



2017 – 2020 Strategic Plan

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DRAFT

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Connect for Health Colorado is pleased to present its 2017 – 2020 Strategic Plan. This Plan is the result of months of internal diagnosis, external analysis, and stakeholder input. It represents a roadmap to guide the Marketplace through changing times and enable the organization to continue to meet its core mission of *increasing access, affordability, and choice for individuals and small employers purchasing health insurance in Colorado*.

The 2017 – 2020 Strategic Plan is not designed to address every possible outcome of the current uncertainty surrounding the direction of national healthcare policy. Rather, the Plan focuses on what Connect for Health Colorado knows today and is within its control. The Board and staff believe that acting now, while maintaining flexibility should the situation change, will put the Marketplace in the best position to continue to meet the needs of Colorado residents and small businesses and fulfill its commitment to a “Colorado” solution to healthcare reform. Regardless of how the debates in Washington turn out, a strong Connect for Health Colorado is in the best interests of the state, its residents, and its small businesses. That is the driving force behind this Plan.

Building on Our Success

Since Connect for Health Colorado opened in 2013, Colorado’s uninsured rate has been cut in half. As of the end of Open Enrollment 2016 – 17, 178,000 Coloradans were enrolled in health insurance coverage through the individual Marketplace (a 12% increase over the prior Open Enrollment Period), and 678 small businesses provided coverage to 5,500 employees and family members (a 46% increase). Connect for Health Colorado is the only place where Coloradans can access federal premium tax credits and cost-sharing reductions to make health insurance more affordable. In 2017, 61% of Marketplace customers are receiving financial assistance through Advanced Premium Tax Credits. In 2016, the total returned to Coloradans in the form of federal tax credits was \$318M.

Connect for Health Colorado maintains strong relationships with the broker and Assistor community. During the 2016 – 17 Open Enrollment Period 961 licensed, trained and certified brokers; 110 Health Coverage Guides (Assistors); and 290 Certified Application Counselors (Assistors) working at 34 organizations throughout the state helped residents find coverage through the Marketplace. 55% of all Marketplace customers enrolled through a broker, and 92% of customers who enrolled in a plan with help of an Assistor received financial assistance.

The organization continues on the path to sustainability through its leveraging of technology investments; increasing revenues through growing enrollment; renegotiating vendor contracts to provide lower and more predictable expenditures; and tight management of administrative controls. Through these measures the organization expects to be operationally sustainable over the next two years. Recent positive performance during the fourth Open Enrollment supports the continued path to sustainability.

A Collaborative Process

The strategic planning process began with a Board retreat in April 2016. Since then, the Board and staff have worked together to identify opportunities that provide the most positive impact to Coloradans over the next few years. Ideas were evaluated based on their fit with Connect for Health Colorado's mission; ability to make a measurable impact on the organization, its customers and partners; and potential for a sustainable, lasting impact.

Input was also gathered from key stakeholder groups including Board members, consumer advocates, brokers, Assistors, carriers and the public.

On February 13, 2017, the Board adopted the following goals:

1. Advocate to improve access to coverage in rural areas of Colorado.
2. Maximize the number of consumers and employers who shop and enroll through the health insurance marketplace, and apply for available financial assistance.
3. Improve the ability of customers to attain and retain the right coverage for their needs.
4. Ensure that Connect for Health Colorado is a healthy and thriving organization.

These four goals served as the basis for a robust strategy mapping process that included the following steps:

- Reviewed external forces and internal constraints influencing and potentially impacting the Marketplace's ability to meet its strategic goals
 - External forces: potential threats and opportunities
 - Internal constraints: key strengths and potential weaknesses
- Drafted a strategy map linking goals to objectives and potential strategies
 - Objective: what will be achieved
 - Strategy: how it will be achieved
- Established cross-functional teams to finalize proposed objectives for each goal, and to develop success measures and strategies for each objective

Strategy Map Structure



Result = alignment between and clarity of goals, objectives and strategies

Throughout the process, stakeholders were updated and given the opportunity to review and comment on the team’s progress. Through this collaborative process, a shared vision for Connect for Health Colorado’s priorities from now through 2020 has emerged and forms the foundation of this Plan.



