

2024-2028 Health Connector Strategic Plan Update and Conversation

Health Connector Board of Directors Meeting

PATRICIA GRANT

Deputy Executive Director and Chief
Operating Officer

NURY HERRERA

Senior Agency Affairs Coordinator

ERIN RYAN

Chief of Staff

MARISSA WOLTMANN

Chief of Policy and Plan Management

December 12, 2024

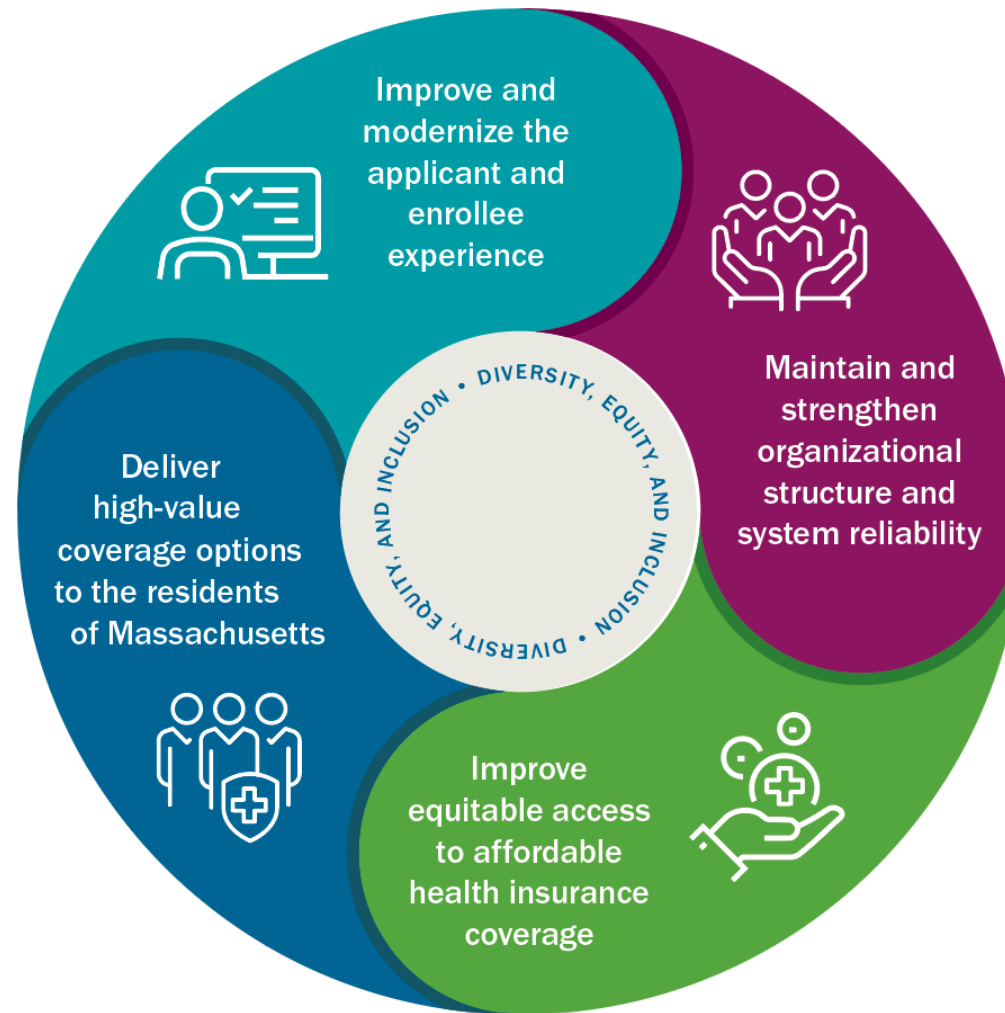


Overview

Health Connector staff will review progress made during the first year of the 2024-2028 Health Connector Strategic Plan and seek input from the Board on overarching goals for 2025.

