

VERMONT HEALTH CONNECT

*AN UPDATE ON VERMONT'S INTEGRATED SYSTEM FOR
MEDICAID AND QHP ENROLLMENT*

HOUSE HEALTH CARE - MARCH 30, 2016

Overview

- Operations
- Metrics
- New Report on Health Coverage for Children
- Outreach and Education

OPERATIONS

Operational Overview

- Customer Support Center
 - Maximus onboarded additional staff this month
 - On track for improved March metrics
- COC and Integration are trending in right direction
 - Net inventory of change requests <4,000
 - Inventory of 834 integration errors is down 50% since March 1
- Tax forms (1095-A and B) mailing as expected
 - Mailed ahead of schedule
 - Corrected forms continue to be sent as needed
- New Medicaid eligibility thresholds take effect April 1
 - Medicaid eligibility to follow 2016 Federal Poverty Level (FPL)
 - QHP subsidies stay with 2015 FPLs for calendar year (in accordance with federal rule)

Change Requests

- VHC receives ~125 change requests per day.
- A similar processing rate kept the net inventory just over 4,000 for much of early March, but it is again trending down.

Net inventory:

- **5,577 on 2/1**
- **4,141 on 3/1**
- **3,883 on 3/28**

Goal is to get work queue in 2,000 - 3,000 range, which would be a sustainable level for being able to meet prescribed customer service targets.

Medicaid Renewals

- **Medicaid for the Aged, Blind and Disabled (MABD) -**
Redeterminations continue (1K/mo.)
- **Medicaid for Children and Adults (MCA) –**
 - Initial notices mailed to 3rd and final legacy group on 3/22
 - 8,300 households in 3rd group (26,300 total)
 - Overall response from first two groups: 56%
 - Much higher than previous efforts (~30% last year)
 - Higher in first group, driven by closure notice
 - Closure follows processing of paperwork
 - Second group will receive notice for 4/30 closure
 - Initial letters to first VHC-Medicaid group to mail by mid-April
 - Run through October (9K/mo.)

METRICS

Customer Support Center

Month	Calls Offered	Answer Rate	Calls Answered	Calls Answered <30 Sec	Transfer Rate
December 2015	38,969	86%	33,416	57%	13%
January 2016	42,769	83%	35,352	33%	10%
February 2016	45,043	81%	36,514	47%	9%

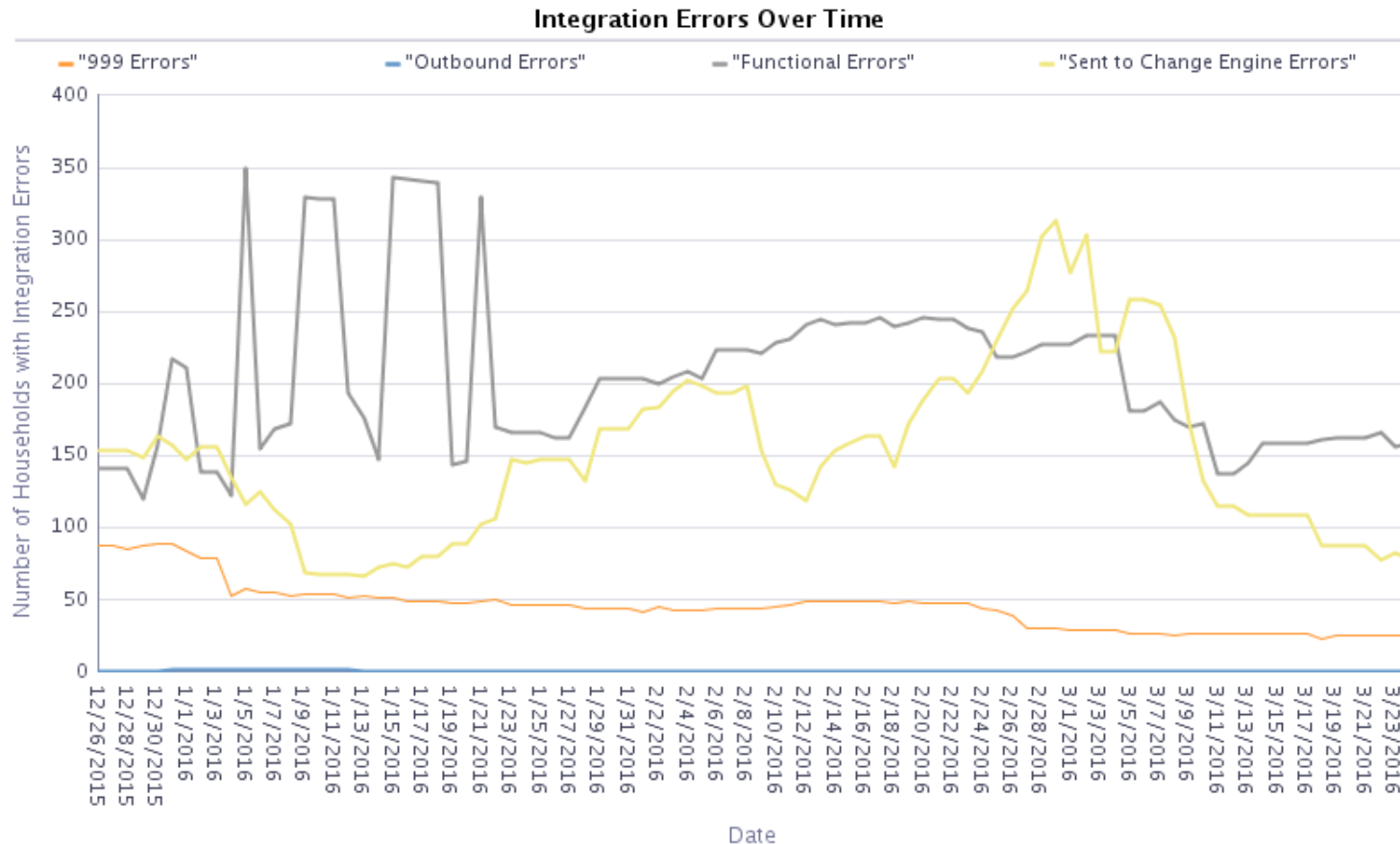
Week of 3/7	9,065	96%	8,709	81%
Week of 3/14	9,448	95%	8,989	79%
Week of 3/21	8,877	98%	8,682	87%

For context:

- SLA calls for answer rate of 60% of calls answered within 25 seconds.
- Maximus missed SLA last four months, had met SLA 11 of the previous 12 months.
- Average wait time over the three months of Open Enrollment:
 - Vermont: 5min 3sec
 - Federal: 10min 30sec

834 Transactions

- Inventory of known errors down 50% since March 1



In addition to working to resolve these known errors, VHC and carriers continue to work together to make sure other transactions are being integrated across systems as expected.

