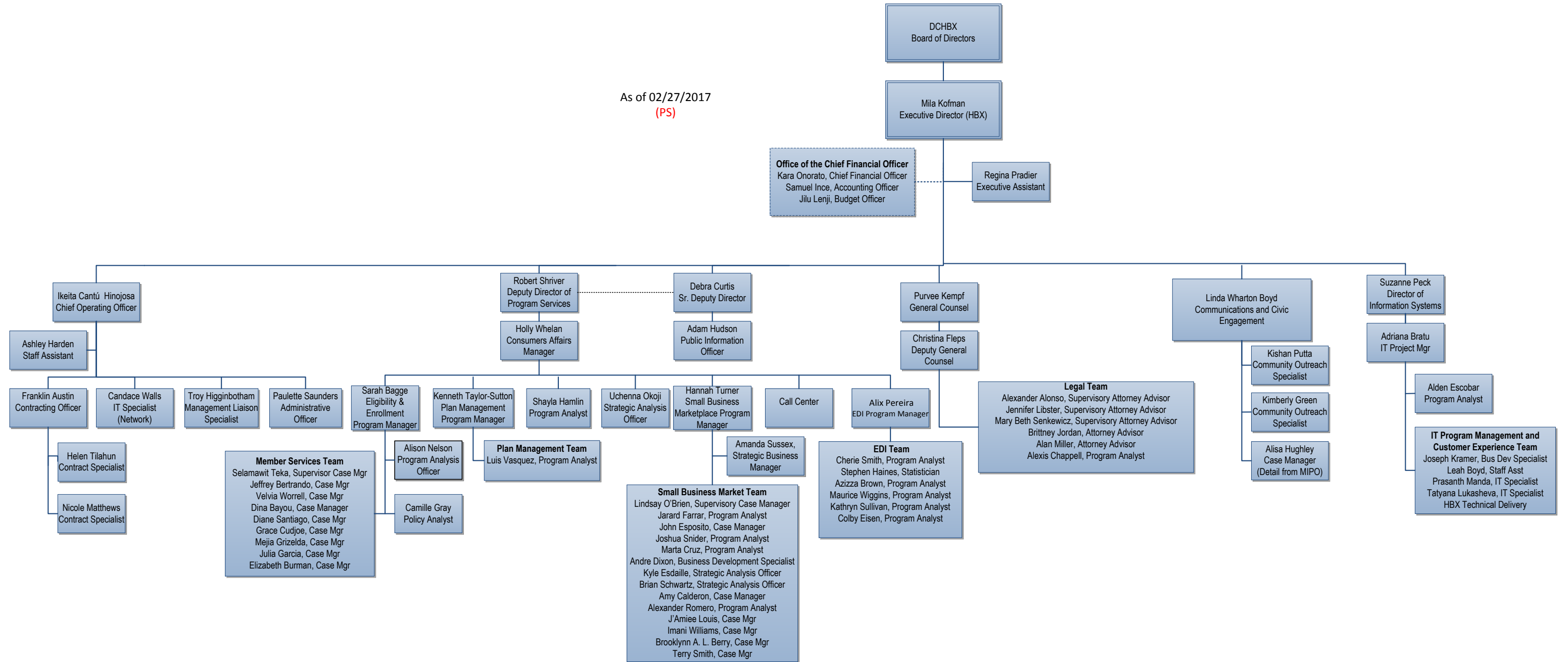


As of 02/27/2017
(PS)



FY2016 FTEs by

Position Number	Title	Name	FTE
77487	Agency Chief Financial Officer	Onorato,Kara Danielle	1
77488	Accounting Officer	Ince,Samuel	1
77489	Budget Officer	Lenji,Jilu	1
77473	Executive Director (HBX)	Kofman,Mila	1
77485	Senior Deputy Director	Curtis,Debra Scott	1
85920	Staff Assistant	Harden,Ashley	1
86203	Executive Assistant	Pradier,Sara R	1
88122	Chief Operating Officer	Cantu Hinojosa,Ikeita	1
77483	Management Liaison Specialist	Higginbotham,Troy M.	1
77491	Contracting Officer	Austin,Franklin	1
77484	Contract Specialist	Matthews,Nicole F	1
77492	Contract Specialist	Tilahun,Helen	1
77527	Administrative Officer	Saunders,Paulette S	1
77516	IT Specialist (Network)	Walls,Candace M	1
77522	General Counsel	Kempf,Purvee P	0.5
88934	Deputy General Counsel	Fleps,Christina W	1
77510	Supervisory Attorney Advisor	Alonso,Alexander O	0.5
77532	Supervisory Attorney Advisor	Libster,Jennifer M	0.5
77744	Supervisory Attorney Advisor	Senkewicz,Marybeth	0.5
83276	Attorney Advisor	Jordan,Brittney	1
92049	Attorney Advisor	Miller,Richard Alan	1
77523	Attorney Advisor	Vacant	1
77524	Program Analyst	Chappell,Alexis C	1
92048	Case Manager	Vacant	1
77529	Public Information Officer	Hudson,Adam	1
77533	Communications and Civic Engagement	Wharton Boyd,Linda	1
77684	Community Outreach Specialist	Green,Kimberly	1
83267	Community Outreach Specialist	Putta,Kishan	1
77508	Director of Information Systems	Peck,Suzanne J	1
92062	Deputy Chief Information Officer	Vacant	1
77512	Business Development Specialist	Kramer,Joseph R	1
83265	Program Manager	Pereira,Alix	1
83270	Program Analyst	Brown,Azizza	1
89384	Program Analyst	Escobar,Alden	1
88318	IT Project Manager	Bratu,Adriana	1
88690	Staff Assistant	Boyd,Leah	1
89369	IT Specialist (Systems Analysis)	Lukasheva,Tatyana	1
89372	IT Specialist (Systems Analysis)	Vacant	1
91329	IT Specialist (Systems Analysis)	Manda,Prasanth Reddy	1
89371	IT Specialist (Security)	Vacant	1
89370	Supervisory IT Specialist	Vacant	1
89374	Information Technology Specialist	Vacant	1
77486	Case Manager	Burman,Elizabeth	1
77531	Case Manager	Calderon,Amy	1

92075	Case Manager	Smith,Lakuan Terry	1
92076	Program Analyst	Vasquez,Luis	1
77518	Program Analyst	Smith,Cherie R	1
77683	Program Manager	Taylor-Sutton,Kenneth L	1
77744	Supervisory Attorney Advisor	Senkewicz,Marybeth	0.5
85368	Policy Advisor	Vacant	1
77510	Supervisory Attorney Advisor	Alonso,Alexander O	0.5
77532	Supervisory Attorney Advisor	Libster,Jennifer M	0.5
77528	Policy Analyst	Gray,Camille P	1
85366	Eligibility & Enrollment Manager	Bagge,Sarah	1
85369	Policy Advisor	Vacant	1
86133	Program Analysis Officer	Nelson,Alison	1
77511	Program Manager	Turner,Hannah K	1
85367	Supervisory Case Manager	O'Brien,Lindsay	1
77513	Case Manager	Williams,Imani	1
77525	Case Manager	Eisen,Colby	1
85570	Case Manager	Esposito,John	1
91996	Case Manager	Berry,Brooklyn	1
77526	Program Analyst	Wiggins,Maurice R	1
83272	Program Analyst	Sullivan,Kathryn	1
86211	Program Analyst	Farrar,Jarard E	1
87326	Program Analyst	Snider,Joshua	1
87329	Program Analyst	Cruz,Marta M	1
92047	Program Analyst	Romero,Alexander	1
87328	Business Development Specialist	Dixon,Andre	1
83264	Strategic Analysis Officer	Esdaille,Kyle	1
88317	Strategic Analysis Officer	Schwartz,Brian D	1
87363	Strategic Business Manager	Sussex,Amanda	1
77514	Statistician	Haines,Stephen R	1
77737	Deputy Director of Program Services	Shriver,Robert H	1
77745	Consumer Affairs Manager	Whelan,Holly	1
77522	General Counsel	Kempf,Purvee P	0.5
86134	Supervisory Case Manager	Teka,Selamawit A	1
87958	Program Analyst	Hamlin,Shayla	1
77742	Strategic Analysis Officer	Okoji,Uchenna K	1
77530	Case Manager	Cudjoe,Grace Akosuah	1
83269	Case Manager	Bayou,Dina	1
83277	Case Manager	Bertrando,Jeffrey	1
83279	Case Manager	Santiago-Lee,Diane	1
83281	Case Manager	Worrell,Velvia C	1
83284	Case Manager	Hughley,Alisa	1
85370	Case Manager	Garcia,Julia	1
85571	Case Manager	Louis,J'Aimee A	1
87327	Case Manager	Mejia,Grizelda	1

Program and Activity

Activity	Program
Agency Fiscal Officer	Agency Fiscal Operations
Accounting Operations	Agency Fiscal Operations
Budget Operations	Agency Fiscal Operations
Performance Management	Agency Management Program
Performance Management	Agency Management Program
Performance Management	Agency Management Program
Performance Management	Agency Management Program
Performance Management	Agency Management Program
Personnel	Agency Management Program
Contracts and Procurement	Agency Management Program
Contracts and Procurement	Agency Management Program
Contracts and Procurement	Agency Management Program
Contracts and Procurement	Agency Management Program
Information Technology	Agency Management Program
Legal	Agency Management Program
Legal	Agency Management Program
Legal	Agency Management Program
Legal	Agency Management Program
Legal	Agency Management Program
Legal	Agency Management Program
Legal	Agency Management Program
Legal	Agency Management Program
Legal	Agency Management Program
Legal	Agency Management Program
Consumer Education and Outreach Support Services	Consumer Education and Outreach Program
Consumer Education and Outreach Support Services	Consumer Education and Outreach Program
Consumer Education and Outreach Support Services	Consumer Education and Outreach Program
Consumer Education and Outreach Support Services	Consumer Education and Outreach Program
IT Related Operations	IT Related Operations
IT Related Operations	IT Related Operations
IT Related Operations	IT Related Operations
IT Related Operations	IT Related Operations
IT Related Operations	IT Related Operations
IT Related Operations	IT Related Operations
IT Related Operations	IT Related Operations
IT Related Operations	IT Related Operations
IT Related Operations	IT Related Operations
IT Related Operations	IT Related Operations
IT Related Operations	IT Related Operations
IT Related Operations	IT Related Operations
Plan Management	Marketplace Innovation Policy and Operations
Plan Management	Marketplace Innovation Policy and Operations

FY16 and FY17 Vacancies

Position	Date of Vacancy	Reason for Vacancy	Activities to Fill Position	Date Filled
Case Manager	4/4/2016	New position 13-month Term Appointment	Name Select	4/18/2016
Agency Chief Financial Officer	12/2015	Backfill – former employee went to another District agency	Posted in Job Science – Position Filled	1/1/2016
Contracting Officer	2/16/2016	Retirement	Posted in Job Science – Position Filled	2/26/2016
Contract Specialist	1/11/2016	New Position	Position Posted in Job Science – Position filled	1/16/2016
Case Manager	10/31/2016	New position 13-month Term Appointment	Name Select	11/14/2016
Program Analyst	6/6/2016	New Position	Position Posted in Job Science – Positon Filled	7/11/2016
Case Manager	11/21/2016	New position 13-month Term Appointment	Name Select	12/12/2016
Program Analyst	1/28/2015	New Position (EDI)	Position posted in Job Science – Position Filled	3/17/2016
Case Manager	7/25/2016	New position 13-month Term Appointment	Name Select	8/8/2016
Program Analyst	8/22/2016	New position 13-month Term Appointment	Name Select	9/2/2016
Case Manager	2/1/2016	New position 13-month Term Appointment	Name Select	2/22/2016
Executive Assistant	12/14/2015	Former employee promoted to Program Analyst	Name Select	1/10/2016

Strategic Analysis Officer	1/15/2016	New Position	Position Posted in Job Science – Positon Filled	4/4/2016
IT Project Manager	3/17/2016	New Position	Position Posted in Job Science – Positon Filled	5/2/2016
Staff Assistant	10/10/2016	New position 13-month Term Appointment	Name Select	10/31/2016
IT Specialist (System Analysis)	6/30/2016	New Position	Position Posted in Job Science – Positon Filled	9/20/2016
IT Specialist (System Analysis)	6/30/2016	New Position	Position Posted in Job Science – Positon Filled	10/31/2016
Program Analyst (IT)	7/11/2016	New Position	Name Select	8/8/2016
Case Manager	11/14/2016	New position 13-month Term Appointment	Name Select	12/12/2016
Program Analyst	12/12/2016	New position 13-month Term Appointment	Name Select	1/9/2017
Attorney Advisor	11/14/2016	Backfill – former employee went to another District agency	Name Select	1/25/2017
Case Manager	11/14/2016	New position 13-month Term Appointment	Name Select	1/23/2017
Program Analyst	11/14/2016	New position 13-month Term Appointment	Name Select	1/23/2017
Program Manager (EDI)	10/30/2016	MSS Termination	Position Posted in Job Science – Positon Filled	12/25/2016

Program Manager (Plan Management)	10/30/2016	Resignation	Position Posted in Job Science – Positon Filled	12/25/2016
Program Analyst (Assisters)	1/11/2016	Promotion	Position Posted in Job Science – Positon Filled	1/24/2016
Deputy General Counsel	6/7/2016	New Position	Position Posted in Job Science – Positon Filled	7/10/2016
Supervisory IT Specialist	6/30/2016	New Position	Position Posted in Job Science	Actively recruiting
IT Specialist (Security)	6/30/2016	New Position	Position Posted in Job Science	Actively recruiting
IT Specialist (Systems Analysis)	6/30/2016	New Position	Position Posted in Job Science	Actively recruiting
Information Technology Specialist	6/30/2016	New Position	Position Posted in Job Science	Actively recruiting

FY16 Additional Income Allowances

Employee	Fiscal Year	Amount
Kofman, Mila	2016	\$31,645.97
Peck, Suzanne	2016	\$21,867.82
Brendan, Rose	2016	\$18,029.99
Shriver, Robert	2016	\$23,590.06
Turner, Hannah	2016	\$20,319.00
Whelan, Holly	2016	\$20,688.00
Boyd, Linda Wharton	2016	\$23,869.56

FY17 Additional Income Allowances

Employee	Fiscal Year	Amount
Kofman, Mila	2017	\$32,604.60
Peck, Suzanne	2017	\$25,026.69
Shriver, Robert	2017	\$25,026.69
Turner, Hannah	2017	\$20,928.21
Whelan, Holly	2017	\$21,308.18
Boyd, Linda Wharton	2017	\$24,586.35

FY16 and to date in FY17 Hiring Incentives

Employee	Fiscal Year	Amount
Bratu, Adriana	2016	\$5,000.00

FY16 Travel Expenses

Employee	Amount
Alison Nelson	\$20.00
Amanda Sussex	\$42.57
Debra Curtis	\$82.76
Henry Aaron (Board Member)	\$200.51
Holly Whelan	\$311.51
Jilu Lenji	\$831.85
Linda Wharton Boyd	\$660.94
Mary Beth Senkewicz	\$371.75
Mila Kofman	\$517.97
Purvee Kempf	\$729.70
Samuel Ince	\$805.50
Shayla Hamlin	\$121.23

FY17 Travel Expenses

Employee	Amount
Debra Curtis	\$27.65
Mila Kofman	\$77.89

Health Benefit Exchange Authority FY17 Salaries Over 100K

Employee	Position	Salary
Kofman, Mila	Executive Director	\$217,364
Curtis, Debra Scott	Sr. Deputy Director for Policy and Programs	\$202,154
Kempf, Purvee P	General Counsel	\$201,473
Fleps, Christina W	Assistant General Counsel	\$181,992
Senkewicz, Marybeth	Supervisory Attorney Advisor	\$175,950
Peck, Suzanne J	Director of Information Systems	\$171,849
Shriver, Robert H	Deputy Director for Program Services	\$171,849
Cantu Hinojosa, Ikeita	Chief Operating Officer	\$171,849
Boyd, Linda Wharton	Communications and Civic Engagement Manager	\$168,826
Miller, Richard Alan	Attorney Advisor	\$168,403
Alonso, Alexander O	Supervisory Attorney Advisor	\$166,613
Libster, Jennifer M	Supervisory Attorney Advisor	\$157,600
Austin, Franklin	Contracting Officer	\$146,260
Whelan, Holly	Consumer Affairs Manager	\$142,054
Turner, Hannah K	Program Manager/SHOP	\$139,521
Bratu, Adriana	IT Project Manager	\$139,050
Onorato, Kara	Chief Financial Officer	\$145,288
Sussex, Amanda	Strategic Business Manager	\$133,000
Bagge, Sarah	Eligibility & Enrollment Management	\$133,000
Pereira, Alix	Program Manager/Electronic Data Interchange	\$133,000
Taylor-Sutton, Kenneth L	Program Manager/Plan Management	\$133,000
Hudson, Adam	Public Information Officer	\$132,612
Manda, Prasanth Reddy	IT Specialist (Systems Analysis)	\$130,000
Lenji, Jilu	Budget Officer	\$129,445
Ince, Samuel	Accounting Officer	\$129,445
Haines, Stephen R	Statistician	\$123,403
Higginbotham, Troy M.	Management Liaison Specialist	\$117,267
Saunders, Paulette S	Administrative Officer	\$117,267
Schwartz, Brian D	Strategic Analysis Officer	\$117,267
Matthews, Nicole F	Contract Specialist	\$114,199
Okoji, Uchenna K	Strategic Analysis Officer	\$114,199
Esdaille, Kyle	Strategic Analysis Officer	\$114,199
Chappell, Alexis C	Attorney Advisor	\$111,131
Jordan, Brittney	Attorney Advisor	\$107,432
Wiggins, Maurice R	Program Analyst	\$104,995
O'Brien, Lindsay	Supervisory Case Manager	\$104,995
Nelson, Alison	Program Analysis Officer	\$104,995
Brown, Azizza	Program Analyst	\$101,927

