Agenda

A. Call to Order and Introductions
B. Public Comment
C. Review and Approval of Minutes
D. CEO Report
E. Operations Update
F. Information Technology Update
G. Marketing & Sales Update
H. All Payer Claims Database Update
I. Finance Update
J. Executive Session
K. Adjournment
Welcome and Introductions
Public Comment
CEO Update
Operations Update
QHP Enrollment by Metal Level

- Silver: 59%
- Bronze: 16%
- Gold: 23%
- Catastrophic: 2%
QHP Enrollment by Carrier

- ConnectiCare: 37%
- HealthyCT: 3%
- Anthem: 60%
Age Breakdown

- **AGE ≥65**: 1%
- **AGE <18**: 8%
- **AGE 18-25**: 9%
- **AGE 26-34**: 13%
- **AGE 35-44**: 12%
- **AGE 45-54**: 24%
- **AGE 55-64**: 33%
Follow Up from Operations Trends for January

– Membership continues to grow

– Customer Service was improved
  • Better service in call center
    – More representatives: 280 currently
  • Training continues with all outreach staff; call center, assisters, brokers, CACs

– Medicaid Redeterminations
  • Continual collaboration with DSS to address
  • DSS contractors are expanding to deal with additional work

– Carriers
  • Focus on people with urgent medical needs
  • Continued maturation of the data interchange with carriers
Call Center: Number of Calls - December to Date

- Initial Calls
- Transferred Calls
- Total Calls

access health CT
Call Center: Abandonment Rates - December to Date
Call Center: Average Wait Time in Seconds
December to Date

Initial Calls
Transferred Calls

access health CT
February Issues and Actions

- Expected March Increase in QHP interest and applications

- Customer Service

- Medicaid Redeterminations: HUSKY/CHIP Customers

- Potential Risks
  - Retention of knowledgeable staff
  - Carrier and DSS process
  - Redetermination volume
Plan Management Update
Compliance with Network Requirements
Network Adequacy: Substantially Similar Requirement

Connecticare Benefits Inc
HealthyCT
UnitedHealthcare

No difference in network: meets the similarity standard

Anthem

Different Networks: Evaluation Required
Network Adequacy: Substantially Similar Requirement

AHCT Review of Anthem Online Provider Directory for Individual Exchange Products for Connecticut Providers

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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<tbody>
<tr>
<td><strong>Anthem:</strong></td>
<td><strong>Count</strong></td>
<td></td>
</tr>
<tr>
<td>Individual On Exchange</td>
<td>29,730</td>
<td>Individual Off Exchange</td>
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<tr>
<td>HMO: Pathway X</td>
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<td>HMO: Blue Care / Individual</td>
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<tr>
<td>Enhanced</td>
<td>29,730</td>
<td></td>
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<tr>
<td>PPO: Pathway X</td>
<td>29,857</td>
<td>PPO: Century Preferred</td>
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<tr>
<td></td>
<td>37,454</td>
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</table>

Counts provided by Anthem

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td><strong>Anthem:</strong></td>
<td><strong>Count</strong></td>
<td></td>
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<tr>
<td>Individual On Exchange</td>
<td>18,794</td>
<td>Individual Off Exchange</td>
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<td>HMO: Blue Care / Individual</td>
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<td>PPO: Pathway X</td>
<td>18,788</td>
<td>PPO: Century Preferred</td>
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<tr>
<td></td>
<td>21,999</td>
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## Connecticut Provider Counts

<table>
<thead>
<tr>
<th>Provider Category</th>
<th>Anthem Individual HMO</th>
<th>Anthem Individual PPO</th>
<th>CBI</th>
<th>HealthyCT</th>
<th>UHC</th>
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<tbody>
<tr>
<td>Primary Care</td>
<td>3,891</td>
<td>3,888</td>
<td>2,236</td>
<td>1,575</td>
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<tr>
<td>Pediatrics</td>
<td>817</td>
<td>816</td>
<td>621</td>
<td>526</td>
<td>859</td>
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<tr>
<td>Ob/Gyn</td>
<td>756</td>
<td>755</td>
<td>539</td>
<td>476</td>
<td>830</td>
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<td>BH-SA</td>
<td>4,424</td>
<td>4,422</td>
<td>1,500</td>
<td>521</td>
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<td>Cardiology</td>
<td>339</td>
<td>339</td>
<td>422</td>
<td>217</td>
<td>488</td>
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<td>Oncology</td>
<td>165</td>
<td>165</td>
<td>280</td>
<td>62</td>
<td>273</td>
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<tr>
<td>Sub-Total</td>
<td>10,392</td>
<td>10,385</td>
<td>5,598</td>
<td>3,377</td>
<td>7,291</td>
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<td>All Other</td>
<td>6,706</td>
<td>6,602</td>
<td>5,402</td>
<td>3,142</td>
<td>6,889</td>
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<td>Total Providers</td>
<td>17,098</td>
<td>16,987</td>
<td>11,000</td>
<td>6,519</td>
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<td>Facility Locations</td>
<td>802</td>
<td>803</td>
<td>420</td>
<td>235</td>
<td>515</td>
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<td>17,900</td>
<td>17,790</td>
<td>11,420</td>
<td>6,754</td>
<td>14,695</td>
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</table>
CMS - Essential Community Provider (ECP) Standards

