Agenda

A. Call to Order and Introductions
B. Public Comment
C. Review and Approval of Minutes
D. CEO Update
E. Vice-Chair Election
F. Policy/Procedure
G. Open Enrollment Update
H. Operations Update
I. Plan Management
J. Adjournment
Public Comment
Review and Approval of Minutes (Vote)
CEO Update
Vice-Chair Election
Policy/Procedure
ADOPTION OF EMPLOYER APPEALS PROCEDURE ON EMERGENCY BASIS: FINDING REQUIRED UNDER CONN. GEN. STAT. § 1-121

• Section 1-121 of the Connecticut General Statutes permits a quasi-public agency to adopt a procedure upon fewer than thirty (30) days’ notice if the agency finds that imminent peril to public health, safety or welfare requires such adoption. The Exchange finds that it must adopt an employer appeals process on fewer than thirty (30) days’ notice because without such adoption, employers and employees are left in limbo with respect to significant financial risks.

• The Exchange is required to send a notice through its Integrated Eligibility System to any employer when their employee has been deemed eligible for Premium Tax Credits (PTC) and or Cost Sharing Reductions (CSR). Employers and employees have rights to appeal under federal law, but the federal government has yet to adopt any appeal procedures. Without the additional certainty that an appeal can provide, employers cannot plan for the financial impact of significant penalties and employees will not know if their premium tax credits are in jeopardy and their household budgets subject to a substantial additional expense. It is critical to get this information into the hands of employers and consumers as soon as possible.
ADOPTION OF EMPLOYER APPEALS PROCEDURE ON EMERGENCY BASIS: FINDING REQUIRED UNDER CONN. GEN. STAT. § 1-121

• For the 2015 Plan Year, the Exchange has received 163 calls from employers asking for information on how they should proceed or challenging their potential penalty in response to the notice they received. The Exchange expects this number will increase as additional notices are sent to employers during the 2015 Plan Year. The Employee’s eligibility for PTCs and/or CSRs may change due to the Employer’s Appeal finding. As a result, a significant number of employers and employees are immediately affected by this situation. Since the appeal process can take up to 180 days to complete, it is critical to start the appeals process as soon as possible so that the Exchange can provide much-needed answers to Connecticut businesses and citizens.
Open Enrollment Update
Open Enrollment Membership Update

- Current membership across all plans and programs stands at **471,881** individuals
- Since the start of open enrollment, we have processed nearly **90k** QHP enrollments and **132k** Medicaid enrollments.
  - Of these **24,287** were new QHP customers, and **83,749** were new Medicaid customers.
  - Net new enrollment for the OE period thus far stands at **108,036** (78% Medicaid/22% QHP)
Additional Membership Information

- To date, ConnectiCare has seen the majority of new enrollments (43%)
- Anthem is currently taking 1 out of every 3 new enrollments
- Healthy CT has seen a dramatic uptick in selection, with one in five individuals selecting their plans.

<table>
<thead>
<tr>
<th>2015 OE Carrier Churn</th>
<th>New 2015 Enrollees</th>
<th>(% of Total)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anthem Blue Cross and Blue Shield</td>
<td>7,606</td>
<td>31%</td>
</tr>
<tr>
<td>ConnectiCare Benefits Inc</td>
<td>10,430</td>
<td>43%</td>
</tr>
<tr>
<td>HealthyCT Inc</td>
<td>5,074</td>
<td>21%</td>
</tr>
<tr>
<td>UnitedHealthcare</td>
<td>1,177</td>
<td>5%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>24,287</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>
### Additional Membership Information

- The majority of both new and renewing enrollee’s continue to choose silver level coverage
  - For new enrollee’s, roughly half (or 53%) are choosing silver level plans, followed by 28% selecting bronze, and approximately 14% gold.
  - Both catastrophic and platinum plans continue to see very small selection

<table>
<thead>
<tr>
<th>Enrollee Status</th>
<th>Total</th>
<th>Catastrophic</th>
<th>Bronze</th>
<th>Silver</th>
<th>Gold</th>
<th>Platinum</th>
</tr>
</thead>
<tbody>
<tr>
<td>New 2015 Enrollee</td>
<td>24,287</td>
<td>614</td>
<td>6,863</td>
<td>12,941</td>
<td>3,336</td>
<td>533</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2.5%</td>
<td>28.3%</td>
<td>53.3%</td>
<td>13.7%</td>
<td>2.2%</td>
</tr>
<tr>
<td>Repeat Enrollee</td>
<td>65,582</td>
<td>711</td>
<td>11,046</td>
<td>41,529</td>
<td>12,070</td>
<td>226</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.1%</td>
<td>16.8%</td>
<td>63.3%</td>
<td>18.4%</td>
<td>0.3%</td>
</tr>
</tbody>
</table>
Enrollment Trends

