

**Also in this issue:**

[Doing Right Things Right:  
Metrics .....2](#)

[Doing Right Things Right:  
Accomplishments .....3](#)

[The MIE Toolbox Creates  
Consistency for HICS  
Packages.....6](#)

[Operations Service  
Anniversaries!.....8](#)

[MIE Testimonials.....8](#)

[About the Operations  
Department .....9](#)

[Operational Priorities .....9](#)

## A Note from Ron Walters

Senior Vice President & Head of Operations

As the year begins, we continue our focus on quality initiatives, automation, and finding ways to Make It Easy for our Members. However, as we wrap up another year, it's always important to look back at some of the best year-over-year highlights (2015-2016) for the Operations team:

- ✓ Reconciliation discrepancies per member decreased 37%
- ✓ Enrollment errors decreased from .9% to .5% (a 52% decrease)
- ✓ Repeat calls decreased by 5%
- ✓ Refund TAT decreased by 28%
- ✓ Call Abandon rated decreased from 4.1% to 2.6% (a 36% decrease)
- ✓ HICS per member decreased from .006 to .004 (a 36% decrease)

Additionally we have implemented a new billing system control tool (ART), completed a claims systems conversion, and became ICD-10 compliant.

Operations is in a season of transformation – and we are hard at work fine-tuning our processes, developing robotics, and leading our teams toward consistency. What's more, our choice to move talent across our operational area is a strategic approach to gain a fresh look at each function.

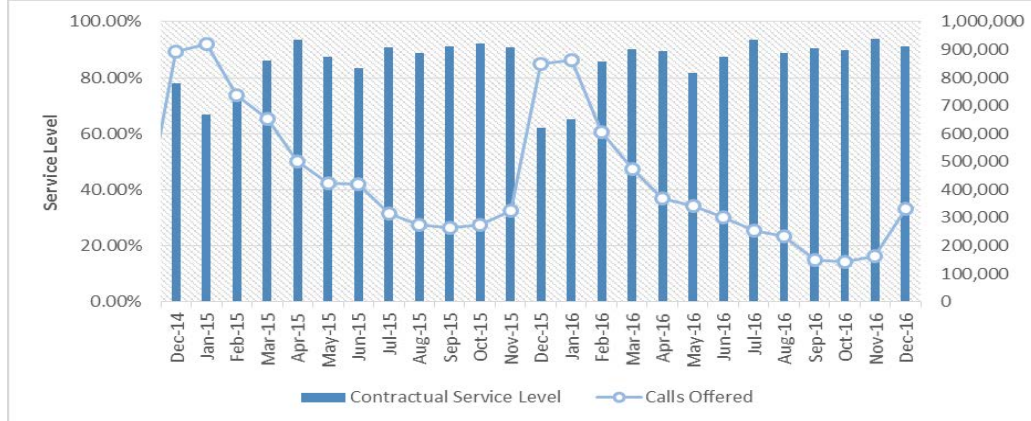
I encourage each of you to lean in and take note at how you handle day-to-day tasks and find ways to Make It Easy.

How will you Make It Easy?

MAKE IT *easy*

## Doing Right Things Right – December Call Center Metrics

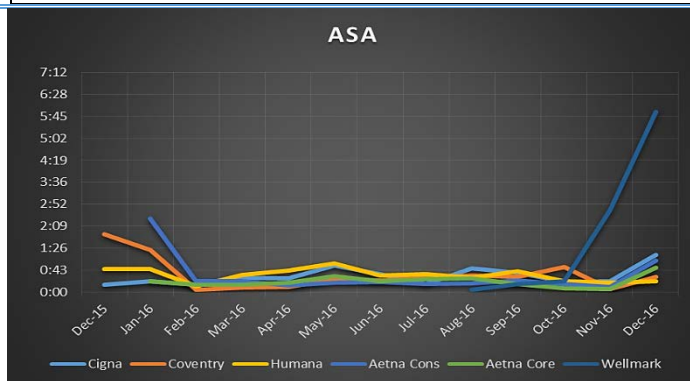
Key metrics and performance indicators may not reflect *all* that we do and the excellence behind it but these help us keep focused on our goals and demonstrate our accomplishments. Here are our December results!



