



Massachusetts Health Connector Strategic Plan 2024–2028 Milestone Report

February 2026

About this report

The Health Connector continues to take intentional steps to integrate the goals enumerated in the 2024-2028 Massachusetts Health Connector Strategic Plan into the day-to-day work of the agency and its staff. This approach brings the strategic plan to life through tactical action plans and by centering its tenets for staff and organizational decision-making. In the third year of the five-year strategic plan, the Health Connector will continuously reassess how its work responds to a changing landscape without losing focus on its primary goals and opportunities for stability and success. This applies internally, with external partners, and most importantly, to how we serve our members.

To ensure proper prioritization of work in 2026 and beyond, the Health Connector will continuously assess how each work track—big or small—advances the agency’s goals as reflected in our strategic plan. Milestone Reporting for 2026 will focus on monitoring progress towards critical milestones and the impact of completed work tracks, while streamlining reporting on individual work tracks. The Health Connector assessed the top three agency priorities of 2025, and for 2026, is transitioning the completed work and introducing refined priorities for 2026. These priorities, unveiled during the Health Connector’s Strategic Board meeting in November 2025, require the effort and support of all Health Connector staff to ensure success.

The Health Connector remains grateful for the commitment and support of its Board of Directors and external stakeholders who support its mission to ensure that all Massachusetts residents have affordable, comprehensive health coverage, and looks forward to continuing to apprise the public of its progress advancing its 2024-2028 Strategic Plan.

2026 – 2027 Agency Priorities

In 2025, the Health Connector identified key agency priorities at the start of the calendar year, all of which supported the agency's overall Strategic Plan, and will continue this practice in 2026. By identifying clear priorities and the work tracks that support them, staff can better prioritize their own work and more clearly connect their day-to-day activities with progress measured by our Strategic Plan and improving the Health Connector's service to the residents of the Commonwealth. Agency priorities and associated work tracks have been updated in this Milestone Report to reflect progress from 2025 as we move into 2026.

During 2025, the Health Connector focused its priorities on:

- Successful implementation of the agency's new contact center vendor
- Successful procurement and possible transition to a new Enrollment and Premium Billing (EPB) vendor
- Navigating a dynamic federal landscape while maintaining stability and preserving access to care

Significant progress was made across all three priorities. Notably, Health Connector staff successfully implemented a new contact center vendor, Automated Health Services (AHS), in 2025, with the transition fully completed and well-established during the second half of 2025. In 2026, while this work remains important, it will transition to a state of "business as usual."

For 2026-2027, the Health Connector will continue its multiyear commitment to its remaining two priorities from 2025 (1, and 2 below) and intensify its focus on strengthening organizational infrastructure that is central to positioning the Health Connector for future success.

- Successful implementation of the agency's new Enrollment and Premium Billing (EPB) vendor
- Policy Leadership on Coverage & Affordability
- Strengthening Organizational Infrastructure

Successful implementation of the Health Connector's Enrollment and Premium Billing (EPB) vendor

Goal: Conduct smooth implementation of a new Enrollment and Premium Billing (EPB) system that delivers much more consistent and reliable member functionality and reduces friction currently shouldered by staff and members, making key resources available to take on new challenges.

- Implementation of the new EPB system continues to move forward but with some development delays, which may affect the overall timelines

- Maximus and the Health Connector have met to re-baseline the project, incorporate lessons learned, and create a revised workplan moving forward
- A transition SOW with Softheon is still outstanding, although a fully executed NDA is in place thereby allowing transfer of data between Softheon and Maximus and its subcontractor, Catalis

Policy Leadership on Coverage and Affordability

Goal: Continuous evaluation of programs and offerings, evolving them to meet changing needs and to account for unfavorable policy or fiscal headwinds, and investing in partnerships that allow for holistic solutions to shared challenges.

- In 2025, significant shifts in federal policy required action by the Health Connector. Both the passage of the “One Big Beautiful Bill” Act in July 2025 and the expiration of enhanced federal premium tax credits resulted in the Health Connector working to understand and implement federal changes to minimize disruptions and burdens for enrollees, including a robust outreach campaign to help individuals losing access to federal premium tax credits understand and respond to these changes.
- The Health Connector continues to monitor Congressional, Executive and Judicial activity, preparing for various outcomes with a focus on mitigating the impact on our members and the state’s health insurance ecosystem
- Major milestone in next 6 months
 - Staff anticipate additional federal rulemaking for analysis and implementation, including the annual Notice of Benefit and Payment Parameters regulation
 - Staff will prepare to implement new eligibility and operational rules for 2027, including a shortened Open Enrollment period and elimination of tax credit eligibility for many lawfully present immigrants
- Risks: Timelines for and content of forthcoming federal proposals are unknown, adding uncertainty to the Health Connector’s work and the market overall

Strengthening Organizational Infrastructure

Goal: Create an organizational culture focused on establishing roles, business norms, processes, systems, and ways of working that support reliable, aligned performance across the Health Connector and position the Health Connector for nimbleness, greater efficiencies, and improved systems and technologies.