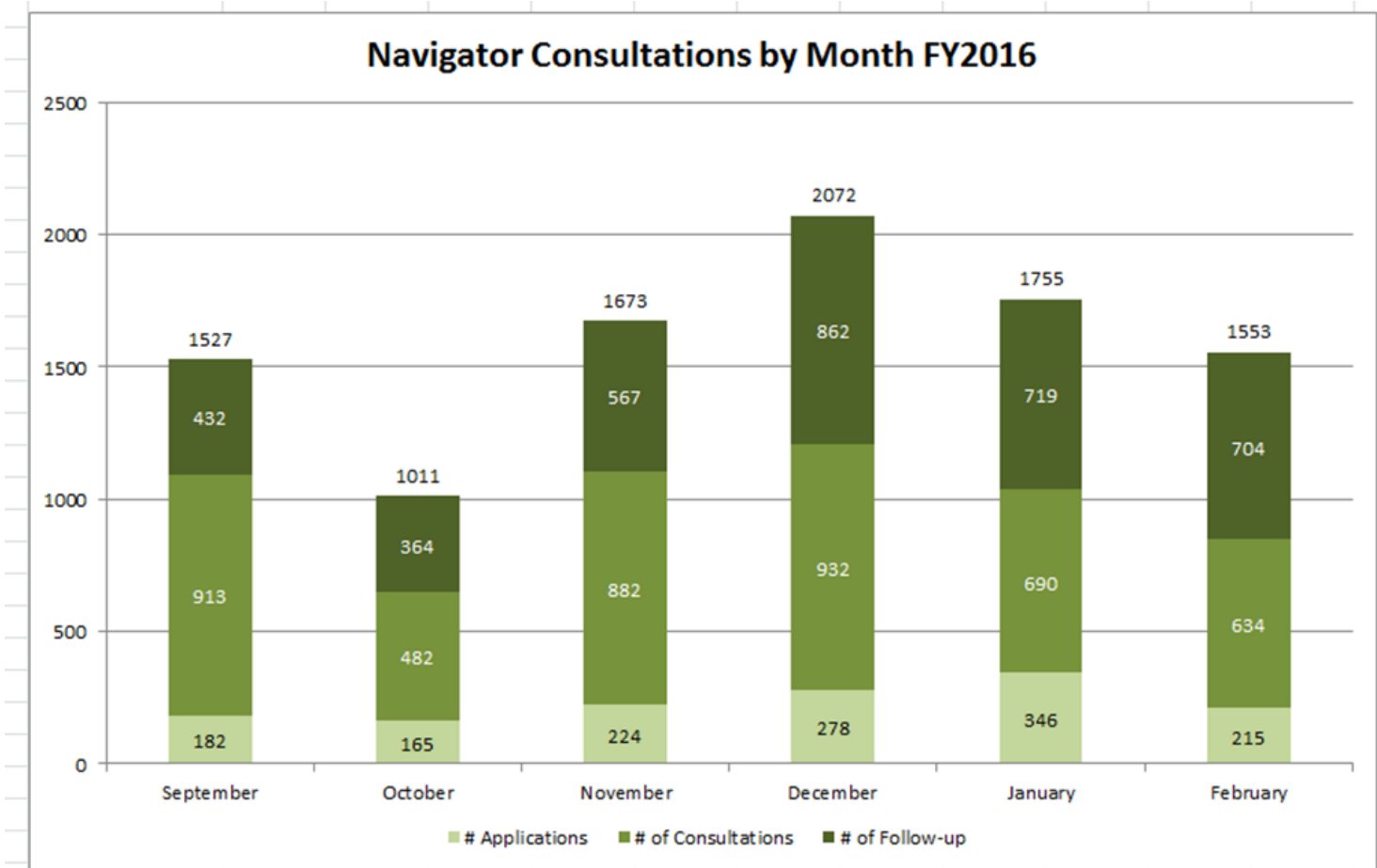
System Performance

Month	Availability	Avg Page Load Time (seconds)	Max Peak User	Visits
December 2015	99.99%	1.93	97	67,068
January 2016	99.86%	2.02	136	67,911
February 2016	99.91%	1.72	168	52,952

For context:

- SLA calls for Availability of at least 99.9% and Load Time no greater than two seconds.
- Except for January, has met Load Time SLA every month since spring upgrades.
- November and January were only two months since spring upgrades in which Availability SLA was missed.

