



Open Enrollment 2016 Readiness and Outreach Activities (VOTE)

Board of Directors Meeting, August 13, 2015

Open Enrollment 2016 Readiness: At-a-Glance



- Today we will be sharing our plans for this upcoming Open Enrollment period, including the way in which current members will renew into their 2016 coverage as well as our plans for broader outreach focusing on the remaining uninsured in the Commonwealth
- We are asking the Board to vote on the following matters for Open Enrollment 2016:
 - Staffing costs for Dell associated with extended business hours during Open Enrollment for an amount not to exceed \$1.4M
 - Operational contingency staffing support, if needed, leading up to, during and after Open Enrollment for an amount not to exceed \$900,000
 - Implementation of new, community-based Customer Interaction Centers (CICs) for Open Enrollment 2016 for an amount not to exceed \$2.26M



Open Enrollment 2016 Redeterminations & Renewals

Redeterminations & Renewals: Overview



- Open Enrollment is the time of year when individuals and families may enroll in non-group coverage or switch existing coverage for any reason, without needing a qualifying event
- Our goal for this year's Open Enrollment is to ensure that consumers who are happy with where they are and do not have any updates to their information can do nothing, and as long as they continue to pay their premiums, they will be able to stay in their same or similar plan in 2016
 - Our overall message to the market, however, will be one of encouragement to update their application with their most current information, and to browse their plan options during Open Enrollment
- We are required by the Affordable Care Act (ACA) to redetermine eligibility for our members before renewing their coverage
- Given unique features of our market – most notably the ConnectorCare program – and the fact that this is the first year we will be conducting renewals in the hCentive system, we will be pursuing a state-specific approach to redeterminations and renewals that has been approved by Centers for Medicare & Medicaid Services (CMS)

Redeterminations & Renewals: Overview (cont'd)

- The Health Connector, like the Federally Facilitated Marketplace (FFM) for 2016, will only be noticing and renewing individuals who are actively enrolled in a 2015 Qualified Health Plan (QHP) or Qualified Dental Plan (QDP) leading up to or during Open Enrollment



Preliminary Eligibility Notice

- Late August
- Sent to enrollees who submitted a subsidized application
- Informs them of estimated 2016 FPL and program eligibility
- Instructs on how to update/correct the information
- Encourages updates to both 2015 & 2016 eligibility applications



Final Eligibility Notice

- Late October (right before Open Enrollment)
- Sent to all enrollees eligible to renew into a QHP and/or a QDP in 2016
- Includes information about the member's 2016 plan (including QDPs, where applicable), rates, tax credit amount (where applicable), other plan options for ConnectorCare eligible members and other helpful information related to Open Enrollment

- Given that all of our current members submitted a new application within the last year, we are borrowing the FFM's approach of using income data in the system updated with the latest Federal Poverty Level (FPL) tables, rather than using Tax Year 2014 (or older) data obtained from re-calling the federal hub as it might be, on balance, outdated as compared to income projected by the member for 2015
- In addition to updating FPL, the Health Connector will also ping the Federal Data Services Hub for death, access to non-Employer Sponsored Insurance (ESI) public Minimum Essential Coverage (MEC) and disability

Redeterminations & Renewals: August Communications



Renewing your coverage for 2016

Good news! If you are currently enrolled in health or dental insurance through the Health Connector, you won't need to apply again for 2016. We'll renew you in the same or a similar plan in 2016. Or, you can change your plan during open enrollment after shopping and comparing plans. Here's what happens:

Late August 2015 – Early September 2015

If you applied for help paying for coverage, we'll send you a letter with programs we think you may qualify for in 2016.

Update your information if:

- Any of the information we have for you is wrong or has changed.
- You've had changes in 2015, or you expect your information to be different in 2016. For example, if you expect your income to go up or down, or you've recently moved.

You can update your information online at MAhealthconnector.org.



October 2015 – November 2015

We'll send 2016 renewal packets to all Health Connector members. The packet will tell you if your current plan is available for 2016.

Review your renewal plan

Starting November 1, you can review 2016 plan details:

- Review your renewal plan's benefits and costs, including the monthly premium.
- Be sure your providers, such as doctors or hospitals, are in the plan's network. Your providers may no longer be in your plan, but may be part of other plans offered by the Health Connector.



November 1, 2015

Open enrollment starts. This is the time when you can start to shop and compare plans for 2016.

Shop if you want to change plans

It's important to compare your options during open enrollment because monthly premiums and other costs may be changing for 2016. You can shop for and choose a plan during open enrollment. You can compare plans online at MAhealthconnector.org.



Your coverage type for 2016

If you do not make any changes to the information we have, we expect the members of your household to qualify for the following type(s) of coverage in 2016:

Household Member	DOB	Member ID	2016 Coverage Type
[Household Member Name]	[Household Member DOB]	[Member ID]	[Coverage Type]
[Household Member Name]	[Household Member DOB]	[Member ID]	[Coverage Type]

You will continue to stay in your current coverage through December 31, 2015, as long as you continue to pay your monthly bill on time (if you have one). Any changes to your coverage will not start until January 1, 2016.

If anyone in the household qualifies for MassHealth, you will get a separate letter from MassHealth with more information about your coverage including when benefits begin.

Tax credit for 2016

Based on the information we have about your income, you will qualify for an Advance Premium Tax Credit amount for 2016.

However, even though you may qualify based on your income, you also need to have filed your taxes in 2014 in order to get a tax credit next year.

Let us know about any changes for your 2016 application within the next 30 days

What you need to do:

- Review the information about your household and coverage for 2016.** If our information about your household is not correct, you might not get the right coverage and amount of help paying for it for 2016.
- Tell us within the next 30 days if your information is not correct.** If you think any of this information is incorrect, or if you expect this information to change for 2016, you can update your information online through your account at MAhealthconnector.org. If you've already had changes in 2015 that you haven't reported yet, you can update this information online as well. If you don't have an online account, call Customer Service to make changes.
- Read your mail.** We'll send you another packet of information in October or November, with information about your health plan for 2016. You may also get mail from MassHealth if we think anyone in your household will qualify for MassHealth in 2016.

Information about your household

Number of people in your household: [family size]

Federal Poverty Level (FPL): [FPL]%. Use the table on the last page of this notice to compare the FPL listed here to your household's income and size.

To learn more about Health Connector coverage in 2016, go to MAhealthconnector.org

You can also call for help:

on
your household to
not correct, you should

Redeterminations & Renewals: October Communications

Open enrollment starts November 1, 2015. This is the time to shop and compare health and dental insurance plans. It's also the only time of year when you can change plans for any reason. **If you don't shop for a new plan, you will be renewed into your current plan or a similar one for 2016.**

What you need to do:



Review your renewal information for 2016.