- Active procurement for a full-service Human Resource Information System (HRIS) that includes HR, Learning Management and Payroll modules
- Currently working with a vendor to review and align compensation across the agency
- Working on a procurement to provide a safety assessment to better prepare staff in the event of any type of emergency
- Working with contact center vendor to improve back-end systems to be more efficient and to streamline customer service

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Strategic Focus: Improve and Modernize the Applicant and Enrollee Experience


Goal: Ensure residents can seamlessly and quickly enroll in and easily maintain coverage

Tactic 1: Simplify and reorganize notice language and delivery method

Key Milestone(s)	Milestone Progress	Key Progress Indicators	Challenges and Dependencies
<ul style="list-style-type: none"> ▪ Identify and create editable documents for all enrollment and premium billing notices - complete ▪ Create user feedback and testing programming for material – complete ▪ Review all enrollment and premium billing notices, and email and SMS messages - complete ▪ Finalization of all material for EPB vendor, including translations - in process ▪ All HIX notices have been reviewed, updated, and finalized. Material is in translation process 	<p style="text-align: center;">90% complete</p> <div style="text-align: center;">  </div> <p style="text-align: center;">*50% complete as of the prior report</p>	<p>Expected Impact</p> <ul style="list-style-type: none"> ▪ Improved member experience through reorganization and simplification of member messaging through the most effective channels <p>KPI</p> <ul style="list-style-type: none"> ▪ Decrease in contact center calls related to member confusion in 2025 	<ul style="list-style-type: none"> ▪ Process to update HIX notices takes time

Goal: Provide a more user-friendly, streamlined online experience for residents and members engaging digitally with the Health Connector


Tactic 1: Update and reorganize content on the non-application portion of the Health Connector website

Key Milestone(s)	Milestone Progress	Key Progress Indicators	Challenges and Dependencies
<ul style="list-style-type: none"> ▪ Define website refresh goals and objectives - complete ▪ Update and develop content, maximizing search engine optimization (SEO) development - ongoing ▪ Implement updated content structure and functionalities for a seamless user experience - ongoing ▪ Monitor performance, gather feedback, and make iterative improvements - ongoing 	<p style="text-align: center;">70% complete</p> <div style="text-align: center;">  </div> <p style="text-align: center;">*60% complete as of the prior report issued</p>	<p>Expected Impact</p> <ul style="list-style-type: none"> ▪ The Health Connector website will be easier for residents to find when searching on the internet, and once on the website will be able to find relevant information on Health Connector website more easily <p>KPI</p> <ul style="list-style-type: none"> ▪ Improved SEO performance metrics (<i>i.e.</i> keyword ranking, search engine visibility, site visitors) ▪ Positive trends in user engagement metrics (<i>i.e.</i> decrease in bounce rate or time on site) 	<ul style="list-style-type: none"> ▪ Staff bandwidth to evaluate and update nearly 800 published pages plus portable documents (PDFs) may be limited ▪ Developing a sustainable, managed content repository system will require extensive bandwidth

Strategic Focus: Maintain and Strengthen Organizational Structure and System Reliability


Goal: Foster an inclusive work environment that centers professional growth and staff empowerment

Tactic 1: Establish a learning and development team and create a formal onboarding and training curriculum for staff (This tactic has been successfully embedded into standard workflows and is now operating as business as usual.)

Key Milestone(s)	Milestone Progress	Key Progress Indicators	Challenges and Dependencies
<ul style="list-style-type: none"> ▪ Completion of the first phase of the multi-phase new hire onboarding curriculum by the end of June ▪ Facilitate first round of onboarding sessions for managers in August ▪ Facilitate second round of onboarding sessions by the end of September ▪ Assess feedback from new hires of the onboarding experience to address future improvement ▪ Develop an onboarding curriculum for managers 	<p style="text-align: center;">100% complete</p> <div style="text-align: center;">  </div> <p style="text-align: center;">*75% complete as of the prior report</p>	<p>Expected Impact</p> <ul style="list-style-type: none"> ▪ New and existing staff will have a strong foundation on the history, culture, and functions of the Health Connector ▪ All staff will have the opportunity to experience self-paced learning through the Learning Management System <p>KPI</p> <ul style="list-style-type: none"> ▪ Increase in the percentage of new hires and staff actively engaging with the learning library ▪ Reduction in staff reporting feeling 'siloe'd' and improved understanding of processes across agency 	<ul style="list-style-type: none"> ▪ Time and staff constraints vis-à-vis development of content for training materials ▪ Delays in the review and approval of content


		<ul style="list-style-type: none"> ▪ Increase in the number of online trainings completed year over year 	
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Tactic 2: Health Connector Diversity, Equity, Inclusion, and Belonging (DEIB) staff workgroup to center DEIB within the Health Connector’s culture (This tactic has been successfully embedded into standard workflows and is now operating as business as usual.)