- QHP enrollment data by day indicates an increased tendency for deadline driven sign up activity.
- Average daily enrollment, excluding the 5 days leading up to 12/15, stands at 337 enrollments per day.
- For the 5 days heading to 12/15, that average was 1,424 per day.
- Post 12/15 average daily enrollment now stands at 248 per day.
In-Person Assistance Updated

- Community Enrollment Partner (CEP) locations are witnessing robust activity
  - More than 2,800 visitors have gone to a CEP location
  - 1,303 enrollments have taken place as a result (a 47% conversion)
  - 462 QHP, 841 Medicaid

- During the same time frame last year, mobile enrollment fairs had witnessed attendance of 1,869 visitors and 864 enrollments.

- Our new strategy of consistent community enrollment resources has witnessed a 50% increase in visitors and a 50% increase in enrollments.

* Weeks are Mon-Sun

* Holiday week
Store Front Updated

- Store front activity continues to build as we head towards OE’s end
  - More than 6,200 individuals have visited our stores since 11/15
  - 3,540 enrollments have taken place as a result (a 57% conversion rate)
    - 1,459 QHP, 2,081 Medicaid

- During the same time frame last year, store fronts saw attendance of 5,224 visitors and 2,534 enrollments.

- With a well established retail presence in year 2, we have seen a 19% increase in visitors and a 40% increase in enrollments.
The [www.accesshealthct.com](http://www.accesshealthct.com) website has had highly active usage since it went live and during this open enrollment.

<table>
<thead>
<tr>
<th>Metric</th>
<th>Description</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Page Views since October 01, 2013</td>
<td>The total number of page view on the website since the system went live</td>
<td>39,881,732</td>
</tr>
<tr>
<td>Total visitors since October 01, 2013</td>
<td>The total number of visitors to the website since the system went live</td>
<td>1,438,902</td>
</tr>
<tr>
<td>Total page view during this open enrollment</td>
<td>The number of page views since this open enrollment started on November 15, 2014</td>
<td>8,044,891</td>
</tr>
<tr>
<td>Total visitors during this open enrollment</td>
<td>The number of visitors to the website since this open enrollment started on November 15, 2014</td>
<td>292,130</td>
</tr>
</tbody>
</table>
Consumers are using the ahCT Mobile App actively to create accounts, submit verifications, view messages and buy unsubsidized QHPs

<table>
<thead>
<tr>
<th>Metric</th>
<th>Description</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>App Downloads</td>
<td>Number of Apps downloaded on iOS and Android</td>
<td>18,495</td>
</tr>
<tr>
<td>Verification Documents Uploaded</td>
<td>Number of verification documents uploaded</td>
<td>6,277</td>
</tr>
<tr>
<td>Number of Accounts Created</td>
<td>Number of Account creation attempts</td>
<td>30,875</td>
</tr>
<tr>
<td>Number of QHP Applications</td>
<td>Number of Applications signed and submitted using Mobile Enroll</td>
<td>489</td>
</tr>
<tr>
<td>Number of Message &amp; Notice Views</td>
<td>Number of messages, notices and documents viewed in the mobile Inbox</td>
<td>95,830</td>
</tr>
</tbody>
</table>
Operations Update
Operating Metrics

Total Membership – 471,881

- Insured without APTC: 20,664
- Insured with APTC: 69,205
- Medicaid: 382,012

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Operating Metrics

Insured Membership - 89,869

- Insured without APTC
  - Oct 2013: 20,664
  - Jan 2014: 69,205

- Insured with APTC
  - Oct 2013: 89,869
  - Jan 2014: 89,869
End of Open Enrollment Preparations

- **Call Center**
  - IVR
    - Prioritize customer enrollment through specialized IVR routing
    - Enable upfront messaging in the IVR
    - Allow callers the option of a call back
  - Expanded Hours of Operation
    - 1/15/15 open 8am to 10pm
    - 2/14/15 open from 10am to 6pm
    - 2/15/15 (Sunday) open from 10am to 12am (midnight)

- **Enrollment Centers**
  - Hours on Feb 15th will be extended until 12am (midnight)

- **Special Events**
  - Working with Urban League of Hartford’s Health Fair – Date to be determined
1095-A Consumer Support

**Consumer Education**
- AHCT Website “Learn More Tab” updated with 1095 – Dec 22, 2015
- Tri-fold 1095 A pamphlet sent with 1095-A forms – last week of January 2015