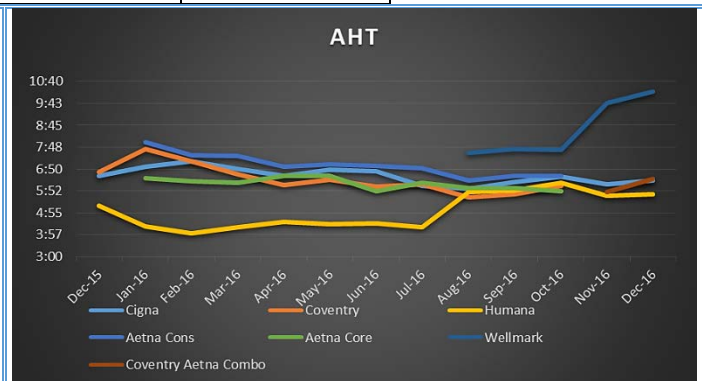
Operations Service Level Agreements	Total SLAs	Achieved	% Achieved
Call Center Percentage of Phone SLAs Met	25	23	73%
Processing & Reporting Percentage of Processing SLAs Met	62	56	78%
Carrier Service Level Agreements - Aetna, Cigna, Coventry, Humana & Wellmark			% Achieved
Average Handle Time			6:29
Average Speed of Answer			0:51
Abandon Rate			4%

Note: SLA counts will fluctuate monthly because not all SLAs are monthly.

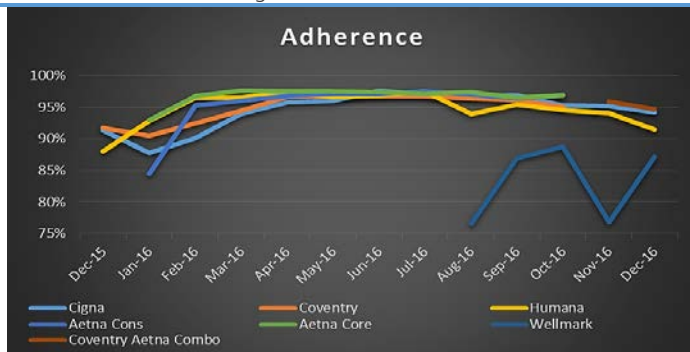
\*\*Abandon Rates are straight abandons.



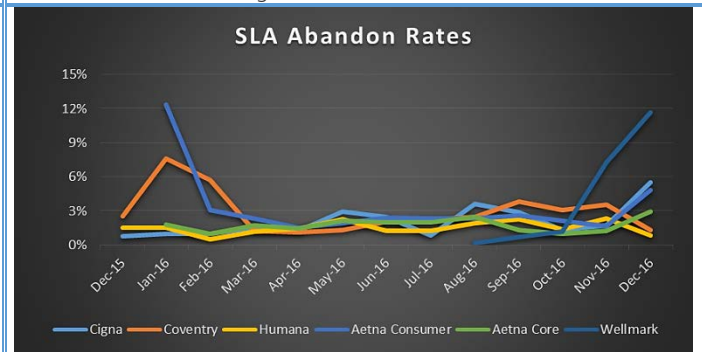
The average time it takes to answer a call



The average time it takes to handle a call



How closely CCAs adhere to their schedules



The percent of callers that hang up prior to reaching a CCA



## Doing Right Things Right – Accomplishments

“The secret to change is to focus all of your energy not on fighting the old but on building the new.”

– Socrates

### Back Office

#### Reconciliation

##### FFM Exchange Carrier Discrepancy Improvement

The table below shows the monthly 2016 and 2015 year over year comparison and improvement results.