2014:
Safe Harbor: 20%
Minimum Expectation: 10%

2015: 30%

PROPOSED CHANGE

CONTRACT TO BE PROVIDED TO:

- Indian health providers in the service area
- Federally Qualified Health Center (FQHC)
- Ryan White Providers
- Family Planning Provider
- Hospitals
- Other ECP Providers (STD Clinics, TB Clinics, Hemophilia Treatment Centers, Black Lung Clinics & other entities that serve predominantly low-income, medically underserved individuals)
## AHCT ECP Standards & Carrier Compliance

<table>
<thead>
<tr>
<th>Carrier</th>
<th>Federally Qualified Health Centers (FQHCS) 90%</th>
<th>CMS Non-Exhaustive List: 75%</th>
<th>Exchange Expanded List: 2014: 35% / 2015: 75%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anthem</td>
<td>11 of 14 (79%)</td>
<td>44 of 59 (75%)*</td>
<td>447 of 641 (70%)*</td>
</tr>
<tr>
<td>Connecticare Benefits, Inc</td>
<td>13 of 14 (93%)*</td>
<td>47 of 59 (80%)*</td>
<td>430 of 641 (67%)*</td>
</tr>
<tr>
<td>HealthyCT</td>
<td>10 of 14 (71%)</td>
<td>40 of 59 (68%)</td>
<td>329 of 641 (51%)*</td>
</tr>
<tr>
<td>United</td>
<td>8 of 14 (57%)</td>
<td>32 of 59 (54%)</td>
<td>137 of 641 (21%)</td>
</tr>
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</table>

*Meets Standard
Network Adequacy: Next Steps

• Continuing review of the network adequacy and ECP submissions by carrier
  – Require demonstration of “good faith” effort from Carriers not meeting AHCT standards
  – Develop a “reasonable access” standard for 2015 e.g., member to provider ratio, including geographical and provider type considerations

• Secure software in order to alleviate manual analysis, data manipulation, review and presentation.

• Continuing ongoing dialog with carriers on specific network issues
access health CT
Connecticut’s Health Insurance Marketplace

February 2014
Information Technology Update
Accomplishments

– March Volume Readiness
  • Call Center Technology Improvements
    – Maximus
    – Xerox
  • Customer Facing Improvements
    – Spanish Translated Website
    – Catastrophic Coverage
    – Incarceration Compliance Improvements
  • Infrastructure Stabilization
    – Hardware/Software
    – Network
Short Term

– Streamlining The Customer Experience

• Security Validation
  – New Remote Identity Proofing Vendor Selected
  – IRS Audit Preparation

• Income Verification
  – CT Department of Labor

• Single Application Sign On
  – Department of Social Service (ConneCT) and AccessHealthCT

• Electronic Transmission of Eligibility to Carriers
  – Educating consumers with bulk email to Anthem Subscribers
  – More flexible processing of consumer records
Contents

• Update on Media Efforts
• Overview of Key Sales and Marketing Metrics
Media Update

February activity maintaining active Q1 presence

• February media spend stands at approximately $500k, just slightly below January’s media spend of approximately $600k.

• All media activity in market now utilizes testimonial based advertisements focusing on:
  – savings opportunities
  – ease of enrollment
  – availability of in person help
Media Update

February advertising taking advantage of high profile events

• Strong winter Olympic performance will provide solid support for February enrollment activity.

• Winter games have been #1 in Prime Time since opening ceremonies
• 121 commercial spots have aired (709 GRP’s)
• Ad schedule has reached nearly 98% of CT households, with a frequency of more than 7 times
• Added program elements have increased exposure at key times
Olympic Bump

High profile activity delivering results
- Key metrics in the week after the launch of the Olympics are outperforming the week prior to kick off (Feb 3-6 vs. Feb 10-13)

31% Website traffic increase
24% Account creation increase
8% Call volume increase
67% Daily enrollments increase
Direct Mail

• In addition to traditional media, 300,000 targeted direct mail pieces were dropped between 2/13 and 2/15, adding additional support for our final enrollment push.

• The prior direct mail drop in December provided substantial near and long term incremental activity (measured here by specific 800# phone call volume)

![Graph showing call volume over time]
Web Site Performance Remains Strong

- Web traffic has stabilized heading into February’s media push.
- However account creation remains strong heading towards March.