Key Milestone(s)	Milestone Progress	Key Progress Indicators	Challenges and Dependencies
<ul style="list-style-type: none"> ▪ Establish mission and renewed focus of internal workgroup ▪ Raise awareness and elevate celebrations and observances that reflect and affirm various aspects of identity of staff - ongoing 	<p>100% complete</p>  <p>*60% complete as of the prior report</p>	<p>Expected Impact</p> <ul style="list-style-type: none"> ▪ Renewing its commitment to serving as a diverse and inclusive workplace <p>KPI</p> <ul style="list-style-type: none"> ▪ Establish baseline data with respect to diversity of staff and leadership ▪ Increase in foundational DEIA training to enrich internal and member-facing work 	<ul style="list-style-type: none"> ▪ Dependency on staff bandwidth to organize events

Goal: Ensure, invest in, and cultivate reliable Health Connector organizational functions


Tactic 1: Make incremental process improvements to the annual Seal of Approval (SOA) (This tactic has been successfully embedded into standard workflows and is now operating as business as usual.)

Key Milestone(s)	Milestone Progress	Key Progress Indicators	Challenges and Dependencies
<ul style="list-style-type: none"> ▪ Additional process improvements planned for 2026 ▪ Complete 2026 SOA submission review ▪ Prepare for 2027 RFR release in February 2026 	<p style="text-align: center;">100% complete</p> <div style="text-align: center;">  </div> <p style="text-align: center;">*60% complete as of the prior report</p>	<p>Expected Impact</p> <ul style="list-style-type: none"> ▪ Improved stability in the SOA process and predictability for carrier partners <p>KPI</p> <ul style="list-style-type: none"> ▪ Improved carrier engagement, understanding of, and satisfaction with the SOA as a business process 	<ul style="list-style-type: none"> ▪ Dependency on/need to align with various federal and state processes and deadlines ▪ Potential dependency on carriers' resources and responses, bandwidth, timing constraints, etc.


Tactic 2: Enhance relationships with carrier partners (This tactic has been successfully embedded into standard workflows and is now operating as business as usual.)

Key Milestone(s)	Milestone Progress	Key Progress Indicators	Challenges and Dependencies
<ul style="list-style-type: none"> ▪ Internal reorganization of carrier functions ▪ Conduct exec-to-exec level meetings with carrier leadership on an annual basis, starting in 2024 ▪ Create a Health Connector operational and technical road map to aid carriers in planning 	<p style="text-align: center;">100% complete</p> <div style="text-align: center;">  </div> <p style="text-align: center;">*66% complete as of the prior report</p>	<p>Expected Impact</p> <ul style="list-style-type: none"> ▪ Health Connector and carriers can jointly strategize regarding market, policy, and business issues with greater ease <p>KPI</p> <ul style="list-style-type: none"> ▪ Decrease in the overall volume of avoidable expedited high-priority carrier issues handled by the Carrier Relations team in 2024 ▪ Increase in identification, calendaring, proactive planning, and execution of both Health Connector and carrier-driven projects 	<ul style="list-style-type: none"> ▪ Dependency on carriers to disclose a comprehensive and accurate list/information for carrier initiatives portion of this scope ▪ Dependency on vendors and Health Connector leadership to approve projects, resources, and meet finalized timelines ▪ Dependency on vendor resources and potential conflicting priorities to create project plans, execute project plans and meet deadlines that are published to carriers ▪ Difficult to account for “unknown” projects that may arise as the result of system defects, new regulatory or statutory requirements, etc. ▪ Relatively short runway to implement changes associated with new enrollment and premium billing vendor


Tactic 3: Improve carrier financial reconciliation and reporting (future reporting will be available in Impact Analysis Summary)

Key Milestone(s)	Milestone Progress	Key Progress Indicators	Challenges and Dependencies
<ul style="list-style-type: none"> ▪ Adoption of manual fix by year-end 2024 ▪ Improve financial visibility by providing carriers two new reports: <ul style="list-style-type: none"> ▪ <u>Grace Period Write Off (GPW) Reports</u>: These monthly reports include ConnectorCare and subsidized members and the applicable coverage month for which a GPW applies, as well as GPW reversals due to enrollment changes ▪ <u>Accounts Receivable Aging Report</u>: This is a monthly report that will include all outstanding member premium balances 	<p style="text-align: center;">100% complete</p> <div style="text-align: center;">  </div> <p style="text-align: center;">*95% complete as of the prior report</p>	<p>Expected Impact</p> <ul style="list-style-type: none"> ▪ Fewer discrepancies between Health Connector and carrier reports resulting in improved member experience and improved efficiencies in processes <p>KPI</p> <ul style="list-style-type: none"> ▪ Decrease in contact center calls due to member confusion ▪ Decrease in the overall volume of avoidable expedited high-priority carrier issues handled by the Carrier Relations team in 2025 	<ul style="list-style-type: none"> ▪ Potential competing projects and resources can delay the rollout of the new reports ▪ Importance of explaining how the reports can be used to decrease the number of false discrepancies to avoid carrier confusion