DESCRIPTION	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEPT	OCT	NOV	DEC	TREND
CIGNA	2,581	5,038	5,891	2,329	1,834	1,984	1,956	2,214	2,057	2,260	2,027	2,500	
COVENTRY	34,415	114,239	126,778	27,134	26,834	29,104	27,411	27,984	25,051	24,617	22,134	22,411	
FL BLUE	27,588	132,349	170,642	89,591	97,391	109,201	114,338	N/A	N/A	N/A	N/A	N/A	
KAISER	12,482	13,512	15,468	5,881	6,223	6,407	6,498	7,375	6,840	7,216	8,903	9,584	
AETNA CONSUMER	11,875	44,556	68,515	26,559	5,380	7,259	6,943	6,434	6,100	6,284	6,587	7,139	
AETNA CORE	N/A	N/A	N/A	N/A	6,228	7,223	7,084	6,456	4,045	4,260	3,282	3,738	
HCSC	N/A	N/A	N/A	N/A	N/A	N/A	100	52	511,337	140,610	138,848	137,185	
2016 TOTALS	88,941	309,694	387,294	151,494	143,890	161,178	164,330	50,515	555,430	185,247	181,781	182,557	
CIGNA	23,111	30,438	26,783	27,542	22,604	17,514	16,820	18,530	17,929	14,509	12,762	17,794	
COVENTRY	202,600	261,935	187,089	185,234	97,903	133,085	128,541	140,980	126,903	125,039	109,996	173,324	
FL BLUE	83,108	138,263	108,438	99,436	71,883	66,750	69,136	77,297	36,160	73,883	74,329	121,545	
KAISER	N/A	N/A	N/A	N/A	N/A	N/A	3,016	-	25,714	37,514	35,958	43,590	
2015 TOTALS	308,819	430,636	322,310	312,212	192,390	217,349	217,513	236,807	206,706	250,945	233,045	356,253	
TOTAL REDUCTION	219,878	120,942	(64,984)	160,718	48,500	56,171	53,183	186,292	(348,724)	65,698	51,264	173,696	
% REDUCTION	71%	28%	-20%	51%	25%	26%	24%	79%	-169%	26%	22%	49%	

- Sept 2016 volume spike was the result of HCSC submitting duplicate RCNI files for TX, OK HIOS IDs and Conversion issues.

### BPO

#### Aetna/Coventry

- All teams showed an improvement in quality.
- Refresher course on viewing billing/payment history, billing adjustments, and refunds.

#### Wellmark

##### Call Center

- Hired & trained a new team for member/agent support.

##### Processing

- We on boarded WIPRO and successfully worked our first HICS packages.

### Business Process

#### Billing Process

- BSC ART tool corrections were completed on 49,000 cases in December. Current error rate is less than 6%, down 17 points since the start of the project.
- Led the completion of the Auto Adjustment crisis room and corrections.

**Eligibility/  
Maintenance  
Process**

- Continued progress with the back office documentation project:
  - Project is aimed to highlight “when and why” we process functions and ensure all process steps, rules and triggers are documented and housed in one reference database. This project will identify carrier and business rule discrepancies along with potential system enhancements.
  - Successfully process mapped Reinstatements, Remove Future Term and Reopen policy functions.
  - Partnering with training and document specialists to deliver more enhanced materials to the front line staff and PAAS clients.
- ServiceLink Certification project:
  - This project will ensure each employee using ServiceLink portal is certified based on their skill level.
  - Partnered with training and development team and Operations SMEs
  - Created 1st level SLP certification assessment
  - Hosted focus group with various CCAs across each carrier team:
    - Positive feedback on assessment questions
    - Helped the group identify efficiencies within SLP
    - Identified a need to improve on users efficiency steps
- December SLP Focus Groups:
  - Hosted meeting with Quality Auditors to gain insight into SLP through the eyes of an auditor.
  - Identified staff continue to show improvement with SLP skills
  - Noted potential need for more efficiency training on quick links/steps
  - Billing continues to be a struggle with several page clicks to get resolution (New billing page project will solve for this)

**Workflow  
Process**

Partnering with Operations and Business Automation:

- Successfully documented GetNext (GN) “standard” Carrier Workflow queues and queue routing paths for ease in onboarding new Carriers. Standardization provides a base model workflow to offer Carriers and allows for more consistency among new carrier workflows.
- 13 Business Automation New Project/Change were requests were deployed in December including; new Cigna views enabling easier SLA monitoring from the GN dashboard. Functionality was added to allow Auditors to make corrections to specific fields on GN packages, providing a more efficient auditing process.

## **Operations Support**

### **Analytics**

- Conducted War Room meetings to improve Adherence in Operations. Ended month at 87.16 percent, an increase over November's 76.48 percent. Teams are now consistently over 90 percent goal.