In this packet is information about the type of coverage you qualify for in 2016. You can also find out if your current 2015 coverage will be available in 2016. If you take action, you will be renewed into your current 2015 plan, or a similar plan.



Compare changes to benefits and costs for 2016.

There may be changes to your plan's benefits and costs in 2016. In this packet, you can see what your renewal plan's monthly premium will be in 2016. You can also use the plan comparison tool at MAhealthconnector.org/plan-changes to learn about other benefits and costs for 2016.



Make sure the providers you want are available.

Check to see if any providers (such as doctors or hospitals) that you want are in a plan's network before you decide to renew or change plans during open enrollment. If a provider is included in a plan's network by calling the insurance company or searching on their website.



Shop during open enrollment if you want to change plans.

Make sure to shop and compare your options during open enrollment, which starts November 1. You can compare plans online at MAhealthconnector.org.



Keep paying your monthly premium bill (if you have one).

You'll need to keep paying your premium bills on time in order to have coverage. Make sure to pay attention to the premium bill you get in December, in case there have been changes to the amount that you owe.

Important Dates:



November 1, 2015: First date to start shopping and comparing plans. MAhealthconnector.org.



December 23, 2015: Due date for your January 1 premium (if you have one). Make sure to pay this bill on time to not have gap in coverage.



January 1, 2016: The first day of your new 2016 coverage. If there have been any changes to your eligibility, January 1 is the date when those changes start.

Frequently Asked Questions

What are my options if I want to change plans?

The 2016 open enrollment period is from November 1, 2015 to January 31, 2016. If you want to change plans for 2016, you will need to make this change during open enrollment. For coverage that starts January 1, 2016, you must change your enrollment and pay your first premium by December 23. You could also look at health plans directly from a health insurance carrier, but keep in mind that if you qualify for help paying for costs, you can only get these savings if you enroll through the Health Connector.

How can I get help paying for coverage?

You may be able to qualify for programs that help you pay for health insurance and out-of-pocket costs. You can apply at any time to find out if you qualify. To find out if you can qualify, go to MAhealthconnector.org and fill out an application online. Answer "yes" when asked whether you want to see if you can get help paying for insurance.

Can I get coverage through MassHealth?

MassHealth will check to see if the people in your household qualify for coverage through MassHealth, the Health Safety Net.

MassHealth will send another letter, letting you know if you qualify. If you need more information or have questions about MassHealth, call MassHealth at 800-497-4648 for people who are deaf, hard of hearing, or have a hearing aid.

When does my new coverage type start?

If there are any changes to the type of coverage you qualify for, your new coverage will start on January 1, 2016. You will stay enrolled in your current coverage for 2015, unless you let us know that you want to change.

Why is my tax credit \$0.00?

If your tax credit amount is \$0.00, it is because you are not eligible for a tax credit. You can learn more about how tax credits work at MAhealthconnector.org.

2016 Health Insurance Eligibility and Plan Information

Household Member	DOB	Member ID	2016 Coverage Type	2016 Renewal Plan Name	Coverage Start Date
[Household Member Name]	[DOB]	[Member ID]	[Coverage Type]	[Carrier/Plan name]	January 1, 2016
[Household Member Name]	[DOB]	[Member ID]	[Coverage Type]	[Carrier/Plan name]	January 1, 2016

Monthly Premium for 2016 Renewal Plan: [contribution amount for QHP]

This is the amount that your household will owe for your health insurance monthly premium payments if you stay enrolled in the 2016 health insurance renewal plan listed on this notice.

2016 Tax Credit Amount: [2016 APTC]

Your 2016 renewal plan monthly premium shown above **includes** the full amount of your monthly tax credit applied to it. You can change the amount of tax credit that you want applied to your premium at any time, through your online account at MAhealthconnector.org, or by calling Customer Service.

2016 Dental Insurance Eligibility and Plan Information

Household Member	DOB	Member ID	2016 Renewal Plan Name	Coverage Start Date
[Household Member Name]	[Household Member DOB]	[Member ID]	[Carrier/Plan name]	[Renewal Start date]

Redeterminations: Updating Application Information Self-Service

With the deployment of Release 6.5, members will have the ability to edit their own 2016 and 2015 applications.

- Individuals who have existing 2015 applications or who come into the system to create a 2015 application will automatically have a 2016 application created for them (if they are QHP eligible)
- Individuals will newly be able to make changes to their own accounts online, and will no longer have to call customer service in order to do so
- Changes made to 2015 or 2016 applications can easily be applied to the application not being updated, mitigating double work for both members and customer service representatives

Year 2015

Eligibility Id	Received Date	Submitted Date	Status	Actions
RefID_1438207711575		07/29/2015	Submitted	Detail Edit Application

What is Year 2015 Application?

This is your application for **2015**. Report a change in this application if there have been changes in your household (such as family size, income, or access to insurance) in **2015**.

Year 2016

Please review the details in your **2016** application to make sure all of the information we have for **2016** is correct.

Eligibility Id	Received Date	Submitted Date	Status	Actions
RefID_1438207711575		08/03/2015	Submitted	Detail Edit Application
RefID_1438207711575		08/03/2015	Preliminary (not final)	Review
RefID_1438207711575		08/03/2015	Preliminary (not final)	Review

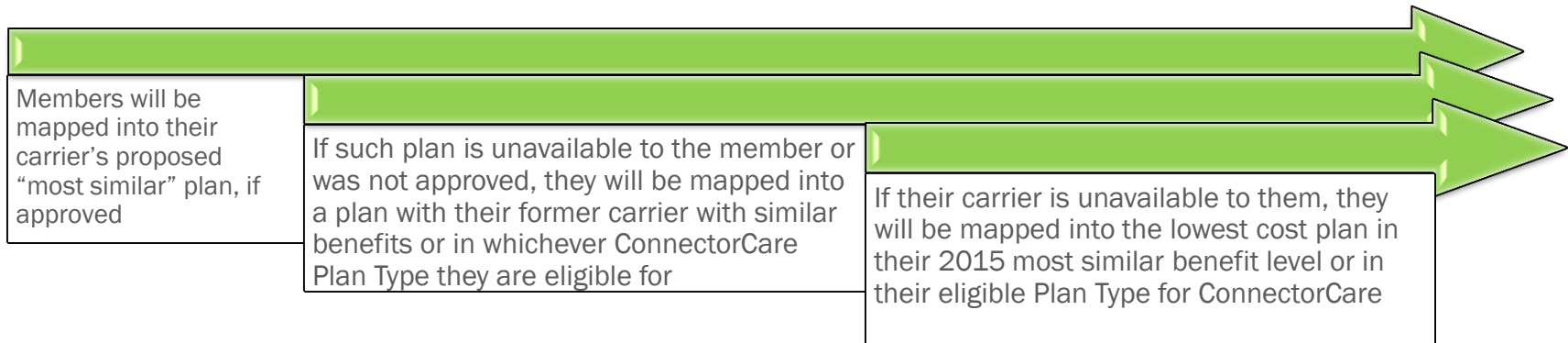
If you made changes to Year 2015 application and want to apply the same changes in 2016 application, click [here](#).