Tactic 4: Improve definition and documentation around agency processes and responsibilities

Key Milestone(s)	Milestone Progress	Key Progress Indicators	Challenges and Dependencies
<ul style="list-style-type: none"> ▪ External vendor secured to provide support to agency effort to document all business processes - complete ▪ Phase 1 of project, which includes initial assessment and inventory of existing documentation — complete ▪ Phase 2 of project including prioritization of work, writing and updating documentation in various stages of completion — complete ▪ Phase 3 of project to develop staff training 	<p style="text-align: center;">95% complete</p> <div style="text-align: center;">  </div> <p style="text-align: center;">*85% complete as of the prior report</p>	<p>Expected Impact</p> <ul style="list-style-type: none"> ▪ Increased clarity in internal team responsibilities, subject matter expert roles, compliance management, and quality assurance responsibilities ▪ More standardized and organized process documentation ▪ Highlighted and documented handoffs in complex, cross-agency processes that have evolved over many years ▪ Centralized library that serves as a living staff resource <p>KPI</p> <ul style="list-style-type: none"> ▪ Improved staff efficiencies ▪ Decrease in incidence of internal business process gaps 	<ul style="list-style-type: none"> ▪ Constraints of staff time and bandwidth to provide expertise needed for documentation project


Tactic 5: Procure and implement a new HRIS system

Key Milestone(s)	Milestone Progress	Key Progress Indicators	Challenges and Dependencies
<ul style="list-style-type: none"> ▪ Procurement posted January 29, 2026 ▪ Receive bids, review and choose a vendor, execute contract by April ▪ Implement HR module by September 1 ▪ Implement Payroll module by December 27 for first payroll cycle of 2027 ▪ Implement Learning Management System (LMS) module 	<p style="text-align: center;">25% complete</p> <div style="text-align: center;">  </div> <p style="text-align: center;">*Newly added work track</p>	<p>Expected Impact</p> <ul style="list-style-type: none"> ▪ Integrate HR, Payroll, and LMS systems ▪ Automate HR tasks such as recruitment, hiring, onboarding, and benefits ▪ Improve data accuracy and compliance ▪ Reduce administrative burdens and manual errors ▪ Allow employee self-service ▪ Provide training platform for staff education and development <p>KPI</p> <ul style="list-style-type: none"> ▪ Reduced time from job posting to hiring ▪ Improved employee satisfaction surveys ▪ Increased participation in staff learning opportunities 	<ul style="list-style-type: none"> ▪ Lack of competitive bids ▪ Bids from vendors are unable to provide all 3 modules ▪ Delays in implementation

Tactic 6: Complete transition activities with new Enrollment and Premium Billing (EPB) vendor

Key Milestone(s)	Milestone Progress	Key Progress Indicators	Challenges and Dependencies
<ul style="list-style-type: none"> Fully executed Non-disclosure Agreement and transitional Statement of Work Finalize scope, functional and technical specifications Complete system development Complete comprehensive system and end to end tests 	<p>33% complete</p>  <p>*Newly added work track</p>	<p>Expected Impact</p> <ul style="list-style-type: none"> Improved user experience and stable system processing <p>KPI</p> <ul style="list-style-type: none"> High pass rate from testing Minimal errors and low defect rate High data quality 	<ul style="list-style-type: none"> Aggressive implementation timelines for a complex implementation that may require re-baselining of the overall timeline Heavy external resource dependencies - current vendor, HIX systems, Carriers, Fulfillment and Contact Center Delays in data migration due to delay in getting fully executed NDA Risk due to lack of agreed upon transitional Statement of Work with current vendor

Tactic 7: Comprehensive test strategy to mimic production processing and prolonged parallel processing


Key Milestone(s)	Milestone Progress	Key Progress Indicators	Challenges and Dependencies
<ul style="list-style-type: none"> Complete all development and end to end testing activities 90 days before go-live Complete data migration testing to ensure data accuracy Production ready code prior to 3-month parallel processing 	<p>0% complete</p>  <p>*Newly added work track</p>	<p>Expected Impact</p> <ul style="list-style-type: none"> Identify discrepancies between vendor systems and resolve through defect remediation and additional testing Production ready code <p>KPI</p>	<ul style="list-style-type: none"> Dependent on all transition activities being completed 90 days before scheduled go live Dependent on new vendor system working as designed External resource dependencies to support parallel processing