PROGRAM	Approp Fund
1000 - AGENCY MANAGMENT	0620
	0620 - Total
1000 - AGENCY MANAGMENT	- Total

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DC Health Benefit Exchange

FY16 - FY17 BUDGET

AGENCY LEVEL

Activity	GAAP Category Title
1010 - PERSONNEL	PERSONNEL SERVICES
	PERSONNEL SERVICES - Total
	NON-PERSONNEL SERVICES
	NON-PERSONNEL SERVICES - Total
1010 - PERSONNEL - Total	
1015 - TRAINING	NON-PERSONNEL SERVICES
	NON-PERSONNEL SERVICES - Total
1015 - TRAINING - Total	
1020 - CONTRACTS AND PROCUREMENT	PERSONNEL SERVICES
	PERSONNEL SERVICES - Total
	NON-PERSONNEL SERVICES
	NON-PERSONNEL SERVICES - Total
1020 - CONTRACTS AND PROCUREMENT - Total	
1030 - PROPERTY MANAGEMENT	NON-PERSONNEL SERVICES
	NON-PERSONNEL SERVICES - Total
1030 - PROPERTY MANAGEMENT - Total	
1040 - INFORMATION TECHNOLOGY	PERSONNEL SERVICES
	PERSONNEL SERVICES - Total
1040 - INFORMATION TECHNOLOGY - Total	
1060 - LEGAL SERVICES	PERSONNEL SERVICES
	PERSONNEL SERVICES - Total
	NON-PERSONNEL SERVICES
	NON-PERSONNEL SERVICES - Total
1060 - LEGAL SERVICES - Total	
1090 - PERFORMANCE MANAGEMENT	PERSONNEL SERVICES
	PERSONNEL SERVICES - Total
	NON-PERSONNEL SERVICES
	NON-PERSONNEL SERVICES - Total
1090 - PERFORMANCE MANAGEMENT - Total	

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Comp Source Group	FY 2016 BUDGET	FY 2016 EXPENDITURE	FY 2017 BUDGET
0011 - REGULAR PAY - CONT FULL TIME	81,122.8	111,456.73	116,142.83
0014 - FRINGE BENEFITS - CURR PERSONNEL	19,469.47	20,719.21	28,687.28
	100,592.27	132,175.94	144,830.11
0041 - CONTRACTUAL SERVICES - OTHER	160,562	160,562	169,000
al	160,562	160,562	169,000
	261,154.27	292,737.94	313,830.11
0040 - OTHER SERVICES AND CHARGES	15,000	408.19	32,500
al	15,000	408.19	32,500
	15,000	408.19	32,500
0011 - REGULAR PAY - CONT FULL TIME	486,568.49	304,243.48	454,440.84
0012 - REGULAR PAY - OTHER	0	16,395.02	0
0013 - ADDITIONAL GROSS PAY	0	10,300	0
0014 - FRINGE BENEFITS - CURR PERSONNEL	116,776.44	47,696.69	112,246.89
	603,344.93	378,635.19	566,687.73
0041 - CONTRACTUAL SERVICES - OTHER	20,000	17,676.15	25,000
al	20,000	17,676.15	25,000
	623,344.93	396,311.34	591,687.73
0031 - TELEPHONE, TELEGRAPH, TELEGRAM, ETC	301,142	237,831.17	392,440
0032 - RENTALS - LAND AND STRUCTURES	1,524,280.63	496,129.3	780,236
al	1,825,422.63	733,960.47	1,172,676
	1,825,422.63	733,960.47	1,172,676
0011 - REGULAR PAY - CONT FULL TIME	88,774.67	91,776.78	98,747.51
0014 - FRINGE BENEFITS - CURR PERSONNEL	21,305.92	29,020.97	24,390.63
	110,080.59	120,797.75	123,138.14
	110,080.59	120,797.75	123,138.14
0011 - REGULAR PAY - CONT FULL TIME	652,309.16	560,880.95	583,060.52
0014 - FRINGE BENEFITS - CURR PERSONNEL	149,190.61	92,817.93	144,015.96
	801,499.77	653,698.88	727,076.48
0040 - OTHER SERVICES AND CHARGES	0	0	3,600
0041 - CONTRACTUAL SERVICES - OTHER	220,958	53,792	102,500
al	220,958	53,792	106,100
	1,022,457.77	707,490.88	833,176.48
0011 - REGULAR PAY - CONT FULL TIME	944,513.87	696,710.49	916,997.97
0012 - REGULAR PAY - OTHER	71,164.76	105,175.61	132,294.23
0013 - ADDITIONAL GROSS PAY	30,000	65,521.17	56,681.55
0014 - FRINGE BENEFITS - CURR PERSONNEL	208,139.12	127,181.18	259,175.17
	1,253,817.75	994,588.45	1,365,148.92
0020 - SUPPLIES AND MATERIALS	15,400	8,144.86	39,000
0040 - OTHER SERVICES AND CHARGES	187,700.54	158,174.77	177,975
0041 - CONTRACTUAL SERVICES - OTHER	122,541.74	121,210.62	105,000
0070 - EQUIPMENT & EQUIPMENT RENTAL	10,000	5,120.79	10,000
al	335,642.28	292,651.04	331,975
	1,589,460.03	1,287,239.49	1,697,123.92
	5,446,920.22	3,538,946.06	4,764,132.38
	5,446,920.22	3,538,946.06	4,764,132.38

FY 2017 EXPENDITURE	
	38,580.01
	7,178.69
	45,758.7
	168,590
	168,590
	214,348.7
	32.92
	32.92
	32.92
	157,621.08
	0
	0
	27,022.11
	184,643.19
	0
	0
	184,643.19
	0
	187,597.29
	187,597.29
	187,597.29
	31,767.99
	10,054.89
	41,822.88
	41,822.88
	267,756.82
	39,102.13
	306,858.95
	0
	2,180
	2,180
	309,038.95
	230,186.12
	17,978.32
	8,609.36
	31,495.24
	288,269.04
	4,299.06
	25,129.56
	1,615.28
	0
	31,043.9
	319,312.94
	1,256,796.87
	1,256,796.87

PROGRAM	Approp Fund
100F - AGENCY FINANCIAL OPERATIONS	0620
	0620 - Total
100F - AGENCY FINANCIAL OPERATIONS	- Total

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DC Health Benefit Exchange

FY16 - FY17 BUDGET

AGENCY LEVEL

Activity	GAAP Category Title
110F - BUDGET OPERATIONS	PERSONNEL SERVICES
	PERSONNEL SERVICES - Total
110F - BUDGET OPERATIONS	- Total
120F - ACCOUNTING OPERATIONS	PERSONNEL SERVICES
	PERSONNEL SERVICES - Total
120F - ACCOUNTING OPERATIONS	- Total
140F - AGENCY FISCAL OFFICER	PERSONNEL SERVICES
	PERSONNEL SERVICES - Total
	NON-PERSONNEL SERVICES
	NON-PERSONNEL SERVICES - Total
140F - AGENCY FISCAL OFFICER	- Total

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Comp Source Group	FY 2016 BUDGET	FY 2016 EXPENDITURE	FY 2017 BUDGET
0011 - REGULAR PAY - CONT FULL TIME	172,901.13	121,053.29	127,872.05
0014 - FRINGE BENEFITS - CURR PERSONNEL	39,474.81	28,011.99	31,584.4
	212,375.94	149,065.28	159,456.45
	212,375.94	149,065.28	159,456.45
0011 - REGULAR PAY - CONT FULL TIME	176,014.05	121,053.3	127,872.05
0014 - FRINGE BENEFITS - CURR PERSONNEL	43,453.24	27,255.42	31,584.4
	219,467.29	148,308.72	159,456.45
	219,467.29	148,308.72	159,456.45
0011 - REGULAR PAY - CONT FULL TIME	314,778.55	116,928.22	173,172.87
0014 - FRINGE BENEFITS - CURR PERSONNEL	66,066.56	19,895.29	42,773.7
	380,845.11	136,823.51	215,946.57
0020 - SUPPLIES AND MATERIALS	2,800	0	2,800
0040 - OTHER SERVICES AND CHARGES	144,000	55,047.12	146,000
0041 - CONTRACTUAL SERVICES - OTHER	0	0	21,634
0070 - EQUIPMENT & EQUIPMENT RENTAL	3,000	0	3,000
al	149,800	55,047.12	173,434
	530,645.11	191,870.63	389,380.57
	962,488.34	489,244.63	708,293.47
	962,488.34	489,244.63	708,293.47

FY 2017 EXPENDITURE	
	42,415.77
	9,735.91
	52,151.68
	52,151.68
	42,415.75
	9,435.76
	51,851.51
	51,851.51
	45,045.05
	7,195.27
	52,240.32
	0
	0
	0
	0
	0
	52,240.32
	156,243.51
	156,243.51

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PROGRAM	Approp Fund
5000 - CONSUMER EDUCATION AND OUTREACH PROGRAM	0620
	0620 - Total
5000 - CONSUMER EDUCATION AND OUTREACH PROGRAM	- Total

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FY16 - FY17 BUDGET

AGENCY LEVEL

Activity	GAAP Category Title
5010 - CONSUMER EDUC & OUTREACH SUPPORT SVCE	PERSONNEL SERVICES
	PERSONNEL SERVICES - Total
	NON-PERSONNEL SERVICES
	NON-PERSONNEL SERVICES - Tot
5010 - CONSUMER EDUC & OUTREACH SUPPORT SVCE - Total	
5010 - CONSUMER EDUC. AND OUTREACH SUPPORT SVC	PERSONNEL SERVICES
	PERSONNEL SERVICES - Total
	NON-PERSONNEL SERVICES
	NON-PERSONNEL SERVICES - Tot
5010 - CONSUMER EDUC. AND OUTREACH SUPPORT SVC - Total	
5020 - MARKETING AND COMMUNICATION	PERSONNEL SERVICES
	PERSONNEL SERVICES - Total
	NON-PERSONNEL SERVICES
	NON-PERSONNEL SERVICES - Tot
5020 - MARKETING AND COMMUNICATION - Total	
5040 - NAVIGATORS COUNSELORS AND IPA	PERSONNEL SERVICES
	PERSONNEL SERVICES - Total
	NON-PERSONNEL SERVICES
	NON-PERSONNEL SERVICES - Tot
5040 - NAVIGATORS COUNSELORS AND IPA - Total	
- Total	

Comp Source Group	FY 2016 BUDGET	FY 2016 EXPENDITURE	FY 2017 BUDGET
0011 - REGULAR PAY - CONT FULL TIME	1,616,321	592,880.28	0
0012 - REGULAR PAY - OTHER	158,317.9	526,247.14	0
0013 - ADDITIONAL GROSS PAY	0	54,349.47	0
0014 - FRINGE BENEFITS - CURR PERSONNEL	318,419.93	215,676.19	0
0015 - OVERTIME PAY	0	10,392.23	0
	2,093,058.83	1,399,545.31	0
0041 - CONTRACTUAL SERVICES - OTHER	924,454.18	574,454.18	0
al	924,454.18	574,454.18	0
	3,017,513.01	1,973,999.49	0
0011 - REGULAR PAY - CONT FULL TIME	0	0	163,909.05
0012 - REGULAR PAY - OTHER	0	0	226,124.57
0013 - ADDITIONAL GROSS PAY	0	0	24,586.36
0014 - FRINGE BENEFITS - CURR PERSONNEL	0	0	96,338.31
	0	0	510,958.29
0041 - CONTRACTUAL SERVICES - OTHER	0	0	400,000
al	0	0	400,000
	0	0	910,958.29
0011 - REGULAR PAY - CONT FULL TIME	213,774.67	90,084.13	128,750
0014 - FRINGE BENEFITS - CURR PERSONNEL	51,305.92	22,803.66	31,801.25
	265,080.59	112,887.79	160,551.25
0040 - OTHER SERVICES AND CHARGES	50,000	7,851.42	0
0041 - CONTRACTUAL SERVICES - OTHER	0	0	250,000
al	50,000	7,851.42	250,000
	315,080.59	120,739.21	410,551.25
0011 - REGULAR PAY - CONT FULL TIME	75,589.13	25,757.17	0
0014 - FRINGE BENEFITS - CURR PERSONNEL	18,141.39	3,050.23	0
	93,730.52	28,807.4	0
0041 - CONTRACTUAL SERVICES - OTHER	1,761,000.62	1,744,535.77	655,000
al	1,761,000.62	1,744,535.77	655,000
	1,854,731.14	1,773,343.17	655,000
	5,187,324.74	3,868,081.87	1,976,509.54
	5,187,324.74	3,868,081.87	1,976,509.54

PROGRAM	Approp Fund
7000 - MARKETPLACE INNOVATION POLICY OPERATIONS	0620

7000 - MARKETPLACE INNOVATION POLICY OPERATIONS - Total

0620 - Total

Feb 15, 2017

DC Health Benefit Exchange

FY16 - FY17 BUDGET

AGENCY LEVEL

Activity	GAAP Category Title
7010 - CONTACT CENTER	PERSONNEL SERVICES
	PERSONNEL SERVICES - Total
	NON-PERSONNEL SERVICES
	NON-PERSONNEL SERVICES - Total
7010 - CONTACT CENTER - Total	
7020 - PLAN MANAGEMENT	PERSONNEL SERVICES
	PERSONNEL SERVICES - Total
	NON-PERSONNEL SERVICES
	NON-PERSONNEL SERVICES - Total
7020 - PLAN MANAGEMENT - Total	
7030 - ELIGIBILITY AND ENROLLMENT	PERSONNEL SERVICES
	PERSONNEL SERVICES - Total
	NON-PERSONNEL SERVICES
	NON-PERSONNEL SERVICES - Total
7030 - ELIGIBILITY AND ENROLLMENT - Total	
7040 - MEMBER SERVICES	PERSONNEL SERVICES
	PERSONNEL SERVICES - Total
	NON-PERSONNEL SERVICES
	NON-PERSONNEL SERVICES - Total
7040 - MEMBER SERVICES - Total	
7050 - DATA ANALYTICS AND REPORTING	PERSONNEL SERVICES
	PERSONNEL SERVICES - Total
7050 - DATA ANALYTICS AND REPORTING - Total	
7060 - S.H.O.P OPERATIONS	PERSONNEL SERVICES