What is Year 2016 Application?

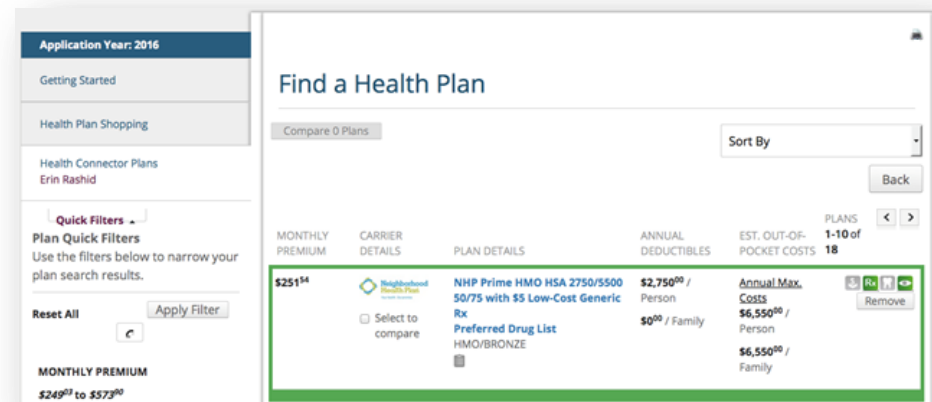
This is your application for **2016**. Your Health Connector eligibility and plan renewal for **2016** will be based on the information in your **2016** application.

Renewals: Plan Mapping & Shopping

- Members can remain in their same plan for 2016, if that plan is available; if their plan is unavailable, members will be mapped into a like plan using the following logic:

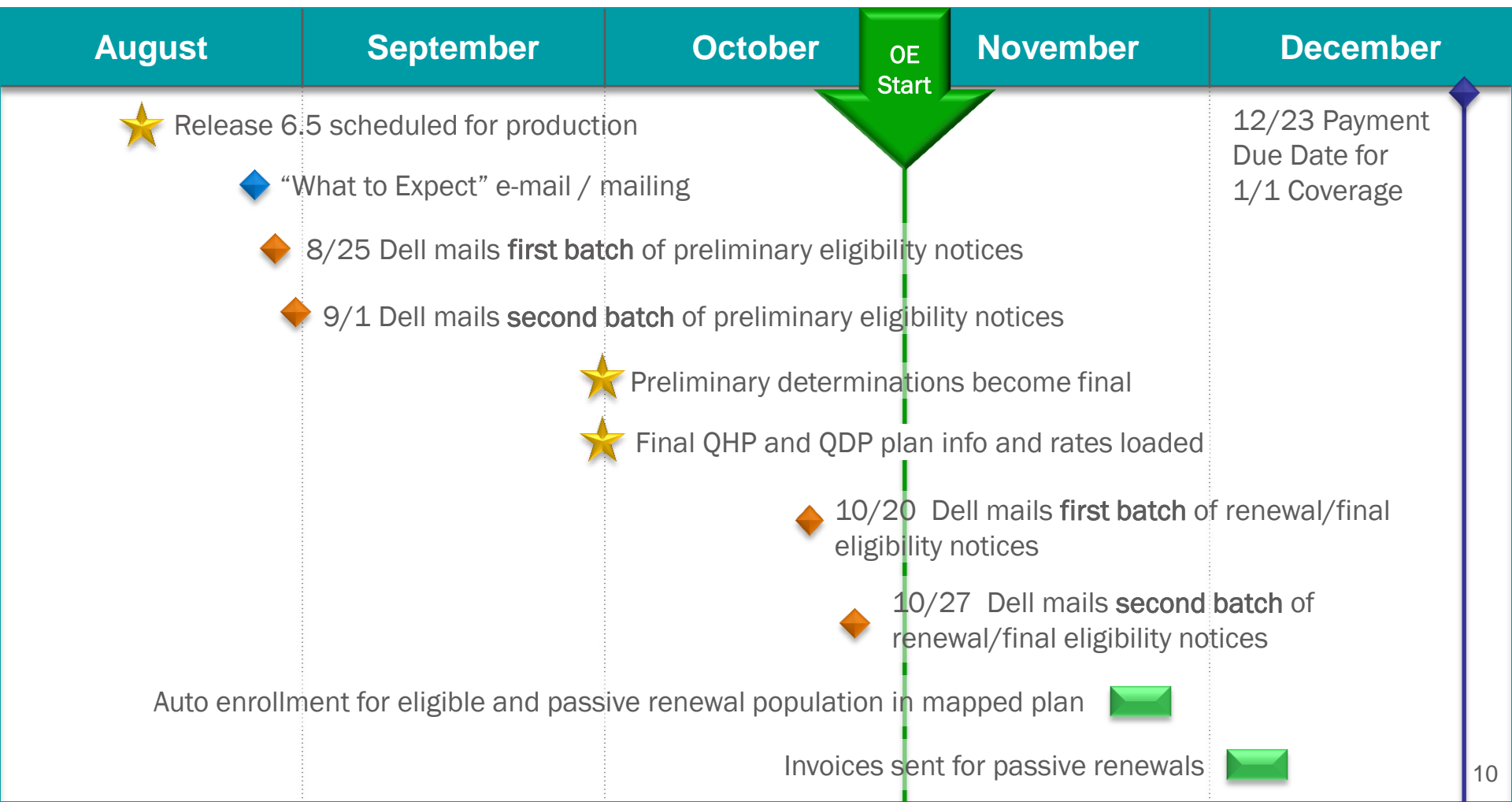


- When members shop during Open Enrollment, until they choose a new plan or are auto-enrolled into a mapped plan, they will see their mapped plan at the top of every shopping page outlined in green
- Unless a member checks out with a new plan, they will be auto-renewed into their mapped plan in late November
- Members can always shop for a new plan until the end of Open Enrollment (until 12/23 for 1/1, 1/23 for 2/1, 1/31 for 3/1)



Redeterminations & Renewals: Timeline

Our schedule for noticing and processing redeterminations and renewals is built upon a desire to not overwhelm members, carrier operations and Health Connector operations.