Navigator Consultations

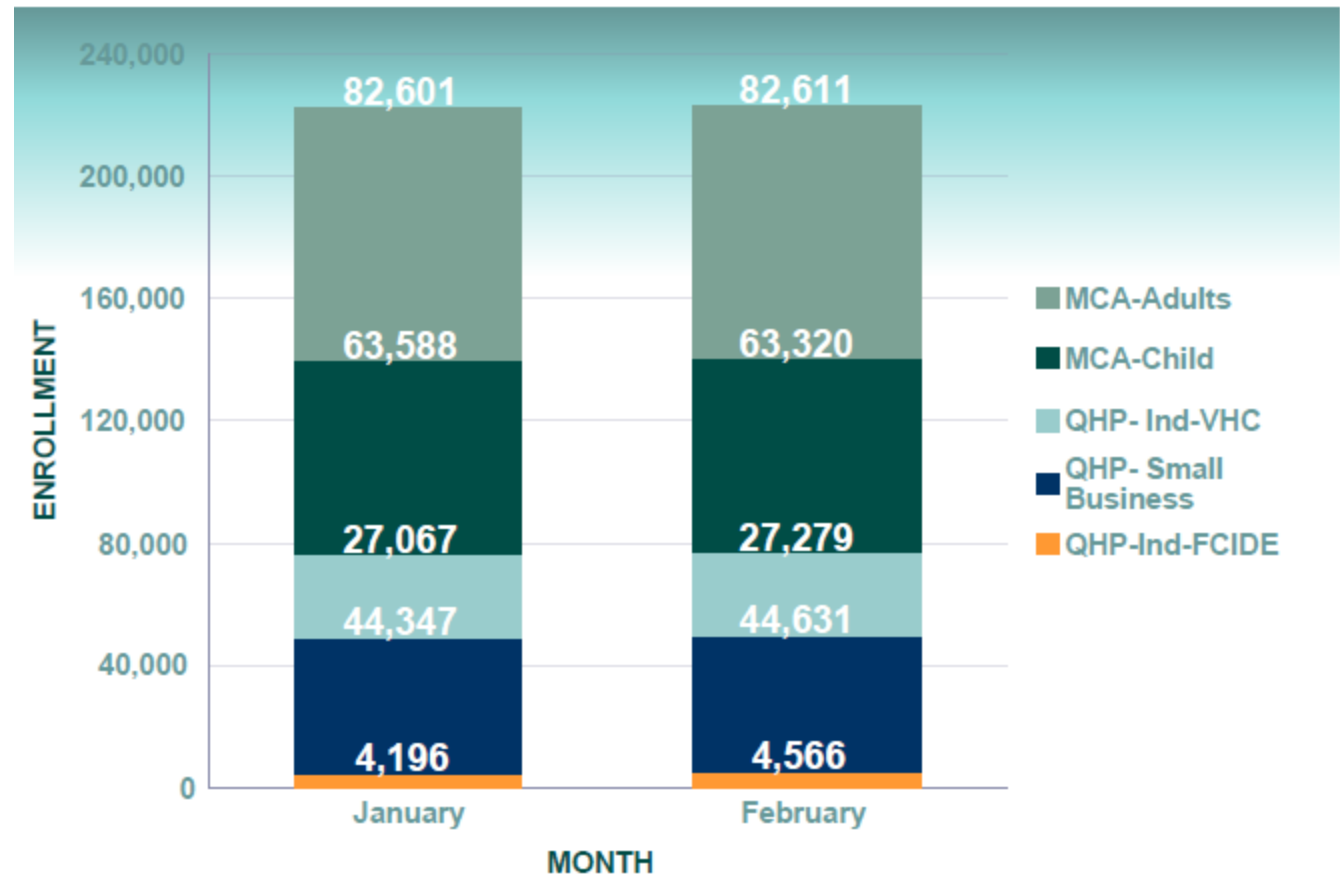


ENROLLMENT DATA

Current Coverage

Nearly 220,000 Vermonters are covered by VHC Qualified Health Plans and Medicaid for Children and Adults. Nearly 40,000 more (not shown) are covered by Medicaid for the Aged, Blind and Disabled.

INDIVIDUALS ENROLLED IN QUALIFIED HEALTH PLANS (QHP)
OR MEDICAID FOR CHILDREN AND ADULTS (MCA)

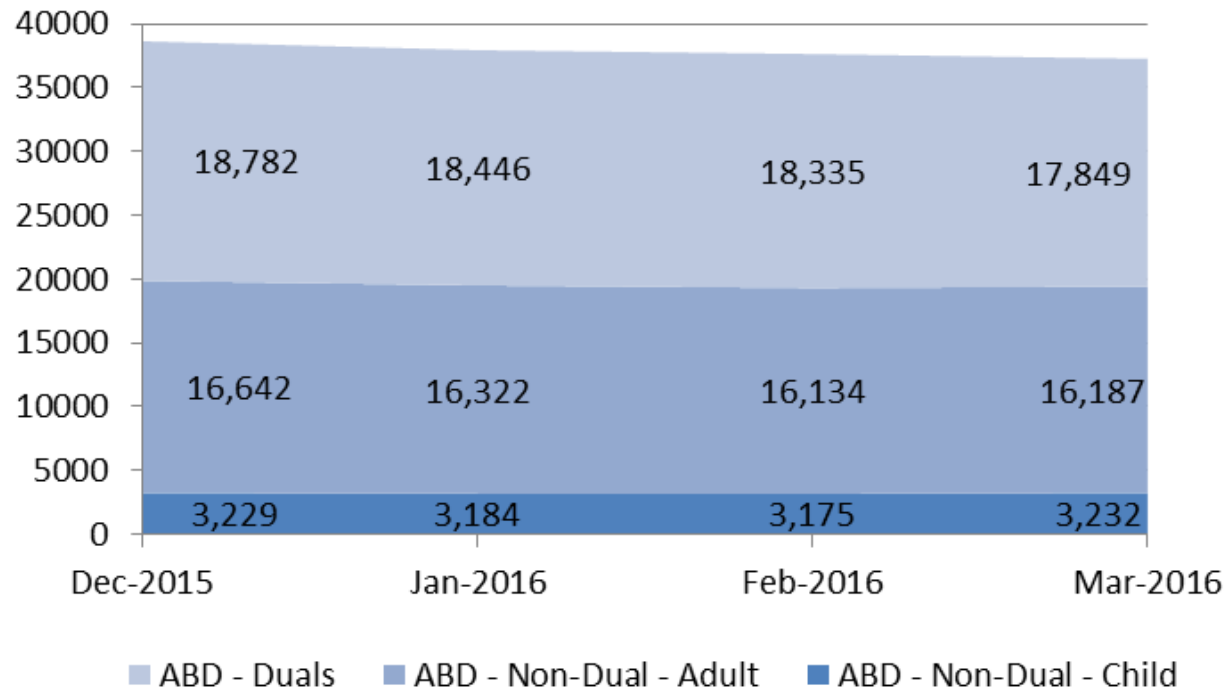


Note: Effectuated enrollments for QHP as reported by insurers including Full Cost Individual Direct Enrollment (FCIDE) to VHC Medicaid for Children and Adults (MCA) as reported by Vermont Health Connect and Vermont's legacy ACCESS system. MCA includes Dr. Dynasaur and CHIP but does not include Medicaid for the Aged, Blind, and Disabled (MABD).

