

Strategic Plan 21-24 Progress Report Qtr 2 2022 (April-June)

How we increase access, affordability and choice for Coloradans

Finance and Operations Committee – October 24, 2022







Success Measure Highlights – Qtr 2 2022

- Goal #1 Improve access to coverage to increase enrollments in rural areas of Colorado.
 - ✓ Significant year over year increases in enrollment and retention measures targets met
 - ✓ Established Eligible But No Enrolled (EBNE) baseline measures based on CHI data
- ➤ Goal #2 Maximize the number of consumers who shop and enroll through the health insurance marketplace and apply for available financial assistance.
 - ✓ Year over year increases in enrollment and retention targets met
 - ✓ Established Eligible But No Enrolled (EBNE) baseline measures based on CHI data
- ➤ Goal #3 Improve the ability of customers to attain and retain coverage based on their health care needs and circumstances.
 - ✓ Reduction in health plan issuers on exchange from 8 to 6
 - ✓ All other measures at or near targets
- Goal #4 Ensure that Connect for Health Colorado remains a healthy and thriving organization.
 - √ Financial measures on track
 - ✓ New CHRTO in place will start addressing scorecard and employee survey deficiencies



Appendix – Success Measures



#1: Increase the number of Coloradans enrolled in rural counties Increase the percentage of rural Plan Year 2022 open enrollment = 3.98%. Plan Year 2022 open enrollment = 3.98%. Quarter 2 year over year: Identify rural demographic populations that are under the number of brokers, enrollment centers in rural Colorado.	·
2024 2021 = 2.86% 2022 = 3.76%	
Lower the rate of rural Coloradans who qualify for financial help but who are not enrolled. Benchmarks Established Subsidies/APTCs and the opportunity for SEPs. Benchmark (2020 CHI EBNE data): 39% Off-exchange Individual Market Eligible for subsidies but not enrolled.	osidies
Maintain or Increase rural customer retention rate. Baseline: 2021 – year over year: 97.8% average monthly retention. Average retention rate Quarter 2 year over year: 2021 - 93% 2022 - 98.9% Work with strategic partners including issuers, enroll brokers, and assistance network to pursue shared go enrollment and reducing costs in rural communities.	goals of increased
Increase rural customer satisfaction with chosen plan With chosen plan Plan: 52% Slightly or Strongly Satisfied (statewide data only) Customer Satisfaction with Chosen plan Plan: 52% Slightly or Strongly Satisfied (statewide data only) Create mechanisms to gather coverage needs and value businesses and use these insights to direct new product offerings and self-service development activities.	ice platform. values from rural small

Objective	Success Measures	Progress	Status
#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. • Sponsored and attended Voices of Rural Colorado Conference • Established monthly check-ins with Rural Health Policy Center • Landscape assessment of other opportunities to be completed by end of the year
	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. Identified rural legislative targets to hold 1:1 meetings with based on uninsured and EBNE rate in district
	Increase the number of rural county enrollees who receive financial help by 5% annually	24% increase year over year quarter comparison: Q2 CY21 – 31,828 Q2 CY22 – 39,368	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.



Objective	Success Measures	Progress	Status
#1: Increase enrollment overall	Increase effectuated enrollment by 3.5%	13% increase Quarter 2 year over year comparison: Q2 CY21 – 160,089 Q2 CY22 – 181,531	Expanding product options and data-driven marketing, outreach, education, and enrollment assistance activities targeting subsidy and nonsubsidy 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 Q2 CY21 = 2.51% End of Q2 CY22 = 3.15%	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%. Q2 CY21 = 96% Q2 CY22 = 95%	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	Increase the number of enrollees who receive subsidies by 3.5% annually	20% increase Quarter 2 year over year comparison: Q2 CY21 – 113,074 Q2 CY22 – 136,192	Identifying demographic populations that are underrepresented in the C4HCO Marketplace, especially subsidy-eligible Coloradans; develop/execute population-specific growth strategies.
(Community demographics defined as ages 26-34, income up to 200% FPL, and rural counties)	Lower the rate of Coloradans who qualify for financial help but who are not enrolled statewide	Benchmarks established	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. Benchmark (2020 CHI EBNE data): 43% (73,000) Off-exchange Individuals Eligible for subsidies 61% (153,000) Uninsured eligible for subsidies but not enrolled
	Improve enrollment and retention results for systemically marginalized communities	Enrollment: (baseline being determined) Retention – Year over Year Comparison: Q2 CY21– 97.4% Q2 CY22– 98.6%	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.

Objective	Success Measures	Progress	Status
#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: CY2021-97.4% average monthly retention rate	Average retention rate Quarter 2 YTD: 2021 – 97.6% 2022 – 98.0%	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 – (tie to HRA selection in 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.

Objective	Success Measures	Progress	Status
#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 2 year over year comparison: Q2 CY21 – 80.7% Q2 CY22– 73.3%	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.



Objective	Success Measures	Progress	Status
#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 to date- 724	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	Q2 CY21 YTD - 17 Q2 CY22 YTD - 14	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.



Objective	Success Measures	Progress	Status
#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	Reduction in medical plan issuers from 8 to 6 between PY 22 and PY23 due to Bright Health and Oscar exit	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 90% 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.



Objective	Success Measures	Progress	Status
#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.



Objective 1	Success Measures	Progress	Status
Engage in operational, administrative, and financial activities that continue to improve the stability and longterm 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: Q2 CY21 - 1.63 calls per submission Q2 CY22 - 2.29 calls per submission First call resolution (target 90%): Q2 CY21 99% Q2 CY22 95%	Maintain or reduce service center calls to plan submissions as a general measure of process improvements of exchange operations. Baseline: 202180 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 June 30: Operating Expense PMPM = \$17.6 Customer Service Cost Per Contact = \$45 (calls only)	Baseline FY 2021: Operating Expense PMPM = \$21.00 Baseline FY 2021: Customer Service Cost Per Contact = \$43 (calls only), \$35 (with Chat)



Objective 1	Success Measures	Progress	Status
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 @ June 30, 2022 139 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 12 months ending June 30, 2022 was \$6.1 million, compared to \$3.7 million for same prior year period	



Objective 2	Success Measures	Progress	Status
#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% 2022 Communicatio n survey score down 3%	 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



Objective 2	Success Measures	Progress	Status
#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 through the survey. In the meantime here are some initiative we are taking to improve/maintain these scores. Sent employees benefit survey to understand pluses and deltas. Results reflected employees' overall satisfaction with most benefits; the delta is the opportunity to offer more than one medical option. 50% want another medical option. HR team is working to offer two or more medical options this year and pet insurance. Working with our broker to meet the employee's desire. 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	CHTRO is discovering and understanding measurements during Q1 & Q2. In Q3, the CHRTO will be able to determine gaps and plan the next steps.



What will be achieved→

How success will be measured→

How it will be achieved →



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

CONNECT HEA

2021- 2024 Strategic Goals

Goal #1:

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

Goal #3:

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

Goal #2:

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

Goal #4:

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



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