<ul style="list-style-type: none">▪ Identify the business processes and develop validation points to compare the process outcomes between the 2 vendors.		<ul style="list-style-type: none">▪ 0 defects/discrepancies between systems that cannot otherwise be explained as valid	
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Strategic Focus: Improve Equitable Access to Affordable Health Insurance Coverage

Goal: Expand equitable access to affordable health coverage

Tactic 1: Establish a strategy for community engagement – Phase 1


Key Milestone(s)	Milestone Progress	Key Progress Indicators	Challenges and Dependencies
<ul style="list-style-type: none"> ▪ Identify approach and finalize goals by June 2024 ▪ Begin hosting community input/perspectives forums end of 2024 ▪ Schedule forums, in person and virtually, in expanded language capacity, in 2025 ▪ Refine forum guides and discussions to maximize learning in meetings ▪ Develop recommended framework for future community engagement opportunities 	<p style="text-align: center;">100% complete</p> <div style="text-align: center;">  </div> <p style="text-align: center;">*90% complete as of the prior report</p>	<p>Expected Impact</p> <ul style="list-style-type: none"> ▪ Institutionalization of a way for the public and members to have a seat at the table and detail experiences and perceptions of the Health Connector to inform Health Connector decision-making and strategy <p>KPI</p> <ul style="list-style-type: none"> ▪ Increase in resident and member feedback to the Health Connector and create mechanism to respond back to communities 	<ul style="list-style-type: none"> ▪ Forming a forum format that engages participants and allows for expansive viewpoints while working through identified areas of inquiry ▪ Recruitment of attendees appropriately reflecting a community's needs and perceptions may be beyond existing resources and community partnerships

Tactic 2: Establish a Health Connector Member Health Equity Workgroup – Phase 1

Key Milestone(s)	Milestone Progress	Key Progress Indicators	Challenges and Dependencies
<ul style="list-style-type: none"> Catalogue and onboard workgroup members to work in flight at the Health Connector related to advancing member health equity Develop health equity proposal to enhance/align related work and amplify impact (as well as potentially sunset low-impact work to generate efficiencies) 	<p>100% complete</p>  <p>*45% complete as of the prior report</p>	<p>Expected Impact</p> <p>KPI</p> <ul style="list-style-type: none"> Completion of first-ever catalogue of Health Connector programs and policies related to advancing equity in member health outcomes Completion of health equity proposal 	<ul style="list-style-type: none"> Competing priorities

Goal: Evaluate and address health equity initiatives through data analytics and community engagement

Tactic 1: Implement new data tools to enhance eligibility and enrollment analytics (This tactic is complete, enabling enhanced data access and quality through earlier dashboard availability, optimized metrics, and expanded reporting to include Health Connector for Business data).


Key Milestone(s)	Milestone Progress	Key Progress Indicators	Challenges and Dependencies
<ul style="list-style-type: none"> CMS security approval of new technology Development and implementation of a new business intelligence platform by August 2024 Development of internal dashboard to support Open Enrollment by fall 2024 	<p>100% complete</p>  <p>*90% complete as of the prior report</p>	<p>Expected Impact</p> <ul style="list-style-type: none"> Ability to monitor metrics that indicate disparities in eligibility and enrollment and inform future policy decisions Ability to address questions and contextualize responses to State & Federal agencies 	<ul style="list-style-type: none"> Quality of underlying vendor data to populate/power the business intelligence tool

<ul style="list-style-type: none"> ▪ Development of geo-mapping capabilities for CCA reports by January 2025 ▪ Development of new board reporting ▪ Enablement of public facing dashboards & reports ▪ Delivery of operational dashboard to support broader Health Connector business needs by February 2025 		<p>KPI</p> <ul style="list-style-type: none"> ▪ Implementation of the business intelligence platform by August 2024 ▪ Use new business intelligence platform to design and monitor metrics to indicate disparities in the eligibility and enrollment process ▪ Institutionalization of the business intelligence tool and internal dashboards to provide business owners with information needed to assess performance and overall customer experience 	
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Strategic Focus: Deliver High-Value Coverage Options to the Residents of Massachusetts

Goal: Ensure Health Connector coverage is comprehensive, affordable, and meets residents' needs

Tactic 1: Implementation of communication efforts with carriers to reduce forgone preventive care among lower-income enrollees and members from communities of color (This tactic has been successfully embedded into standard workflows and is now operating as business as usual.)


