Strategic Plan Update

- Success measures have been established for 32 out of 39 measures

- Remaining measures are either awaiting baseline measurements (2) or being researched (5)

- Internal teams have been created to support the measuring and underlying implementation of initiatives supporting the strategic goals

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➢ **Goal #1 - Improve access to coverage to increase enrollments in rural areas of Colorado.**

   ✓ On track or exceed enrollment and retention targets (partially attributable to ARP)

➢ **Goal #2 - Maximize the number of consumers who shop and enroll through the health insurance marketplace and apply for available financial assistance.**

   ✓ On track or exceed enrollment and retention targets (partially attributable to ARP)

➢ **Goal #3 - Improve the ability of customers to attain and retain coverage based on their health care needs and circumstances.**

   ✓ Customer and issuer survey scores met or exceeded targets

   ✓ Significant reduction in 1095 disputes

   ✓ Improvement in CSR eligible enrolling in silver plans compared to prior year same quarter

➢ **Goal #4 - Ensure that Connect for Health Colorado remains a healthy and thriving organization.**

   ✓ Financial measures on track - Exception, days cash on hand slightly below target

   ✓ Employer survey results met targets – Exception, communication score fell below 78%

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Appendix – Success Measures Detail

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What will be achieved→

How success will be measured→

How it will be achieved→

```
                    GOAL

        OBJECTIVE           OBJECTIVE

        SUCCESS             SUCCESS
        MEASURE(S)          MEASURE(S)

   STRATEGY   STRATEGY   STRATEGY   STRATEGY
```

Result = alignment between and clarity of goals, objectives and strategies

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2021- 2024 Strategic Goals

Goal #1:

Improve access to coverage to increase enrollments in rural areas of Colorado.

Goal #2:

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

Goal #3:

Improve the ability of customers to attain and retain coverage based on their health care needs and circumstances.

Goal #4:

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

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Goals are high-level descriptions of what C4HCO seeks to accomplish

Objectives are more specific/measurable desired results (the "what") that will lead to achievement of goals

Success measures consist of qualitative or quantitative data that determine if objectives are achieved

Strategies are high level activities designed to help the organization meet its objectives (the "how"), and are supported by more specific (i.e., tactical) initiatives

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Goal #1

Objective	Success Measures	Progress	Status/Current Initiatives
#1: Increase the number of Coloradans enrolled in rural counties	Increase the percentage of rural Coloradans enrolled through the Marketplace from 3.5% to 3.8% by 2024	Plan Year 2022 open enrollment = 3.98%. End of Q1 21 = 2.84% End of Q1 22 = 3.89%	Identify rural demographic populations that are underrepresented. Expand C4HCO outreach and the number of brokers, assistance sites, and enrollment centers in rural Colorado.
	Lower the rate of rural Coloradans who qualify for financial help but who are not enrolled.	Annual report from CHI will be available in August	Investigating data sources to measure progress. Maximize rural consumer awareness of the positive financial impact of APTCs and the opportunity for SEPs.
	Maintain or Increase rural customer retention rate. Baseline: 2021 – 97.8% average monthly retention.	Average retention rate Quarter 1: 2021 - 95% 2022 - 97.9%	Work with strategic partners including issuers, enrollment centers, brokers, and assistance network to pursue shared goals of increased enrollment and reducing costs in rural communities.
	Increase rural customer satisfaction with chosen plan	Customer Satisfaction with Chosen Plan: 52% Slightly or Strongly Satisfied (statewide data only)	Investigating methods for measuring progress. Integrate feedback on rural needs into C4HCO's product offerings and self-service platform. Create mechanisms to gather coverage needs and values from rural small businesses and use these insights to direct new product and business development activities.

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Goal #1

Objective	Success Measures	Progress	Status/Current Initiatives
#2: Increase our participation in health care policy discussions affecting rural Colorado	Increase the number of policy discussions & participation by 10%	**10:** policy discussions & meeting participation with rural Coloradans, community leaders and health care policy leaders since Jan 1, 2022	Convene, engage, and participate with rural Coloradans, community leaders and health care policy leaders to support the awareness and successful implementation of current and future legislative bills that increase access, affordability, and choice for individuals and small employers purchasing health insurance in Colorado.
	Increase the number of 1:1 conversations with legislators, community leaders, and town hall meeting participation	**5:** 1:1 conversations with legislators, community leaders, and town hall meetings since Jan 1, 2022	Influence policies that increase options, choice and purchasing alliances across rural Colorado.
	Increase the number of rural county enrollees who receive financial help by 5% annually	25% increase Quarter 1 year over year comparison: 2021Q1 – 30,971 2022Q1 – 38,449	Convene, engage, and participate with rural Coloradans, community leaders and health care policy leaders to support the awareness and successful implementation of current and future legislative bills that increase access, affordability, and choice for individuals and small employers purchasing health insurance in Colorado.