### Weekly web visitors vs. Weekly account creation

- **11%** increase from 11/3 to 11/10
- **7%** increase from 11/17 to 11/24
- **8%** increase from 12/1 to 12/8
- **11%** increase from 12/15 to 12/22

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31
Field Activity Producing Solid Results

- Field team is closing in on enrolling more than 5,000 individuals during the enrollment period.
- Stores and fairs have enrolled 371 individuals halfway through February.

### New Britain

<table>
<thead>
<tr>
<th></th>
<th>OCT</th>
<th>NOV</th>
<th>DEC</th>
<th>JAN</th>
<th>FEB</th>
<th>NB</th>
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<td></td>
<td></td>
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<tr>
<td>Enrollments</td>
<td>10</td>
<td>320</td>
<td>1,143</td>
<td>772</td>
<td>186</td>
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<td>78</td>
<td>929</td>
<td>1,843</td>
<td>1,141</td>
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### New Haven

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<tr>
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<tr>
<td>Enrollments</td>
<td>105</td>
<td>538</td>
<td>427</td>
<td>56</td>
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<td>Visitors</td>
<td>471</td>
<td>1,236</td>
<td>929</td>
<td>167</td>
<td>2,803</td>
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### Fairs

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<th>JAN</th>
<th>FEB</th>
<th>FAIR</th>
<th>TOTAL</th>
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<tr>
<td>Total</td>
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<td></td>
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</tr>
<tr>
<td>Enrollments</td>
<td>230</td>
<td>565</td>
<td>393</td>
<td>129</td>
<td>1,317</td>
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<td>Visitors</td>
<td>487</td>
<td>1,274</td>
<td>656</td>
<td>237</td>
<td>2,654</td>
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### Grand Totals

<table>
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<th>NB</th>
<th>NH</th>
<th>FAIR</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Enrollments</td>
<td>2,431</td>
<td>1,126</td>
<td>1,317</td>
<td>4,874</td>
</tr>
<tr>
<td>Visitors</td>
<td>4,353</td>
<td>2,803</td>
<td>2,654</td>
<td>9,810</td>
</tr>
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</table>
Winter Concert Promotion

• Our winter concert/event promotion campaign continues to show solid performance

• With a heavy online and social media emphasis, effort looks to build awareness and gather leads in a scalable fashion

<table>
<thead>
<tr>
<th>Metric</th>
<th>Value</th>
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<tbody>
<tr>
<td>Total Facebook Entries:</td>
<td>128,251</td>
</tr>
<tr>
<td>Total Facebook Shares:</td>
<td>91,147</td>
</tr>
<tr>
<td>Total New Likes for AHCT:</td>
<td>20,902</td>
</tr>
<tr>
<td>From 4,773 to 25,675</td>
<td></td>
</tr>
<tr>
<td>Opt-ins for AHCT Info:</td>
<td>36,991</td>
</tr>
</tbody>
</table>
March Enrollment Focus

**Sales team gearing up for final enrollment push**

- NIPA team coordinating final community outreach activity
  - Launching focused marketing effort entitled “Because I Got Covered”...
  - Coordinating 100 community enrollment events in final 45 days
- Field staff concluding enrollment fairs in mid-March
  - Staff will be focused on store front enrollments
- Top brokers are being engaged to participate in final enrollment activities
- CAC’s leveraging resources for March outreach efforts
  - Distribution of letter to known uninsured
  - Equipped with AHCT collateral
  - Additional CAC’s have been trained
All Payer Claims Database Update
APCD Update

Vendor Selection RFP

- We have released RFP for selecting a vendor for data management & analytics products on Jan. 27, 2014
- By Feb. 14 we finished the Q&A part
- We received 16 intents to bid declarations
- Final date to receive RFP is set at Feb. 28, 2014
- Final date to select a vendor is set at Week of March 24th

APCD Vendor Selection Process

- An APCD Vendor selection committee was formed, comprising of 9 members
- This committee is drawn from 2 members from the AHCT’s Board and APCD Advisory Group; rest 7 are drawn from AHCT’s SLT and other SMEs (contracting, finance, IT, HSR, etc.)
- RFPs will be graded
- On-site presentations will be arranged for TOP 3 vendors
- Final selection will be based on both RFP responses and on-site presentations
APCD Update (cont.)

**APCD Transparency**

- In an effort to be transparent and accessible, APCD has created multi level strategies to reach the public
  - Regular bi-monthly meetings with APCD Advisory Group
  - Regular meetings with various subcommittees
  - Engage other stakeholders from State Agencies, Universities, Foundations, Professional Groups, Consumer Advocates, Research Agencies
  - Continue to engage with various entities to explore additional components that could be added to the APCD data
  - Provided wide media access to APCD’s future objectives, types of reports and information for the consumers
  - Developing various capabilities to support Exchange enrollment process with purchasing decision support
APCD Update (cont.)