2017 – 2020 Strategic Plan Overview

Goal #1: Advocate to improve access to coverage in rural areas of Colorado.

2016 saw a decrease in the number of plans available through Connect for Health Colorado in all but one of the nine geographic rating areas across the state. In 2017, 14 counties and five partial-counties had only one carrier participating in the Marketplace. Many of these are rural counties. Additionally, three of the rating areas outside of the metro-Denver region have, at most, half of the number of plans available for purchase in the metro region. Increasing the number of participating carriers in rural areas would have a significant impact on access and affordability.

Rural Coloradans face unique challenges accessing affordable health coverage, and as a result rural areas have some of the highest uninsured rates in the state. Stakeholders have expressed concern that the plans available in rural regions of the state do not provide consumers with effective access to the health care delivery system. In addition, health insurance outreach and education is even more important in rural communities as residents tend to have less experience with health insurance and the health care system.

Even with these challenges, Marketplace enrollment in rural communities remains relatively strong. While less than 8% of the state's population lives in the 42 counties considered rural by the Colorado Rural Development Council, residents of those counties make up 10% of Connect for Health Colorado's customers.

In line with its mission to increase access, Connect for Health Colorado's leadership identified Colorado's rural areas as in need of policy and operational activity to increase plan choice, access to health coverage and the health care system, and outreach and education to residents who are or may be subsidy-eligible but are not enrolled (EBNE).

To achieve this goal, Connect for Health Colorado will focus on activities that:

- encourage carrier participation in rural areas,
- increase awareness among rural Coloradans on the benefits available through the Marketplace, and
- work with stakeholders to address the high cost of health coverage and improve provider access in rural areas.

Success will be measured by:

1. Increasing the number of rural counties with two or more carriers offered.
2. Increasing the number of rural counties with two or more plans offered per metal tier.
3. Increased market share in rural areas.
4. Completing enhancements to Marketplace decision support, subsidy programs, network options and/or plan designs.

Goal #2: Maximize the number of consumers and employers who shop and enroll through the health insurance marketplace, and apply for available financial assistance.

Continued enrollment growth is critical to the long-term success of the Marketplace, and is at the heart of its mission. This is true for individual consumers – whether or not they are eligible for subsidized coverage – and small businesses, and is why Connect for Health Colorado continually strives to expand its reach to residents of our state who are not enrolled in health insurance. While Connect for Health Colorado has made significant progress in achieving this goal, obstacles exist. For example, decreasing plan availability and persistent technological challenges have hampered the Marketplace’s ability to reach the maximum number of individuals eligible for health coverage and financial assistance.

One of the key value propositions for consumers in using the Marketplace is the ability to access financial assistance in the form of Advance Premium Tax Credits (APTCs) and Cost-Sharing Reductions (CSRs). APTCs are available to consumers between 100% and 400% of the federal poverty level. Based on Open Enrollment 2016 – 17 data, the average premium for Connect for Health Colorado customers receiving financial assistance is \$502 per month. However, APTCs reduce actual paid premiums to only \$133 per month, an average savings of \$369 per month. Marketplace survey data indicate that there are some Coloradans who are eligible for but do not apply for financial assistance. Given the Marketplace’s mission, efforts to increase the take-up of financial assistance are of interest to Connect for Health Colorado leadership.

For the Marketplace to grow, it must focus on customer retention. Key to retaining customers is increasing customer satisfaction. Connect for Health Colorado’s customer satisfaction has increased significantly since the first open enrollment. Many of the lessons learned during that time have been implemented to improve the overall customer experience. However, continued attention to improving the customer experience is needed.

Improving systems integration and functionality would have a significant impact on increasing customer satisfaction. The more efficiently and reliably customers can “self-service” through the eligibility and enrollment process, the better the customer experience. Improved functionality would also free up Service Center resources to assist high need customers, including individuals with complex situations.