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Goal #2

Objective	Success Measures	Progress	Status/Current Initiatives
#1: Increase enrollment overall	Increase effectuated enrollment by 3.5%	13% increase Quarter 1 year over year comparison: 2021Q1 – 156,715 2022Q1 – 177,494	Expanding product options and data-driven marketing, outreach, education, and enrollment assistance activities targeting subsidy and non-subsidy eligible consumers.
	Increase the percentage of Coloradans enrolled through the Marketplace from 3.0% to 3.25% by 2024	Plan Year 2022 open enrollment = 3.37%. End of Q1 21 = 2.50% End of Q1 22 = 3.29%	Pursuing existing and potential new avenues to positively impact access to comprehensive, affordable coverage through the Marketplace. Developing new partnerships (channels) to expand Connect for Health Colorado's reach within the state.
	Maintain or exceed enrollment effectuation rate of 92%	Plan Year 2022 open enrollment = 93%. Q1 21 = 85% Q1 22 = 92% (expected to be higher upon once issuer reporting complete	Improving process and/or implement system enhancements to increase level of enrollment effectuations. Enhancing technology platform to provide easier access to eligibility and enrollment services for external organizations.
#2: Increase enrollment within systemically marginalized communities (Community demographics defined as ages 26-34, income up to 200% FPL, and rural counties)	Increase the number of enrollees who receive subsidies by 3.5% annually	21% increase Quarter 1 year over year comparison: 2021Q1 – 109,911 2022Q1 – 133,391	Identifying demographic populations that are underrepresented in the C4HCO Marketplace, especially subsidy-eligible Coloradans; develop/execute population-specific growth strategies.
	Lower the rate of Coloradans who qualify for financial help but who are not enrolled statewide	Waiting on CHI EBNE report for 2021	Working with strategic partners including issuers, enrollment centers, brokers, and assistance network to pursue shared goals of increased enrollment and reducing premium costs across the state but especially as they relate to underserved populations.
	Improve enrollment and retention results for systemically marginalized communities	Enrollment: (baseline being determined) Retention: 2021Q1 – 96.8% 2022Q2 – 97.4%	Maximize consumer awareness of the positive financial impact of APTCs and the opportunity for SEPs. Influence policies that increase health insurance affordability, access and choice across the state.

Goal #2

Objective	Success Measures	Progress	Status/Current Initiatives
#3: Increase customer satisfaction	Improve the net promoter score	Net Promoter Score: +16 (statewide data only)	Improving customer experience through improvements in customer service processes. Utilize available data sources to understand customers' needs to improve services and expand product offerings. Enhance the broker and Assister marketplace experience through tools, technology, support and education.
	Maintain or increase customer retention rate Baseline: 2021- 97.4% average monthly retention rate	Average retention rate Quarter 1: 2021 – 92.5% 2022 – 97.6%	Improve post enrollment services to provide enrollees additional services and products to assist them in managing their health needs. Building AN Portal using assister's feedback Consistent engagement and requests for feedback.
#4: Expand the number of employers providing access to Marketplace coverage to their employees	Develop measures, targets, data sources and reporting format by 6/30/21; establish baseline and begin reporting 12/31/21	15 in the Front Range/Metro 10 in the Southeast and San Luis Valley Total: 25	Number of small business events, sponsorships, presentations Target: 24 annually Developing measure that tracks employees enrolled through the Marketplace
	Web traffic to small business pages	Number of Small Business Web visits April 1 – June 30: 2,853 (up 16% YoY)	Expand web presence and functionality of C4HCO for assistance to small businesses and their employees. Partner with organizations/vendors in providing services, tools, education and products for small businesses and their employees.
	Small business referrals sent to Enrollment Centers and Brokers	Broker Lead Referrals April 1 – June 30: 188 leads generated	Expand small business health insurance product options and data-driven marketing, outreach and education with business groups, chambers of commerce and professional societies. Develop and implement small business referral program to provide expert assistance to small businesses in navigating health insurance options for employees.