**Consumer Support**
- AHCT Main 1095 IVR Transfer Branch Activation – Jan 20, 2015
- 1095 Call Center Go-Live – Jan 26, 2015
- AHCT Website ‘Learn More Tab’ updated with 1095 information

**Training**
- 1095 Call Center Training – Jan 14, 2015
AHCT Plan Management

KEY ACCOMPLISHMENTS FOR 2014

- QHP Application Review and Certification for 2015 Plan Year
- Plan Management Portal Redesign
  - Enhanced Data Review
  - Consumer Portal Simulation
  - Data Correction Functionality
  - Carrier Plan Preview
- Stand-Alone Dental Consumer Shopping Experience
- Uniform Schedule of Benefits Template Development and Implementation
- Mapping Software Acquisition, Training, Execution
- Essential Community Provider (ECP) Outreach
- Certification Review Data Integrity Comparison Enhancements
QHP Application Review: Primary Findings (2015 PY)

- Plans & Benefits Template (PBT) data entry mismatch
- Conflicting cost sharing information between PBT & Prescription Drug Template
- Inclusion of outdated information
- Issuer Company Logo: submission specifications not followed
- Unique Plan Design – supporting documentation not submitted for each plan
- SHOP rates template incomplete
Expected Changes for QHP Review Process: 2016 Plan Year

QHP APPLICATION

- Develop detailed QHP Application instructions to enforce AHCT submission guidelines
- Responsible party quality assurance sign off required prior to submission/resubmission
- Results of CMS QHP Application Review Tools required as part of submission
- Include clarification of differences between CMS QHP templates and AHCT Data requirements

IMPROVEMENTS TO CMS PLANS BENEFITS TEMPLATE

- State EHB Reference Table to be updated
- Explanation Field: no longer requires completion of EHB Variance Reason
- Subject to Deductible fields on Benefits Package tab to be removed
- URLs for SBC moved to Cost Share Variance tab (specific to plan variant level)
- “Not Applicable” option added to each cost sharing drop down list box
- Modifications to drop down list box for certain Inpatient Hospital benefits

SCHEDULE OF BENEFITS

- Variable filing not permitted
- Less prescriptive for non-standard benefit language and cost sharing
Issuer & Qualified Health Plan (QHP) Certification

Key Considerations about 2016 Plan Year:

• Open Enrollment period will begin earlier and is shorter (10/1/15 - 12/15/15)

• All currently participating QHP Issuers will have to be certified

• AHCT has been working with the Connecticut Insurance Department (CID) to coordinate the CID rate & form filing review timeframe w/ QHP certification timeframe

• Small Employer Health Options Program (SHOP) group size increases from 2-50 employees to 2-100 employees
# AHCT 2016 Plan Year Key Deliverables

<table>
<thead>
<tr>
<th>Deliverable/Milestone</th>
<th>Target Dates (subject to change)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proposed HHS Notice of Benefit and Payment Parameters and Actuarial Value Calculator (AVC) Released by CMS</td>
<td>November 21, 2014</td>
</tr>
<tr>
<td>Present Proposed AHCT Standard Plan Designs at Board of Directors (BOD) Meeting</td>
<td>February 19, 2015 (or a Special BOD Meeting)</td>
</tr>
<tr>
<td>HHS Notice of Final Benefit and Payment Parameters &amp; Final AVC for 2016 Released</td>
<td>March 5, 2015 (TBD)</td>
</tr>
<tr>
<td>Release QHP Issuer Solicitation and Notice of Intent</td>
<td>March 17, 2015</td>
</tr>
<tr>
<td>Present Final Standard Plan Designs at BOD Meeting</td>
<td>March 26, 2015</td>
</tr>
<tr>
<td>QHP Issuer Non-Binding Notice of Intent Submission Deadline</td>
<td>March 31, 2015</td>
</tr>
<tr>
<td>Deliverable/Milestone</td>
<td>Target Dates (subject to change)</td>
</tr>
<tr>
<td>---------------------------------------------------------------------------------------</td>
<td>----------------------------------</td>
</tr>
<tr>
<td>Publish 2016 QHP Issuer Application, Instructions &amp; Checklist</td>
<td>April 20, 2015</td>
</tr>
<tr>
<td>QHP Applications, Template Data, Supporting Documents due to AHCT</td>
<td>May 18, 2015</td>
</tr>
<tr>
<td>AHCT Review of QHP Issuer Data Submissions / Resubmissions</td>
<td>May 19 – August 14, 2015</td>
</tr>
<tr>
<td>Certification of QHP Issuer Plan Submissions</td>
<td>July 30 – September 12, 2015</td>
</tr>
<tr>
<td>Upload QHP Plan Data into AHCT Plan Management Staging System</td>
<td>August 17 – August 20, 2015</td>
</tr>
<tr>
<td>AHCT/QHP Issuer Plan Preview Sessions</td>
<td>August 24 – September 4, 2015</td>
</tr>
<tr>
<td>Activate Approved QHP Data in PM System</td>
<td>September 16, 2015</td>
</tr>
<tr>
<td>Certified QHP Plan Data Made Available to CMS</td>
<td>September 16, 2015</td>
</tr>
<tr>
<td>QHP Plan Data Published in AHCT Consumer Portal</td>
<td>October 1, 2015</td>
</tr>
<tr>
<td>Plan Year 2016 Open Enrollment Period</td>
<td>October 1 – December 15, 2015</td>
</tr>
</tbody>
</table>
QHP Application Development: Influences/Dependencies