Medicaid

Medicaid for the Aged, Blind and Disabled

Enrollment as assessed in March 2016*

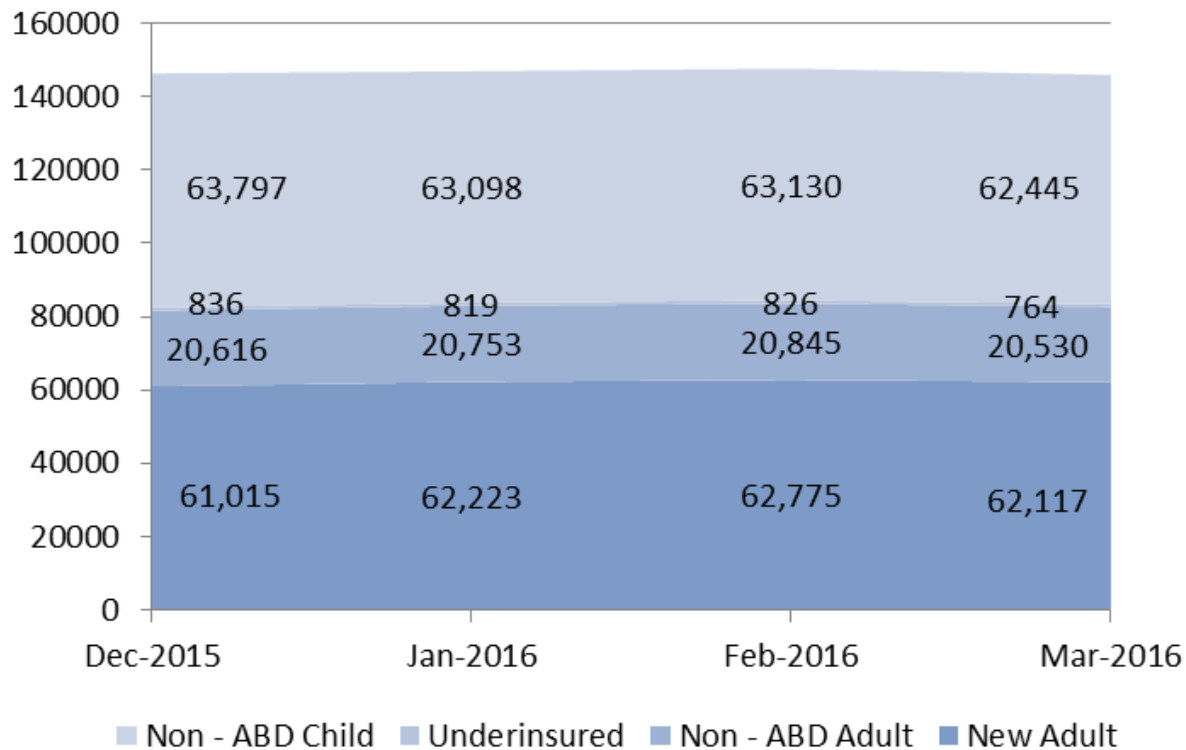


* Note that these numbers will change in future months due to retroactive eligibility changes.

Medicaid

Medicaid for Children and Adults

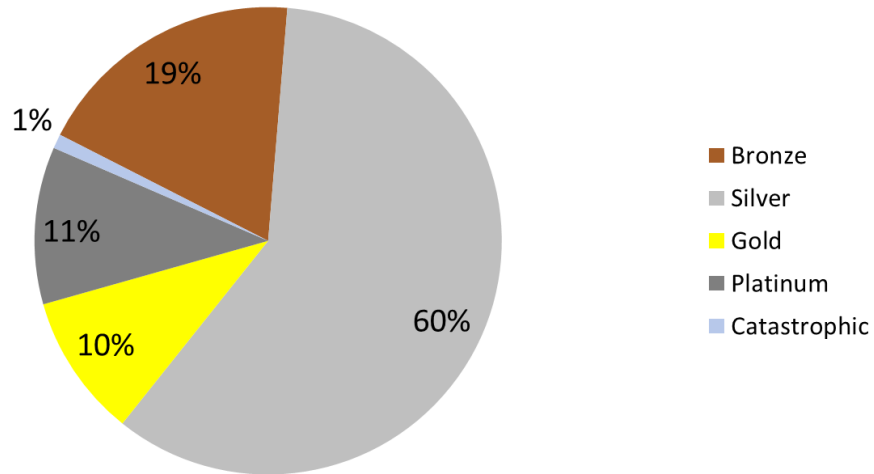
Enrollment as assessed in March 2016 *



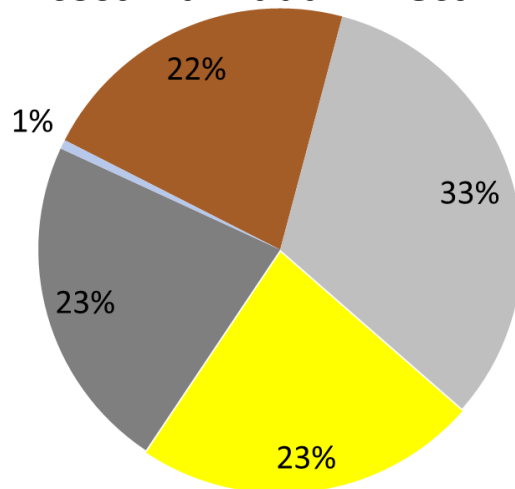
* Note that these numbers will change in future months due to retroactive eligibility changes.