Open Enrollment 2016

Operational Readiness

Operational Readiness: Overview



- During Open Enrollment 2015, the Health Connector experienced unprecedented call volume as individuals were required to apply and re-enroll in coverage
- As we prepare for the upcoming Open Enrollment period, our goal is to increase access to timely, quality customer service for individuals and families across the Commonwealth while also continuing to enhance and improve the general customer experience for our members at any time of year
- To deliver on this goal, we have been focusing tremendous effort on strategies designed to immediately improve customer experience and to better gauge the volume of activity we are likely to experience during Open Enrollment, particularly one with significant new functionality creating a new experience for our members

Operational Readiness: Overview (cont'd)

- In terms of efforts to improve customer service in advance of Open Enrollment, we have undertaken a series of activities including, but not limited to:




Quality & Training program re-assessment

- New Learning Management System
- Implementation of improved quality scoring and enhanced performance management
- Training program redesign
- Implementation of centralized Agent Assist Desk for CSRs to gain consistent, timely support



Refined staffing levels

- Enhanced call volume and handle time forecasting based on expected impact of redetermination/renewal, outreach and market activities
- Daily staffing level assessment check points and calibration of forecast model



Increased efficiency

- Real-time handle time monitoring
- Refined call-back process

- As for efforts to enhance customer experience during Open Enrollment, we will be expanding the call center with extended hours of operation and additional staff (and the flexibility for even more staff if needed), and we will also be implementing an exciting new community-based approach to servicing by opening new in-person customer services locations across the Commonwealth

Call Center Staffing, Hours & Customer Interaction Centers



- In preparation for the upcoming Open Enrollment, Health Connector staff has been working with its business operations vendor, Dell, to develop a comprehensive operations forecast to better estimate our needs for the fall
- Our efforts have involved in-depth interviews of core business and policy staff at the Health Connector, other state operations teams who have already experienced the ACA renewal process, and stakeholders who were able to provide us insight about what to expect for the coming year from a broader market perspective
- As a result of these efforts, we plan to extend the hours that the call center operates during Open Enrollment beyond what we offered last year and, as mentioned, supplement our current locations in Boston and Worcester with additional in-person customer service centers in key areas of the Commonwealth (particularly those where the remaining uninsured reside)

Call Center Staffing, Hours & Customer Interaction Centers (cont'd)



- For expanded hours, we propose extending the availability of our call center staff as follows:

	2015 OE Hours	2016 OE Hours
<i>Monday-Friday:</i>	7AM – 7PM	8AM – 9PM
<i>Saturday:</i>	9AM – 3PM	9AM – 5PM
<i>Sunday:</i>	<i>ad hoc</i>	9AM – 5PM

- This will offer consumers the opportunity to contact the call center during a time more convenient for them, while also allowing the call center to better accommodate increased call volume expected during Open Enrollment
- In addition, we will be asking for the Board to authorize contingency staffing in the unlikely event that staffing is not adequate for call center or back office, despite our best forecasting efforts

Call Center Staffing, Hours & Customer Interaction Centers (cont'd)



- Beyond call center staffing and extended hours, we are also planning to implement a “Distributed Service Model” whereby individuals looking to apply for coverage or currently enrolled through the Health Connector will have the opportunity to seek in-person support closer to their home
- As part of this model, we will implement new, in-person locations known as Customer Interaction Centers (CICs) in areas with the largest concentration of members and uninsured individuals, including:
 - A new year-round location in Springfield, Massachusetts
 - Three temporary “pop-up” sites in Northeastern & Southeastern Massachusetts
- We are looking to co-locate these sites with community partners in existing facilities who already serve the population we are looking to assist
 - In the event colocation with partner agency/community organization(s) is feasible, costs included in the budget request will be reduced accordingly
- The existing Boston location will be converted from a standard walk-in center to a CIC, including an expanded waiting room, new self-service and bring-your-own-device kiosks as well as new, additional semi-private rooms for one-on-one consultation

Supporting Work Orders & Contracts

- To support the activities outlined in this section, we will be asking the Board to authorize three distinct work orders/contracts:
 - **Extended Call Center Hours Dell Work Order – not-to-exceed \$1.4M**
 - Includes staffing costs for hours worked by Customer Service Representatives (CSRs), back office staff, team leads and supervisors above the hours authorized in the Master Services Agreement
 - Staffing costs will follow the current rate card and actual hours worked
 - **Contingency Staffing Contract – not-to-exceed \$900K**
 - Funds would be used to hire and train CSRs and back office staff to support billing, enrollment and document processing; staffing costs would be billed based on actual hours worked at an agreed upon rate
 - **Distributed Service Model Dell Work Order – not-to-exceed \$2.26M**
 - Includes infrastructure set-up & maintenance costs for rent (unless co-located with a different organization); office furniture, equipment, supplies; security systems, signage
 - Also includes hiring & training a CIC manager, 3 supervisors & 14 staff during peak periods, and 1 supervisor with 3 staff for off peak periods (*i.e.*, for just Springfield)



Open Enrollment 2016 Outreach Strategy

Outreach Goals for 2016 Open Enrollment

Target Remaining Uninsured

Covering uninsured residents has remained a goal of the Health Connector since its inception, and this year we will prioritize that goal to outreach and assist those consumers who may be uninsured using culturally and linguistically appropriate strategies for engagement

Support Redeterminations & Renewals

While QHP & QDP members will not be *required* to do anything to maintain their coverage, we will encourage them through a light-touch awareness campaign to update their accounts and shop around for the best coverage that meets their needs (and their budget)

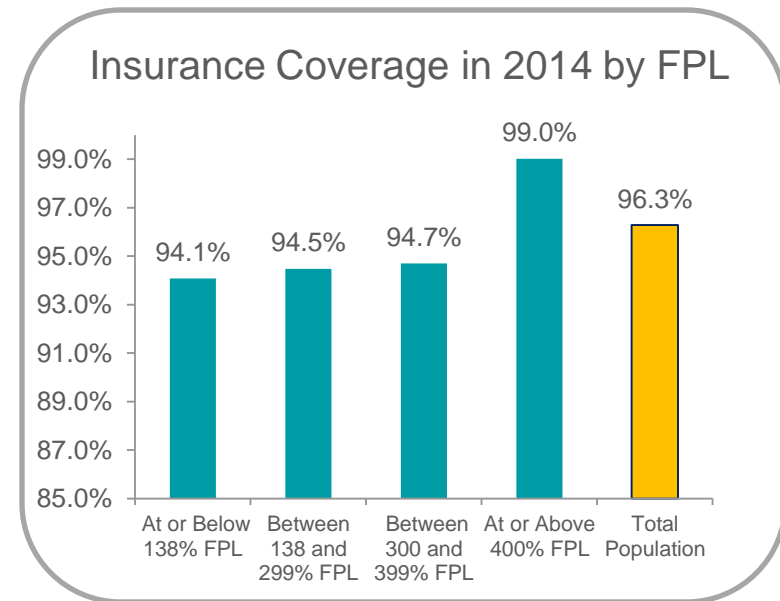
Increase Awareness & Understanding

Through community engagement and content development, we hope to generate additional awareness of the Health Connector's role in connecting people to coverage and how to use the tools the Health Connector offers to encourage and empower self-service

High-Priority Populations

As just indicated, our primary population for the upcoming Open Enrollment period is the remaining uninsured.