PERSONNEL SERVICES - Total

NON-PERSONNEL SERVICES

NON-PERSONNEL SERVICES - Tot

7060 - S.H.O.P OPERATIONS

- Total

Authority

T

Comp Source Group	FY 2016 BUDGET	FY 2016 EXPENDITURE	FY 2017 BUDGET
0011 - REGULAR PAY - CONT FULL TIME	105,781	17,651.66	47,185.33
0014 - FRINGE BENEFITS - CURR PERSONNEL	25,387.44	3,866.12	11,654.78
	131,168.44	21,517.78	58,840.11
0020 - SUPPLIES AND MATERIALS	14,874	9,609.65	10,500
0031 - TELEPHONE, TELEGRAPH, TELEGRAM, ETC	0	0	15,000.39
0032 - RENTALS - LAND AND STRUCTURES	883,443.35	619,408.46	412,052
0040 - OTHER SERVICES AND CHARGES	24,522	960	14,763
0041 - CONTRACTUAL SERVICES - OTHER	5,251,178	2,244,070.56	3,238,546
0070 - EQUIPMENT & EQUIPMENT RENTAL	6,700	1,223.8	5,000
al	6,180,717.35	2,875,272.47	3,695,861.39
	6,311,885.79	2,896,790.25	3,754,701.5
0011 - REGULAR PAY - CONT FULL TIME	654,724.06	356,176.46	367,103.33
0012 - REGULAR PAY - OTHER	0	23,939.23	0
0013 - ADDITIONAL GROSS PAY	37,585	18,063.57	18,029.99
0014 - FRINGE BENEFITS - CURR PERSONNEL	151,696.39	84,976.07	90,674.52
0015 - OVERTIME PAY	0	149.74	0
	844,005.45	483,305.07	475,807.84
0041 - CONTRACTUAL SERVICES - OTHER	1,908,571.58	515,716.18	1,050,000
al	1,908,571.58	515,716.18	1,050,000
	2,752,577.03	999,021.25	1,525,807.84
0011 - REGULAR PAY - CONT FULL TIME	806,967.32	560,945.33	710,810.22
0013 - ADDITIONAL GROSS PAY	0	1,069.77	0
0014 - FRINGE BENEFITS - CURR PERSONNEL	184,986.59	106,326.05	175,570.13
0015 - OVERTIME PAY	0	221.4	0
	991,953.91	668,562.55	886,380.35
0040 - OTHER SERVICES AND CHARGES	300,000	0	0
0041 - CONTRACTUAL SERVICES - OTHER	2,373,000	1,544,098	1,436,500
al	2,673,000	1,544,098	1,436,500
	3,664,953.91	2,212,660.55	2,322,880.35
0011 - REGULAR PAY - CONT FULL TIME	634,560.02	271,251.98	536,428.91
0012 - REGULAR PAY - OTHER	377,934.97	202,289.97	499,956.9
0013 - ADDITIONAL GROSS PAY	23,590	18,883.42	45,714.6
0014 - FRINGE BENEFITS - CURR PERSONNEL	242,998.8	84,661.86	255,987.3
0015 - OVERTIME PAY	0	18,292.32	0
	1,279,083.79	595,379.55	1,338,087.71
0020 - SUPPLIES AND MATERIALS	22,500	7,693	27,300
0040 - OTHER SERVICES AND CHARGES	0	0	26,000
0041 - CONTRACTUAL SERVICES - OTHER	50,000	0	0
0070 - EQUIPMENT & EQUIPMENT RENTAL	5,000	0	5,000
al	77,500	7,693	58,300
	1,356,583.79	603,072.55	1,396,387.71
0011 - REGULAR PAY - CONT FULL TIME	420,710.99	134,761.28	237,605.55
0014 - FRINGE BENEFITS - CURR PERSONNEL	100,445.33	34,678.9	58,688.57
	521,156.32	169,440.18	296,294.12
	521,156.32	169,440.18	296,294.12
0011 - REGULAR PAY - CONT FULL TIME	1,358,258.53	681,582.83	764,896.49

0012 - REGULAR PAY - OTHER	226,534.26	449,451.88	594,852.55
0013 - ADDITIONAL GROSS PAY	19,727	24,653.52	20,319
0014 - FRINGE BENEFITS - CURR PERSONNEL	381,156.31	190,788.06	335,858
0015 - OVERTIME PAY	0	10,322.51	0
	1,985,676.1	1,356,798.8	1,715,926.04
0041 - CONTRACTUAL SERVICES - OTHER	1,322,695.25	1,106,541.58	2,015,000
al	1,322,695.25	1,106,541.58	2,015,000
	3,308,371.35	2,463,340.38	3,730,926.04
	17,915,528.19	9,344,325.16	13,026,997.56
	17,915,528.19	9,344,325.16	13,026,997.56

FY 2017 EXPENDITURE	
	0
	0
	0
	1,895.88
	0
	58,864.28
	2,520
	79,243.3
	1,299.9
	143,823.36
	143,823.36
	104,849.41
	40,264.52
	8,974.93
	31,686.69
	1,204.76
	186,980.31
	6,874.75
	6,874.75
	193,855.06
	191,046.21
	0
	36,595.98
	0
	227,642.19
	0
	134,522.89
	134,522.89
	362,165.08
	243,243.38
	186,264.53
	15,908.63
	77,635.61
	2,560.96
	525,613.11
	620.76
	618
	0
	0
	1,238.76
	526,851.87
	41,689.4
	11,836.66
	53,526.06
	53,526.06
	260,166.49

178,008.05
9,018.92
73,612.87
9,888.65
530,694.98
254,600
254,600
785,294.98
2,065,516.41
2,065,516.41

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PROGRAM	Approp Fund
8000 - IT RELATED OPERATIONS	0620
	0620 - Total
8000 - IT RELATED OPERATIONS - Total	
Overall - Total	

Feb 15, 2017

DC Health Benefit Exchange

FY16 - FY17 BU

AGENCY LEVEL

Activity	GAAP Category Title
8010 - IT RELATED OPERATIONS	PERSONNEL SERVICES
	PERSONNEL SERVICES - Total
	NON-PERSONNEL SERVICES
	NON-PERSONNEL SERVICES - Total
8010 - IT RELATED OPERATIONS - Total	

ange Authority

BUDGET

LEVEL

Comp Source Group	FY 2016 BUDGET	FY 2016 EXPENDITURE	FY 2017 BUDGET
0011 - REGULAR PAY - CONT FULL TIME	1,908,706.43	460,469.86	2,828,732.97
0012 - REGULAR PAY - OTHER	0	99,156.95	87,173.08
0013 - ADDITIONAL GROSS PAY	0	36,738.17	25,026.6
0014 - FRINGE BENEFITS - CURR PERSONNEL	451,923.73	95,205.39	721,160.68
0015 - OVERTIME PAY	0	230.72	0
	2,360,630.16	691,801.09	3,662,093.33
0020 - SUPPLIES AND MATERIALS	7,700	5,511.31	32,200
0032 - RENTALS - LAND AND STRUCTURES	0	0	824,102
0040 - OTHER SERVICES AND CHARGES	1,458,202	775,408.74	1,839,901.45
0041 - CONTRACTUAL SERVICES - OTHER	30,365,187.63	29,743,296.98	34,476,198.91
al	31,831,089.63	30,524,217.03	37,172,402.36
	34,191,719.79	31,216,018.12	40,834,495.69
	34,191,719.79	31,216,018.12	40,834,495.69
	34,191,719.79	31,216,018.12	40,834,495.69
	63,703,981.28	48,456,615.84	61,310,428.64

FY 2017 EXPENDITURE	
	204,243.8
	70,183.26
	8,456.77
	39,070.23
	294.02
	322,248.08
	0
	79,945.36
	0
	5,640,340.16
	5,720,285.52
	6,042,533.6
	6,042,533.6
	6,042,533.6
	9,959,151.56

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DCHBX Q9_FY16 Reprogrammings

Program Name	Activity	Purpose of Reprogramming	Funding Source	Fund Detail	Grant Number	PH	Reprogramming Amount
IT Related Operations	8010	To fund the contractual cost for IT contracting services	Federal	6204			419,974.37
IT Related Operations	8010	To fund the rental cost for IT department relocation	Federal	6205			300,000.00
IT Related Operations	8010	To fund the personal services costs in accordance to the grantor's guidelines	Federal	6204			503,309.00
Total							1,223,283.37

FY2016-IntraDistricts (Transfers)			
Buyer Agency	Seller Agency	Amount	Description of Services
DCHBX	DC Human Resources	\$160,562	To provide staffing assistance
DCHBX	OCTO	\$775,409	To provide server operations support services
DCHBX	DISB	\$100,000	To conduct HBX's assessment
DCHBX	DHS - Economic Security Administration	\$767,000	To provide eligibility determination services for the Authority
DCHBX	Office of Administrative Hearings	\$13,875	To provide administrative hearing support services

FY2017-IntraDistricts (Transfers to Date)			
Buyer Agency	Seller Agency	Amount	Description of Services
DCHBX	DC Human Resources	\$168,590	To provide staffing assistance
DCHBX	Office of Administrative Hearings	\$1,625	To provide administrative hearing support services

Grant Details

Grant No.	Grant Title	Project Period*	Funding Source	Purpose of the Grant	Approved CMS Grant Award	Expenditures in FY16	Expenditures in FY17 as of 01.31.17	Remaining Grant Funds as of 1.31.17	Employee responsible for grant deliverables
HBEIE140203	Level 1 Establishment Grant	1/23/2014 - 10/22/2016	Federal Grant from Centers for Medicare and Medicaid	On October 23, 2013, the District was awarded an additional \$34.4M of Establishment Level One Funding to continue and complete the implementation efforts. In May 2014, the District was awarded \$7.9M of supplemental funding to this award to support the Carrier Information API and the Automated Test Infrastructure.	\$42,402,977	\$18,813,575	\$2,553,817	\$0	Mila Kofman
HBEIE140202	Level 1 Establishment Grant	7/24/2014 - 12/29/2017	Federal Grant from Centers for Medicare and Medicaid	On July 24, 2014, HBX was awarded a Level One Establishment Grant from the Centers for Medicare & Medicaid Services in the amount of \$25.8 million. The vast majority of these grant monies will be expended on IT. HBX continues to build functionalities to the system to enhance the consumer shopping experience. In December 2014, the District was awarded \$5.6M of supplemental funding to this award to support continued implementation activities.	\$31,525,096	\$3,579,900	\$1,980,054	\$8,994,671	Mila Kofman
HBEIE150214	Level 1 Establishment Grant	12/22/2014-12/19/2017	Federal Grant from Centers for Medicare and Medicaid	On December 22, 2014, HBX was awarded a Level One Establishment Grant from the Centers for Medicare & Medicaid Services in the amount of \$22.0 million to support continued implementation activities.	\$22,057,941	\$8,797,320	\$263,469	\$12,997,152	Mila Kofman
					\$95,986,014	\$31,190,795	\$4,797,340	\$21,991,823	

* Reflects extensions approved by the Center for Medicaid and Medicare Services

Supported Programs and Activities	Corrective Action or Technical Assistance
Supports all HBX implementation/ development activities, but not operations.	None
Supports all HBX implementation/ development activities, but not operations.	None
Supports all HBX implementation/ development activities, but not operations.	None

Vendor Name	Purpose of Contract	Contract Administrator	Current Contract Term	Modification Cost	FY16 Total Amount Expended	FY17 Total Amount Expended, to Date	Reason for Modification	Funding Source	Method
Obverse	IT Consulting Services- Cost Allocated (DHS)	Suzanne Peck	Option Year Two 10/1/2016-9/30/2017	Exercised Option Year One (OY1)- \$6.3M OY1 Increase- \$1.5M OY2- \$2.3M Increase \$500K	\$2,308,553.70	\$372,820.96	Exercised Options & Increases	Federal Grant/Assessment	IFB
Analytica	IT Consulting Services- Cost Allocated (DHS)	Suzanne Peck	Option Year Two 10/6/2016- 10/5/2017	Exercised OY1- \$1.5M Exercised OY2- \$2.6M	\$1,299,712	\$24,108.62	Exercised Options	Federal Grant/Assessment	IFB
Data Net Systems	IT Consulting Services- Cost Allocated (DHS)	Suzanne Peck	Option Year Two 11/24/2016- 11/23/2017	Exercised OY1- \$2M OY1 Increase- \$5.7M Exercised OY2- \$2.6M	\$1,007,604.46	\$538,204.50	Exercised Options & Increase	Federal Grant/Assessment	IFB
Pittman Group dba Vantix	IT Consulting Services- Cost Allocated (DHS)	Suzanne Peck	Contract expired 10/1/2015-9/30/2016	Exercised OY1- \$4.6M	\$4,279,850.72	\$0.00	Exercised Option	Federal Grant/Assessment	IFB
FWG Solutions	IT Consulting Services- Cost Allocated (DHS)	Suzanne Peck	Contract expired 11/24/2015-11/23/2016	Exercised OY1-\$2.6M	\$876,426.52	\$0.00	Exercised Option	Federal Grant/Assessment	IFB
Enlightened, Inc.	IT Consulting Services- Cost Allocated (DHS)	Suzanne Peck	Option Year Three 4/30/2016-4/29/2017	Exercised OY2-\$9,703,371 Exercised OY3- \$10M OY3 Increase- \$950K	\$5,083,012.97	\$483,254.83	Exercised Options and Increase	Federal Grant/Assessment	IFB
Enlightened, Inc.	IT Consulting Services	Suzanne Peck	Base Year 4/22/2016- 4/21/2017	OY-\$150K	\$0.00	\$177,277.50	Increase	Federal Grant	IFB
Cradle Systems, LLC	IT Consulting Services	Suzanne Peck	Base Year 5/2/2016- 5/1/2017	*TBD	\$186,220.00	\$480,322	Additional IT Service (MA Project)	Federal Grant	IFB
Courage, LLC	IT Consulting Services	Suzanne Peck	Base Year 5/2/2016- 5/1/2017	Increase- \$250K	\$936,613.50	\$1,248,422	Converting the Haven and Mobile (MA Project)	Federal Grant	IFB
Accenture Federal Services	Independent Verification and Validation Services	Suzanne Peck	Option Year Two 10/1/2016- 9/30/2017	Exercised OY1- \$912,393.24 Exercised OY2- \$100K OY2- Decrease Contract Line Item Number (CLIN)-\$ 87,303.56 OY2 Add & Increase- \$850K	\$912,393.24	\$0.00	Exercised Options, Decrease CLIN, Add & Increase Contract amount	Assessment	GSA/Sole Source
Center for Study of Services	Doctor Directory and Plan Comparison	Robert Shriver	Option Year Two 10/1/2016- 9/30/2017	Exercised OY1 \$523,980.00 OY1 Increase- \$225,231.00 Exercised OY2- \$789,150.00	\$517,861.48	\$0.00	Exercised Options and Increase	Assessment	Sole Source
Inspired eLearning	Software and Web-Based Training	Suzanne Peck	Option Year One 2/23/2016- 2/22/2017	Exercised OY1 \$87.50	\$87.50	\$0	Exercised Option	Assessment	Exempt from Competition
A&T Systems	Cloud Computing Services	Suzanne Peck	Option Year One 6/24/2016- 6/23/2017	Exercised OY1- \$298K OY1 Increase- \$170K * OY1 Increase- \$200K	\$239,032.73	\$57,881	Exercised Option and Increase	Assessment	GSA/RFP
NFP Health Services	Premium Billing	Suzanne Peck	Option Year Three 10/1/2016- 9/30/2017	Exercised OY2- \$990K OY3- \$763,800.00 \$226,200.00	\$990,000.00	\$318,250	Exercised Options	Assessment	Sole Source
Maximus, Inc.	Call Center Services	Holly Whelan	Option Year Four 10/1/2016- 9/30/2017	Exercised OY3- \$5,538,372.00 Exercised OY4- \$5,766,534 MA Cost	\$1,520,930.15	\$120,591	Exercised Options	Federal Grant/Assessment	RFP
Mythics, Inc.	Oracle Enterprise Management Software	Suzanne Peck	Option Year One 2/4/2016- 2/3/2017	Exercised OY1- \$117,029.28	\$56,264.07	\$0	Exercised Option	Assessment	GSA/RFP

* = Pending modifications contingent on the Massachusetts Health Connector project being approved and finalized through MOU.

Q1. Please provide a current organizational chart for the District of Columbia Health Benefit Exchange Authority (HBX), and include:

- a. The number of full time equivalents (FTEs) at each organizational level;**

See Attachment A.

- b. A list of all FY16 FTEs broken down by program and activity;**

See Attachment B.

