

2014 Open Enrollment Check-in

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- The Affordable Care Act (ACA) went "live" on January 1, marking the beginning of new coverage options in Massachusetts, including Medicaid expansion, premium tax credits, and the availability of Qualified Health Plans (QHPs)
- Thanks to the ACA, thousands more Massachusetts residents have health insurance today
- In spite of the IT challenges presented by a consistently underperforming vendor, more than 28,000 new people have access to subsidized coverage through the Health Connector and MassHealth programs
- These IT challenges, however, continue to persist, and have caused us to rely on workarounds in order to ensure access to coverage for our members
- Those workarounds carry costs, and we are fully committed to holding CGI accountable for those costs and their failure to perform

Pathways to Coverage



- We have largely been unable to rely on the new online system for end-to-end enrollment activities, and have stood up a number of different pathways to ensure coverage for January 1
- For those in subsidized coverage in 2013:
 - 130,000 people in Commonwealth Care (or Commonwealth Care-eligible) under 133% FPL and non-AWSS moved to MassHealth CarePlus, joining other MassHealth members shifted to CarePlus
 - 124,000 people in Commonwealth Care (over 133% FPL or AWSS), Medical Security Plan and Insurance Partnership have access to extended coverage through March 31
- For those seeking to enroll in subsidized coverage for the first time for 2014:
 - Approximately 4,100 people were able to be processed for eligibility by MassHealth or the Health Connector through manual workarounds
 - Approximately 26,000 were not able to be processed into permanent coverage due to IT problems, including data issues, and were enrolled in temporary coverage through MassHealth
- For those seeking to enroll in unsubsidized coverage through the Health Connector:
 - Approximately 4,000 people enrolled in coverage by choosing a plan by December 31, with payment for first premium due January 10

Pathways to Coverage (cont'd)



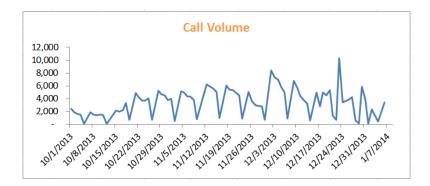
Below is a description of the various pathways we employed to ensure coverage for members.

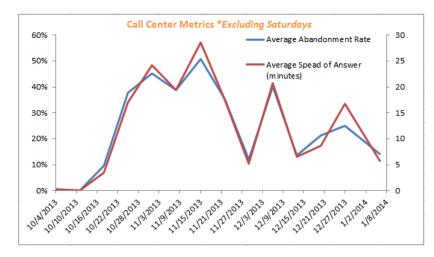
	Unsubsidized QHP	Subsidized QHP	New MassHealth	AA Coverage
Application intake	Mostly web-basedPaper application also accepted			
Sending to federal data services hub	• Through HIX			• Through HIX
Program Determination	Mostly through HIX	 Through a program determination tool outside of HIX 		Pending
Shopping	Mostly through HIX	Through the call center		• n/a
Premium billing	Dell Financial Management System		• n/a	• n/a
Enrollment	 An alternative enrollment file in lieu of 834 		• MMIS	• MMIS

Pathways to Coverage (cont'd)



- With support from our carriers, we were able to extend the deadlines for QHP shopping from December 23 to December 31 and for premium payment to as late as January 10
 - Many states extended their shopping deadlines, but only a few did so as late as 12/31
- We also opened our call center on Sundays during the last two weeks of December, stayed open late on December 31 (until 9 p.m.) and opened New Year's Day to maximize applicants' opportunities to enroll
 - As of December 31, we had ~200 call center staff, three times the original capacity on October 1
- With help from MassHealth, Health Care for All (HCFA), our Enrollment Assisters and other stakeholders, we also have helped numerous members who had trouble with the application process get coverage for January 1, supporting our goal of ensuring coverage for those who completed applications





Enrollment as of January 1, 2014



Through these alternative pathways, more people have access to coverage through the Commonwealth today than did before.

Commonwealth Care members and eligible but unenrolled individuals transitioned to MassHealth	~130,000
Commonwealth Care, MSP and IP members extended through 3/31/2014	~124,000
"New people" accessing subsidized coverage through the Health Connector and MassHealth	~28,000
Non-subsidized QHP members (some are current Commonwealth Choice and YAP, of whom ~2,500 had a 12/31 end date)	~4,000*

*Additional non-subsidized QHP enrollments for 1/1 anticipated given premium payment deadline extension

Current IT Landscape



- Incomplete and inadequate IT functionality as a result of an underperforming vendor has made it difficult for users to complete the application process
- Subsidized applicants also cannot use the Web to select a plan
- It is cumbersome for carriers to process enrollments because the system is not yet capable of automatically transferring enrollment information to them
- Thousands of people are in temporary MassHealth coverage due to IT data and system problems who need to be moved to permanent coverage expeditiously
- Application data is also not stored correctly in many instances, necessitating close review of data for accuracy before even beginning to process for eligibility
- We have had to rely on alternative platforms or call center-based solutions for those shopping for dental and small business coverage



An independent review will help inform solutions to the persistent IT issues.

- The Health Connector and EOHHS/MassHealth brought in a rapid assessment team to perform an end-to-end review of our existing system and help determine next steps for technical fixes
- The rapid assessment team is lead by experts from MITRE, a non-profit research and development center that has expertise in systems engineering and integration
- This review will enable us to:
 - Assess the quality and available usage of portions of the system in production
 - Delineate the best course of action for getting the project on a track to success
 - Align the project management structure, as needed, to implement recommendations for successful completion of this project
- That team will complete its review by January 17 and will report back to the Health Connector and EOHHS/MassHealth on recommended next steps

Solutions & Accountability (cont'd)



- This review will also help inform our actions with respect to CGI's role and responsibilities in connection with this project going forward
- We have been directed by Governor Patrick to consider all of our legal rights related to CGI's failure to perform and the cost of remediation



Until reliable IT solutions are put in place, we will be focusing on stabilizing/strengthening available capabilities to support open enrollment while continuing to leverage alternatives and develop new workaround processes.

- Immediately transition responsibility for developing 834 file transmissions (originally scoped within the HIX) from CGI to Dell to support faster launch of automated solutions
- Continue to work to resolve outstanding data issues so we can transition applicants out of temporary coverage and process additional subsidized applications
- Stabilize website functionality and performance of what is currently available through the HIX through frequent "hot fixes"
- Develop additional workarounds supporting varying levels of automated functionality to transition Commonwealth Choice, Commonwealth Care, MSP and IP members that need coverage for April 1





- Notwithstanding IT challenges, we are nevertheless succeeding in protecting and even expanding coverage to include thousands of additional Massachusetts residents
- We are determined to resolve the IT problem and have brought in an expert team to help chart the course forward
- We have important dates going forward, and just as we have done for January 1, we will continue to ensure pathways to coverage for all populations
- We are committed to making the ACA a success in Massachusetts, which, at the end of the day, is ultimately about providing access to affordable, quality health insurance for all of our residents