### **Business Process Improvement**

- Employee List Bill (ELB) Kaizen: Facilitated two-day, cross carrier event to determine root cause/corrective action for current issues experienced by HCSC and develop a roadmap of lessons learned for pending Molina implementation.
- ELB Failure Modes Effects Analysis: out of the Kaizen came the need to review each phase for risks and prevention. Conducted one of four FMEA's with the cross carrier team. The remainder to be completed in January.
- Continued to facilitate the weekly Kaizen for more robust process documentation for all Back Office functions.
- Facilitated process mapping of Kaiser work flow proposals requesting IT automation of current spreadsheet work into GetNext packages.

### **Member Communications**

- Created and mailed:
  - 536,144 **Binder Payment Letters** during Open Enrollment through 12/31. The average TAT was three business days.
  - Created and mailed 645,254 **Application Acknowledgement Letters** during Open Enrollment through 12/31. The average TAT was three business days.

These two letters have significant volume spikes during this season. The Application Acknowledgement letter is sent to every member who applies for coverage, and the Binder Payment Letter is sent if the member has not paid the January bill.

#### **Intake Team**

- Implemented a new protocol for express mail in the mailroom tracking purposes prior distribution to recipient.
- Updated the Intake department check receipt log and tracking process.
- Indexing is meeting and maintaining 99% TAT.
- Binder/premium payments are being processed daily (up to 500 per carrier) keeping within our SLA.

### **Reporting**

- Completed Alteryx training and started building reports in the new tool.

### **VoC/Quality**

- Improved efficiency by combining the iQor Calibrations into one (3C's and Cigna).
- Our call auditors completed Side-by-Sides with Cigna new hires, provided floor-walking support for their new hires during Nesting, and also provided additional floor-walking support to the Business Unit during the last two weeks of the month (peak holiday time, over 40 hrs).
- Created the Operations work tracker SOP for GetNext to track the time of completion.
- Worked with the ServiceLink Portal group to share ideas for possible improvements based on audit data and coaching insights.



## PaaS

- |               |  |
|---------------|--|
| <b>Kaiser</b> | <ul style="list-style-type: none"><li>The HPS Kaiser Processing team met Level 2 SLA ended the month of December at 98.8%, a huge improvement based on previous months.</li></ul>  |
| <b>Molina</b> | <ul style="list-style-type: none"><li>The month of December brought a conclusion to the development for onboarding. In September, we set out a plan to have all of the onboarding documentation prepared, signed-off and approved by both HPS and Molina to begin building out training. We successfully delivered on that goal and expectation. On December 29th, we conducted a final walk through of the Project Plan, BIM, HLD, WorkFlows, SOP's, Calendar of Events, SLA's and all other artifacts that were created to develop the training platform to bring Molina on board.</li></ul> |

MAKE IT *easy*

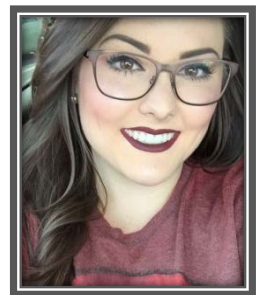
## The MIE Toolbox Creates Consistency for HICS Packages


Here's how one Supervisor made it easy for hundreds of 834 processors working on HICS cases in Tampa and Airola.

Nearly six months ago, Loni Campbell supervised a HICS team facing an insurmountable amount resubmissions due to wording variances. As cases were resolved, she realized there was an opportunity to standardize responses, and create consistency.

Motivated to find a solution, she loaded an Excel workbook with preset templates, formulas, and all of the tools the team used on a daily basis, and named it the 'MIE Toolbox' (MIE referring to "Make it Easy").

Following two months of Beta testing with the Aetna/Coventry team, the MIE Toolbox is now a daily resource to Aetna/Coventry, HCSC, Kaiser, and Wellmark 834 HICS Processors. It contains links to all of the databases and software tools needed to perform all tasks, such as links to ServiceLink, and CSR, and the Premium Calculator, and Adjustment Mapping Sheet, and more.