- Although Massachusetts has reached nation-leading levels of insurance coverage, 3.7% of its residents remain uninsured. Who are they?
 - Predominately low-income (potentially eligible for MassHealth or ConnectorCare, based on income), but can be found across income categories
 - Non-elderly adults (5.1% uninsured), men (5.4% uninsured), Hispanic individuals (7.1% uninsured) and Black, non-Hispanic individuals (6.3% uninsured) all have higher-than-average rates of uninsurance
 - More likely to reside in the Metro Boston area, as well as Western and Central Massachusetts
- Recent CHIA/Urban Institute research notes that two key reasons uninsured residents do not have insurance is perception of high cost of coverage and not knowing how to enroll



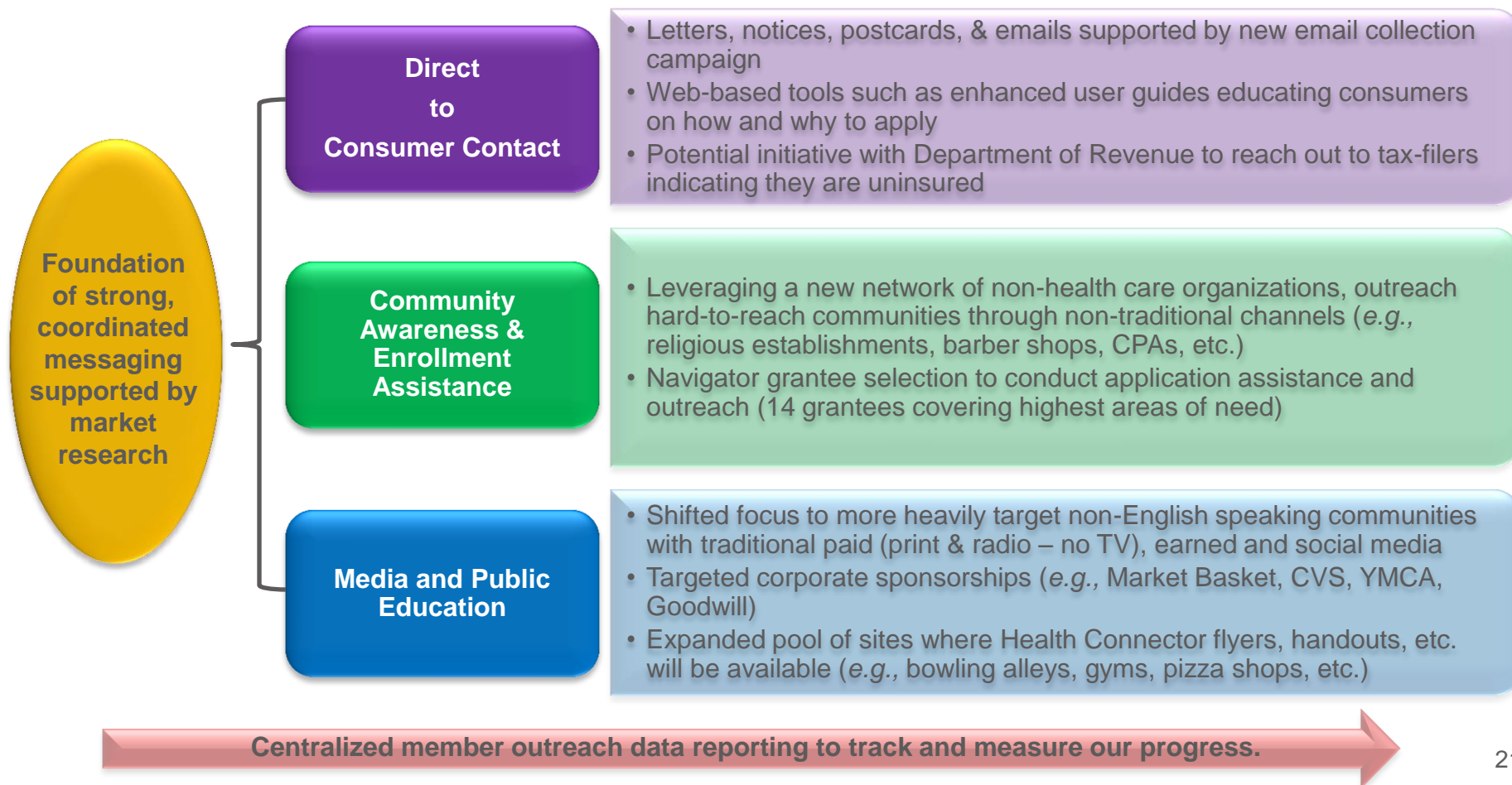
*Sources:

Skopec, Laura, Sharon K. Long, Susan Sherr, David Dutwin and Kathy Landgale. Center for Health Information and Analysis. "Findings from the 2014 Massachusetts Health Insurance Survey" May 2015.

Long, Sharon K. and Thomas H. Dimmock. Blue Cross Blue Shield Foundation of Massachusetts and the Urban Institute. "The Geography of Uninsurance in Massachusetts, 2009-2013." April 2015.

Multi-faceted 2016 Outreach Campaign

We will employ a mixture of targeted and broad-based outreach strategies to generate awareness about health insurance, the Health Connector and how to get coverage or get better coverage if you already have it.



Direct-to-Consumer Contact

Our direct-to-consumer outreach activities typically focus on our existing membership, but we are also working to expand our reach through email collection campaigns and an exciting potential partnership with the Department of Revenue.