To achieve this goal, Connect for Health Colorado will focus on activities that positively impact enrollment growth in all customer segments including:

- using available data to improve retention and target new customers,
- refining education and outreach mechanisms,
- exploring alternative product/benefit solutions,
- identifying new types of customers for Marketplace products and services,
- exploring partnerships with organizations that could help the Marketplace attract new customers (e.g. healthcare and wellness vendors), and
- increasing customer, broker, Assistor and carrier satisfaction.

Success will be measured by:

1. Increasing customer retention and new customer enrollment results.
2. Maintaining or increasing the percentage of Marketplace enrollees who are subsidy eligible.
3. Increasing customer, partner and stakeholder satisfaction.

Goal #3: Improve the ability of customers to attain and retain the right coverage for their needs.

Health insurance coverage often includes co-pays, deductibles, coinsurance, visit limits and network tiers. These terms can be confusing, especially to the newly insured, and without additional assistance or education enrollees could choose a plan that is not right for their situation or face high out-of-pocket costs that may have been avoidable. The need for better customer education is supported by research conducted by Enroll America after a recent Open Enrollment Period, which found that nearly 90% of enrollees (both new enrollees and customers renewing coverage) wanted more information about how to use their coverage.

Understanding how health insurance coverage works is critical to making the right decisions during enrollment and beyond, and many customers are not equipped with the right tools and information to make informed decisions. This can expose them to unintended financial burden, or for their health needs to go unmet. If a customer has a negative experience with their insurance, whether trying to obtain it or utilize it, they are more likely to forego coverage in the future. While efforts have been made to assist Marketplace customers, such as the Quick Cost and Plan Finder Tool, more work must be done to help customers select the right plan for their situation and use it effectively.

There have been some successes. For example, Connect for Health Colorado was recognized for its Quick Cost and Plan Finder Tool, which was used by 27,495 people in the last Open Enrollment period. During that same period, 22,000 customers made appointments with brokers through the Marketplace's lead tool and 16,000 customers scheduled appointments with Assistors through the Get Covered Connector tool.

Connecting customers to knowledgeable channels in their community can also help them make informed decisions about their health insurance coverage. Local brokers and Assistors can help consumers understand their options, make the right coverage decisions, and navigate the shopping, eligibility and enrollment process.

By helping Coloradans better understand their coverage options, Connect for Health Colorado can expect to see higher rates of customer satisfaction with their chosen plan and a higher renewal retention rate. Consumers who understand how to use their plan more wisely are less likely to experience frustration or unanticipated health care costs, also leading to increased customer satisfaction and retention.

In addition to enhanced education and decision support tools, improving the ability of customers to attain and retain the right coverage requires a simpler, more streamlined shopping, eligibility and enrollment process and that consumers have access to a reasonable number of plan options.

To achieve this goal, Connect for Health Colorado will focus on activities that:

- assist consumers in better understanding their coverage and how to use it,
- improve the customer eligibility and enrollment experience, and
- ensure that customers continue to have choice in selection of carriers and Qualified Health Plans by improving the value proposition that the Marketplace offers to carriers.

Success will be measured by:

1. Increasing customer health insurance knowledge, as reported via surveys.
2. Increasing customer satisfaction with the eligibility and enrollment experience, as reported via surveys.
3. Increasing carrier satisfaction, as reported via surveys.

Goal #4: Ensure that Connect for Health Colorado is a healthy and thriving organization.

Connect for Health Colorado is a young organization, having been created by Colorado State Law in May 2011. As such, in many respects it has operated as a start-up. In just a few years, Connect for Health Colorado has grown to include 78 full-time employees and an annual budget of \$40M.

Connect for Health Colorado strives to have an efficient and effective operation to deliver on its mission at the lowest possible cost. The organization continues on the path to sustainability through its leveraging of technology investments; increasing revenues through growing enrollment; renegotiating vendor contracts to provide lower and more predictable expenditures; and tight management of administrative controls. Through these measures the organization expects to be operationally sustainable over the next two years. Recent positive performance during the fourth Open Enrollment supports the continued path to sustainability.

Human capital is key to the Marketplace's success, and Connect for Health Colorado strives to become an 'employer of choice'. This will require staffing strategies that attract and retain qualified talent, talent management initiatives that support and encourage employee professional growth and workplace engagement, establishing a continuity of staff, retaining historical knowledge, and effectively leveraging team talents.