- c. The employee responsible for the management of each program and activity;**

Program	Activity	Responsible Manager	Responsible Employee
Agency Fiscal Operations Provides comprehensive and efficient financial management services, to and on behalf of District Agencies so that the financial integrity of the District of Columbia is maintained. This program is standard for all agencies using performance-based budgeting.	Accounting Operations	Kara Onorato, Chief Financial Officer	Samuel Ince, Accounting Operations
	Budget Operations		Jilu Lenji, Budget Operations
Agency Management Provides for administrative support and the required tools to achieve operational and programmatic results. This program is standard for all	Contracts and Procurement	Ikeita Cantú Hinojosa, Chief Operating Officer	Franklin Austin, Contracting Officer
	Information Technology Services		Candace Walls, Information Technology Specialist
	Personnel		Troy Higginbotham, Management Liaison Specialist

agencies using performance-based management.	Facilities Management		Paulette Saunders, Administrative Officer
	Performance Management	Debra Curtis, Senior Deputy Director for Policy and Programs	Debra Curtis, Senior Deputy Director for Policy and Programs
	Legal Services	Purvee Kempf, General Counsel	Purvee Kempf, General Counsel
Consumer Education and Outreach Educates District residents, small business owners and small business employees about health coverage options available through DC Health Link by organizing special events, participating in sponsored activities, conducting educational seminars, partnering with other District agencies and organizations as well as intensive outreach through all of these methods.	Consumer Education and Outreach	Linda Wharton Boyd, Communications and Civic Engagement Manager	Linda Wharton Boyd, Communications and Civic Engagement Manager
	Marketing and Communications		Linda Wharton Boyd

<p>Marketplace Innovation Policy and Operations</p> <p>Performs functions required of all state-based marketplaces, including plan management, eligibility determinations, and certification of qualified health and dental plans, as well as to ensure the efficient operation of an on-line insurance marketplace where individuals, families, small businesses, and their employees can shop and enroll in health insurance.</p>	Contact Center	<p>Robert Shriver, Deputy Director of Program Services and Holly Whelan, Consumer Affairs Manager</p>	Alison Nelson, Program Analysis Officer
	Plan Management		Kenneth Taylor-Sutton, Program Manager
	Eligibility and Enrollment		Sarah Bagge, Eligibility and Enrollment Manager
	Member Services		Selawamit Teka, Supervisory Case Manager
	Data Analytics and Reporting		Stephen Haines, Statistician
	Small Business Health Options Program (SHOP)		Hannah Turner, Program Manager
	Navigators, In-Person Assistants, and Certified Application Counselors		Holly Whelan, Consumer Affairs Manager
	Electronic Data Interface Operations (EDI Ops)		Alix Pereira, Senior Policy Advisor

Information Technology (DC Health Link)		Suzanne Peck, Director of Information Systems	Suzanne Peck, Director of Information Systems
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d. A narrative explanation of any organizational changes made during FY16 or to date in FY17.

HBX concluded realigning its programs and activities to more closely mirror how services are delivered and fully implemented two new program categories with its FY16 budget – the Marketplace, Innovation, Policy and Operations (MIPO) program, and the Information Technology program. The MIPO program now houses Plan Management, Eligibility and Enrollment, Members Services, Small Business Health Options Program (SHOP), Electronic Data Interface Operations (EDI Ops), and the Navigator, Assister, and Certified Application Counselor (CAC) activities. The Information Technology program provides critical development, maintenance and support of DC Health Link. In FY16 and to date in FY17, HBX made several changes.

Marketplace, Innovation, Policy and Operations (MIPO) – HBX continues to assess cost effective staffing for MIPO. To serve approximately 65,000 people covered through SHOP and 18,000 through the individual marketplace, additional account managers and member services staff were added.

In FY16, the MIPO team became responsible for the Navigator, Assister, and CAC programs. These outreach and enrollment initiatives had previously been managed by the HBX Legal Department until early FY16.

Additionally as approved under the FY16 budget, the MIPO team added one position to help with data analysis and federal data reporting requirements.

In FY16, we also moved Electronic Data Interface (EDI) operations functions from our Information Technology team to the MIPO team. This change allows for more cost effective staffing of EDI and seamless coordination between EDI and account managers/member services teams.

IT Operations – The Information Technology program provides critical development, maintenance and support of DC Health Link. On February 1, 2017, the operations and maintenance (O&M) and security for the shared system with Medicaid was transferred to OCTO. HBX no longer leads O&M/security for the shared system. HBX is responsible for its own IT infrastructure, which includes all of SHOP and private individual health insurance customers (enrollment and shopping). This functionality/system is now cloud-based, agile, and open sourced. This is separate from the shared eligibility rules engine with Medicaid. HBX only uses the shared rules engine for APTC and PTC determinations.

Q2. For each vacancy posted during FY16 and to date in FY17, please state:

- a. The date that each position became vacant;
- b. Why the position became vacant;
- c. Steps that were taken to fill the position; and
- d. The date the position was filled.

See Attachment C.

Q3. With respect to employee evaluations, goals, responsibilities, and objectives in FY16 and to date in FY17, please describe:

a. The process for establishing employee goals, responsibilities, and objectives;

HBX performs its hiring functions through one HBX Human Resources Manager employee and a Memorandum of Agreement with the Department of Human Resources (DCHR). Services provided under the agreement include: position classification, benefits and retirement administration, policy development guidance, and employee relations consultation.

Although we have exercised the same performance management principles since 2013, HBX formally transitioned to utilization of the District's PeopleSoft performance management program and system in FY15. Implementation included staff training and education on the development of Specific, Measurable, Attainable, Realistic, Time-Related (SMART) goals, creation of Performance Improvement Plans (PIP), and completion of performance evaluations. Each manager partners with individuals regarding employee goals and responsibilities related to their overall duties as well as the objectives and mission of the agency. In FY16, HBX employees had SMART goal-driven performance plans in place and received performance evaluations.

b. The steps taken to ensure that all HBX employees are meeting individual job requirements;

In addition to the above-mentioned process, our managers have worked to establish an organizational culture that emphasizes teamwork, shared leadership, and goal-sharing with service to our customers – District residents and small businesses – at the core. Managers meet regularly with team members to ensure that goals and responsibilities are met and job performance is in line with the position of record for the employee.

HBX's system of performance management rests on the following basic principles:

- Goals should be set and agreed upon by both the manager and the employee;
- Metrics for measuring the employee's success in meeting those goals should be clearly articulated;
- The goals themselves should be flexible enough to reflect changing conditions in our customers' needs, changing federal regulations, and program priorities established by the Executive Board and Executive Director; and
- Managers are encouraged to act as coaches to help their direct reports achieve success.

We do this through full staff meetings, weekly team meetings, weekly policy meetings, manager meetings, and senior managers meetings. Every program provides detailed weekly reports that are made available agency-wide, giving employees the opportunity to learn and obtain real time feedback from the Executive Director and other senior managers on problem solving. Feedback is quick, ideas for improvements are shared and immediately implemented, and just as

importantly, performance problems are corrected as they occur rather than waiting until a more formal, once-a-year sit down.

In FY15, HBX also launched a leadership development and coaching program for senior management, and the program has continued in FY16 and FY17. The program includes a combination of team skills as well as individual growth in order to operate efficiently and effectively as a leadership team, including identifying best practices used by other State-based Marketplaces and the private sector as we shift from the successful implementation phase to the on-going operational years.

c. The remedial actions taken for employees who failed to meet employee goals, responsibilities, and objectives.

Employees who fail to contribute to established goals are provided counseling. Managers will put an individual on a 30, 60 or 90 day action plan of improvement. In some instances, they have been successfully reassigned to other teams more suited to their skills, knowledge and abilities.

Q4. Please list all employees detailed from or to your agency, if any. Provide the reason for the detail, date of detail, and projected date of return.

There were no employees detailed from the DC Health Benefit Exchange Authority in FY16 or to date in FY17.

Q5. Please provide the Committee with the following for FY16 and to date in FY17:

- a. A list of all employees who receive cell phones, personal digital assistants, or similar communication devices at agency expense;**

HBX currently provides cell phones to all program and operational staff. Two administrative support personnel, one IT specialist, two program personnel, and one attorney do not require the use of such devices and have not received agency-issued equipment.

- b. A list of employees receiving bonuses, special pay, additional compensation, or hiring incentives in FY16 and to date in FY17 and the amount;**

See Attachment D.

- c. A list of travel expenses for FY16 and to date in FY17, arranged by employee;**

See Attachment E.

- d. A list of all employees with a salary over \$100,000.**

See Attachment F.

Q6. Please provide the amount budgeted and actually spent in FY16 and to date in FY17 for the agency and its programs and activities, broken out by source of funds, Comptroller Source, and Comptroller Object.

See Attachment G.

Q7. Have any spending pressures been identified for FY17? If so, please provide a detailed narrative of the spending pressure, including any steps that are being taken to minimize its impact of the budget.

No spending pressures have been identified for FY17.

Q8. Please provide an update on all the cost-savings initiatives included in HBX's FY17 budget.

HBX is firmly committed to keeping its costs as low as possible, using a variety of strategies:

Agency Partnerships

HBX minimizes potential duplications in services by leveraging partnerships with sister agencies. These cost-savings initiatives include developing and sharing functionality with OCTO, DHS and DHCF. Note that HBX has assumed most verifications of eligibility. This is more cost effective than having ESA perform those functions. HBX also partners with DISB for assessment collections, uses DCHR for some of its human resource services, and delegates authority to the Office of Administrative Hearings for appeals of eligibility determinations.

State Partnerships

HBX continues to explore additional cost-savings through sharing various functions with other state exchanges via common purchasing/negotiations with vendors for better prices when two or more states need the same/similar service, joint contracting, and sharing products/notices, etc. In 2016, HBX negotiated reduced rates for services from Consumers' Checkbook and cost reductions occur when a state signs up – cost is lower for HBX and that state.

HBX is excited to enter into a first-in-the-nation partnership with the Massachusetts Health Connector for HBX to provide turnkey operations of its small business (SHOP) marketplace. That partnership was approved on February 23, 2017, and will realize savings for HBX by having a partner with whom we can share operational costs including, for example, the costs of implementing new requirements. It will also enable us to bring new consumer-facing enhancements to the market that will benefit both DC and Massachusetts small businesses, while creating a solution architecture that presents the potential for expansion to other products or lines of business.

FY17 Cost Reductions

In addition to these measures, HBX is aggressively working with its vendors to reduce costs. HBX renegotiated its contract with its premium aggregation vendor to achieve cost savings – eliminating per member per month fees that would have been triggered. HBX achieved cost savings through price reductions for its Contact Center. Also, HBX moved away from color printing to a default of black and white, reducing overage costs for color copies by 98%. Furthermore, HBX moved away from using a large system integrator for IT development in 2015. Since that time, the development has been managed by HBX Information Technology Operations working with IT consultants from CBEs. This means that funds are spent locally. HBX has also taken in-house its eligibility verification process. As a result, the FY18 budget reflects a reduction in the MOU with ESA, from \$775,000 to \$100,000. Additionally, moving

from a hardcoded, high license fee IT system to agile, open source, and cloud-based IT system saves millions of dollars in annual operations and maintenance costs, and allows for ongoing investments. Hardcoded software has long development cycles (6-8 months to deployment) and expensive testing. Using an “Agile” approach and open source code means quick deployments that are cost effective to test. HBX continues to convert licensed-based software to open source. HBX uses IT experts staffed by CBEs.

Budget Review

HBX’s proposed budget passes through multiple tiers of review. HBX finalized its proposed budget after HBX receives input from the Standing Advisory Board and other stakeholders to ensure that the proposed budget reflects community priorities, and is responsible and efficient. The proposed budget is reviewed and approved by the HBX Executive Board’s Finance Committee and the Executive Board. It is then submitted through the Mayor to the Council for review and approval. The stakeholder input and various levels of review ensures that community needs are met in the most cost-effective manner.

Q9. Please identify any reprogrammings received by or transferred from HBX during FY16 and to date in FY17, and include a description of the purpose of the transfer and which HBX programs, activities, and services were affected.

See Attachment H.

Q10. Please identify any intra-district transfers received by or transferred from HBX during FY16 and to date in FY17, and include description as to the purpose of the transfer and which HBX programs, activities, and services were affected.

See Attachment I.

Q11. Provide a complete accounting of any Special Purpose Revenue Funds for FY16 and to date in FY17. Please include the following:

- a. Revenue source name and code;**
- b. Description of the program that generates the funds;**
- c. Activity that the revenue in each special purpose revenue fund supports;**
- d. Total amount of funds generated by each source or program in FY16 and to date in FY17; and**
- e. FY16 and to date FY17 expenditure of funds, including purpose of expenditure.**

No Special Purpose Revenue Funds were budgeted or spent in FY16 or FY17.

Q12. Please provide the following information for all grants awarded to HBX during FY16 and to date in FY17:

See Attachment J.

Q13. For each grant lapse occurring in FY16, please provide:

a. A detailed statement on why the lapse occurred;

N/A

b. Any corrective action taken by HBX;

N/A

c. Whether the funds can be carried over into FY17.

N/A

No grants lapsed in FY2016.

Q14. Please provide the following information for all contract modifications made during FY16 and to date in FY17:

- a. **Name of the vendor;**
- b. **Purpose of the contract;**
- c. **HBX employee responsible for the contract;**
- d. **Modification term;**
- e. **Modification cost, including budgeted amount and actual spent;**
- f. **Narrative explanation of the reason for the modification;**
- g. **Funding source; and**
- h. **Whether or not the contract was competitively bid.**

See Attachment K.

Q15. Please list and describe each major program and activity, policy initiative, performance objective and legislative objective during FY16 and FY17, to date. For each, please provide the name of the employee responsible for each and the total number of FTEs assigned to the program.

The Affordable Care Act (ACA) is working in the District of Columbia to help individuals and families have affordable, quality health coverage. More than 96% of the District's residents have health coverage and the District ranks among the top three states with the lowest uninsured rates in the country. The District has a long record of expanding health coverage to its residents, and HBX continues to be successful in finding and enrolling the uninsured.

The ACA has been implemented in the District through DC Health Link, an online competitive, consumer-driven private health insurance marketplace that enables individuals and small businesses to compare health insurance prices and benefits and purchase affordable, quality health insurance. DC Health Link opened for business on October 1, 2013.

From October 1, 2013, to February 2, 2017, DC Health Link has served more than 300,000 people: 43,860 people enrolled in a private individual health insurance, 179,446 people have been determined eligible for Medicaid, and 81,293 people enrolled through the DC Health Link small business marketplace (includes Congressional enrollment) called SHOP.

For plan year 2017, residents have a choice of 20 private health insurance plans (2 of which are catastrophic) from CareFirst and Kaiser. At the close of open enrollment this year, 23,779 District residents selected health plans for 2017. That is the highest number of people DC Health Link has ever had in the individual marketplace, with more new customers during this open enrollment period than in either of the past two.

DC Health Link offers to small businesses 151 private health insurance plans from three United Healthcare companies, two Aetna companies, two CareFirst BlueCross BlueShield companies, and Kaiser. These include HMOs, POS, PPOs, zero-deductible plans, and HSA-compatible high deductible coverage. As of February 2017, there are approximately 65,000 people currently enrolled through their employer in SHOP. Some small businesses have saved thousands of dollars through DC Health Link, and some saw 2017 rate decreases of as much as 19%.

HBX received the 2016 Best Practices in Innovation award from Amazon Web Services (AWS) City on a Cloud Challenge. This is a global competition of local and regional government and technology partners using AWS to deploy innovative solutions to move government forward on behalf of their citizens.

HBX was also recognized by the Clear Choices campaign in January, 2017 for offering the best online comparison shopping tools among all public exchanges in the country. DC Health Link was ranked number 1 among State-based Marketplaces and the Federal Marketplace in the Clear Choices report card.

See <https://static1.squarespace.com/static/547e0e88e4b0d4a9ddc29e99/t/588fbb1e37c58133cd186662/1485814559457/CC+2017+InsuranceScorecard.pdf>.

On February 23, 2017, HBX and the Massachusetts Health Connector announced a first-in-the-nation state-to-state partnership. Under this partnership, HBX will stand up a separate branch of DC Health Link's existing online platform to improve available offerings to Massachusetts' small businesses and their employees – including the ability for employees to potentially select their own plan from a range of choices – while reducing long-term operational costs for the small-group online platform. This partnership will enable HBX to leverage its cloud-based, agile, open-source technology to bring new customer-facing enhancements to the market that will benefit both DC and Massachusetts small businesses, while creating a solution architecture that presents the potential for expansion to other products or lines of business.

Looking ahead, it remains HBX's top priority to find new ways to improve the customer experience on DC Health Link, resolve customer issues quickly and efficiently, and reach uninsured populations through extensive outreach activities, media campaigns, and partnerships with community organizations and District government agencies.

Major Programs and Activities

A. FY16 & FY 17 Program Structure

Consumer Education and Outreach contains the following 3 major activities:

- ***Consumer Education and Outreach Support Services***: educates District residents, small business owners and small business employees about health coverage options available through DC Health Link by organizing special events, participating in outside events, conducting educational seminars, partnering with other District agencies and organizations, and conducting intensive outreach through all of these methods;
- ***Marketing and Communication***: provides support and awareness for DC Health Link through development of an earned media plan, printed materials for distribution, paid media campaign that may include outdoor advertising, broadcast, newspapers and other publications, digital, and social media avenues; and
- ***Navigators (also called In-Person Assisters) and Certified Application Counselors***: provides in-person assistance at multiple locations across the District to consumers looking

for help starting or completing the online application and plan selection process. There are currently approximately 90 Navigators, Assisters, and Certified Application Counselors assisting consumers across the city.