Plan Selection - Metal Level

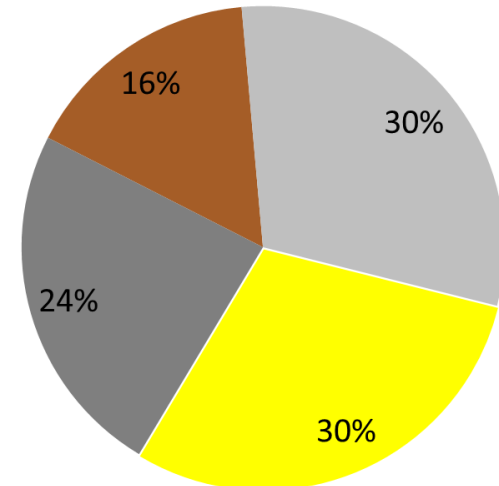
Individual – VHC-managed



Full-cost Individual Direct Enroll



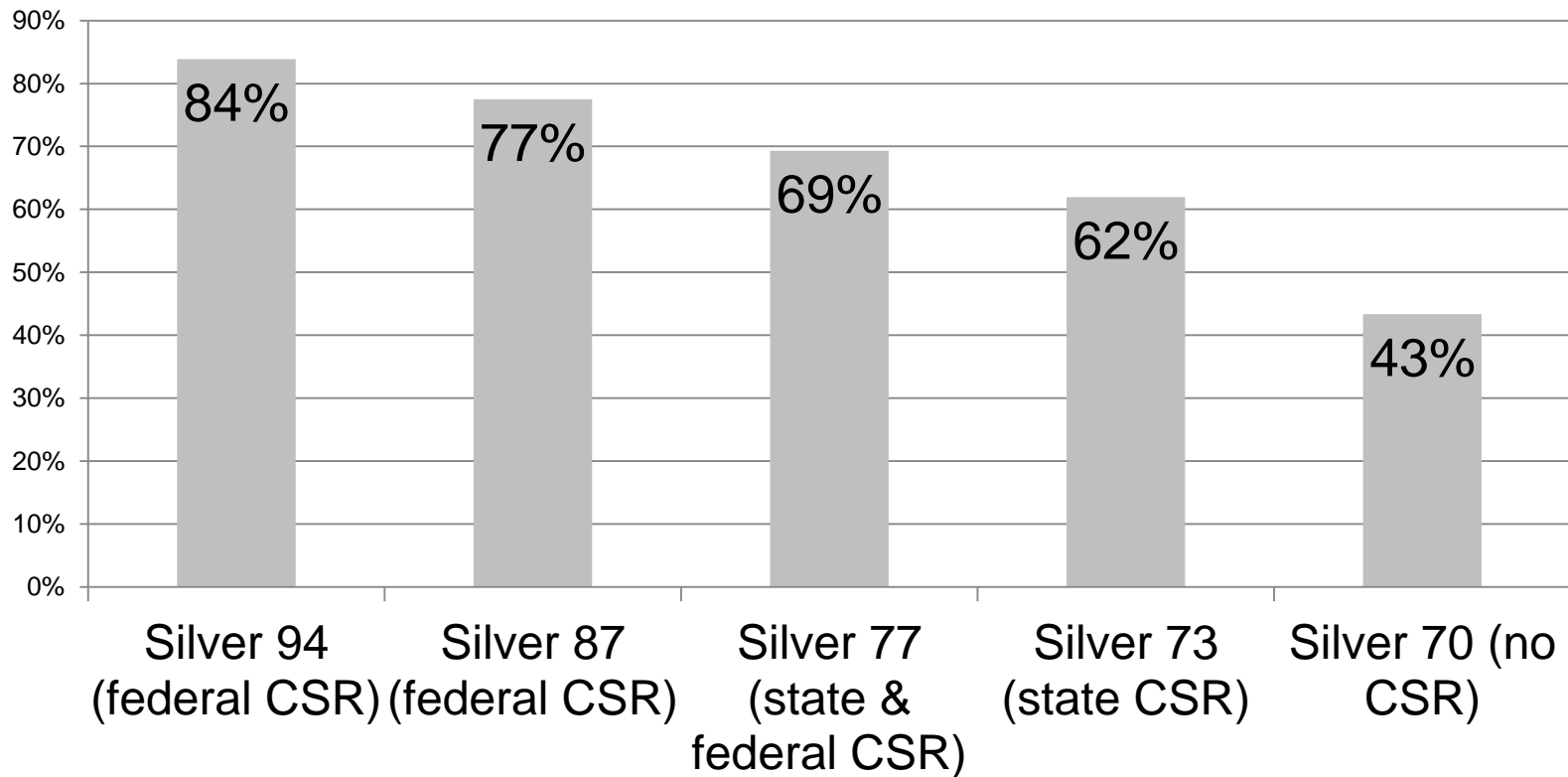
Small Business



Totals may not add to 100% due to rounding

QHP-Individual Enrollment - March 2016

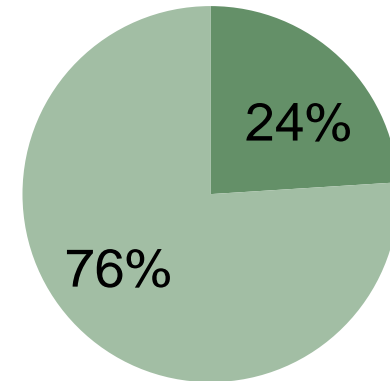
Silver Plan Enrollment as % of Eligible Customers in Each Income Bracket



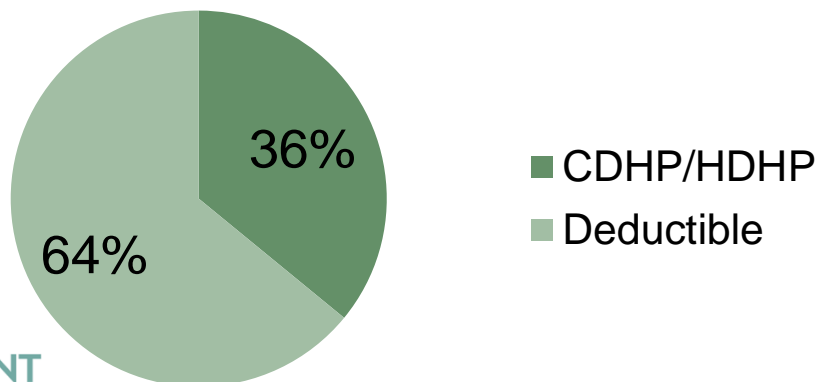
Plan Selection – Deductible Type

Vermont Health Connect customers are much less likely to enroll in a High Deductible Health Plan (HDHP) than Vermonters who direct enroll with a carrier.