Key Milestone(s)	Milestone Progress	Key Progress Indicators	Challenges and Dependencies
<ul style="list-style-type: none"> ▪ Coordinate and ensure carriers distribute communications (via email, text, or mail) to members encouraging cancer screenings and other high-value preventive care by the end of 2024 ▪ Carriers to report data on campaign engagement, outcomes, changes in utilization tied to forgone care ▪ Carriers executing on their campaigns; reporting on 2024 carrier activity and outcomes expected in 2026 	<p style="text-align: center;">100% complete</p> <div style="text-align: center;">  </div> <p style="text-align: center;">*75% complete as of the prior report</p>	<p>Expected Impact</p> <ul style="list-style-type: none"> ▪ Decrease in forgone preventive care, particularly among lower-income enrollees and members from communities of color <p>KPI</p> <ul style="list-style-type: none"> ▪ New carrier report delivered to the Health Connector detailing member engagement with the campaign, and known utilization trends in the plan year 2025 ▪ Decrease in reports of forgone care via carriers or members in a survey relative to prior years beginning in 2025 and 2026 	<ul style="list-style-type: none"> ▪ Identifying the timing of outreach to carriers and further coordination

Tactic 2: Leverage the 2027 Seal of Approval process to pursue program and product enhancements aimed at providing affordable, high-value coverage.


Key Milestone(s)	Milestone Progress	Key Progress Indicators	Challenges and Dependencies
<ul style="list-style-type: none"> ▪ Obtain Board approval for changes to the 2027 Seal of Approval RFR by February, 2026 ▪ Issue RFR for 2027 Seal of Approval, incorporating strategy and feedback provided in 2026 by March 1, 2026 ▪ Review RFR Responses and present Seal of Approval recommendations to the Board by September Board Meeting ▪ Begin competitive assessment and strategy development for 2028 by July, 2026 ▪ Complete 2028 SOA strategy and issue Market Survey to request responses by end of December, 2026 	<p style="text-align: center;">10% complete</p> <div style="text-align: center;">  </div> <p style="text-align: center;">*Newly added work track</p>	<p>Expected Impact</p> <ul style="list-style-type: none"> ▪ Health Connector products offer affordable, high-value coverage <p>KPI</p> <ul style="list-style-type: none"> ▪ Rate increases for Health Connector plan designs do not rise at a rate higher than off Exchange products ▪ Unsubsidized plans for individuals and small groups are competitive with those offered off Exchange ▪ Maximum subsidies obtained for members through APTCs for eligible members ▪ Achieve equitable access to providers and care for members eligible for ConnectorCare, including around preventive services 	<ul style="list-style-type: none"> ▪ Delay in receipt of actuarial value calculator has prevented final recommendations for plan designs for 2027, leaving limited time for discussion and decisions ▪ The Health Connector exists within the broader health care landscape and will work with other stakeholders to address shared affordability and coverage challenges

Goal: Increase awareness of the value and brand of Health Connector products

Tactic 1: Maintain and evaluate “Value Plan” for small group market (additional reporting is available in Impact Analysis Summary)

Key Milestone(s)	Milestone Progress	Key Progress Indicators	Challenges and Dependencies
<ul style="list-style-type: none"> ▪ Go live with the “Value Plan” model by November 2024 (PY2025 Open Enrollment), which includes highlighting small group plans within the Health Connector for Business (HCB) shopping experience that are beating market average premiums ▪ Creation and execution of new outreach material, including marketing via participating groups, highlighting availability of Premium Value Plan ▪ Initiating partnership with the state’s largest broker association, NABIP-MA, creating new avenues to provide information to the broker community about Premium Value Plan specifically, and HCB value and benefits generally ▪ Early-stage metric gathering to understand employer and employee shopping decisions (new sales and renewals) relative to the new Premium Value Plan availability 	<p style="text-align: center;">100% complete</p> <div style="text-align: center;">  </div> <p style="text-align: center;">*90% complete as of the prior report</p>	<p>Expected Impact</p> <ul style="list-style-type: none"> ▪ Provide small employers of the Commonwealth with a more simplified way to identify lower-cost employee health plans that continue to provide value <p>KPI</p> <ul style="list-style-type: none"> ▪ Increased interest in products demonstrated through increased quoting, and enrollment activity for Health Connector for Business small group offerings in 2025 	<ul style="list-style-type: none"> ▪ Articulating a framework to support employers in defining what “value” means to them where they may have varying priorities beyond premiums (e.g., network access and other plan features)

Tactic 2: Seek efficiencies in administration of Health Connector for Business program