- CMS Final Regs / AVC
- Final Actuarial Consultant Review
- Draft CMS Benefit & Payment Parameters Regs
- Draft CMS Actuarial Value Calculator (AVC)
- Draft CMS Letter to Issuers (FFMs)
- AHCT Policy Team Review of CMS Draft Regs & AVC
- Initial Actuarial Consultant Review

Mar 5*
Feb 27*
Feb TBD
Feb 19: AHCT BOD Meeting (or Special Meeting)
Feb TBD
Mar 17
Nov 21
Dec 19
Dec 22
Jan 14
Jan 20
Jan 16

All Dates Subject to Change
*Anticipated Release Date

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QHP Application Development: Influences/Dependencies

Release of QHP Application
4/20/15

- **AHCT QHP Standards / Requirements**
- **Draft CMS Regulations**
- **Draft CMS Letter to Issuers (FFMs)**
- **Lessons Learned (2015 Plan Year)**
- **Updated ECP Listing**
- **AHCT Schedule of Benefits Template Design**
- **Federal QHP Template Design**
- **Federal Attestation Requirements**
- **AHCT PM Team System Enhancements**
- **AHCT Web Portal Design**
- **SERFF Submission Process**
- **2016 Renewal Process / Crosswalk**

All Dates Subject to Change
*Anticipated Release Date
QHP Certification: Requirements & Dependencies

Attestations: SBMs & CT Specific

CID Filing Approval: Form & Rate

Actuarial Memorandum & URRT

Certification of Good Standing

Prescription Drug Formulary

Plan Design Submission & Unique Plans

Quality Reporting & Accreditation

Meaningful Difference & Non-Discrimination

Quality Improvement

Network Adequacy (including ECPs)

Cost-Sharing Requirements

QHP Templates

*Ultimately Leads to Issuer & QHP Certification
Plan Management Certification: Summary

LIFECYCLE IS CONTINUOUS!

Certification Completed

Federal Regulations & Guidance Impact

QHP Solicitation Released

AHCT Standard Plans

QHP Application Released

System Support Finalized

Submission Review
SHOP Sales Summary

<table>
<thead>
<tr>
<th></th>
<th>Groups</th>
<th>Subscribers</th>
<th>Members</th>
</tr>
</thead>
<tbody>
<tr>
<td>Book of Business</td>
<td>174</td>
<td>722</td>
<td>1153</td>
</tr>
<tr>
<td>1/1/2015</td>
<td>26</td>
<td>101</td>
<td>151</td>
</tr>
</tbody>
</table>
SHOP Re-launch - Marketing & Communications

“New Year, New Plans, New Opportunities”

• Email Blast to 659 brokers via Constant Contact
• Twitter and Facebook posts to promote links to SHOP website & brochure
  – Total Twitter audience = 2,427
  – Total Facebook audience = 39,996
• Presentations to key Chambers of Commerce
• Interviews the largest Connecticut Business Journals
• Newspaper advertisement in February issue of the Hartford Business Journal (Health Care Issue)
• Media interviews on Better Connecticut and WFSB (already airing)
Broker Awareness Initiatives

• One-on-one Broker Sales Calls
  – Target 48 broker visits per month
  – 2015 Plan Reviews
  – AHCT SB-specific Benefits Central Education
  – Group Dental Opportunities

• Training for New Brokers

• Broker-based Events
  – Structured Conferences /Trade Shows (i.e. National Association of Health Underwriters)

• Web Outreach
  – Benefit Central in February
  – New Web Site in place with tools and product
    (www.accesshealthctsmallbiz.com)
Small Group Employer Awareness

• Face-to-face
  – All renewing groups/broker to be contacted

• Direct Mail-based Outreach
  – Purchase of direct mailing list; target groups by size, ownership type, etc.

• New Web Site with key requested features:
  – Pay a bill
  – Get a quote
  – Tax credit estimator
  – Find a broker

• Partner with Associations that Support Small Businesses
Adjournment