to improve alignment and communication.
- Enhancements to the change reporting process.
- New appeals and complaints processes.
- Reconciliation process improvements.



## Goal #4: Update

Ensure that Connect for Health Colorado is a healthy and thriving organization.

#### **STRATEGIES KEY ACTIVITIES COMPLETED** Continue to improve upon the fiscal Researched, drafted and reviewed new reserve policy to stability of the Marketplace. Finance and Operations Committee. Further develop human capital and Medicaid Cost Allocation Plan (CAP) approved by CMS. C4 expense reporting process finalized with HCPF and engagement. expenses submitted through September 2017. Grant opportunity research completed. Developed new project intake process including financial evaluation and impacts on budget and sustainability. Implemented real-time budget to actual financial management dashboard reporting at both the department and contract/project level. Employee survey completed - Board update to be provided in January



# APPENDIX: Key Activities in Process



## **Goal #1: Key Activities in Process**

- Working with state and federal partners to explore policy solutions, including waivers, to address the unique challenges related to high insurance costs in rural communities.
- Engaging with stakeholders and the DOI in exploring what impacts, if any, a change in benefit structures in rural communities would have on number of plans offered, cost of premiums, and access.
- Participating at Colorado Bar Assn/Colorado CPA Association Conferences and in committees and focus groups of Club 20, Progressive 15 and Action 22.
- Continuing to develop customer stories from rural regions of the state.
- Participating in conversations through the National Academy of State Health Policy on this topic and hosting an in-person meeting on best practices with other state-based marketplaces in April of 2018.
- Partnering with state agencies, carriers and health policy groups to study the impacts of alternative plan designs on affordability.
- Continuing conversations with the Division of Insurance on network adequacy specific to on-exchange carriers and ways to incentivize participation or broaden network structures.

## **Goal #2: Key Activities in Process**

- Preliminary exploration of new product offerings including:
  - Direct Primary Care combined with a wrap policy (potentially catastrophic/bronze/silver plans) that can be offered to Small Business employers and reduce the cost of insurance
  - expansion of Dental product offering to add a richer plan in 2018
  - exploration of other product offerings including Life, STD, LTD,
     Critical Illness, Accident and Gap insurance
- Enhanced email support for brokers and Assisters to reduce calls to the Service Center and improve efficiency and broker/Assister satisfaction.
- Continue to assess all processes looking for efficiencies.

## **Goal #3: Key Activities in Process**

- Enrollment improvements including reporting, EDI transactions and enrollment processing.
- Special Enrollment Period reporting enhancements.
- Improvements to 1095A dispute resolution process for January 2018.
- Ongoing efforts to work with OIT and HCPF to align policies and reduce member confusion due to conflicting requirements.



## **Goal #4: Key Activities in Process**

- Presenting revised reserve policy draft to Finance and Operations Committee in January.
- Opportunity tracking/evaluation (e.g. grants, collaboration) process under development.
- Finalizing contract with HCPF governing CAP and other relationships with HCPF.
- Preliminary discussions with the Colorado Health Foundation on future funding underway.
- Completing inventory of financial analysis needs; standardized ROI methodology under development.
- Researching best practices for improving cost control and contracting structure through discussions with other SBMs.
- As part of moving corporate offices, evaluating all corporate/facility services for quality and cost of services.