- For our existing membership, we will be sending a number of emails and postcards (e.g., “What to Expect from Open Enrollment”, or “Open Enrollment Save the Dates”, etc.) as well as inserts into monthly invoices and flyers mailed with other direct standing communications
 - We will also be launching a separate awareness campaign leveraging Open Enrollment messaging to highlight the importance of updating income information and filing taxes for those applying for or receiving tax credits
- For non-members and the uninsured, we have a number of different direct communication campaigns we are pursuing:
 - Emails and postcards to anyone who applied for coverage through us but did not enroll, announcing Open Enrollment, along with “Open Enrollment is Ending” reminders as the end of January nears
 - We launched an email collection campaign on our website and Facebook page; subscribers will receive regular updates and reminders
 - We will be launching a targeted campaign to promote the new CICs, particularly to potential new members looking for in-person assistance in their community
 - We will continue our work with Department of Unemployment Assistance to outreach unemployed individuals
 - ★ In addition, we are working with the Department of Revenue (DOR) to directly target the remaining uninsured in Massachusetts ★

Direct-to-Consumer Contact (cont'd)



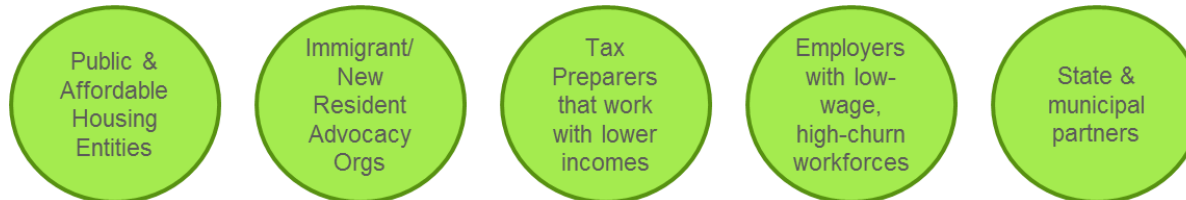
- The Health Connector works with DOR to administer the Commonwealth's individual health insurance mandate
- Each tax year, thousands of Massachusetts tax filers report that they do not carry health insurance that meets Minimum Creditable Coverage (MCC) standards
 - The most recent year for which data is available indicated approximately 180,000 adults self-report as uninsured
- This year, we are working to partner with DOR to send a mailing to these individuals informing them of ways they can enroll in health insurance coverage
 - If possible, aiming to send staggered mailings starting in early fall
 - Messages included in mailing are being developed to address reasons the remaining uninsured cite as being key factors in their uninsurance status
- Additionally, the Health Connector is seeking to work with DOR to amend state tax forms for future years to allow someone to self-select to receive a mailing with assistance for obtaining insurance if they report that they are uninsured

Community Awareness and Engagement: Partnerships

Our goal this year is to partner with businesses, associations, and faith-based organizations that operate outside of the “health care access” setting to spread awareness into our target communities about the value of health insurance and where to go to find it.

Community
Awareness &
Enrollment
Assistance

- We are reaching out to a wide range of new types of community partners to forge collaborations aimed at better reaching the remaining uninsured



- These partnerships will allow us to leverage opinion leaders, communication channels (e.g., newsletters, radio shows, local cable access programs, etc.), and community events, to name a few, to build sustainable knowledge in the broader market about health insurance and our role in connecting residents to coverage
- We are also actively engaging local government officials in the communities with the highest rates of uninsurance across the Commonwealth to better understand options and strategies for reaching their constituents

Enrollment Assistance: Navigators

We are also pleased to announce the recipients of this year's Navigator grant awards to a critical group of outreach and enrollment assisters that will not only support renewals and redeterminations for our existing members, but will also help us in our effort to reach the remaining uninsured.

Community
Awareness &
Enrollment
Assistance

- The Navigator program is an ACA requirement – fully funded by the state – that provides consumers with culturally and linguistically appropriate assistance in areas such as direct outreach, application and enrollment guidance through any post-enrollment needs
- This past year, Navigators and other certified assisters played a critical role in supporting our member transition efforts both for enrollment assistance and general education and outreach activities
- We modified this year's notice of grant opportunity to align with our shifted focus from transitioning legacy populations to outreaching the remaining uninsured, and to that end, we sought organizations located in the communities with the highest uninsured rates with demonstrated experience in reaching our target population
- Our goal was to best use our resources to maximize coverage for a wide range of geographic areas and demographics

Enrollment Assistance: Navigators (cont'd)

Goals of the Navigator Program FY16

Health Connector Goals	Navigator Grantee Goals FY16	
	1. Target Uninsured	<ul style="list-style-type: none"> • Outreach and assist those consumers who are known to the Navigator organizations, who have not started an application, or were program determined but did not yet enroll • Conduct targeted outreach to those consumers within their communities who remain uninsured due to cultural, linguistic or other barriers
	2. Grow Awareness	<ul style="list-style-type: none"> • Using culturally and linguistically appropriate methods, continue to generate awareness about the available health insurance programs and options through MAhealthconnector.org
	3. Retain Membership	<ul style="list-style-type: none"> • Assist those currently enrolled in a Health Connector QHP with their renewal leading up to and during OE (Nov 1, 2015 – Jan 31, 2016) • Support shopping for members who would like to make changes to plans or who are eligible for new programs in 2016 • Assist those consumers who experience any life changes with reporting that information to the Commonwealth

Enrollment Assistance: Navigators (cont'd)