Data Submission Preparation:
- Payer registration completed on 1/10/14
- Data submission communication/planning sessions with payers are underway
- Issue resolution processes, submission assistance resources and documents, and project plans being developed to facilitate submission process
- Submitter profiles being developed to expedite vendor on-boarding upon contract finalization

HHS Reporting Compliance
- Per 78 Fed. Reg. 37032 (June 19, 2013) AHCT is required to submit eligibility and enrollment reports to HHS at regular intervals
- Access Health Analytics is developing and implementing process to satisfy federal reporting requirements in an efficient manner
February 2014
Finance Update
Finance Update

- Finance focus continues on tasks needed to effectively meet the commitments required by the transition to a “Going Concern.”
- As part of securing financial resources, the market based assessment notices were sent out at the end of January.
- Business process will be enhanced as the contract for an end user analytical and reporting tool vendor nears completion. The product includes a new general ledger and a customer relationship management (CRM) application.
- Regulatory requirements continue to be met:
  - The semi-annual Grant Progress Reports due to the Department of Health and Human Services (HHS) by January 31, 2014 were submitted. Separate progress reports are required for each grant.
  - The Second Quarter 2014 Quasi-Public Financial and Personnel Status Report was submitted to the Office of Fiscal Analysis.
  - The quarterly Federal Financial Reports due to HHS’s Department of Payment Management by January 31, 2014 were submitted. One consolidated report is required for all active Federal grants.
  - The January 2014 “Annual Report from the Chief Executive Officer” was completed and submitted to the Governor in accordance with Section 12 of Public Act No. 11-53.
  - The HHS Office of Inspector General Eligibility audit, which began January 6th, continues. Finance is coordinating and facilitating their audit activities and the audit has been proceeding without major issues.
- The fiscal year 2nd Quarter full year forecast, which displays an unfavorable variance vs the prior forecast of $0.9M, follows.
access health CT
Connecticut’s Health Insurance Marketplace

Q2 - 2014 Fiscal Year Forecast
Q2 Forecast - Focus

• **Variance to Q1 Forecast**
  – Anticipated cost to cover the Q2 Forecast Variance to Q1 Forecast is currently funded, however continued trend increases could impact 2014 portion of FY 15 spend level
  – Discussions underway with CMS on level I supplement

• **Risks**
  – Delayed payment from DSS can impact future sustainability margin
  – Unexpected Staffing Needs
  – New Federal Mandates
  – Uncertain Contractual Obligation

• **Directional Impact to 2015**
  – Assuming the current run rate, the projected cost for the 1st year of self-sustainability increases slightly
  – Increase in cost during the first year of self-sustainability has negligible impact on the number of months of contingency that is maintained from the Market Assessment month
  – Various strategic decisions could impact sustainability revenue sources and amounts
Q2 2014 Fiscal Year Forecast
Overview

### Consolidated - Q2 2014 Full Year Fiscal Forecast

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<thead>
<tr>
<th></th>
<th>Q1 FCST</th>
<th>Q2 FCST</th>
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</thead>
<tbody>
<tr>
<td>Salaries &amp; Fringe</td>
<td>$8,052,507</td>
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<tr>
<td>Consultants</td>
<td>$72,146,463</td>
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<tr>
<td>Equipment</td>
<td>$1,647,835</td>
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<td>Supplies</td>
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<td>Travel</td>
<td>$176,549</td>
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<td>Medicaid Recovery</td>
<td>$(12,641,546)</td>
<td>$(13,250,765)</td>
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<tr>
<td>Other</td>
<td>$6,315,571</td>
<td>$6,149,766</td>
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<tr>
<td><strong>Grand Total</strong></td>
<td>$75,726,730</td>
<td>$76,625,865</td>
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</table>

Fiscal Year 2014
Q1 to Q2 Forecast Compare

- Q2 Forecast is $0.9M unfavorable to Q1 Forecast
  - Marketing & Advertising is higher than anticipated
  - Temp labor greater than anticipated
  - Technology is running as anticipated
  - Salary & Fringe favorability – Hiring
  - Medicaid Recovery – running slightly higher
Q2 2014 Fiscal Year Forecast
Operational Vs. Build Cost

Distribution
Q2 14 Fiscal Year Forecast

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<tr>
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<td>$40,846,529</td>
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<td>Operational</td>
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<td>$35,247,898</td>
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Q2 2014 Fiscal Year Forecast
2015-2016 Lookout

2015 Operating Target
$34.9M

2015 Operating Projection
$37.1

Emerging Strategic Directions
Executive Session
Adjournment