- In total, \$650,000 in grant funds were provided to 7 Navigator/In Person Assister organizations for 2017 to provide enrollment assistance and outreach activities. These organizations include Whitman Walker Health, Mary's Center, La Clinica del Pueblo, Unity Healthcare, Community of Hope, Leadership Council for Healthy Communities, and DC Primary Care Association.
- The Certified Application Counselor program is a non-funded program designed for organizations that provide application and enrollment assistance to consumers, but do not receive grant funds to do so (ex: hospitals, etc.).

Marketplace Innovation Policy and Operations: performs functions required of state-based marketplaces, including plan management, eligibility determinations, and certification of qualified health and dental plans, as well as to ensure successful operation of an on-line insurance marketplace where individuals, families, small businesses, and their employees can shop and enroll in health insurance. This program contains the following 6 major activities:

- ***Contact Center:*** required for state-based marketplaces and is a condition for certification as a state-based marketplace. The contact center takes calls to assist customers with DC Health Link questions and on-line applications, processes paper applications and provides information for escalated cases to the HBX and Economic Security Administration (ESA).
- ***Plan Management:*** required for state-based marketplaces and is a condition for certification as a state-based marketplace. Working in conjunction with local and federal regulatory bodies, establishes and oversees the process to certify, recertify, and decertify Qualified Health Plans and Qualified Dental Plans available through DC Health Link. Also manages enrollment issues related to Qualified Health Plan and Qualified Dental Plan carriers. This includes the coordination of all Electronic Data Interchange (EDI)-related transactions to and from DC Health Link.
- ***Eligibility and Enrollment:*** required for state-based marketplaces and is a condition for certification as a state-based marketplace. With the support of IT, designs and manages the eligibility and enrollment process through a seamless, web-based application that determines individual and family member eligibility for cost sharing reductions and/or advanced premium tax credits, determines eligibility for private health insurance, and enables individuals and families to enroll in qualified health plans and qualified dental plans available through DC Health Link, manages and facilitates a legally required customer appeals process; and, as required by federal law, provides tax reporting information to customers and the IRS.
- ***Member Services:*** responsible for core customer service. Researches complex customer issues and works with carriers and internal operations to resolve those issues. Provides assistance to customers with complex circumstances and to those needing extra help

navigating the DC Health Link online marketplace, resolving any technical difficulties a customer may experience, ensuring that changes to eligibility and enrollment information are quickly updated and processed, assessing qualification for special enrollment periods, performing required verifications, and resolving escalated cases including from the Contact Center.

- ***Data Analytics and Reporting:*** responsible for the development and implementation of federally required data reporting requirements and customer surveys. Manages the end-to-end process of developing functionality for electronic federal data reporting as well as the creation and dissemination of required IRS 1095A forms for tax reporting purposes. Federal reporting responsibilities include monthly IRS H36 reports, monthly HHS/CMS Policy Level Reports and State Based Marketplace Input (SBMI) files, and annual IRS H41 reports. Develops and administers internal customer surveys for DC Health Link.
- ***SHOP Operations:*** required for state-based marketplaces and is a condition for certification as a state-based marketplace. Develops, operates and manages DC Health Link's Small Business Health Options Program (SHOP) – the on-line marketplace for small businesses. Manages the process from end-to-end, designs system improvements, and troubleshoots systems issues to ensure effective operation of the SHOP Marketplace. Supports brokers, employers, and their employees. Works with IT on design, manages broker relationships, training, certification, and cases. Conducts outreach and works with the small business community.

IT Related Operations: maintains, improves, and supports the Information Technology (IT) components necessary to operate DC Health Link. Please see questions 20 and 21 for more information on IT related operations.

Agency Management: provides for administrative support and the required tools to achieve operational and programmatic results.

Agency Financial Operations: provides comprehensive and efficient financial management services to, and on behalf of, District agencies so that the financial integrity of the District of Columbia is maintained. This program is standard for all agencies using performance-based budgeting.

Legislative Objectives

A. Legislation Introduced or Enacted in FY16 and FY17

None for FY16 or FY17 to date. HBX is currently reviewing local ACA implementation laws. Technical corrections may be necessary. Should the ACA be repealed at the federal level, HBX

will work with its community partners and stakeholders to identify policy options for consideration by the Council.

B. Regulations Introduced or Enacted in FY16 and FY 17

§ 26-D DCMR §110 *et seq.* – Final Rulemaking on Health Carrier Assessment DC Council passively approved permanent regulations on the assessment process on June 30, 2016. The final regulations became effective upon publication in the District Register on July 22, 2016. The final regulations establish a permanent appeals process, and clarify the entities that are subject to the assessment. The regulations were published for informal public comment on September 23, 2015. HBX presented the proposed regulations and public comments received to the HBX Executive Board on December 9, 2015. After an opportunity for additional public comment, the Executive Board voted to approve these proposed regulations for publication in the DC Register. The proposed regulations were published in the DC Register on December 18, 2015 for a 30 day notice and comment period, which closed on January 16, 2016. No comments were received on these proposed regulations. The proposed regulations were submitted to the Council of the District of Columbia for passive 30-day review, which ended on June 30, 2016, at which time the regulations were deemed approved.

Policy Initiatives

A. Background

HBX policy decisions are developed through a local, transparent, and DC-based community stakeholder-driven process using advisory committees and working groups. HBX is governed by a private Executive Board of District residents that makes decisions on policy based on the input and recommendations from the Standing Advisory Board, advisory committees and working groups (<http://hbx.dc.gov/page/meet-health-benefit-exchange-authority-executive-board-members>). HBX believes that to maintain a successful state-based marketplace where residents, families and small businesses can choose quality, affordable health plans that meet their needs, it must reflect the priorities of the community and continue to have significant input from DC stakeholders.

Standing Advisory Board and Committees: HBX has several standing advisory committees charged with making policy recommendations. The membership includes diverse stakeholders representing a broad range of policy views. The Standing Advisory Board (<http://hbx.dc.gov/page/dc-health-benefit-exchange-hbx-standing-advisory-board>) and Standing Advisory Committees (<http://hbx.dc.gov/page/dc-health-benefit-exchange-advisory-committees>) are on-going committees that review questions and issues and develop policy recommendations for the Executive Board.

The Standing Advisory Board provides input to the HBX Executive Board in developing policy positions on numerous issues including: to prohibit tobacco rating in individual and small group

market insurance policies sold in the District; to establish transition periods toward one big marketplace for individual and small group market insurance; to enact new permanent and temporary Special Enrollment Periods for people seeking health insurance coverage outside of the annual open enrollment period; to recommend board action on network adequacy standards; to review and recommend enhanced plan certification requirements for HBX; and each year, the Standing Advisory Board reviews the staff proposed HBX budget and provides input prior to the budget moving forward for Executive Board consideration. The full review of their meetings and materials can be viewed on the HBX website here: <https://hbx.dc.gov/node/431712>.

There are three standing Advisory Committees in addition to the Standing Advisory Board:

- Producers Advisory Committee advises on how to best use the experience and skills of health insurance brokers and agents to help people choose coverage to best meet their needs. This includes issues around compensation and appointment, and other issues as requested by the Executive Board or Authority staff. In 2016, the Producer Advisory Committee met in person twice to discuss developing a Preferred Broker program, launching a new broker training, and engaging General Agencies (building a special online portal in DC Health Link).
- Plan Management Advisory Committee examines issues related to qualified health plan (QHP) requirements, certification processes, and enrollment. This Committee focuses on operational issues. In 2016, the Plan Management Advisory Committee worked to establish policies around binder payments in the individual market, and dependents aging off a parent's policy in both the individual and SHOP markets. The Committee also began discussions on the process for decertifying plans in DC Health Link and approaches for implementation of this process should it be needed in the future.
- Consumer Assistance and Outreach Advisory Committee focuses on the design and implementation of the Navigator and Consumer Assistance programs to help educate residents and enroll them.

Working Groups: If a policy decision needs specific expertise or must be examined quickly, an ad hoc Working Group chaired by a Board Member and vice chaired by a Member of the Standing Advisory Board is established. The working group is given topic specific issues to address within set time-frames. Membership and participation is open and diverse stakeholders participate as voting members. There have been a total of eighteen working groups since inception. The majority of working groups were created and concluded their work in 2013 when major policy decisions were being made. Currently the standard plans working group is the only recurring working group (reconvened every year).

The meetings and materials can be found on the HBX website at: <http://hbx.dc.gov/page/advisory-working-groups>.

B. FY16 and FY17 Policy Decisions

Special Enrollment Periods: The federal government sets minimum standards for qualifying events that enable people to enroll outside an annual open enrollment period. States are allowed to add additional qualifying circumstances. HBX staff researches actions taken by other states and the customer circumstances that may warrant action. The Standing Advisory Board then reviews the research, takes public input on expanding SEPs, and recommends new SEPs to be adopted. The HBX Executive Board then considers those recommendations for implementation. The Standing Advisory Board reviewed and made a recommendation to create a time limited SEP affecting APTC-eligible customers. The resolution for this action can be found on the HBX website (<http://hbx.dc.gov/page/adopted-resolutions>).

Network Adequacy: On August 6, 2016, the HBX Executive Board adopted a resolution based on the unanimous recommendation of the Standing Advisory Board. The resolution encourages the District to enact network adequacy standards based on the National Association of Insurance Commissioners Health Benefit Plan Network Access and Adequacy Model Act and network adequacy standards enacted in other states. The resolution on network adequacy can be viewed on the HBX website (<http://hbx.dc.gov/page/adopted-resolutions>).

Updates to Standard Plans for 2018: The Standard Plan Advisory Working Group met through the Fall – Winter of 2016-2017 to modify standard plan designs for plan year 2018. As a reminder, HBX adopted standard plan designs to permit customers to compare apples-to-apples across carriers and make coverage choices based on quality, price, and provider participation. The Standard Plans were first adopted in FY15, but they need to be modified each year to ensure compliance with federally mandated actuarial value levels. The Standard Plan Working Group most recently also considered whether additional standard plan designs should be required – specifically a requirement that health carriers offer a Health Savings Account (HSA) compatible plan at specific metal levels. This issue was added for consideration in response to a carrier in the individual marketplace discontinuing to offer HSA-compatible plans for 2017. The Working Group updated the actuarial values of the standardized plans as required to meet federal standards. The Working Group also recommended a requirement to offer an HSA-compatible plan at the bronze metal level for the individual marketplace for plan year 2018. Additionally, both Kaiser and Carefirst agreed to voluntarily offer an HSA-compatible plan at the gold level for plan year 2018. The HBX Executive Board adopted the Standard Plan Working Group recommendations and the resolution can be found on the HBX website here: https://hbx.dc.gov/sites/default/files/dc/sites/hbx/publication/attachments/Standard%20Plans%20Board%20Resolution%202017%20final_0.pdf

On-going FY17 Policy Priorities

HBX policy priorities for FY17: 1. If federal policy changes lead to people losing their health care, then develop policy options for Council to consider. 2. Continue to focus outreach resources to find and enroll uninsured people. 3. To successfully launch our partnership with Massachusetts, demonstrating the power of states that are committed to expanding coverage and improving health insurance affordability and choice for their residents and businesses.

Q16. Please identify all recommendations identified by the Office of the Inspector General or the D.C. Auditor in FY16 and FY17, to date. Please note what actions have been taken to address these recommendations.

In March 2016 and February 2017, the DC Office of the Inspector General (DC OIG) issued the *Health Benefit Exchange Authority Financial Statements for the Years Ended September 30, 2015, and 2014* (OIG No. 16-1-07HI) and the *Health Benefit Exchange Authority Financial Statements for the Fiscal Years Ended September 30, 2016, and 2015* (OIG No. 17-1-07HI), respectively. No material weaknesses were identified in either report.

In December 2015, the DC OIG issued report *Audit of Remediation Efforts in Response to Significant Deficiencies Identified in the FY 2014 Independent Auditors' Report at D.C. Health Benefit Exchange Authority* (OIG No. 15-2-11MA). This report was addressed as a part of the answers to the *Questions for Performance Oversight Hearing on Fiscal Year 2015-16*, question 24: http://dccouncil.us/files/user_uploads/budget_responses/pohquestionshbx.pdf.

In January 2017, the D.C. Auditor (ODCA) released *The D.C. Government Must Improve Policies and Practices for the Protection of Personally Identifiable Information*. ODCA states that “[A]lthough our audit was focused on the three selected agencies (CFSA, DCHR, DOES) to ensure PII is properly protected across all District agencies, we direct our recommendations to the Mayor, OCTO, and all District agencies where applicable.”

HBX is currently in compliance with privacy requirements applicable to personally identifiable information for exchange marketplaces pursuant to 45 C.F.R. §155.260 *et seq.* Additionally, HBX maintains the confidentiality of Internal Revenue Service Return information, defined by section 6103(b)(2) of the Internal Revenue Code of 1986, under §6103 of the IRC and pursuant to IRS Publication 1075. Compliance with these and other applicable laws overlaps with recommendations identified by ODCA.

Q17. Are there any current statutory or regulatory impediments to your agency's operations?

ACA Repeal and/or Replace Efforts at the Federal Level

There is an effort by Congress and the new federal Administration to repeal the Affordable Care Act (ACA). If the ACA is repealed, there are significant negative implications for the District and its residents.

District Policymakers leveraged the ACA to ensure that District residents and businesses have access to affordable health care. This was done by creating a locally operated and managed state based marketplace (HBX), expansion of Medicaid, and enactment of new consumer and patient protections through insurance market reforms.

District residents could lose premium reductions, called advance premium tax credits (APTCs), and cost sharing reductions (CSRs) that help make private health insurance more affordable. The ACA provides advance premium tax credits to reduce monthly premiums. Repeal of this provision would require Congressional action. Approximately 1000 people currently receive these through DC Health Link. Another feature of the ACA provides cost sharing reductions to help people pay for copayments and coinsurance. This could be eliminated through executive action and does not require legislation. Approximately 350 District residents currently receive CSRs. For impact on the Medicaid program, please consult with DHCF.

In addition, the ACA included various critical insurance consumer protections including but not limited to:

- All health insurance coverage sold to individuals and small businesses must cover essential health benefits, including primary care and specialists, hospitals, lab work, preventive care, maternity, mental health and substance abuse treatment and other benefits.
- Annual and lifetime limits on coverage are prohibited.
- People with medical needs cannot be denied coverage or charged more.
- Preexisting medical conditions must be covered.
- Women of child-bearing years cannot be charged more.
- Premiums based on occupation, gender, and claims history are prohibited. Premiums can be varied for age with a restriction of 3:1. District law also prohibits tobacco rating. For small businesses, size and industry rating is prohibited also.

DC policymakers enacted the ACA's core health insurance consumer protections into law, although technical corrections may be necessary. These protections mean that health insurance is comprehensive and available to all District residents.

District policymakers established a locally managed and operated state-based marketplace to ensure that policy decisions are made locally and reflect the priorities of the DC community. Additionally, District policymakers ensured stable funding for the online marketplace. It is funded through a broad-based assessment on all health carriers and does not depend on federal funding.

Since DC Health Link opened for business on October 1, 2013, DC Health Link has served over 300,000 people: 43,860 people have obtained private health insurance through the individual marketplace, 81,293 employees and their families enrolled through small businesses, and 179,446 have been found eligible for Medicaid (February 2017).

The District's uninsured rate has been cut in half, resulting in more than 96% of the District's residents having health coverage, making DC number 1, 2, or 3 in the nation depending on the study. This is the highest insured rate in the District's history. A spring 2016 external survey of DC Health Link customers found that:

- 1 in 4 people who signed up for private health insurance during the last open enrollment were uninsured prior to enrollment;
- 1 in 2 people eligible for Medicaid were previously uninsured; and
- 4 in 10 small businesses did not offer health insurance to their employees prior to enrolling through DC Health Link.

For small business customers, DC Health Link is the on-line health insurance marketplace for small businesses in the District of Columbia established to provide transparency, encourage market competition, simplify the purchase of insurance, and provide small businesses the type of market power only large employers had in the past. Small businesses – and their employees – can see in one place all of the different products, compare benefit packages side-by-side, and compare prices for all products. With the purchasing power of thousands, DC's small businesses now have insurers competing for their business. DC Health Link offers 151 different health insurance products including: PPO, HMO, POS, and EPO; nationwide networks; local/regional networks; zero deductible and HSAs. DC Health Link advocates for the lowest possible rates and its outside actuaries provide actuarial analysis to insurance regulators. Rates for 2017 decreased by as much as 19%; all insurers offered some products with lower rates than 2016. DC Health Link also has online portals for brokers and General Agencies/TPAs. There are more than 800 brokers supporting approximately 65,000 people covered through small businesses through DCHealthLink.com (Feb 2017).