To achieve this goal, Connect for Health Colorado will focus on activities that:

- continue to improve upon the fiscal stability of the Marketplace, and
- further develop human capital and engagement.

Success will be measured by:

1. Achieving positive annual financial results.
2. Improving employee satisfaction and engagement results, as reported via surveys.

Specific objectives, success measures and strategies for each goal can be found in the next section.

2017 – 2020 Goals, Objectives, Strategies and Success Measures

<p>Goal #1: Advocate to improve access to coverage in rural areas of Colorado.</p>
<p>Objective #1: Encourage carrier participation in rural areas to ensure rural customers have options that fit their health and financial situation.</p> <p>Success Measures:</p> <ul style="list-style-type: none"> • Increase the # of counties with two or more carriers offered in rural areas in 2019 and 2020. • Increase the number of counties with two or more plans offered per metal tier (plus catastrophic) in rural areas in 2019 and 2020.
<p>Strategies:</p> <ol style="list-style-type: none"> 1. Explore ways to reduce risk for carriers in rural areas (e.g. statewide reinsurance) 2. Explore additional flexibility in the plan designs that carriers can offer in rural areas
<p>Objective #2: Increase awareness among rural Coloradans on the benefits available through Connect for Health Colorado.</p> <p>Success Measure:</p> <ul style="list-style-type: none"> • Increased market share in rural Colorado year over year in 2018, 2019 and 2020.
<p>Strategies:</p> <ol style="list-style-type: none"> 1. Focus on rural outreach and enrollment 2. Build relationships with community influencers, brokers, carriers, health coverage guides in rural areas to keep Connect for Health Colorado top-of-mind as rural customers look for health insurance solutions 3. Increase resources to target high eligible but not enrolled (EBNE) rural areas
<p>Objective #3: Work with stakeholders to address the high cost of health coverage and improve provider access in rural areas.</p> <p>Success Measure:</p> <ul style="list-style-type: none"> • Enhanced decision support, subsidy programs, network options and/or plan designs implemented by 2019.
<p>Strategies:</p> <ol style="list-style-type: none"> 1. Increase health insurance literacy and enhance decision support tools (including cost transparency) specifically targeted at rural Coloradans 2. Support potential initiatives to mitigate the cost of insurance, such as state-level subsidies for above 400% FPL 3. Explore potential alternative plan design offerings that may have lower premiums to increase consumer choice 4. Explore ways to enhance rural area provider networks

Goal #2:

Maximize the number of consumers and employers who shop and enroll through the health insurance marketplace, and apply for available financial assistance.

Objective #1:

Increase enrollment overall.

Success Measures:

- Increase new customer enrollment by 10% annually beginning with OE 2018.
- Retain 75% of customers annually beginning with OE 2018.
- Maintain or increase the number of enrollees who are subsidy eligible.

Strategies:

1. Identify, coordinate and effectively utilize available data sources to improve retention; and identify, target and enroll the most appropriate new customers in health coverage
2. Continue/refine existing and develop new outreach and education mechanisms to target subsidy eligible consumers, non-subsidy eligible consumers and small businesses
3. Explore feasible alternative product (“ancillary”)/benefit solutions available to all new and existing customers (including the Public Benefits Corporation option)
4. Explore expanding Connect for Health Colorado’s organizational scope to encourage marketplace utilization by other states (e.g. regional exchange) or entities (e.g. public employers or carriers)
5. Explore partnerships with established organizations (e.g. healthcare, wellness) that Connect for Health Colorado can align with to attract more/potential customers

Objective #2:

Increase customer satisfaction.

Success Measures:

- Customer Satisfaction measure as defined by improvement in net promoter score TBD.
- Satisfaction measures for partners and stakeholders TBD.

Strategies:

1. Explore improvements in the Service Center structure and processes to improve the customer experience
2. Assess, define and implement system functionality improvements both internally and externally
3. Broaden customer satisfaction surveys to include partners and stakeholders (brokers, assistors, carriers)

Goal #3:

Improve the ability of customers to attain and retain the right coverage for their needs.