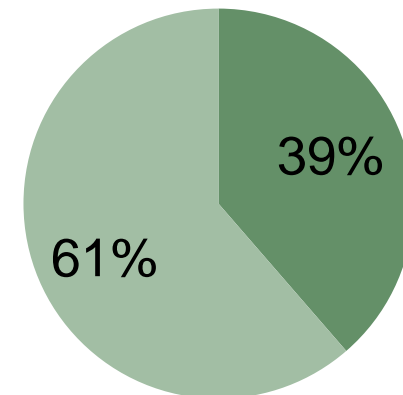
Individual-VHC



Full-Cost Individual Direct Enroll



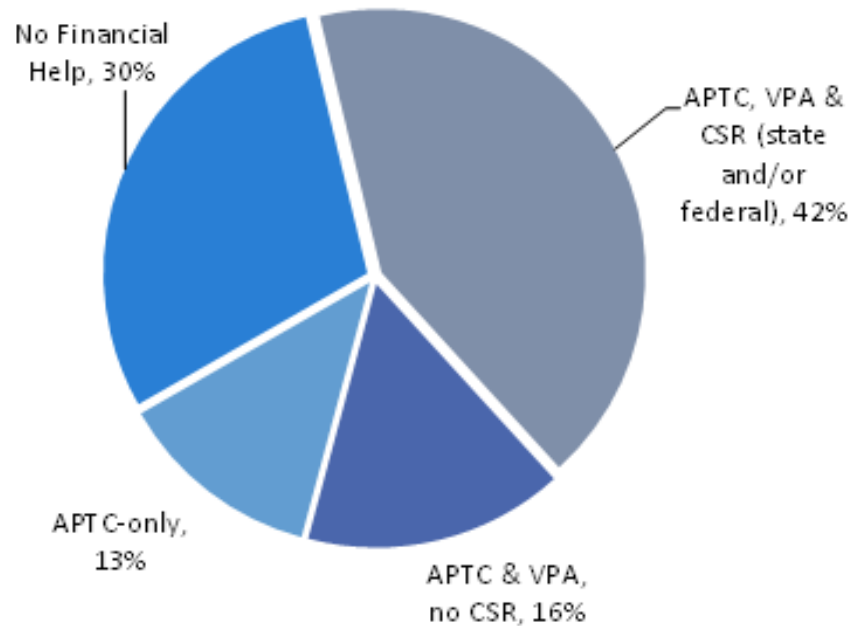
Small Business



Note: High Deductible Health Plans (HDHP) are also known as Consumer Directed Health Plans (CDHP)

Financial Help

Of Individuals in VHC-Enrolled Individual QHP



Of VHC-Enrolled Individuals:

- 70% receive premium subsidies
- 58% receive APTC & VPA, 13% receive only APTC (total not 100% due to rounding)

NEW REPORT ON HEALTH COVERAGE FOR CHILDREN

National Report on Health Coverage for Children

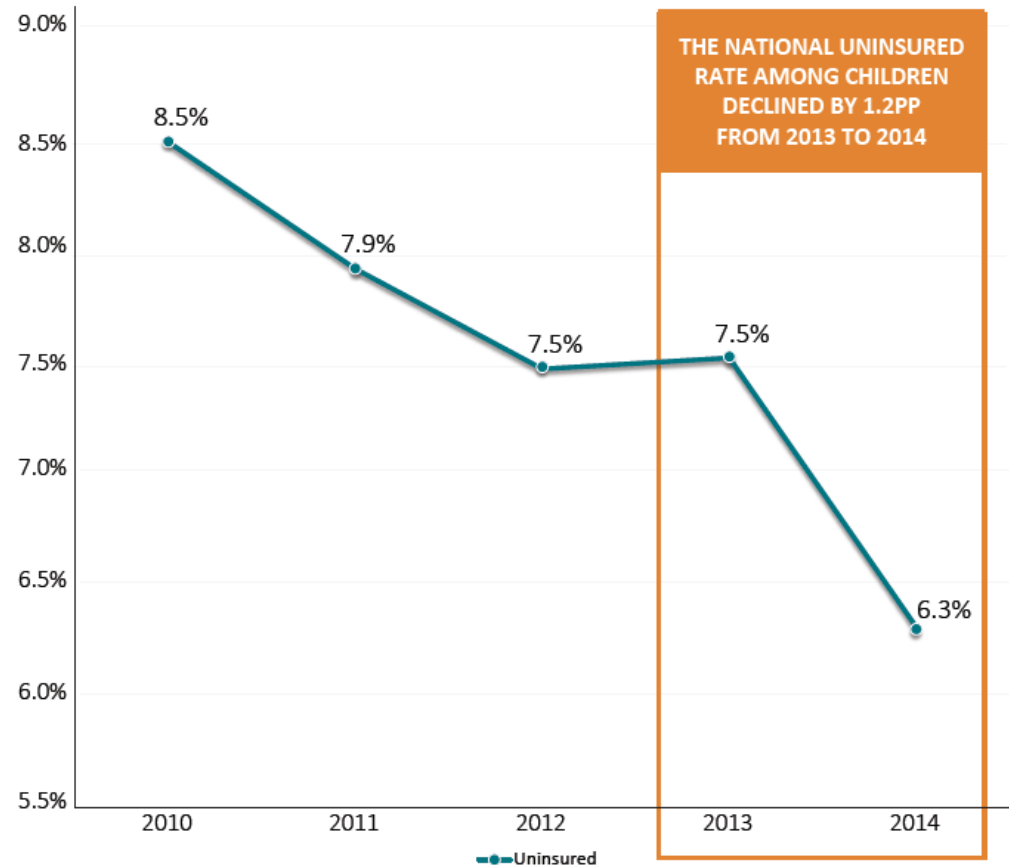
February study by the State Health Access Data Assistance Center reported:

- Vermont has the lowest percentage of uninsured children in the nation.
- Vermont made major gains, especially in terms of insuring low-income and middle-income children, in the first year of Vermont Health Connect.

Covering More Children (Year 1 of Health Exchanges)

	STATE	PERCENT
TOP FIVE STATES	1. Vermont	1.2*
	2. Massachusetts	1.8
	3. Hawaii	2.5
	4. District of Columbia	2.7
	5. Iowa	3.2
BOTTOM FIVE STATES	1. Alaska	12.3
	2. Texas	11.8
	3. Arizona	10.5
	4. Nevada	10.0
	5. Florida	9.6

* Relative standard error exceeds 30% or estimate is equal to zero.