DC Health Link was ranked first among state-based health insurance exchange websites and HealthCare.gov by the Clear Choices Campaign annual report card (January 2017).

In addition to developing and managing a transparent and competitive market that works for individual and small business customers, HBX advocates on behalf of all customers. For example, HBX works with independent actuaries to review proposed rates and provide input to the insurance regulators – always advocating for the lowest possible rates for business and individual customers.

HBX will continue to work closely with local partners such as providers, consumer groups, brokers, carriers, and others to preserve, improve, and implement statutory and regulatory protections as needed for District residents and small businesses.

Independent Procurement Authority

The Council of the District of Columbia granted HBX independent procurement authority since inception. This authority has been and remains vital to HBX's success. We have used our authority with transparent, carefully vetted processes that are closely aligned with federal and District of Columbia procurement standards. Some of the statutory provisions affecting HBX procurement authority will expire at the end of FY18.

As the Health Committee recognized in 2013, the standard procurement process is intentionally slow to mitigate mistakes and does not fit the fast-track work of HBX. Independent procurement authority has enabled HBX to correct problems caused by standard procurements and meet the ACA challenges of building and maintaining a high-functioning marketplace and the complex system that supports it. ACA challenges and changes will continue for the foreseeable future, as seen from the wide-ranging repeal efforts and regulatory actions. In addition, ongoing website enhancement based on customer feedback is essential. HBX heavily relies on its independent procurement authority to meet required and self-initiated improvements. Also in its effort to ensure financial sustainability, HBX relies on its effective and efficient procurement process to get better deals from vendors.

Legal Challenges to Statutory Authority for HBX Assessment

There are seven pending lawsuits in the District of Columbia Superior Court Tax Division challenging the statutorily authorized assessment of health carriers that supports HBX's budget. These lawsuits represent 6 insurance companies all owned by one large entity and one other insurer. These lawsuits raise the same issues raised by an insurance trade association in a separate federal lawsuit filed in 2014 that was ultimately dismissed. The United States District Court for the District of Columbia ruled in favor of the District on all claims and dismissed that lawsuit in 2014. In March 2016, that decision was vacated by the United States Court of Appeals for the District of Columbia, which held that jurisdiction was only proper in the District of Columbia Superior Court Tax Division, not federal court. The District believes that it will prevail in Superior Court based on the same legal rationale that prevailed in Federal District Court.

Q18. Please describe programs, activities, and initiatives executed or planned in FY16 and FY17, to date, to improve the agency's performance from a customer service perspective, including any public relations strategies the agency is using to improve its image.

HBX strives to improve services to DC Health Link customers, employing strategies and initiatives to ensure that the DC Health Link enrollment process meets customer needs and that when any issues and concerns are raised they are promptly addressed and resolved. For a more detailed discussion focusing on new consumer decision support tools, automation and enhancements to the IT solution, please see responses to Questions 21-22.

In FY16 and FY17, HBX initiated and engaged in several creative strategies and public education campaigns to increase public awareness of DC Health Link and its mission in both the individuals & families and small business marketplaces. The campaigns were developed to not only educate the public about DC Health Link and its mission, but to also make it as easy as possible for people to shop and enroll in quality, affordable health insurance through DC Health Link, the online insurance marketplace. The approach was to *"reach people where they live, work, shop, play and pray."*

HBX partnered with community leaders and groups to focus on education campaigns that address the District's diverse populations including Latinos, Asians, Pacific Islanders, African Americans, LGBTQ, Young Invincibles, Millennials and the faith-based communities. In FY17 for open enrollment, HBX had Storefront Enrollment Centers throughout the city. In addition, we continued to have "One Touch Enrollment Centers" (one-stop-shop of all enrollment services) at Carlos Rosario International Public Charter School, with enrollment at Our Lady Queen of the Americas Catholic Congregation and the Consulates of El Salvador, Columbia and Mexico.

Public awareness, education and outreach campaigns included several intense weeks of action to educate and boost enrollment in DC's diverse Latino, Asian Pacific Islander, Young Invincible and African American communities. Events typically included assisters, brokers and staff to directly engage, educate, inform, enroll, and answer attendee questions. Paid media included metro bus ads, radio spots, and community newspaper ads.

Special events included barbershops and beauty salons, bars and clubs, community meetings, festivals such as the Ward 7 Community Festival and Barry Farms Health, Wellness, and Back to School Festival, Saturday afternoon Brunch Bounce to reach millennials, Knock-Knock door-to-door weekend canvassing, movie theatres ("Star Wars"), DC Health Link Care-A-Van that traveled from ward to ward, the 24Hr + Enrollment Marathon with enrollment sites at Denny's (Ward 7) Ben's Chili Bowl (Ward 1), Smith Commons (Ward 6) and MidTown Barber Shop (Ward 4). The marathon ended at local churches, including Israel Baptist Church (Ward 5) and Pilgrim Rest Baptist Church (Ward 7). Weekend events included the Faith-in-Action "From the Pulpit to the Pews" faith-based initiative involving Catholic, Protestant, Muslim, Sikh Gurdwara, Buddhist, Hindu and Jewish congregations.

In an ongoing effort to engage the community and enlist their support in efforts to locate and reach the remaining uninsured, HBX established the DC Health Link Volunteer Program in FY16 and the "Each One LINK One" Campaign. Both programs provide an opportunity for

residents and individuals to participate in HBX's mission to reach and enroll uninsured people. With more than 47 registered volunteers recruited from area colleges and universities, professionals from the legal, engineering and health care fields, and from the District's Volunteer Clearinghouse website, ServeDC, volunteers have been invaluable to outreach efforts and provided support at outreach events and marketing activities during DC Health Link's fourth Open Enrollment Period (OEP 4).

HBX's DC Health Link "Each One LINK One" is a Call-to-Action citywide campaign that launched to engage the public in supporting HBX's efforts to enroll the remaining hard-to reach uninsured. Predicated on the assumption that people know at least one person who may be uninsured, the campaign called on residents to reach out to their family members first and then their friends, neighbors, and colleagues to encourage those they care about to enroll. Participants in the "Each One LINK One" campaign are designated as "DC Health Link Linkers" since they become "the LINK" to helping get those they care about to enroll in health insurance.

Small Business Marketplace

For the small business market, known as SHOP, HBX launched the "Affordable Choices Campaign." The campaign involved forming new partnerships with groups such as the Coalition for Non-Profit Housing and Economic Development, Congress Heights Community Training and Development Corporation, DC Department of Consumer & Regulatory Affairs, DC Department of Small and Local Business Development, DC Small Business Development Center Network, Howard University, Latino Economic Development Corporation, U.S. Small Business Administration, U.S. Women's Chamber of Commerce, and the Washington DC Economic Partnership. These groups were instrumental in DC Health Link's first POWERUP DC to help support DC's small business community during National Small Business Week. The seminar, "*Get Money, Get Movin' ... Accessing Capital to Start and Grow Your Business with Non-Traditional Funding Resources*" featured keynote speakers Denise Turner Roth, Administrator, U.S. General Services Administration (GSA), Natalia Olson-Urtecho, Regional Administrator, U.S. Small Business Administration, Mid-Atlantic Region, and Ana Harvey, Director, DC Department of Small Local Business Development (DSLBD).

The "Affordable Choices" campaign also included: advertisements on Metro buses that featured DC Health Link's small business customers; media buys with radio stations and local newspapers, including Capital Community News, the Hill Rag, MidCity DC, East of the River, Post, Capital News, The Express, El Tiempo, and Washington Business Journal; and a digital/social media outreach through targeted email blasts, text-a-thons, mobile device ads through geo-fencing, and on-screen Hollywood-quality produced movie ads in 29 movie theatres, lobbies and concession stands throughout the city, including locations in downtown Gallery Place, Georgetown, and Uptown. Targeted ads were placed on Comcast and RCN which aired on such stations as CNN, ESPN, MSNBC, Fox News, History, and the Weather Channels. These ads were reinforced with online website impressions.

Social and Digital Media Outreach

With approximately 90% of consumers receiving information from screen-based devices, social media and digital platforms are paramount to reaching customers. HBX leveraged digital communications to help drive engagement. To educate, engage and reinforce enrollment messaging, HBX utilized active digital communications tactics. HBX launched targeted email campaigns during the most recent open enrollment period to remind customers of approaching enrollment deadlines. Reaching residents through mobile advertisement was central to the FY16 and FY17 outreach strategy. HBX employed a text message alert system around each of the deadline dates to remind customers of approaching enrollment deadlines and to enroll in health insurance coverage.

Q19. Please describe programs, activities, and initiatives executed or planned in FY16 and FY17, to date, to better inform the public about enrollment, or changes to programs.

HBX decisions are developed through a local, transparent, and DC-based community stakeholder-driven process using advisory committees and working groups. The HBX Executive Board makes final decisions on policy based on the input and recommendations from various advisory committees and working groups. Executive Board meetings are open to the public, and all meeting materials are posted on the HBX website at <http://hbx.dc.gov/>.

When HBX geared-up for the 4th Open Enrollment Period (OEP) in FY17, it incorporated lessons learned from the first three open enrollment periods and engaged in a variety of marketing, enrollment messaging, media relations and outreach tactics. The focus was to target the remaining uninsured and to encourage plan shopping for renewing customers.

HBX also engages in several public education strategies to increase public awareness of DC Health Link and its mission. As in previous years, HBX launched a robust, proactive, and multifaceted education, outreach and enrollment campaign for both the FY16 (open enrollment 3) and FY17 (open enrollment 4) enrollment periods. Aimed at connecting with DC residents and small business owners and their employees “*where they live, work, shop, play and pray*,” HBX employed a successful hyper-local approach, which consisted of educational workshops, speaking engagements, a speakers’ bureau, door-to-door canvassing, earned and paid media, social and digital platforms, advertisements, special outreach and enrollment opportunities, and partnerships with community, civic, and professional organizations, District government and federal agencies, faith-based institutions, business partners and retailers.

Among the various strategies employed during FY16 and FY17 were:

Outreach and Enrollment Campaigns

The enrollment approach encompassed a multifaceted community-based and media relations strategy including One Touch Enrollment Centers (a one-stop-shop for enrollment support), Storefront Enrollment Centers, media relations, advertisement, social media, etc. To date, the various outreach strategies have resulted in more than 300,000 District residents enrolling in health coverage through DC Health Link. Examples include:

- City-wide Open Enrollment Information and Health Fair (FY16) – this event opened the enrollment period, and also served as the national kickoff for enrollment featuring special guests U.S. HHS Secretary Sylvia Burwell, U.S. Congresswoman Eleanor Holmes Norton, and D.C. Councilmember Todd.
- 4th Open Enrollment Kickoff Care-A-Van (FY17) – Open Enrollment Period 4 kicked off on Minnesota Avenue, NE (Ward 7) and outreach/enrollment vans traveled to all 8 wards to spread the word about the opening of the marketplace.

- One Touch Enrollment Sites (FY16 and FY17) – one-stop-shop enrollment services held at Carlos Rosario International Public Charter School.
- Nine (9) Enrollment Sites known as “Storefronts” in FY16, which expanded to eleven (11) Enrollment Sites in FY17.
- Faith-In-Action Interfaith “Pulpit to the Pews” Campaign (FY16 and FY17) – engaging the faith-based community as partners in outreach and education, including Faith-In-Action weekends.
- National ACA Latino Enrollment Week of Action (FY16 and FY17) – designed to boost enrollment in the Latino community. In FY16, featured a special guest, Jeanne Lambrew, Deputy Assistant to President Obama for Health Policy and Director of the Health Policy Office. In FY17, DC Health Link held its 3rd Annual Latino Week of Action and Health Leadership Symposium entitled, “The Impact of Repealing the ACA for the Immigrant Community,” which included Latino, African, and Asian immigrant community groups and government organizations. The forum featured speakers Maria Gomez, President/CEO, Mary’s Center, M. Lucero Ortiz, Esq., Independent Immigration Attorney, Shelby Gonzales, Senior Policy Analyst, Center on Budget and Policy Priorities and Angel Padilla, Health Policy Analyst, National Immigration Law Center (Panelist).
- National ACA African American Enrollment Week of Action (FY16 and FY17) – designed to boost enrollment in the African American community, especially among African American men.
- National ACA Young Invincible Week of Action (FY16 and FY17) was designed to boost enrollment and outreach to young adults. Events included Coverage in the Classroom (FY16), National Youth Enrollment Day, the Cafe Crawl (FY16), “Shape Up, Sign Up” (FY16 and FY17), and Game Night with the Wizards at the Verizon Center (FY16).
- Millennials Outreach – In FY17, DC Health Link held a Saturday “Brunch Bounce” in commercial corridors popular with young adults in Wards 4, 5, 6, 7, and 8. In FY17, DC Health Link held “The College Football Championship Night” at Red Rocks Bar and Grill which was covered by the Washington Post. See https://www.washingtonpost.com/local/the-rush-to-get-millennials-health-insurance-before-the-possible-repeal-of-obamacare/2017/01/23/20bb4756-d78a-11e6-b8b2-cb5164beba6b_story.html?utm_term=.f07e250de405

- **LGBTQ Outreach (FY16 and FY17)** – DC Health Link Assisters performed outreach at World AIDS Day events and the Walk to End HIV with community partner Whitman Walker Health.

Special Events presented unique opportunities to reach targeted populations. Examples include:

- **Movie Nights (FY16 and FY17)** – DC Health Link advertisement and exhibition at various popular movie theaters onscreen and in lobby displays. In FY17, DC Health Link ran on-screen advertisements during the opening weeks of the popular “Rogue One, A Star Wars Story,” and in FY16 during the “Hunger Games: Mockingjay Part II.”
- **Beauty and Barber Day (FY16 and FY17)** – Boyz to Men; Girls to Curls - Barber shops and Beauty salons in African American communities are more than a place to get haircut, shaved, curled, braids, and other grooming services. They are also a gathering sanctum where men and women meet and share stories about life events and get the latest information about community happenings. During the MLK, Jr. Day of Service and African American Week of Action DC Health Link in conjunction with various community organizations and local businesses placed special emphasis on the importance of African-Americans, especially men, enrolling in quality, affordable health insurance through DC Health Link.
- **NBC4 Health and Fitness Expo (FY16)** – DC Health Link participated in the largest health and wellness event in the Washington, DC area and not only exhibited, but also provided information about the District’s online marketplace for health insurance. An ongoing loop video presentation on how to shop, compare and enroll in health insurance through DC Health Link was presented.
- **CVS Pharmacy (FY16 and FY17)** – DC Health Link was successful in getting CVS Pharmacy to partner with pre-enrollment and enrollment efforts. DC Health Link informational kiosks were positioned in every local CVS store in the city (62 total) along with on-site representatives and table displays for direct customer engagement. DC Health Link also actively participated in numerous CVS health fairs. These events included enrollment, health information tables, and basic health screenings so consumers could get multiple services at once. These outreach activities helped educate people about DC Health Link health insurance options and enrollment events.
- **DC Health Link “Fact Mobs” (FY16 and FY17)** – Street teams of volunteers took to metro subway stops with a bull horn, foot ladder, plenty of energy and loud cheers to get commuters’ attention by shouting 7 major facts about the ACA and DC Health

Link. The volunteers also distributed literature, answered questions and directed commuters to visit nearby enrollment centers. Outreach at Metro stations was conducted before every monthly deadline for enrolling in coverage beginning the next month.

- **MLK, Jr Day Holiday Peace Walk and Parade (FY16 and FY17)** – DC Health Link representatives and its community partners marched in the spirit of Dr. King who said, *“Of all the forms of inequality, injustice in health care are the most shocking and inhumane.”* Participants proudly held DC Health Link banners and marched in the annual event reminding people to enroll by the deadlines, handing out flyers and directing residents to enrollment events, including one-on-one enrollment support the same day at nearby UPO Petey Green Community Center. At the Petey Green Community Center in FY16 and at Anacostia Park in FY17, DC Health Link representatives were available onsite with information and enrollment assistance to honor Dr. King’s legacy and Day of Service. The event is designed to help DC residents enroll both before and after the parade on MLK Jr. Avenue, SE. Several planned activities took place at the Center including Street store fresh produce, workshops, cooking and healthy living demonstrations and more. DC Health Link certified assisters provided in-person education and enrollment assistance to District residents as well as answered questions, and provided information about Medicaid options and premium reductions for private coverage.