- Overview and 2024 highlights
- 2025 Health Connector goals
- Discussion questions for Board

Review of 2024-2028 Strategic Plan



Health Connector 2024 Highlights



Efforts to reduce administrative burdens already delivering results

Smoothly transitioned 192,000 redetermined residents from MassHealth to the Health Connector



Launched initiatives on internal business improvement & staff professional development and wellness

New contact center vendor procurements completed and implementation underway



Health Connector enrollment grew 31 percent over the year, reaching highest level of enrollment in agency history

55,000 members enrolled in the new ConnectorCare Expansion pilot



Introduced maternal health and cardiometabolic goals into Seal of Approval

Launched carrier-to-member communication initiative to promote preventive care among lower income enrollees

Highlights of Progress Made in 2024

Aligned with the “improve applicant experience” focus area, the Health Connector expanded the list of acceptable forms of documentation to prove applicant identity. Applicants are already having a smoother experience.

- Initiative focused on reducing administrative burden for population more likely to be required to submit proof of identity in order to continue application
- One month of data shows decrease in the unacceptable “identity proofing” (IDP) document caseload: **46 percent decrease** in document failure rate (Oct. vs. Nov.)
- More people are making it through the IDP process without need for submitting additional documentation, leading to increased health coverage

Highlights of Progress Made in 2024

The Health Connector initiated a new prioritized focus on internal business operations and staff development this year.

- Launched an effort to develop Standard Operating Procedures (SOPs) for **576 business functions** carried out by the Health Connector
- Initiated **over a dozen** internal initiatives to more fully promote staff professional development, connectivity, engagement with leadership and across-departments, and improved internal communication
- Launched improved approach to more comprehensive onboarding process for new hires, better setting up new team members for success
- Improved and developed **four** new hire trainings and established new training and business resources for existing employees

Highlights of Progress Made in 2024 (Cont.)

New and enhanced outreach initiatives improved awareness and accessibility “to affordable health insurance coverage”.

- Successful implementation of expanded ConnectorCare program, with communications sent to **470,000** unique recipients, and with **55,000 members** now enrolled in new benefits
- Expanded in-person assistance through multiple channels by adding **three new Navigator organizations** and **11 in-person assistance sites** (for a total of **24 Navigator organizations** that speak **32 languages**)
- Created new outreach focus on Massachusetts’s **600,000** gig and creative economy workers
- Completed post-pandemic redeterminations process and enrolled **192,000 unique residents** moving from MassHealth to the Health Connector

Highlights of Progress Made in 2024 (Cont.)

Unveiled in November, the “Premium Value Plan” designation highlights the availability of existing high-value health insurance coverage at lower than market average premiums available to the small-group market.

- Introducing “Value Plan” designation and implemented new way for small businesses to filter and find plans that “beat the market” on premium
- Small businesses could **save 20 percent** when selecting plans with the “Premium Value Plan” designation that delivers the same level of benefits
- New advertising material highlights savings, including digital display and TV sponsorship and has made **2.7 million impressions** since November
- Outreach through the National Association of Benefits and Insurance Professionals in 2025, including **four in-person events, sponsorship opportunities**

2025 Agency Goals

2025 Health Connector Goals

- The Health Connector has identified organizational goals for 2025, based on its strategic plan, its progress against that plan to date, and an updated landscape assessment
- All goals tie to at least one component of the Health Connector's strategic plan
- Equity is a component and overarching goal of all Health Connector work, and organizational efforts in 2025 will result in a more integrated approach to tracking and measuring progress against equity goals
- Health Connector staff will incorporate feedback from today's conversation to inform specific tactics for achieving these goals for 2025

2025 Health Connector Goals



Modernizing Member Experience

- Continue focus on streamlining application experience
- Implement new contact center vendor seamlessly



Strengthening Organization and System

- Standardize internal business process documentation
- Improve internal training and development opportunities



Improving Equitable Access

- Solicit and incorporate member feedback in more ways
- Support and coordinate with statewide equity efforts



Providing High-Value Coverage

- Engage with state and private partners to address current challenges of cost and access
- Enhance awareness of HCB's cost-saving opportunities

Guiding Questions on 2025 Goals

While discussing the Health Connector's proposed goals for 2025, please consider the following questions.

- Considering the goals outlined for 2025, what **greatest challenges** do you imagine? What are our **blind spots**?
- How does the Health Connector **sustain and advance** its programs during a time of **challenging market dynamics** and **changes in the policy environment**?
- Given that underlying **costs and affordability** are an increasing concern across all market segments and stakeholders, how should the **Health Connector position** itself in this space?
- What **questions or observations** do these priorities and goals bring to mind?