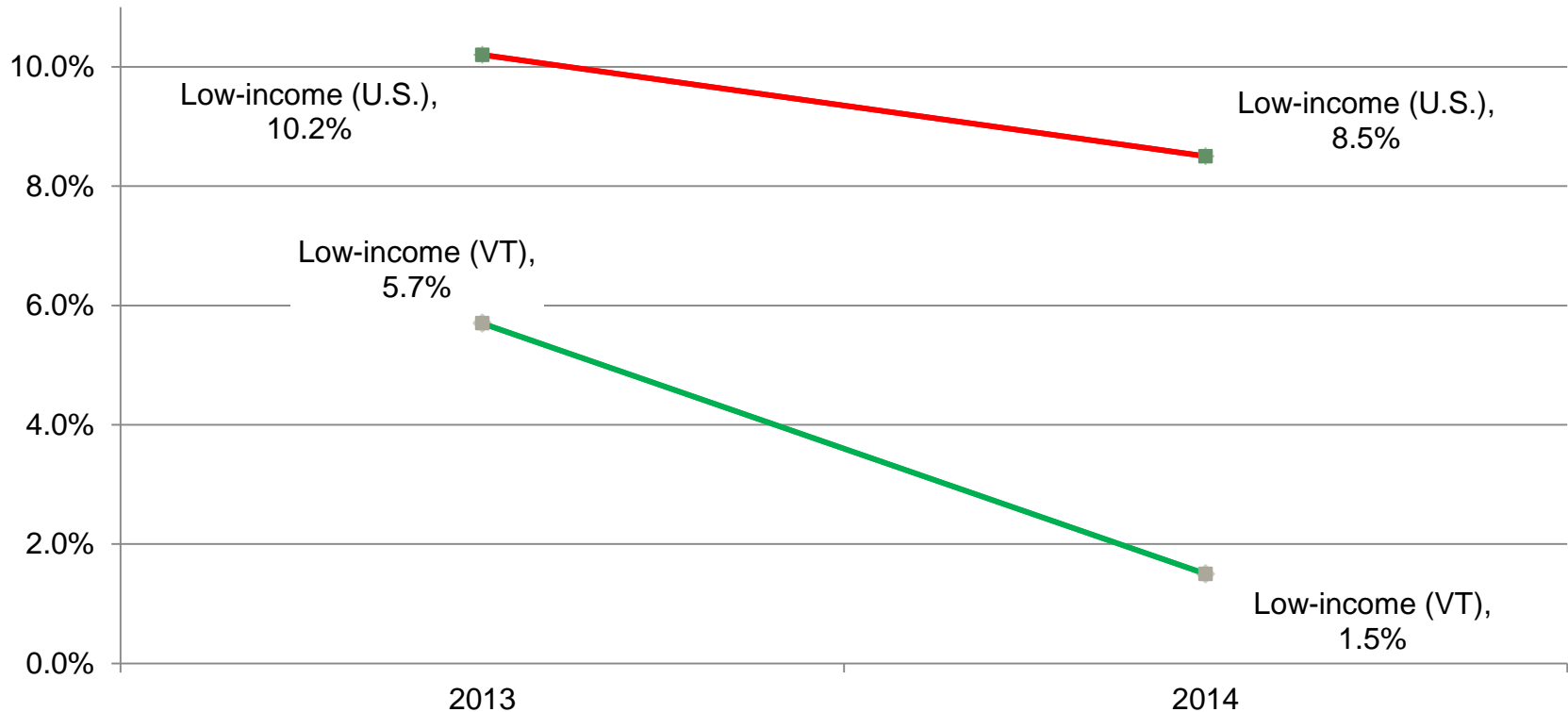


Source: 2010-2014 American Community Surveys as analyzed by SHADAC.

New study shows Vermont #1 in terms of insuring children.

Covering More Children (Year 1 of Health Exchanges)

Uninsured Rate among Low-income Children (<139% FPL)

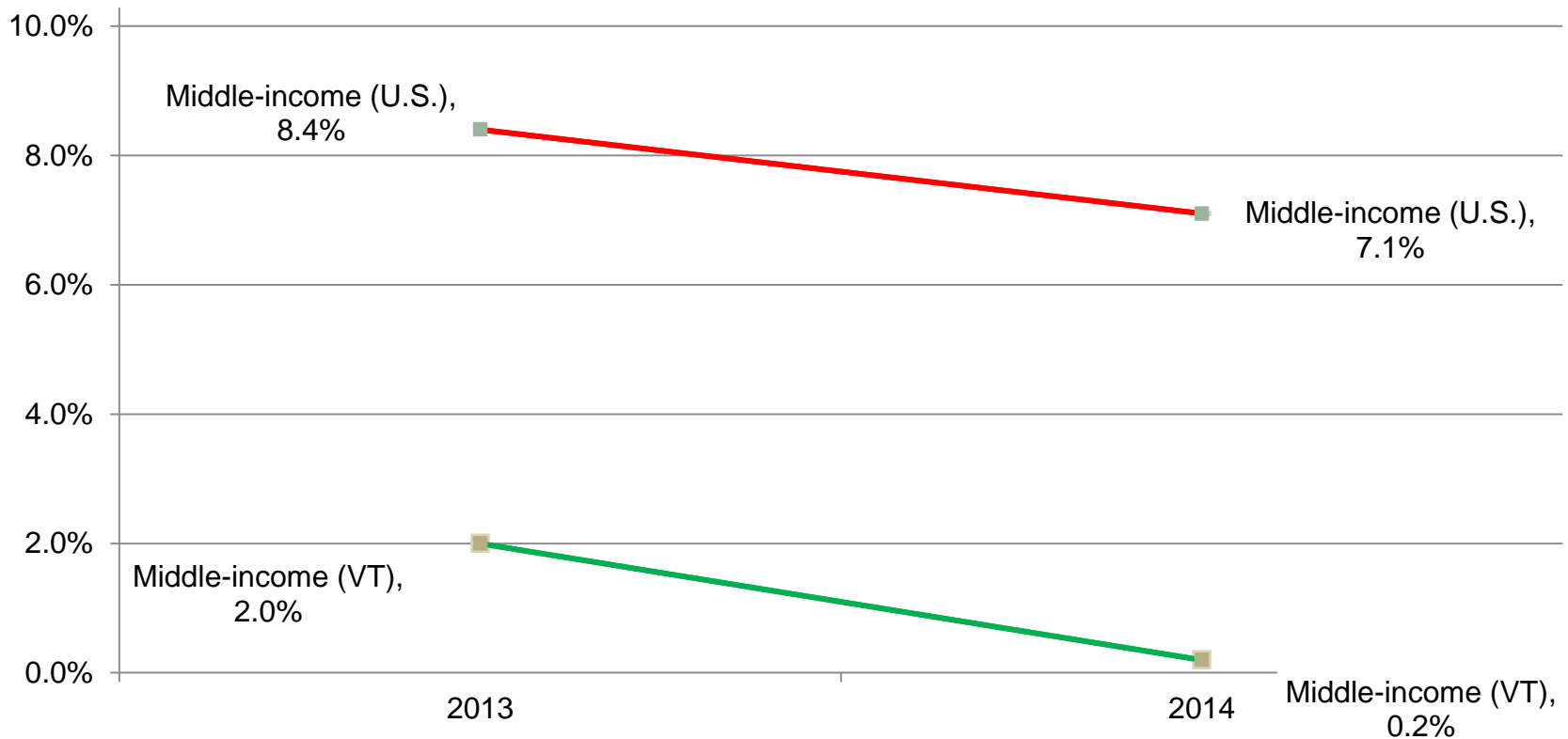


Data from State Health Access Data Assistance Center (SHADAC)

Decrease in uninsured rate among low-income children much sharper in Vermont than nationally during first year of health exchange.