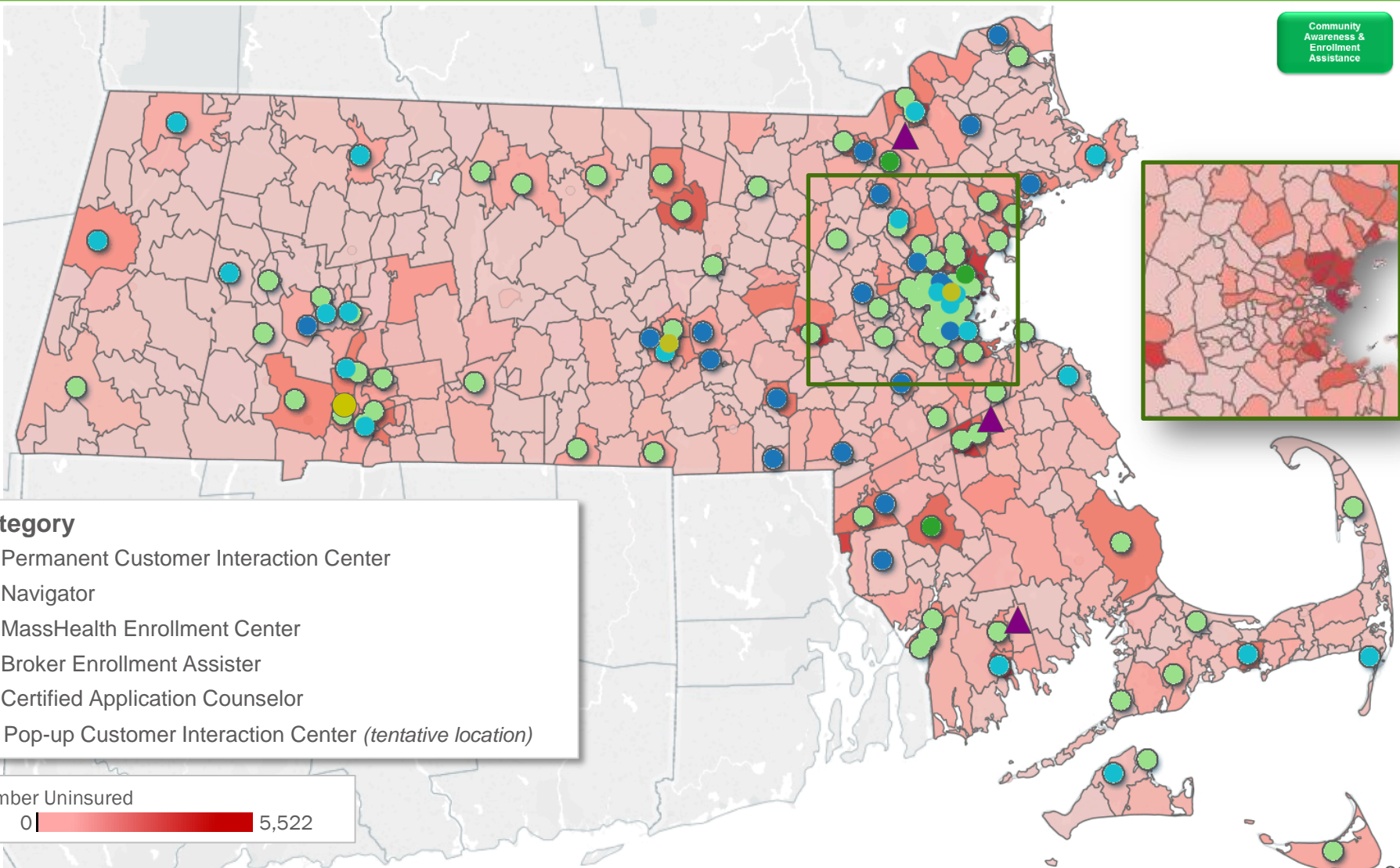
- We received 29 applications this year from applicants representing a diverse array of communities and organizations located throughout the Commonwealth
- While it was a difficult decision to make, we have limited funding available for the program and thus had to narrow down the pool of applicants to those most likely to be able meet our needs for this year
- To that end, we selected 14 organizations for the 2016-2017 program year, of which 12 are returning Navigators and 2 new organizations
 - Both of the new organizations (Tapestry Health & Health Care for All) are currently Certified Application Counselors (CACs) and have experience supporting our target populations
 - They also provide us support in much-needed regions of the Commonwealth (e.g., Pittsfield/Western MA and state-wide to fill in any outreach coverage gaps in hard-to-reach communities)
- Three organizations that have served as Navigators for the first two years of the program were not reselected, as they did not score as strongly compared to other applicants, particularly given the change in focus of the program this year to more heavily rely on outreach efforts
 - We want to thank all applicants, especially those who previously served in the program as Navigators, for their dedication to our shared mission of helping consumers access the health coverage they deserve

Enrollment Assistance: Navigators (cont'd)



FY 16 Navigator Grantees	Award Amount
Boston Public Health Commission	\$138,518
Cambridge Economic Opportunity Council	\$88,550
Caring Health Center	\$187,320
Community Action Committee of Cape Cod & Islands	\$96,959
Ecu-Health Care	\$45,000
Family Health Center of Worcester	\$170,444
Fishing Partnership	\$110,000
Greater Lawrence Community Action Council	\$144,189
Health Care for All	\$249,953
Hilltown Community Health Centers	\$35,543
Manet Community Health Center	\$87,650
People Acting in Community Endeavors	\$92,887
Tapestry Health	\$96,796
Vineyard Health Access/County of Dukes County	\$43,892
TOTAL AMOUNT AWARDED	\$1,587,701

Enrollment Assistance: Assisters Statewide & the Uninsured



Media & Public Education


- We previously presented to the Health Connector Board our high-level media and public education campaign in June, and will update the Board once we complete message development and focus group testing early this fall
- In addition to paid media, however, we are also focusing our efforts on earned and social media as well as strategic corporate partnerships
 - We have been contacting various influential organizations & local businesses in cities with large populations of uninsured residents to share posts over social media and distribute promotional flyers throughout the late summer, fall and winter
 - Establishments range from non-profit community organizations to popular cafes and recreational outlets (e.g., gyms, laundromats, bowling alleys, pizza parlors) that are well-known and trusted in the community
 - Response has been positive with confirmed partners willing to help share messages and information in communities such as Brockton, Chelsea, East Boston, Lawrence, Springfield and Worcester, with more to be added
- We will also again be pursuing strategic corporate partnerships to distribute general information to high-priority communities about Open Enrollment; e.g., flyers or posters on display at CVS and in Market Basket bags, along with visibility at Goodwill locations, YMCAs and local community service organizations



Vote

Health Connector staff recommends authorizing the Executive Director to enter into work orders with Dell Marketing, LLP 1) to expand call center business hours and 2) to implement CICs and a Boston walk-in center redesign, on the terms set out in this presentation.

Additionally, Health Connector staff recommends that the Executive Director be authorized to enter into contract(s) or work order(s) with Dell, other agencies, or other operational support vendors, if required, to provide staff augmentation, up to an amount of \$900,000.



Appendix

FY16 Navigator Grantees

Grantee	Benefit to the Commonwealth	Award Amount/ Language Capacity
Boston Public Health Commission	The Boston Public Health Commission (BPHC) is a returning Navigator (2+ years) and will deliver a comprehensive and innovative outreach strategy that includes providing mobile Navigators throughout the city of Boston with more focus on high needs areas such as East Boston and Dorchester . BPHC will also emphasize assistance to vulnerable populations, including those who recently lost their jobs, immigrants and low-income residents. Some unique approaches to outreach include posting ads on Boston Metro Cabs, and a flyer program within different census tracts in the Boston area.	\$138,518
		Cape Verdean Creole/ English/French/Haitian Creole/Portuguese Spanish
Cambridge Economic Opportunity Council	A community-based organization with a history of providing health coverage assistance to Cambridge-area residents, the Cambridge Economic Opportunity Council (CEOC) is a returning Navigator (1+ years) . CEOC will especially target people through its Certified Volunteer Income Tax preparation program, and is creating a one-stop program that will allow individuals to sign up for health insurance, the Supplemental Nutrition Assistance Program and other public benefits in one meeting. This year, they are expanding their outreach into surrounding communities with high need including Medford, Everett and Revere . Their outreach will be focused in on non-traditional sites such as barbershops, restaurants and salons.	\$88,550
		English/Farsi/Haitian Creole/Spanish
Caring Health Center	Caring Health Center (Caring) is a returning Navigator (2+ years) , providing a full range of preventive and primary health care through three locations. Caring will target graduating students from the Springfield area and continue its outreach efforts to those in the Greater Springfield area who are transitioning to ACA coverage this fall. They have a uniquely focused outreach plan that consists of tabling throughout the community with laptops and portable printers to enable applications to be done on the spot.	\$187,320
		English/Spanish