Objective #1:

Assist consumers in better understanding their coverage and how to use it; from plan selection, enrollment, and throughout the plan year.

Success Measures:

- Increase the percentage of customers who report they are satisfied with the health insurance plan they enrolled in according to “New and Returning” customer survey from 49 – 59% (2018), 59– 69% (2019), 69% – 79% (2020) for new customers and 41% – 51% (2018), 51% – 61% (2019), 61% – 71% (2020) for returning customers.
- Increase the percentage of customers who report they understand differences between health plans from 72 – 77% (2018), 77% – 82% (2019), 82% – 87% (2020).

Strategies:

1. Increase health insurance literacy throughout the plan year
2. Enhance online decision support tools to enable consumers to better understand their options and make the right plan selection based on their needs and circumstances
3. Broaden communication channels focused on total “cost of coverage”, “plan selection”, and the benefits of plans offering cost share reductions (CSR)

Objective #2:

Continue to make improvements in the customer eligibility and enrollment experience.

Success Measure:

- Customer satisfaction measures specific to this objective to be developed.

Strategies:

1. Pursue a collaborative approach with State and Federal entities to improve processes and reporting for members to move from State to Exchange or Exchange to Federal programs
2. Increase stakeholder, customer service representative, and member awareness of appeals process, policy guidelines, and available resolution pathways
3. Increase customer utilization of knowledgeable brokers and Assistors

Objective #3:

Ensure that customers continue to have choice in selection of carriers and QHPs by improving the value proposition that the Marketplace offers to carriers.

Success Measure:

- Carrier satisfaction survey (improve results by 2.5% YOY through 2020); baseline to be established for 2018 plan year.

Strategies:

1. Improve Marketplace enrollment processing
2. Develop seamless Special Enrollment Period approval and verification process to promote timely reporting and reduce the potential for adverse selection
3. Enhance and improve member initiated change reporting
4. Explore additional ways for the Marketplace and carriers to work together to decrease carriers’ cost of doing business, reduce carriers’ administrative burden, and improve member retention and growth

Goal #4:

Ensure that Connect for Health Colorado is a healthy and thriving organization.

Objective #1:

Engage in activities that continue to improve upon the fiscal stability of the organization.

Success Measures:

- Positive annual operating income annually beginning in fiscal year 2018.
- Maintain sufficient operating and capital cash reserves throughout the plan period.

Strategies:

1. Establish cash reserve policy and funding mechanisms
2. Explore and implement, if appropriate, relevant alternative public/private funding, partnerships, alternative organizational structures (e.g. Public Benefits Corporation) and cost sharing/reimbursement mechanisms that contribute to sustainability
3. Obtain approval and implement Medicaid cost reimbursement process
4. Establish financial analysis discipline to evaluate the sustainability impact of new business opportunities, public policy initiatives and project/technology investments
5. Implement and maintain financial management best practices in the areas of budgeting, management reporting and cost control
6. Operationalize continuous improvement process across the organization

Objective #2:

Implement activities that further develop human capital and engagement.

Success Measures:

- Increase the performance components of culture from 52% (agree/strongly agree) to 60% (agree/strongly agree) and communication from 47%(agree/strongly agree) to 55% (agree/strongly agree) by 2020.
- Increase the performance components of engagement from 68% (agree/strongly agree) to 76%(agree/strongly agree), and job satisfaction from 64% (agree/strongly agree) to 72%(agree/strongly agree) by 2020.

Strategies:

1. Evaluate and deploy a staffing strategy that attracts and retains qualified talent
2. Evaluate and deploy talent management initiatives that support and encourage employee professional growth and workplace engagement
3. Establish a process to leverage the annual employee survey to develop actionable strategies along established performance components (benefits, communication, engagement, job satisfaction and culture)
4. Evaluate and take steps to align workplace processes and practices with the 8 values relevant to being an 'employer of choice' (Flexible Deployment, Customer Focus, Performance Focus, Project-based work, Human Spirit and work, Commitment, Learning and Development, Open information)
5. Evaluate and take steps to further establish a "cadence "that can be added to our cultural norm that provides for suitability around innovation, fun and community within our organization