Key Milestone(s)	Milestone Progress	Key Progress Indicators	Challenges and Dependencies
<ul style="list-style-type: none"> ▪ Develop and execute long-term strategic plan for future of HCB, including: <ul style="list-style-type: none"> ○ Budget assessment and financial modeling to identify needed changes to revenue and expenses ○ Project plan to streamline and integrate HCB and non-group vendor operations ○ Growth strategy to increase HCB percentage of small business market share in MA 	<p style="text-align: center;">10% complete</p> <div style="text-align: center;">  </div> <p style="text-align: center;">*Newly added work track</p>	<p>Expected Impact</p> <ul style="list-style-type: none"> ▪ Improve customer experience for HCB Employers, Employees and Brokers ▪ Establish a sustainable and profitable business model ▪ Streamline program management and vendor/contract oversight within the Health Connector <p>KPI</p> <ul style="list-style-type: none"> ▪ Lower operating costs ▪ Profitable revenue/expense model ▪ Improved customer experience 	<ul style="list-style-type: none"> ▪ Prioritization across Health Connector, DCHBX and vendors ▪ Limited visibility into off-exchange comparisons (e.g., revenue model, broker commissions, service model, budget)

Impact Analysis Summary

About this section

The Health Connector concluded the first year of its 2024-2028 Strategic Plan. Progress has been made on many initiatives the Health Connector set out to tackle at the beginning of 2024 to advance its strategic priorities, and much of that work has continued into 2025. As work progresses in many focus areas, the Health Connector has also completed specific milestones laid out in the Strategic Plan Milestone Report (“Milestone Report”). This summary page will serve as the second chapter to the Milestone Report, providing space for the impact of completed work to be monitored going forward.

The Impact Analysis Summary (“Summary”) will house completed work from the Milestone Report and outline the metrics that will be used to gauge the impact of Health Connector initiatives on advancing the goals of the strategic plan. This Summary will provide regular updates on how completed work continues to affect the members we serve, how we engage with them, and how they access health insurance coverage and health care, to understand if the expected impact and intention of our work is being achieved. Below, one will find a brief outline of the tactic originally included in the Milestone Report and the expected impacts and key progress indicators identified in the Milestone Report, with the addition of the metric(s) that will be used to monitor and paint a more comprehensive picture of the impact of this work. The Summary will also capture the completed work that either does not lend itself to an immediate quantitative metric or may require multiple phases before reaching a point of being able to measure its impact, and completed tracks will be labeled as such.

We look forward to monitoring the impact the Health Connector’s work has on advancing our broader agency’s goals, and the opportunity that this Summary will provide to both learn from our success and iterate and adapt initiatives when the intended direction is not being achieved.

Reduce barriers to the Identity Proofing (IDP) portion of the application

Strategic Plan Focus Area: Improve and Modernize the Applicant and Enrollee Experience

Goal: Ensure residents can seamlessly and quickly enroll in and easily maintain coverage

Executive Summary

- Health Connector members and applicants were failing the process of identity proofing, which keeps individuals from moving through the application process, because they were submitting identifying documents that were not on the acceptable documents list.
- In close coordination with MassHealth and CMS, the Health Connector expanded the list of acceptable documents.
- Since implementing the expanded list in November 2024, there has already been a drop in the document failure rate. Now that more documents are accepted, the number of people who fail at this stage has decreased.

<i>Ongoing Impact Achievements</i>				
Impact	Metrics			
Reduce enrollment friction points that disproportionately impact populations without credit histories or with limited access to identifying documents	Number of tasks (identity proofing documents submissions)			
	Baseline October 1-18, 2024 3,170 Tasks	November 1-18, 2024 3,085 Tasks	July 1-31 2025 10, 510 Tasks	November 1-30, 2025 8,276 Tasks
KPI	Number of unacceptable identity proofing cases created			
Decrease the number of unacceptable identity proofing cases created when people fail to send an identity proofing document on our acceptable document list	Baseline October 1-18, 2024 77 Unacceptable IDP cases created	November 1-18, 2024 45 Unacceptable IDP cases created	July 1-31, 2025 66 Unacceptable IDP cases created	November 1-30,2025 35 Unacceptable IDP cases created
	Rate of IDP document failures			
	Baseline October 1-31, 2024 2.10% document failure rate	November 1-30, 2024 1.21% document failure rate	July 1-31, 2025 0.63% document failure rate	November 1-30,2025 0.42% document failure rate

Incorporation of maternal health and cardiometabolic disorders into Seal of Approval (SOA) quality metrics

<p>Strategic Plan Focus Area: Deliver High-Value Coverage Options to the Residents of Massachusetts</p> <p>Goal: Ensure Health Connector coverage is comprehensive, affordable, and meets residents' needs</p>		
<p><i>Executive Summary</i></p>		
<ul style="list-style-type: none"> Health Connector incorporated a collection of metrics related to maternal health and cardiometabolic disorders to Quality Improvement Strategies and as of October 2024, the work was 100% complete. 		
<p><i>Ongoing Impact Achievements</i></p>		
Impact	KPI	Metrics
Shared goals and methods across agencies will allow for targeted improvements and more member-focus	Establish a baseline of existing carrier programs and efforts to impact maternal and cardiometabolic health positively	Baseline data received in fall 2024 will be compared against future years to monitor improvements and inform future quality initiatives

Continuation of Community Specialist Program

<p>Strategic Plan Focus Area: Improve Equitable Access to Affordable Health Insurance Coverage</p> <p>Goal: Expand equitable access to affordable health coverage</p>		
<p><i>Executive Summary</i></p>		
<ul style="list-style-type: none"> Health Connector Community Specialists provide outreach, support, and one-on-one navigation through the application and enrollment process to reduce barriers and promote equitable access to coverage, particularly in high-need communities. 		