Our Mission and Values	HICS Notation Templates	Tools
<p><i>Our Mission is to be the benefit industry's premier outsourcing solution for cost-effective distribution and administration by bringing exemplary service, proven technology and internal expertise to our business partners and their customers.</i></p>	<p><a href="#">Appeal</a></p> <p><a href="#">APTC/Premium/Plan</a></p> <p><a href="#">Demographic Change</a></p> <p><a href="#">Effective date Change</a></p> <p><a href="#">Missing Member</a></p> <p><a href="#">Questions for the Carrier/ER&amp;R Requests</a></p> <p><a href="#">Reinstatement</a></p> <p><a href="#">Terminations</a></p> <p><a href="#">Remove Dependent</a></p> <p><a href="#">IMS Ticket</a></p> <p><a href="#">Binder not paid</a></p>	<p><a href="#">PreAudit Lookup</a></p> <p><a href="#">EDI</a></p> <p><a href="#">CSR</a></p> <p><a href="#">ServiceLink</a></p> <p><a href="#">BA Launcher</a></p> <p><a href="#">File Documentation Tool</a></p> <p><a href="#">Effective Date Changes SharePoint Site</a></p> <p><a href="#">Processing Team SharePoint Site</a></p> <p><a href="#">EMC</a></p>
<p><b>Core Values</b></p> <p>&gt; To do the right things right</p> <p>&gt; To trust in people</p> <p>&gt; To win, but not at any cost</p> <p>&gt; To provide the highest quality service to our customer</p> <p>&gt; To make a difference...</p>		

In addition, it contains 11 notation template types to streamline all information documented in a HICS package by following these simple steps:

1. **From the templates section, select a HICS category** – such as an appeal, premium, or a demographic change.
2. **Respond to a Checklist** (a pre-set list of questions).
3. **Utilize the responses provided** – Processors then copy/paste responses onto the HICS cases for verbiage consistency and accuracy.

Appeals Checklist	
What did the appeal ask you to update?	
What systems did you check?	
What does the balance currently show as today in SLP?	TYPE HERE
What does the PTD currently show as today in SLP?	TYPE HERE
Is the balance currently showing today in SLP correct?	
Has change been added to LR&R?	

Dashboard

Clear All

Appeal Notation - Processed the appeal	Appeal Notation - Did not process the appeal - Already in the system
Currently, the balance shows as TYPE HERE in SLP	Currently, the balance shows as TYPE HERE in SLP
The paid through date is showing as TYPE HERE in SLP	The paid through date is showing as TYPE HERE in SLP
No adjustments are needed, the balance due and paid through date are correct	No adjustments are needed, the balance due and paid through date are correct

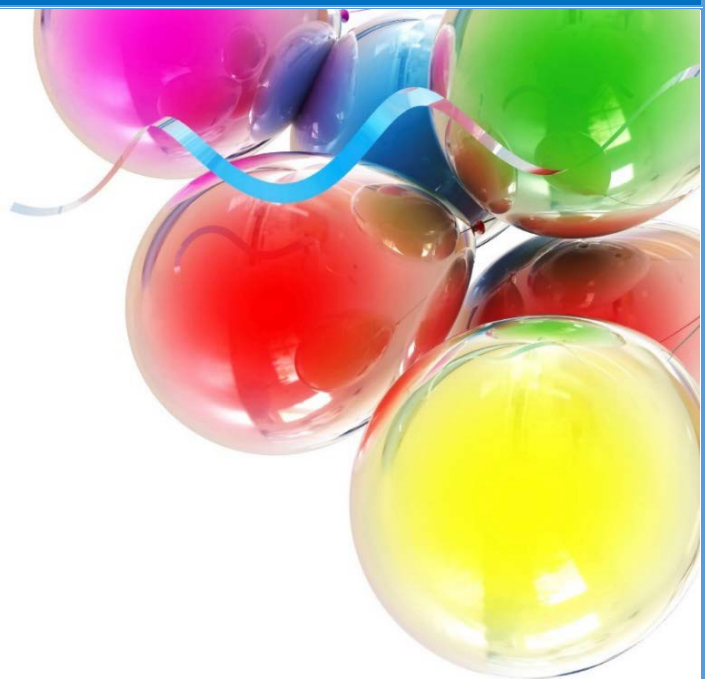
Since its initial implementation, the MIE Toolbox was updated to include the “File Documentation Tool” – a macro that reads an EDI file, and allows our teams to easily copy/paste the information onto GetNext. Ashmit Desai, our HICS Supervisor in Airoli, developed the macro. This shows yet another collaborative effort for our Operations team in Tampa and Airoli! Go HPS!