FY16 Navigator Grantees (cont'd)

Grantee	Benefit to the Commonwealth	Award Amount/ Language Capacity
Community Action Committee of Cape Cod & Islands	A returning Navigator (2+ years), the Community Action Committee of Cape Cod & Islands (CACCI) takes a comprehensive approach to using community partnerships as part of its outreach, including working with Career Opportunity Centers and the Job Training and Employment Corp to promote assistance in accessing health care coverage. CACCI again plans on staffing an information kiosk at the Cape Cod Mall during Open Enrollment to provide information and schedule appointments. CACCI is prepared for Open Enrollment, with a date and time set for their anticipated regional event.	\$96,959
		English/Portuguese/ Spanish
Ecu-Health Care	Ecu-Health Care, a returning Navigator (2+ years), serves eight towns in North Berkshire County. Ecu-Health combines a multi-pronged approach of advertising, print and social media, and face-to-face community presentations with its knowledge of transitioning populations and community partnerships to expand health care access in North Berkshire County. Ecu- Health plans to maximize outreach with a continuing partnership with Berkshire Medical Center and a plan for a mail and phone campaign to outreach clients.	\$45,000
		English
Family Health Center of Worcester	Family Health Care of Worcester (FHCW) is a returning Navigator (1+ years) that provides access to medical, dental, behavioral health and social services through 15 locations in Worcester and South Worcester County. FHCW provides support to underserved and uninsured residents through its multilingual and multicultural staff, and will promote self-sufficiency with the availability of self-service computer kiosks. FHCW will continue and expand its “robo-call” outreach to accommodate five different languages, along with mailings, flyers and other local and ethnic media.	\$170,444
		Arabic/English/French/ Italian/Portuguese/Spanish

FY16 Navigator Grantees (cont'd)

Grantee	Benefit to the Commonwealth	Award Amount/ Language Capacity
Fishing Partnership	The Fishing Partnership is a returning Navigator (1 +years) in Massachusetts with locations in Gloucester, Scituate, New Bedford and Chatham. The Fishing Partnership has a very detailed outreach approach that uses an in-depth member database and years of experience working with its target populations in coastal Massachusetts communities. Fishing Partnership hosts a mix of activities based upon knowledge of fishing communities and passes out brochures and flyers on the docks.	\$110,000
		Italian/Portuguese/Spanish
Greater Lawrence Community Action Council	A returning Navigator (2+ years), Greater Lawrence Community Action Council (GLCAC) is focused on helping residents achieve self-sufficiency. As a Navigator, GLCAC will use its knowledge of transitioning populations and existing partnerships with neighborhood associations to contact residents, and will use a mix of local and ethnic media – including newspapers and radio – to promote the ACA. GLCAC will send two outreach staff into the community and expand their social media into both English and Spanish.	\$144,189
		English/Spanish
Health Care for All	A new Navigator, but a long-standing Health Connector partner, Health Care for All (HCFA) has strong knowledge of the ACA and the health insurance landscape in Massachusetts. HCFA has the ability to mobilize community partners around the Commonwealth for outreach and enrollment activities. They will cover the following high need communities: Everett, Lynn, Chelsea, Revere, Lowell, Framingham, Fall River and Brockton. HCFA's strong all-around approach to outreach will bring 10 pre-Open Enrollment fairs to these high need areas.	\$249,953
		English/Portuguese/Spanish

FY16 Navigator Grantees (cont'd)

Grantee	Benefit to the Commonwealth	Award Amount/ Language Capacity
Hilltown Community Health Centers	A returning Navigator (2+ years), Hilltown Community Health Centers (Hilltown) serve the rural sections of Hampshire and Hampden counties through four sites, and is the only provider of comprehensive medical, dental and other services in the region. With the use of their own electronic records at the Health Center, Hilltown can identify members who need to take action. Hilltown will also take advantage of local opportunities such as agricultural fairs, employment events and health expos to provide outreach and enrollment services.	\$35,543
		English
Manet Community Health Center	A returning Navigator (2 + years), Manet Community Health Center (Manet) serves the South Shore through six locations, including a new site in Taunton. Outreach and enrollment activities will focus on target populations including the area's Chinese, Vietnamese, Brazilian, Muslim and Indian communities, with outreach and enrollment events held in conjunction with local colleges and universities, career centers and food pantries. Manet proposes to do street and MBTA canvassing as well as increase their social media presence.	\$87,650
		Arabic/Cantonese/English/ French/German/Hindi/ Mandarin/Spanish/Punjabi/ Sanskrit/Sindhi/Tagalog/Urdu
People Acting in Community Endeavors	A returning Navigator (2+ years), People Acting in Community Endeavors (PACE) provides a variety of health, education, housing and social services to vulnerable populations in the South Coast region. PACE uses local media outlets – including Community Access TV, and radio and print media in Spanish and Portuguese – to promote activities and events, and has multilingual staff to assist clients. Small focus groups are being explored to help better target outreach.	\$92,887
		English/Portuguese

FY16 Navigator Grantees (cont'd)



Grantee	Benefit to the Commonwealth	Award Amount/ Language Capacity
Tapestry Health	Tapestry Health (Tapestry) is a new Navigator that has 14 easily accessible locations within Western Massachusetts, with a special focus on the Springfield area. Tapestry plans to devote a multitude of time to outreach activities like cultural and health fairs, street outreach, door-to-door campaigning, and other day and night events. Tapestry will team with regional Certified Application Counselors to ensure that people are taking the action needed to get the coverage that is right for them with strategic intake and screening processes.	\$96,796
		English/Spanish
Vineyard Health Access/County of Dukes County	Vineyard Health Access/County of Dukes County (VHCAP) is a returning Navigator (1+years) that previously worked as a Certified Application Councilor. VHCAP is the primary contact for health care coverage information and assistance for small businesses and self-employed consumers on the Islands, and includes a multilingual and multicultural staff that works with medically underserved Native Americans, Brazilians and other residents. VHCAP's plans for outreach include PSAs on local stations and utilizing their Portuguese language Facebook page.	\$43,892
		English/Portuguese/ Spanish/
TOTAL		\$1,587,701