

LAWRENCE MILLER
Chief of Health Care Reform



State of Vermont
OFFICE OF THE GOVERNOR

TO: HCHC, SCHW, SCF, HROC, JFC
FROM: Lawrence Miller, Chief of Health Care Reform
Date: August 1, 2016
RE: Vermont Health Connect Report

A handwritten signature in blue ink that reads "Lawrence Miller".

I am submitting Vermont Health Connect's final report in conformance with Section C.106 of the budget bill passed in 2015. This update covers data through the end of the fiscal year, June 2016, and also touches upon more recent developments in July.

I am pleased to say that you will see a dramatic improvement in operational metrics across the board. These results can largely be attributed to system improvements made in an effort which we have dubbed the "Maintenance & Operations (M&O) Surge." As discussed in prior reports, we finished major system development in March, but still had a punchlist of defects to fix, errors to troubleshoot, and improvements to make. Our M&O partner Optum stepped up to the plate with a series of initiatives and deployments throughout the spring and early summer. Optum's dedication, along with that of state staff and other partners, is the reason we have seen this improvement. We are grateful that they have brought our system to a steady state and we will not rest until every customer gets the service they deserve.

Looking to the future, we are pleased to welcome an additional collaborator to the ranks of our team. Speridian is a firm that has experience both with Siebel systems similar to ours and with the OneGate customer-facing software. We are looking forward to working with Speridian in the coming months to implement a discreet set of steps that will further improve the customer experience.

Speaking of the customer experience, in addition to seeing improvement in our traditional operational categories, you will also see some new metrics. We have been asked to describe what success will look like for Vermont Health Connect and have outlined three focal areas in this report. One key area relates to operational structure and performance. Regarding structure, it's worth noting that the merger of all health care eligibility operations into the Department of Vermont Health Access was completed last month. This move is making administration more streamlined, efficient and effective.

Regarding performance, the Health Access Eligibility and Enrollment Unit (HAEEU) has set a goal of using the stabilized system to deliver timely service for customers. Specifically, the team is now aggregating the whole range of customer requests and tracking the time to resolution. By June 2017, they are aiming to complete 85 percent of customer requests within 10 business days of first request. This would be a significant accomplishment, both because it would be a steep increase from their 49 percent rate at the

start of 2016 and because it would put them on par, as a three-year old organization, with vaunted customer service levels of decades old insurance issuers.

As an interim goal, by October 2016, they are aiming to complete 75 percent of customer requests within 10 business days of first request. I am happy to report that they are well on their way to that goal, having averaged even better results (77 percent) over the ten weeks ending July 1!

Thank you for your continued interest in connecting Vermonters to quality health coverage and thank you for helping to make our shared goals a success.