Ongoing Impact Achievements									
Impact	KPI	Metrics							
Strengthen engagement, access, and support available in high-need communities	Increase in number of in-community support locations and numbers of individuals assisted and enrolled in coverage	<p>Number of organizations and towns/cities</p> <table border="0"> <tr> <td>Baseline December 2024 11 organizations</td> <td>July 2025 13 organizations 10 locations</td> <td>December 2025 9 organizations 5 locations*</td> </tr> </table> <p><i>*This change is attributable to a temporary staffing vacancy.</i></p> <p>Number of individuals assisted by Community Specialist</p> <table border="0"> <tr> <td>January 2025 - June 2,001 individuals</td> <td>July-December 2025 2,439 individuals</td> </tr> </table> <p>Number of individuals enrolled by Community Specialist</p> <table border="0"> <tr> <td>January 2025 - June 2025 534 ConnectorCare members</td> <td>July-December 2025 436 ConnectorCare members</td> </tr> </table>	Baseline December 2024 11 organizations	July 2025 13 organizations 10 locations	December 2025 9 organizations 5 locations*	January 2025 - June 2,001 individuals	July-December 2025 2,439 individuals	January 2025 - June 2025 534 ConnectorCare members	July-December 2025 436 ConnectorCare members
Baseline December 2024 11 organizations	July 2025 13 organizations 10 locations	December 2025 9 organizations 5 locations*							
January 2025 - June 2,001 individuals	July-December 2025 2,439 individuals								
January 2025 - June 2025 534 ConnectorCare members	July-December 2025 436 ConnectorCare members								

Develop “Value Plan” for small group market

Strategic Plan Focus Area: Deliver High-Value Coverage Options to the Residents of Massachusetts		
Goal: Increase awareness of the value and brand of Health Connector products		
<i>Executive Summary</i>		
<ul style="list-style-type: none"> The most popular small business health plans are clearly labeled as “Premium Value Plans,” offering significant savings compared to more expensive plans with the same benefits and access to services. 		
<i>Ongoing Impact Achievements</i>		
Impact	KPI	Metrics

<p>Provide small employers of the Commonwealth with a more simplified way to identify lower-cost employee health plans that continue to provide value</p>	<p>Increased interest in products demonstrated through increased quoting, and enrollment activity for Health Connector for Business small group offerings in 2025</p>	<p>2025 Health Connector for Business survey:</p> <p>Almost one in five (17%) of employers said they were aware of the “premium value plan” designation when selecting a plan for their business.</p> <p>Of those aware of the premium value plan designation, almost half (45%) said it was a factor in their decision when selecting a health plan for their business.</p> <p>The policy team is preparing further analysis on premium value plan selections in 2024 and 2025 to see if the designation influences employer plan selections.</p>
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Enhance approach to public education and outreach

<p>Strategic Plan Focus Area: Improve Equitable Access to Affordable Health Insurance Coverage</p> <p>Goal: Expand equitable access to affordable health coverage</p>		
<p><i>Executive Summary</i></p>		
<ul style="list-style-type: none"> The Health Connector is focused on delivering a series of public educational webinars, including sessions conducted in partnership with key stakeholders, to inform, engage, and connect applicants and enrollees with timely health coverage information. 		
<p><i>Ongoing Impact Achievements</i></p>		
Impact	KPI	Metrics
<p>Share information and resources with residents interested in coverage offerings, but not able to attend one of the Health Connector’s scheduled Zoom webinars</p> <p>Reach more potential members in their preferred languages when experiencing life transitions</p>	<p>Increase in conversion of public webinar registrants to attendees</p> <p>Increasing email open rates for those who registered for Health Connector sponsored webinars</p>	<p>January 2025 – December 2025:</p> <p>Sessions Held: 16 public webinars 11 individual & family webinars 5 Health Connector for Business webinars</p> <p>Partnership Webinars: 3 individual and families focused 6 Health Connector for Business focused</p>

Leverage new and strengthen existing touchpoints to better understand the needs of communities and provide supports	Increase in number of relationships and engagements with MassHire Career Center Clients	Registration VS. Attendees: 6,697 registered 2,346 attended
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