Improving and Modernizing the Enrollee Experience

Reducing administrative burdens for applicants and enrollees

- **In progress:** Continued measurable progress in addressing the administrative burdens identified by “sludge assessment”
- **New:** Improve Document Processing Verification (DPV) process for members, including ability for real-time verification

Modernize and integrate Health Connector application with additional state programs

- **In progress:** Ensure that the unique needs of Health Connector members remain prioritized in all efforts to improve application
- **New:** Ensure that the improvements associated with broader state efforts to streamline benefit applications are meaningful for Health Connector members

Improving Operational Stability and Vendor Management



Commitment to providing best-in-class experience for members and our stakeholder partners through improved vendor systems and management continues.

- **In progress:** Successful implementation of new contact center, with smooth “unfelt” transition during phased cutover beginning on April 1, 2025, including:
 - Higher service level expectations, and emphasis on first call resolution
 - Improvements in technology to enhance member experience and contact center efficiency
- **New:** Reviewing all vendor contracts and relationships and resetting higher expectations around service delivery and quality
 - Re-organizing to combine vendor operations, project management, and procurement to enhance contract oversight
 - Creating formal Quality Assurance team to centralize all QA activities across contracts
- **New:** Make material progress towards a single communications messaging tool



New Heights for Internal Operations

New internal infrastructure will help the Health Connector function more stably and effectively, allowing it to begin working on "long term" objectives.

- **In progress:** Investment in employee training, expanding subject matter expertise, and staffing plans
- **In progress:** Strengthen Human Resources infrastructure to support existing employees and field best-in-class new hires
- **In progress:** Standardization of business documentation and new processes for continued utilization
- **New:** Launch of agency-wide risk assessment project

Strengthening Data and Analytics

Having successfully launched a new data and reporting platform, the reporting team can now focus on developing improved analytic capacity, including:

- **In progress:** Development of agency-wide dashboard, representing membership, customer service performance and consumer experience metrics for data-driven decision-making
- **New:** Revamped and improved enrollment report for the Board of Directors and other stakeholders
- **New:** Bring more robust claims data in house to support efforts to better understand direct impacts of Health Connector action on member health outcomes
- **New:** Ability for agency staff to quickly identify and respond to trends



Engaging the Member Voice to Inform Decision Making



The Health Connector will create new ways to receive and respond to feedback from the public, members, and stakeholder partners to inform how we improve access to high value coverage for residents.

- **In progress:** For the first time, the Health Connector will hold regular community engagement sessions with members and the public, including listening sessions and town halls.
- **New:** Establish a member advisory council and establish a process to work with our members in communities to ensure their voices are at the table in shaping our work

Improving Access to and Delivering High Quality Coverage Options



The Health Connector will work to maintain and expand its programs to maximize enrollment in high-quality health insurance.

- **In progress:** Work with state leaders to maintain affordable coverage options that create access to care, to the extent possible
- **In progress:** Align quality and value measures and goals with other stakeholders
- **In progress:** Navigate new federal administration and best position the Health Connector
- **New:** Expand attention to the Health Connector's role in dental and vision space and responding to member needs
- **New:** Consider any new tools for the Health Connector's involvement in broader market dynamics, in light of recent market challenges and in the interest of affordability and access goals



Delivering High-Value Coverage to the Small Group Market

Health Connector for Business team will evaluate growth in program and identify areas of success, differentiation strategy, and areas in need of continued improvement and innovative approaches.

- **In progress:** Make improvements to the small group application and interface
- **In progress:** Exploration of use of Health Connector for Business to bring value to broader small group market
- **New:** Continue to improve relationships with brokers to help increase Health Connector for Business enrollments

Guiding Discussion Questions

Discussion Regarding 2025 Goals

- What are your **reactions to the Health Connector priorities** outlined for 2025?
- Are there **priorities missing** from these goals for 2025, or are there priorities that should receive less agency energy?
- Considering the goals outlined for 2025, what **greatest challenges** do you imagine? What are our **blind spots**?
- How does the Health Connector **sustain and advance** its programs during a time of **challenging market dynamics** and **changes in the policy environment**?
- Given that underlying **costs and affordability** are an increasing concern across all market segments and stakeholders, how should the **Health Connector position** itself in this space?
- What **questions or observations** do these priorities and goals bring to mind?