Goal #3

Objective	Success Measures	Progress	Status/Current Initiatives
#1: Educate and empower customers to choose the right plan for their unique circumstances and stay enrolled so they can access the health care they need	Increase percentage of customers satisfied with their health insurance plan from 60% (2020) to 65% (2024)	2022 showed 65% were satisfied with their plan, this was an increase from 58% in 2021	Enhance online decision support tools that enable consumers to better understand their options so that they make an informed plan selection based on their health care needs and circumstances.
	Increase customer interaction with decision support tools	Qtr 1 2021 vs Qtr1 2022: Users increased by 51% New Users Increased by 169% Sessions per user decreased by 50%	Promoting health insurance literacy throughout the year, through all communication channels. Work with issuers to simplify plan options to make the shopping experience easier. Utilize web metrics to enhance the customer experience in order to help customers choose a plan as effectively as possible.
	Increase percentage of Cost-Sharing Reduction-eligible customers enrolled in Silver plans (Baseline: 2021 – 69% of CSR eligible customers selected CSR eligible silver plans)	Quarter 1 year over year comparison: 2021Q1 – 64.4% 2022Q1 – 70.3%	Ensure operational processes, online forms and functionality, and customer service centers work effectively for Coloradans of different backgrounds and abilities. Pursue collaborative approach with State and Federal entities to improve processes and reporting for members to move from State to Exchange or Exchange to Federal programs.

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Goal #3

Objective	Success Measures	Progress	Status/Current Initiatives
#2: Enhance the eligibility and enrollment systems and processes to improve the customer experience for new and renewing customers	Year-over-year improvement in "overall enrolling was easy" score	Improved from 54% agree in 2021 survey to 63% agree in 2022 survey	Reduce enrollment and renewal process-related administrative and documentation barriers.
	Maintain or reduce annually the number of 1095-A tax form disputes submitted by customers that result in an enrollment update and a corrected 1095-A form. Baseline (based on 2020/2019): 1095 Customer Disputes 1,000	2021 Customer Disputes - 448	Enhance the Electronic Data Interchange (EDI) functionality so that enrollment information (initial enrollments and changes) flows to issuers as expected and can be processed timely and accurately so that customers have active and continuous coverage.
	Maintain or reduce annually the number of valid appeals submitted by customers that result in an eligibility re-determination	2021 Q1 – 9 2022 Q1 - 9	Increase access to knowledgeable brokers and Assisters by expanding in person assistance available statewide. Improve and increase stakeholder, customer service representative, and member awareness of important eligibility and enrollment policies and procedures, as well as improved internal understanding of our products.
	Research feasibility of additional system generated and/or point of service measures of customer experience	Research in process	Research/implement tools and resources to support consistent measuring of consumer needs and satisfaction, provide a better understanding of the customer experience, and establish a clear feedback loop.

Goal #3

Objective	Success Measures	Progress	Status/Current Initiatives
#3: Promote plan choice and issuer participation by improving the value proposition that the Marketplace offers to its partnering health insurance companies	Maintain or increase the number of issuers offering plans	No change in medical plan issuers between 2021 and 2022 (8 in total)	EDI enhancements and process improvement projects to reduce manual efforts and lower administrative costs for issuers and collect data to gauge issuer satisfaction once implemented. Implement projects that decrease issuers' cost of doing business, reduce issuers' administrative burden, and improve member retention and growth.
	Issuer satisfaction improves (overall improvement from 59% in 2019 to 65% in 2024; content and timeliness of communications from 82% 2019 to 85% 2024; resources and issue resolution stays at or higher annually)	2022 Issuer Survey: Overall 62.5% Communications 88.8% Resolution 100% stayed at or above prior year level – 66% better than prior year	Improve Marketplace enrollment and change reporting processing by enhancing the eligibility and enrollment system functionality to better support SEPs and changes.
	Increase issuer satisfaction with enrollment reconciliation and dispute processes by 2.5% annually beginning in 2022 (new survey question to be introduced and baselined in 2021)	Baseline determination in process	New survey question will be introduced in next year's issuer survey, will have results to use as baseline in May 2023. EDI enhancements and process improvement projects to reduce manual efforts and lower administrative costs for issuers and collect data to gauge issuer satisfaction once implemented.

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Goal #3

Objective	Success Measures	Progress	Status/Current Initiatives
#4: Improve equity in health care access, coverage, quality and service and reduce out-of-pocket costs for Marketplace customers	TBD		Work with issuers to improve health care access, coverage, quality and service and reduce out-of-pocket costs among enrollees. Pursue a collaborative approach with Health First Colorado to reduce health disparities among enrollees. Work with institutions to be a voice for equity. Influence policies that reduce health disparities across the state.
#5: Address social determinants of health for Marketplace customers	TBD		Explore ways to integrate coverage for SDOH and access to community-based organizations into Marketplace products. Enhance communications and online tools to improve education about, access to and utilization of community resources. Pursue a collaborative approach with Health First Colorado to address SDOH among enrollees. 4Build on a collaborative approach with other statewide non-profits to address SDOH among enrollees. Influence policies that positively address SDOH across the state.