- **24Hour+ Enrollment Marathon Relay (FY16 and FY17)** – Data from the first and second open enrollment periods showed that people are deadline driven and wait until the last day to enroll. Last-minute enrollment can lead to longer wait time at the call center and longer lines for in-person help. In the final weekend before the January 31 enrollment deadline, DC Health Link targeted last minute shoppers urging them not to wait until the last minute to enroll. The 24-Hour+ Enrollment Marathon Relay provided around-the-clock opportunities for District residents to enroll at locations throughout the city before the final rush. The success of the Marathon in FY16 resulted in a repeat in FY17. The FY17 marathon began at Carlos Rosario International Public Charter School. For the evening, the marathon moved to Denny’s in Ward 7 and Ben’s Chili Bowl until early morning. On Sunday, the marathon concluded at several places of worship. In FY16, White House staff volunteered for the marathon events and for the “Knock, Knock” door- to-door canvassing. Councilmembers helped get the word out through newsletters and tweets, and other social media platforms.

- During FY17, Councilmember Brianne Nadeau attended the kickoff at Carlos Rosario in Ward 1. Councilmember Brandon Todd spoke at Carols Rosario to help start the 24-Hour+ marathon and assisted with door to door canvassing in Ward 4.

- **Data-Driven Canvassing** – In FY17, using data to identify the neighborhoods with the highest concentrations of probable uninsured residents, DC Health link teams canvassed residences in Wards 4, 5, 6, 7, and 8.
- **College Football Championship Pizza-Box Outreach (FY17)** – Red Rocks, a popular neighborhood restaurant, partnered with DC Health Link to place fliers on their pizza delivery boxes with each delivery during the widely watched College Football Championship Game. This tactic got highlighted as the cover story of the Washington Post Metro section on Tuesday, January 24, 2017: https://www.washingtonpost.com/local/the-rush-to-get-millennials-health-insurance-before-the-possible-repeal-of-obamacare/2017/01/23/20bb4756-d78a-11e6-b8b2-cb5164beba6b_story.html?utm_term=.cca69bdf2c5a
- **Latin American Embassies (FY16 and FY17)** – In partnership with the Greater Washington Hispanic Chamber of Commerce (GWHCC) and Hispanic brokers and assisters, DC Health Link held weekly enrollment events at the Consulate of El Salvador. Other events were held at the Consulate of México, the Consulate of Honduras, and the Consulate of Colombia.
- **“Shape Up, Sign-Up” New Year Campaign (FY16 and FY17)** - New Year’s is the traditional time to set new goals and resolutions, especially resolutions to improve one’s health and fitness. January is a busy month at fitness centers across the country. DC Health Link partnered with LA Fitness to host a series of information and enrollment events during the month of January to promote health and wellness – as well as enrollment through DC Health Link. Trained experts were onsite with information and to provide enrollment assistance. Special offers from fitness clubs such as “One Week Sports Club Passes” and “low health club rates” for January were available to encourage consumers to kick start their New Year’s health and wellness goals. The “Shape-Up, Sign-Up” campaign was designed to also inspire consumers to stay healthy, to help ensure that DC remains the fittest city in the country and at the same time to emphasize the importance of protecting one’s health by enrolling in quality, affordable health coverage through DC Health Link. In FY17, the “Shape Up, Sign Up” campaign was strictly done through social media.
- **Cafe Crawl (FY16)** - DC Health Link assisters and certified navigators were at District cafés to enroll young people and other customers in coverage at cafes such as the Tryst Coffeehouse, The Diner, and the Potters House, with laptops in hand. Assisters and navigators provided DC Health Link information and enrollment help.

Partnerships with businesses, government, community, professional groups, educational and faith based institutions, etc.

DC Health Link partnered with many groups to host events to achieve broader community outreach. The partnerships were with District government agencies, community organizations, local small business partners, CVS Pharmacies, faith based entities and others. Examples of the partnerships included:

- **Business Partners**
 - Greater Washington Hispanic Chamber of Commerce (GWHCC)
 - DC Chamber of Commerce (DCCC)
 - Restaurant Association Metropolitan Washington (RAMW)
 - National Association of Health Underwriters (NAHU)

- **Community Partners, Educational Institutions and Community Health Centers**
 - DC Public Schools Office of Student Wellness
 - DC Public Charter Schools Board
 - Carlos Rosario International Public Charter School
 - George Washington University School of Public Health
 - University of the District of Columbia
 - Howard University
 - American University
 - Georgetown University
 - Leadership Council for Healthy Communities
 - Latin American Youth Center
 - Ward 7 Health Alliance
 - Ward 8 Health Council
 - Anacostia Coordinating Council
 - THEARC: Town Hall Education Arts Recreation Campus
 - Mary's Center
 - Whitman Walker Health
 - La Clinica Del Pueblo
 - Unity Health Care (Anacostia and Minnesota Avenue Health Centers),
 - Community of Hope (Marie Reed, Family Health & Birth and Conway Health and Resources Centers)
 - Us Helping Us
 - DC Fiscal Policy Institute
 - AARP DC Chapter
 - Families USA
 - Enroll America

- Young Invincibles
- DC Appleseed
- DC Primary Care Association
- Medical Society of the District of Columbia
- Multiple Sclerosis Society

- **Faith Based Partners**
 - Wednesday Clergy Fellowship
 - DC Baptist Ministers Conference
 - Howard University Gospel Choir
 - Israel Baptist Church
 - Pilgrim Rest Baptist Church
 - First Baptist Marshall Heights
 - Union Temple Baptist Church – Rev. Willie Wilson, Senior Pastor
 - First Baptist Church Randolph, Rev. Dr. Frank Tucker, Senior Pastor
 - Covenant Baptist Church UCC, Reverends Christine and Dennis Wiley, Senior Pastors
 - Campbell AME Church, Rev. Dr. Henry White Senior Pastor
 - Nineteenth Street Baptist Church African American Episcopal (AME) Church 2nd District RED
 - Inner Light Ministries
 - Metropolitan Community Church of Washington
 - Masjid Muhammad, Inc. Mosque
 - Our Lady Queen of The Americas -Parish of The Roman Catholic Archdiocese of Washington
 - Our Lady of Perpetual Help, Father Thomas Frank
 - Kedus Gabriel Ethiopian Orthodox Tewahdo Church
 - St. Mary’s Ethiopian Orthodox Tewahdo Church
 - Sikh Gurdwara, DC
 - Chinese Community Church
 - Islamic Center of Washington, DC
 - Vietnamese Chua Ciac Hoang Buddhist Temple
 - Pilgrim A.M.E. Church, Rev. Dr. Wendell Christopher, Sr., Pastor
 - Greater St. Paul, Rev. Floyd Patterson
 - All Nations Baptist Church, Rev. Dr. James Coleman
 - Faith United Church of Christ, Rev. Arlecia Simmons
 - New Bethel Baptist Church, Rev. Dexter Nutall
 - Allen Chapel A.M.E. Church, Rev. Dr. Michael E. Bell, Sr., Pastor
 - Brown Memorial A.M.E. Church, Rev. Charles Smith, Pastor
 - New Bethany Baptist Church, Floyd Patterson Senior Pastor
 - New Morning Star Baptist, Rev. Donald Sadler, Pastor

- Greater New St. Paul Baptist, Rev. Dr. Regretta Ruffin, Pastor
- Moorish Science Temple, Brother Phillip Chase El
- Dupont Park Seventh Day Adventist, Dr. Marcus Harris, Pastor
- Capitol Hill Seventh-Day Adventist Church, Dr. Gene Michael Donaldson
- First Church Seventh-Day Adventist Church, Pastors John Trusty and Lisa Smith-Reid
- Antioch Baptist Church of Deanwood, Rev. Dr. Eric Baldwin, Pastor
- Church of Christ, Min. Daniel Lester, Pastor
- Pilgrim A.M.E. Church, Rev. Dr. Wendell Christopher, Sr., Pastor
- Metropolitan A.M.E. Church, Rev. William H. Lamar, IV, Pastor
- Shiloh Baptist Church, Rev. Wallace Chares Smith, Senior Pastor
- Peoples Congregational UCC, Rev. Leslie Dowdell-Cannon, Acting Senior Minister
- Ward Memorial A.M.E. Church, Rev. Dr. Michael O. Thomas, Pastor
- New Morning Star Baptist, Rev. Donald Sadler
- Michigan Park Christian Church, Rev. Marvin Owens
- St. John United Baptist, Rev. Dr. John Alexander
- New Bethany Baptist Church, Rev. Dr. Carson Wise
- Others

- **Retail and Small Business**
 - CVS Stores
 - Ben's Chili Bowl
 - Mid-Town Barbershop
 - Best Cuts Barbershop
 - Dazzles Salon
 - Christopher's Salon
 - Golden Scissors
 - @Pizza – H Street
 - DC Brau
 - LA Fitness
 - Huge & Cry Shirtmakers
 - Lunch Market
 - Mess Hall
 - Union Market
 - Urbanstems
 - Compass Coffee
 - Denny's
 - Canal Park Ice Skating Rink
 - Potters House

- Tryst Café
 - Ben’s Chill Bowl
 - The Diner
 - Red Rocks Bar and Grill – H Street, NW
 - Downtown Locker Room
 - Pleasant Pops (Popsicle Store)
 - Board Room (Bar Lounge)
 - Rhino Bar
 - Buffalo Billiards
 - Cove (Young Entrepreneurs Bar/Lounge)
 - Iron Horse Tap Room (Bar)
 - Others
- **Social Media** – HBX maintains an active and interactive presence on many social media platforms including Twitter, Facebook, SnapChat and Instagram. Twitter response strategies were implemented on a regular basis.
 - **Digital Communications** – With approximately 90% of consumers receiving information from screen-based devices, social media and digital platforms are paramount to reaching our audiences. DC Health Link leveraged digital communications to help drive engagement. To educate, engage and reinforce enrollment messaging, HBX utilized active digital communications tactics. Among them were:
 - **Websites (FY16 and FY17)** – Both and DC HealthLink.com websites provide an abundance of information and resources for residents. The calendar of events, board meeting information and request for speakers are major features.
 - **LED Displays (FY16)** – At the Verizon Center, HBX promoted enrollment deadline information through the Metro Brand Immersion Experience with 5 minutes per hour video outlay.
 - **Video Ads (FY16 and FY 17)** – On its websites, HBX featured important data releases as well as “My Cover Story” video promotions of individuals who tell their personal stories about enrolling in health insurance through DC Health Link.
 - **Digital Communication on Mobile Devices (FY16)** – Reaching residents through mobile advertisement was central to the FY16 outreach strategy.

- **Publications and Collateral**

HBX used a variety of methods, including surveys, videos, news releases, reports, rack cards, posters, fliers, window clings and banner bugs to inform the public about enrollment, or changes to programs. See:

“Surveys – Previously Uninsured,” DC Health Benefit Exchange Authority, September 21, 2016

(<http://hbx.dc.gov/sites/default/files/dc/sites/hbx/publication/attachments/SurveyReportGainedCoverage%20final.pdf>)

“District’s Uninsured Rate Drops by Half,” September 29, 2016

(<http://hbx.dc.gov/release/districts-uninsured-rate-drops-half-0>)

“DC Health Link Open Enrollment Period 4 Outreach Summary,” February 8, 2017

(<https://www.youtube.com/watch?v=HlaGX1ooFJI&feature=youtu.be>)

Recognition

Various organizations and news outlets both locally and nationally in FY16 and FY17 covered DC Health Link. HBX has provided advice to several partnership states and state-based marketplaces on outreach strategies, both on an individual basis and through participation in conferences and panels. Among the conference panels were the 2016 Enroll America State of Enrollment Conference’s *Interactive RoundTable Discussion: Learned Lessons* of lessons learned during outreach and enrollment to reach the uninsured; White House Champions of Change event highlighting Champions for the Affordable Care Act; and the White House Millennial Outreach and Engagement Summit.

In the fall of 2016, DC Health Link participated and presented in the “White House Healthy Young America Conference” to discuss outreach and organizing around open enrollment for the Affordable Care Act with youth and health care-focused organizations and efforts leading up to the 2017 National Youth Enrollment Day.

Q20. Have there been any changes to the application process for consumers seeking insurance coverage on DC Healthlink in FY16 and FY17, to date?

Because our solution is agile, cloud-based, and open source, we are well positioned to make changes to the IT system in a cost effective and timely way. As a reminder, SHOP and individual private health insurance enrollment and shopping is cloud-based. This solution currently impacts approximately 65,000 people covered through SHOP and 23,000 people with selected individual marketplace plans for 2017. Note that the eligibility rules engine shared with Medicaid to make determinations for APTC eligibility is not cloud-based, open source, agile. The initial IT system built in 2013 is still in place for APTC. There are approximately 1,200 people with APTC.

In January 2017, DC Health Link was ranked number one among public exchanges for consumer decision support. In 2016, the cloud-based, open source solution won the Best Practices for Innovation award for the 2016 Amazon Web Services (AWS) City on a Cloud Innovation Challenge. The City on a Cloud Innovation Challenge is a global competition of local and regional government and technology partners using AWS to deploy innovative solutions to move government forward on behalf of their citizens. Our agile development approach and cloud-hosted solution enables us to make continuous improvements to the application process for customers seeking insurance coverage without taking the web site down. Accordingly, HBX continues to add features to enhance the user experience for both application and plan selection. Enhancements in FY16 and FY17 to date include:

Enhancements to Plan Match

HBX first made available DC Health Link Plan Match in 2015 for our individual market customers. This tool allows customers to compare health insurance plans based on an estimate of total out-of-pocket costs in a year. It also enables customers to see the health plans in which their preferred doctors participate.

In 2016, we added a pharmacy look-up tool to Plan Match. This tool now allows customers to see which of their medications are covered by which plans, what the co-pay or co-insurance would be in each plan, whether there is separate drug deductible, and whether step therapy or prior approval is required.

Also in 2016, we deployed a Spanish language version of Plan Match.

In 2017, we intend to expand the Plan Match tool to make it available to our small business marketplace customers.

Account Access Improvements

During the third open enrollment period, which ran from November 1, 2015 through January 31, 2016, a significant driver of call volume at our contact center was from people having difficulty logging in. For security reasons, we require complex passwords when people set up their DC Health Link accounts. Previously, customers who forgot their passwords had to answer a series of questions that they set up when they created their accounts, perhaps several years ago. Many customers were unable to complete the password reset process themselves and had to call for help.

In advance of this year's open enrollment, we deployed a change to the password reset process. We now offer customers the option of being emailed a secure link that they can click on to reset their passwords themselves. This improvement paid huge dividends, as the percentage of calls to DC Health Link Customer Service for login issues decreased by more than two-thirds.

We also made it easier for new customers setting up an account and customers resetting their passwords to see our password requirements as they create them. In the past, customers sometimes had difficulty establishing passwords that met our security requirements. Now, as a customer is creating a password, the requirements pop up on the screen and turn green in real time as each one is met.

Account Feature Improvements

Another improvement that took effect prior to this past open enrollment is the ability of customers to upload and view any supporting documents they are required to submit as part of their health insurance application. Currently available to customers who are not applying for premium or cost sharing reductions, this new functionality enables more customers to meet documentation requirements through self-service and provides transparency through their account into the status of the review of those documents. It has also enabled HBX staff to resolve efficiently any data matching issues for these customers through a review of uploaded documents. This functionality has led to a decrease in the time it takes to resolve data matching issues for customers.

Health Insurance Literacy Improvements

In early FY17, HBX integrated a comprehensive glossary of terms and simple explanations of insurance terms into the website and anonymous plan shopping experiences. This ensures that customers can have the information they need in an easy-to-understand format, in order to make enrollment and plan shopping decisions that are best for themselves and their family.

Translation

HBX has now translated key sections of its website and important customer notices into four languages: Spanish, Amharic, French, and Chinese.

Email Campaign Tool

In FY16, HBX began using an email marketing tool to send emails to customers with information on upcoming deadlines, actions needed to renew coverage, and new tools available on the website. This tool allows HBX to track responses to further refine email messaging. In FY17, HBX will develop the capacity to automate these emails in response to customer actions in their accounts.

General Agency Portal for Brokers

In April 2016, HBX added a new portal for General Agencies (GAs) and Third-Party Administrators (TPAs). GAs and TPAs work closely with brokers to support small business customers, providing a range of services for customers similar to those provided by brokers. Whether a broker has a large staff or is a sole practitioner, GAs/TPAs provide a critical level of support to brokers in servicing their clients. DC Health Link's GA portal demonstrates HBX's commitment to the important role brokers provide our customers in finding the right health insurance plan for their needs and ongoing support.