Covering More Children (Year 1 of Health Exchanges)

Uninsured Rate among Middle-income Children (139-400% FPL)

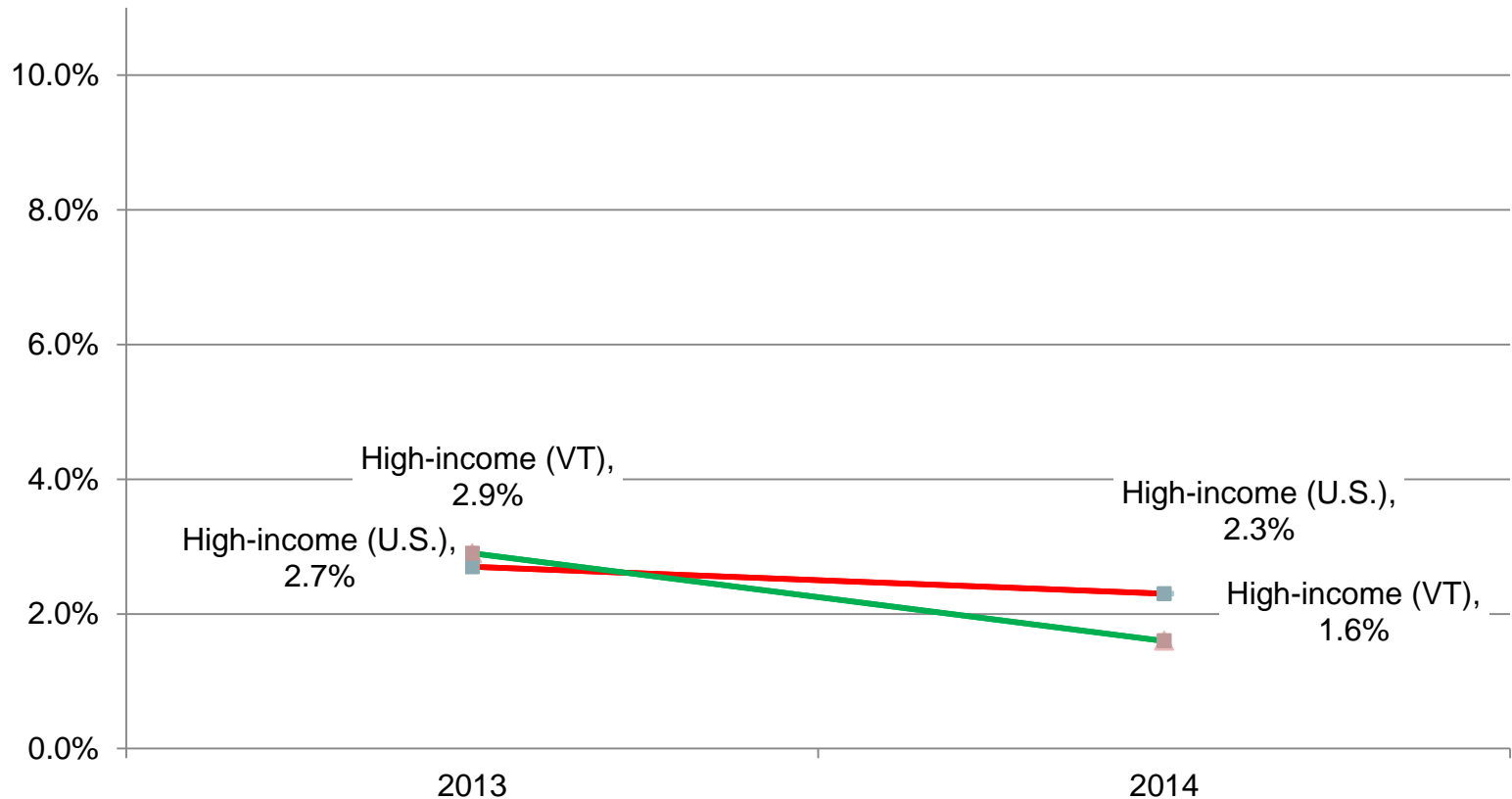


Data from State Health Access Data Assistance Center (SHADAC)

Near universal coverage for middle-income children achieved in Vermont during first year of health exchange.

Covering More Children (Year 1 of Health Exchanges)

Uninsured Rate among High-income Children (>400% FPL)



Data from State Health Access Data Assistance Center (SHADAC)

OUTREACH & EDUCATION

Outreach and Education

- Mailing to Medicaid Providers to enlist support in reminding patients about Medicaid renewals
- Materials to stakeholders and partners
- Sample blurbs for newsletters and local Front Porch Forums posts
- Focus on promoting key reasons for responding to renewal notice quickly
- Plan Comparison Tool and Assisters promoted as resources for members transitioning to QHP

It's **MEDICAID RENEWAL** *Time!*

If you or your children receive health coverage from Medicaid or Dr. Dynasaur, here's what you need to know about Medicaid Renewals

- ✓ If you have questions or need more information, you can call the Customer Support Center toll-free at 855-899-9600 from **8am to 8pm**, Monday through Friday.
- ✓ You can renew by **phone, in person, or by mail** (the renewal form included in the renewal notice you receive in the mail). By phone is usually the easiest and fastest.
- ✓ If you are enrolled in Medicaid/Dr. Dynasaur, you must report changes in your household within **10 days**. Don't wait for a renewal letter to report income or other household changes!
- ✓ If you are uninsured, the federal government will charge you a fee when you file your taxes. (The average federal fee for an uninsured adult is **\$695**.) This fine can be avoided by acting early.