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Goal #4

Objective 1	Success Measures	Progress	Status/Current Initiatives
Engage in operational, administrative, and financial activities that continue to improve the stability and long-term sustainability of the organization.	Develop operational process measures, targets, data sources and reporting format by 6/30/21; establish baseline and begin reporting 12/31/21	Service center calls per plan submission: 2021 Q1 - 2.63 calls per submission 2022 Q1 - 1.62 calls per submission First call resolution: 2021 Q1 95% 2022 Q1 92%	Maintain or reduce service center calls to plan submissions as a general measure of process improvements of exchange operations. Baseline: 2021 - .80 calls per submission (2 calls per submissions outside of OE). Maintain or improve first call resolution to measure service center processes. Baseline: 2021 - 90% calls resolved. Administrative measures being researched/evaluated.
	Develop operational expense measures, targets, data sources and reporting format by 6/30/21; establish baseline and begin reporting 12/31/21	Actual FY 2022 thru March 31: Operating Expense PMPM = $19.08 Actual FY 2022: Customer Service Cost Per Contact = $33.36	Baseline FY 2021: Operating Expense PMPM = $21.00 Baseline FY 2021: Customer Service Cost Per Contact = $35.00 Actual FY 2022: Operating Expense PMPM = $19.08 Actual FY 2022: Customer Service Cost Per Contact = $33.36 (Moved actuals to progress column)

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Goal #4

Objective 1	Success Measures	Progress	Status/Current Initiatives
Engage in operational, administrative, and financial activities that continue to improve the stability and long-term sustainability of the organization.	In the annual employee opinion survey, increase the work processes and tools performance component survey score from 71% to 80% by 2024	2022 Survey 80%	Some initiatives we are taking to improve scores: • Targeted quarterly survey • Capitalize on All Staff meetings to highlight C4HCO initiatives supporting key categories asked about in the Annual Employee Survey using a gamification platform. • Develop & execute annual operations & annual Technology plans • Create a process/structure that encourages continuous improvement.
	Maintain sufficient operating and capital cash reserves throughout the plan period	Days cash on hand @ March 31, 2022 115 days vs 120 day target	Long-term reserve planning incorporated into budget process. Developing more structure & discipline when we make decisions through financial analysis, cost of acquisition analysis, ROI Analysis. Improve upon PBC to contribute to the organizations sustainability tactically. Researching for best practices to incorporate in our processes
	Positive annual operating income annually	Operating income for 9 months ending March 31, 2022 was $4 million, compared to $2.3 million for same prior year period	

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Goal #4

Objective 2	Success Measures	Progress	Status/Current Initiatives
#2: Continue to develop human capital, employee engagement, diversity, and inclusion	Maintain annual employee opinion survey participation rate of at least 90%	98% 2022 Survey	
	Increase performance components survey scores of communication from 78% to at least 85% by 2024	2022 Survey 77%	Partner with the Communications team on All Staff meeting presentations to drive the survey score for communications to at least 85% rating by 2024. • Topics would rotate based on key communication efforts.

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Goal #4

Objective 2	Success Measures	Progress	Status/Current Initiatives
#2: Continue to develop human capital, employee engagement, diversity, and inclusion	Maintain (within a 5% range) or increase annual employee opinion survey scores in all performance components	2022 Survey Results: Engagement 2% down Satisfaction no change Leadership .5% down Work culture 2% up Work processes 4% up Communication 3% down Benefits 3% down	Success measures will be measured annually. In the meantime here are some initiative we are taking to improve/maintain these scores. • Regular communication highlighting C4 initiatives supporting key categories covered in the Annual Employee Survey • Targeted quarterly surveys • Capitalize on All Staff meetings to highlight C4 initiatives supporting key categories asked about in the Annual Employee Survey using a gamification platform • Incorporate a recognition initiative around "I am C4" – recognized in All Staff • Monthly communication newsletter • Enhance New Hire Onboarding process, reinforcing key initiatives and incorporating surveys (capture feedback) • Updating onboarding process, new hire orientation & training and development
	Develop and deploy appropriate metrics/scorecard measures to evaluate and measure ongoing success and accountability	Chief HR & Training Officer started in June: working on this	This will be deferred until we bring on a Chief HR & Talent Officer