For Brokers' Improved Employer Reporting

Another major initiative this year was to improve reporting tools on the small group side. Brokers now have better reporting on all of their clients that are using DC Health Link. They can pull up key information on each group, including their renewal date, status of enrollments during open enrollment, and changes that occur during the plan year. Brokers and employers now have access to their invoice payment history through their online accounts. In addition, all reports available to brokers and employers are not only available through their online accounts but also can be easily downloaded into an Excel spreadsheet. As is the case with many of our features, these improvements were deployed based on feedback from brokers and our small business customers.

Plan Shopping Improvements

Based on feedback from customers and one-on-one user testing, HBX deployed several improvements to plan shopping. We added filters to enable customers to search for HSA-compatible plans. For customers eligible for cost-sharing reductions, we made sure that silver level plans (the level into which they have to enroll in order to receive the reductions) appear at the top of the list when they search for plans. Third, we clarified the naming of our standard plans and added an icon that designated which plans are standard plans to make it easier for customers to identify these options. Our standard plans allow customers to make an apples-to-apples comparison.

Dental Policies in SHOP

In 2016, HBX added qualified dental plans to available insurance products for small businesses. Stand-alone dental insurance has been available through DC Health Link's individual marketplace since opening for business in October 2013.

Q21. What major policy or technical changes, if any, have or will be made to the DC Healthlink in FY16 and FY17, to date?

Because our solution is agile, cloud-based, and open source, we are well positioned to make changes to the IT system in a cost effective and timely way. As a reminder, SHOP and individual private health insurance enrollment and shopping is cloud-based. This solution currently impacts approximately 65,000 people covered through SHOP and 23,000 people with selected individual marketplace plans for 2017. Note that the eligibility rules engine shared with Medicaid to make determinations for APTC eligibility is not cloud-based, open source, agile. The initial IT system built in 2013 is still in place for APTC. There are approximately 1,200 people with APTC. HBX has a back-up open source cloud-based agile solution if there are federal policy changes to APTC that need to be implemented quickly.

We will continue to advocate for our customers and work to preserve and protect all of the successes we have had in the District to expand access to quality, affordable coverage.

In addition to customer-facing improvements outlined in response to question 20, HBX deployed the following improvements (all are for the cloud-based, open source, agile solution):

Improved Transactions with Carriers

DC Health Link communicates enrollment transactions to carrier partners through an Electronic Data Interchange (EDI). Our legacy system had a single set of rules by which all carriers were supposed to abide. Those rules, however, did not accommodate the idiosyncrasies of the carriers' systems. As a result, manual intervention has traditionally been necessary by HBX, the carriers, or both on some types of enrollment and maintenance transactions.

During 2016, we refactored our EDI system to allow for customized transactions, by carrier. This refactoring has enabled us to tailor automated EDI transactions to flow through the carriers' different systems, reducing manual work and allowing for more efficient HBX-carrier transactions.

In addition, we began to automate multi-step EDI processes. For example, when a current customer came onto our system during open enrollment in order to change plans and add a spouse or dependent, that would create multiple EDI transactions with the carriers. Those transactions required manual intervention. Now, we have automated some of these and remaining automation is scheduled for 2017.

Data Improvements

We completed two significant initiatives that had a substantial positive effect on the application process and renewals this past open enrollment period. Due to weaknesses in the legacy IT systems used prior to deployment of our cloud-hosted Enroll Application, there were data

inconsistencies in our systems that led to customer confusion and delays in completing enrollment transactions with our carrier partners. Deployment of the new Enroll Application enabled us to identify the universe of these inconsistencies and, through technical solutions and business processes, resolve discrepancies to synch up the data. This has improved the application process because customer accounts now have accurate enrollment information that reflects what is in the carriers' systems.

We also initiated and successfully executed a similar data reconciliation project with our health plan carrier partners. Similar to the data synchronization project, we worked with the carriers to identify data discrepancies between our systems, to research the root causes of those discrepancies, and to resolve them. This work led to a smoother renewals process for 2017 plans.

Improved Reporting Capabilities

During 2016, HBX also improved its federal reporting performance. We are now able to submit timely monthly reports to the IRS that pass IRS validation requirements and we have expanded the fields of information we provide CMS on a quarterly and annual basis. Our 1095-A program has been regularly recognized as a model for the country. Just recently, we were able to move 1095-As into the cloud, allowing our customers easy access to their forms for both the current tax year and past tax years. We have also worked hard to improve the data exchange between HBX and our carrier partners so that we now can report out on effectuated enrollment, rather than just plan selections. For 2017, we are hard at work to implement the federal government's new requirement of policy-based reporting. This work is important, as once this program goes live, the federal government will rely upon the reports submitted by Exchanges to pay advanced premium tax credits to carriers.

Improved Verifications

HBX launched new functionality to allow for efficient resolution of inconsistencies between information contained in an individual's health insurance application and information from the federal HUB services. The new functionality allows us to send a notice to customers seeking premium and cost sharing reductions and allows customers to upload documents necessary to resolve the inconsistency. HBX case managers have the administrative tools to efficiently resolve the inconsistencies, reducing operational costs.

Small Business Improvements

In 2016, HBX also added improvements to help small businesses manage their accounts. First, we added all invoices, both current and past, to the employer's DC Health Link online account, also accessible by brokers and General Agencies (GAs). Having access to all DC Health Link invoices enables employers to get their new invoices faster, and to review their past invoices at any time.

Second, we added new reporting capabilities that give employers better insight into the open enrollment process. This included showing employers not just their employee's current enrollments, but also their complete enrollment history as well as future enrollments for the upcoming plan year.

Third, we cleaned up some parts of the website that employers reported to be confusing or not helpful. We streamlined how employers see their employee's information, removing extraneous information.

Fourth, we have deployed a new feature that allows businesses to send flash notices to their employees right on their computer screen when logged onto their DC Health Link account. For example, employers can provide flash notices to their employees to let them know that open enrollment is coming to an end and they must complete their application to secure coverage.

Looking ahead, many additional technical improvements are planned for 2017. Some highlights include:

- **Mobile functionality:** In FY17, HBX plans to add mobile functionality for individuals and families applying for private health plans, as well as for employers and brokers. In previous years, HBX built a mobile app for consumers to get information on whether they might qualify for premium reductions, help them to locate outreach events and also find brokers and assisters who could provide them with help during the application and plan selection process. We also built a mobile app just for small businesses to see if they qualify to enroll through DC Health Link and to get information on locating a broker. This new mobile functionality updates and expands upon the initial apps. We will initially deploy a new app for brokers and employers that will add to the existing functionality by providing them access to their DC Health Link accounts. Through this new app, brokers and employers will have instant access to renewal deadlines, open enrollment information and participation, plan information, the employee roster, and the monthly costs for providing health insurance coverage to employees. Additional improvements for individuals and employees are planned for a subsequent release in 2017.
- **Application for Premium Reductions:** In FY17, HBX also is reviewing the current application for individuals applying for premium or cost sharing reductions and plans to deploy improvements to the user experience that will streamline the application more.
- **Translation and Language Access:** In FY16, HBX began translating critical notice text and parts of the website into most common languages spoken in the District – Spanish, Amharic, French, and simplified Chinese. We will continue to translate important documents and web site sections in FY17.
- **Migration of All Remaining Small Business Customers:** HBX partnered with health insurance companies to help migrate all remaining small business health insurance plans onto DC Health Link's online platform beginning with plan years effective 7/1/2016.

This process was set up to be seamless for small businesses and their employees. DC Health Link consumed data from carriers, creating prepopulated accounts for employers. Small business customers who made no changes were automatically renewed into the same plan(s) without having to take any action. Customers who made changes either began offering a choice of all carriers or a choice of plans from one carrier. The migration process continues monthly through 6/1/2017.

We also conducted a major, year-long broker outreach campaign to educate brokers about the migration process and to assist any not previously doing business with DC Health Link with becoming certified so as not to experience any interruptions in their commissions. We are happy to report that some 90% of the small businesses purchasing coverage through DC Health Link have a broker.

- **Broker Quoting Tool for Small Business Employers:** In 2017, we will be launching a robust quoting tool for brokers to develop multiple side-by-side plan year comparisons for their employer clients. After an employer reviews the quotes prepared by the broker, the employer can select a quote to automatically populate in their employer account on DC Health Link.
- **Enhanced COBRA/Continuation Coverage Functionality for Small Business Customers:** In 2017, we will be deploying enhancements to allow small business customers, and brokers working on their behalf, to self-service enrollments into COBRA/continuation coverage.
- **Deploying Plan Match for Small Businesses:** Plan Match allows customers to compare plans based on an annual total out-of-pocket cost estimate, to see in which plans their doctors participate, and to find out which plans cover their prescription drugs and compare prescription drug benefits. DC Health Link was ranked number 1 among public exchanges for having these consumer decision support tools for individual customers. These tools will be made available to our small business customers in 2017.
- **Improved Plan Display:** We are currently conducting user testing to gather information about how customers shop for coverage so we can improve the way we convey health plan information to them. This user testing builds on an earlier round of testing conducted in 2016 as well as a commercial survey we conducted last spring.
- **Nationwide Doctor Directory:** We are developing a nationwide doctor directory that will enable customers who choose health plans with national networks to see whether doctors located around the country participate in those plans.
- **Self-Service Billing Inquiries and Payment:** When deployed, this functionality will enable employers to setup one-time and recurring payments as well as check payments and balances online.

- **Plan Quality Ratings:** The federal government has been compiling quality ratings for health plans and making them available for review. For the next open enrollment, we plan to display plan quality information as part of the plan shopping experience so customers can consider quality ratings when choosing among health plans.

Q22. Please provide an update on the agency’s oversight of the DC Health Link call center, including a description of any regular meetings, conferences, or training sessions that occur with management and/or customer service representatives, how certain trends, developments, problems and concerns are communicated to the agency, and the process by which calls are escalated and/or reviewed by the agency, if at all.

General Oversight

Trends, new developments, problems and concerns are communicated to HBX via multiple regular channels of communication with the Contact Center vendor, including the following:

- The HBX business liaison to the Contact Center is on-site two times per week to work directly with Contact Center Customer Service Representatives (CSRs) and Contact Center management on specific consumer cases, to facilitate training, and to assist with consumer follow-up and contact initiatives.
- A nightly “end of day” report and other regular reports are provided to HBX management by Contact Center management outlining call volume statistics, types of consumer calls, and any escalated cases.
- HBX holds weekly in-person meetings with call center management to review any emerging customer issues, casework, trends, and metrics.
- HBX holds bi-monthly operations meetings with Contact Center management to discuss operational matters such as contract agreement, quarterly reporting, and facilities maintenance.
- Bi-monthly call calibration sessions are held between Contact Center quality analysts, HBX, and Contact Center management to review call quality and consumer handling.
- During open enrollment, HBX communicates with Contact Center management on a daily basis to discuss and resolve all issues as they arise.
- During open enrollment, HBX case and account managers are at the Contact Center on a regular basis as a resource to CSRs and Contact Center management.

CSR Training

Contact Center Management and HBX deliver one-on-one trainings and refreshers as needed to CSRs to reinforce messages and resolution procedures for new or emerging issues, including new policy, system updates, and outreach initiatives, as needed. In advance of and throughout open enrollment, on average, CSRs receive 30-40 hours of training on a monthly basis. Semi-annual privacy and security refresher trainings are also delivered to CSRs along with quarterly reminder updates.

Call Escalation

If a case cannot be immediately resolved at the Contact Center, Customer Service Representatives use Salesforce, a case triaging and tracking system, to escalate the case to a Tier 2 team of Case and Account Managers on the HBX team. Escalated cases that come directly to HBX staff outside of the Contact Center (such as through Councilmembers or from the Executive Office of the Mayor), are also handled by Case and Account Managers. These staff work closely with the HBX Plan Management and Electronic Data Interface (EDI) teams to ensure that any enrollment updates or information is sent quickly to the health insurance carriers, and that the carriers are in turn working to resolve the cases that HBX sends them in a timely manner.

Q23. Please provide the number of calls made to the call center each month from October 1, 2016 to the present.

The chart below details the number of calls made to the DC Health Link Contact Center from October 1, 2016 through February 14, 2017.

Month	# of Calls
October 2016	9,060
November 2016	11,494
December 2016	17,582
January 2017	15,683
February 2017 (as of 2/14/17)	5,631
TOTAL	59,450

Q24. Please identify the number of completed DC Healthlink applications (that have resulted in enrollment in a Medicaid, individual, or SHOP health plan) per month, for FY16 and FY17 to date, and the monthly enrollment targets and projections for FY17. To the extent practicable, please segregate data according to:

- a. Ward;**
- b. Zip code;**
- c. SHOP individual, or Medicaid enrollment;**
- d. Age group; and**
- e. The channel by which enrollment was completed—(i.e. online, in person, or through a broker, certified application counselor, or assistor).**

Response:

Cumulative Enrollment

The following chart reflects cumulative individual and SHOP enrollment through DC Health Link from October 1, 2013 through February 12, 2017, as well as the number of persons determined eligible for Medicaid through DC Health Link. While eligibility for Medicaid coverage is determined through DC Health Link – HBX and DHCF share this online eligibility system – HBX does not conduct actual Medicaid enrollment. DHCF is the lead agency for Medicaid.

Cumulative Enrollment from October 1, 2013 – February 12, 2017

People Enrolled (not current enrollment - historic)	
PROGRAM	COUNT
Individual	40,736
SHOP	80,137
Medicaid	186,605

Current Individual Plan Selection and Paid Enrollment – Plan Year 2017

The following charts reflect individual covered lives currently active for Plan Year 2017. The information is segregated by zip code or age group and delineated by new customers, existing customers who chose new coverage, and customers who were automatically renewed.

DC Health Link Plan Year 2017 Individual Plan Selections as of February 12, 2017

TYPE	COUNT
Auto Renewal	14,158
Active Renewal	2,242
New Customer	7,304
Special Enrollment	188
TOTAL	23,892

DC Health Link Plan Year 2017 Individuals Paid as of February 12, 2017

TYPE	COUNT
Auto Renewal	12,108
Active Renewal	2,048
New Customer	3,831
Special Enrollment	32
TOTAL	18,019

Plan Year 2017 Individual Plan Selections as of February 12, 2017 By Age Group

AGE GROUP	AUTO RENEWAL	ACTIVE RENEWAL	NEW CUSTOMER	SPECIAL ENROLLMENT	TOTAL
< 18	1,256	206	734	23	2,219
18-25	686	86	672	9	1,453
26-34	4,690	816	3,108	64	8,678
35-44	3,035	496	1328	42	4,901
45-54	2,209	343	841	26	3,419
55-64	2,126	284	591	22	3,023
65+	156	11	30	2	199
TOTAL	14,158	2,242	7,304	188	23,892

Plan Year 2017 Individuals Paid as of February 12, 2017 By Age Group

AGE GROUP	AUTO RENEWAL	ACTIVE RENEWAL	NEW CUSTOMER	SPECIAL ENROLLMENT	TOTAL
< 18	1,088	199	419	3	1,709
18-25	574	77	331	2	984
26-34	3,817	735	1,599	3	6,154
35-44	2,636	464	717	11	3,828
45-54	1,947	303	443	5	2,698
55-64	1,934	261	316	8	2,519
65+	112	9	6		127
TOTAL	12,108	2,048	3,831	32	18,019

Plan Year 2017 Individuals Paid as of February 12, 2017 By Zip Code

ZIP CODE	AUTO RENEWAL	ACTIVE RENEWAL	NEW CUSTOMER	SPECIAL ENROLLMENT	TOTAL
20009	1659	273	470	2	2,404
20002	1000	203	412	4	1,619
20007	1089	159	258	2	1,508
20001	943	212	347	1	1,503
20008	1021	136	288	7	1,452
20016	1071	129	243	6	1,449
20011	891	156	285	1	1,333
20010	714	134	251	1	1,100
20003	706	123	228	2	1,059
20015	528	94	149	1	772
20005	343	55	133		531
20037	347	49	112		508
20012	255	45	98		398
20024	256	49	88	1	394
20017	231	41	59	3	334
20018	202	62	68	1	333
20020	201	26	88		315
20036	197	40	52		289
20019	196	25	67		288
20032	72	15	43		130
20004	61	9	23		93
20006	33	3	12		48
OTHER	92	10	57	0	159
TOTAL	12,108	2,048	3,831	32	18,019

Current SHOP Enrollment 2017

For the month of March, there are 66,222 people enrolled through DC Health Link SHOP. Small businesses located in the District and purchasing coverage through DC Health Link employ people who live in the surrounding states and in some cases across the country. Congressional SHOP participants reside in every state. Therefore, SHOP enrollment zip code information is not presented.