The MIE Toolbox will continue to evolve. Cigna HICS will be added to the group of users once that team is migrated to 2.0 in February. Better yet, plans are to also develop a Billing Processing Toolbox. This is an amazing accomplishment for one Supervisor, recently promoted to Operations ExchangeLink Business Analyst, who was determined to Make It Easy.

*How will you Make It Easy?*

## Operations Service Anniversaries!

34 YEARS	LORI KJEER
31 YEARS	LOURDES ARIAS
	ELENA BLOOMER
18 YEARS	TERRI GODSEY
17 YEARS	ELIZABETH HEFFINGER
12 YEARS	DOUGLAS HUBBARD
	SHERRIE CAMPBELL
11 YEARS	TODD CAMPBELL
	JOAN CARUSO
	SHAKEYLA HAMILTON
	CAROL MARTINEZ-AYRES
	MARIA VALDES
10 YEARS	LOLA EDWARDS
6 YEARS	DENISE ASUA
	NANCY BOGAN
	VINETTA BRADLEY
	THERESA BUERHLE
5 YEARS	JACQUELYN CLEMENT
	JUDY CUNDIK
	JAIME NAJERA
	RYAN OSBORNE
	ERIC SANDERS



## MIE Testimonials

**Members want a simplified hassle-free experience,  
at the time, and via the channel they prefer.**

**Here's how your peers are driving the 'Make It Easy' experience...**

### Aetna/Coventry Kudos Calls

- In a Missouri escalation call, the lawyer had been calling in to Coventry. **Melena Williams** was not only able to reassure the gentleman, but kept him calm. He spoke highly of her when she released the call. Melena's ability of keeping a situation from escalating is what we need on our team.
- Christine Crooks stated that **Pamela Moreno** went above and beyond, and did everything she could do to assist her with her needs.
- Ansley E. Runager stated that **Roshannah Carnegie** was very helpful, professional, and patient while assisting her with her policy inquiries.
- Danielle Tuvia stated **Keseanna Bowers** was very patient, friendly, and most of all very helpful.



## The Exchange Reconciliation Team

Anastasia Yastrebtseva, Kaiser Healthcare Exchange Account Manager provided compliments and recognition for **Jean Desruisseaux** sharing that he is a great partner and very supportive in achieving the timely monthly cycle reconciliation with Covered California. He consistently provides timely responses to meet deliverables to address and reconcile discrepancies to resolution. *Thank you Jean!*

Lynn Jafari, Kaiser Healthcare Exchange Account Manager provided recognition and appreciation on 11/18/16 to the Exchange Recon Team, **Alysia Echols, Nancy Hensler, Chris McKinney, and Debra Langhorne** as a result of achieving and meeting both submission timelines to C4 for the End of Year APTC Reconciliation on 10/6 and 12/4 (respectively) with more than 77K records and only 8 discrepancies. Look forward to a less “stressful 1095A season.”. *Way to go TEAM!*

The **Enrollment Exchange Team** received scorecard recognition on 12/7/16 from CMS/FFM as a result of the timely and accurate submission of the enrollment reconciliation files across all Carrier. This was based the monthly submission, quality, and orphan rate.

## About the Operations Department

### CONTACT CENTER

Impacting customer experience through direct customer contact

### PROCESSING

Serving the customer through enrollment and policy change management

### OPERATIONS SUPPORT

Supporting customer services through process oversight

### BACK OFFICE

Providing customer support through coordinating non-phone work

### CLAIMS / ASO

Restoring the customer during a time of loss



## Operational Priorities

- Achieve Core Service Level Agreements
- Achieve 2016 Financial Plan
- Implement Strategic Operations Framework
- Implement Member Experience Framework
- Formalize Business Process Improvement Methodology
- Formalize Product Director Structure
- Fully implement Gorman tool into Recon Process
- Implement O'Neil and E-notes
- IVR enhancements
- Reporting Tool enhancements
- Onboard New Carriers