

HEALTH  
MANAGEMENT  
ASSOCIATES

beWellnm Individual Marketplace Transition  
Project Closeout -  
Key Learnings from Stakeholder Interviews

March 18, 2022

## ■ IV&V PROJECT CLOSE OUT TOPICS TODAY

- Summary of stakeholder interviews
- Preview of final report
- Appendix: Response to Director Foley's question regarding IV&V report findings since 2019

## NUMBER AND TYPE OF STAKEHOLDERS INTERVIEWED

All stakeholder interviews were and remain confidential

Stakeholder	# of Interviews
beWellnm line staff	12
Carriers	6
Brokers	4
OSI	1 (group interview)
HSD	1 (group interview)
Hispano Chamber	1 (group interview)

## INTERVIEW FRAMEWORK

The IV&V team created a framework for the interviews that incorporated four discussion topics/domains: information systems, operations, stakeholder engagement, and performance and accountability management

Domain	What has worked well (top three)	What has not worked well (top three)	Fixes or attempts at fixes	Perspective on root causes	Perspective on barriers <i>What has prevented addressing root causes and/or implementing fixes</i>	Suggestions
Information systems – HIX, FMS, EDI, CEC, CRM, EDM, REP						
Operations – CEC, TIER 2, FIN, PRINT/MAIL						
Stakeholder engagement and outreach <i>Break down by constituency as needed to differentiate</i>						
Performance and accountability management						

## INTERVIEW THEMES AND LEARNINGS

These themes and associated comments/observations/takeaways represent a consensus of interviewees.

THEME	COMMENTS/OBSERVATIONS/TAKEAWAYS
beWellnm line staff commitment	Line staff recognized for their tireless dedication to getting consumers insurance coverage, resolving broker issues, etc. despite having to contend with extraordinary call volumes and very frustrated callers
Inadequate project leadership	Leadership insulation from the rest of the staff, not publicly recognizing issues, no sense of urgency, lack of vendor oversight, line staff insufficiently engaged, key staff lacked the experience and skills their project roles required
Inconsistent, inadequate Board reporting	Board reporting did not fully reflect what project stakeholders “in the trenches” were experiencing
Inability to get through to beWellnm for assistance and get rapid resolution on problems/issues	Not enough properly equipped and trained personnel given volumes that were possible to anticipate; communications across customer service teams were primarily through email, which proved to be cumbersome and led to follow-through problems
Lack of communication from beWellnm	beWellnm and its vendors made policy and system configuration decisions which were not communicated to line staff and external stakeholders, not enough meetings or preparation pre-implementation, meetings became much more infrequent post-implementation, slow communications, significant impacts at times

## INTERVIEW THEMES AND LEARNINGS cont.

THEME	COMMENTS/OBSERVATIONS/TAKEAWAYS
Insufficient/inadequate training	Training materials were inadequate and sometimes didn't reflect actual production, training was minimal, poor documentation, no follow up to ensure knowledge transfer
Lack of appropriate testing, particularly integration, performance/stress and user acceptance testing	The root cause for most issues associated with implementation, lack of beWellnm and program management to enforce robust UAT
Severe performance issues with the customer engagement center (CEC)	Seriously understaffed with poorly trained personnel, significant turnover, rushed last-minute preparations, inconsistent and inadequate contact categorization and reporting, poor follow-through on callbacks, transferred disproportionate number of calls to brokers or beWellnm, rude to brokers, abandonment rates and hold times which should have been beyond unacceptable
Major problems with consumer portal and shopping experience	<p>Inability to prevent duplicate accounts from being created, limitations in what information is presented about various plans and how it is presented (including QHP provider networks), usability concerns including inconsistent use of text, colors, symbols and images</p> <p>No field to identify tobacco use, inability to show more than one carrier network, problematic sort functions – led to suboptimal shopping experience, potentially advantaging some carriers over others</p> <p>It is possible that repurposed code from another market resulted in the inability for legal non citizens to access insurance</p>

## INTERVIEW THEMES AND LEARNINGS cont.

THEME	COMMENTS/OBSERVATIONS/TAKEAWAYS
Serious problems with the premium billing function	Complete failure due at least in part on bad data coming into the premium billing module, enrollment data issues, no ordering of adds/terms, not industry standard, unclear why credit cards could not be accepted for premium payment
Unnecessarily problematic record migrations, data exchanges and reconciliations	Serious issues with broker record transition (disrupted broker books-of-business), carriers (enrollment data problems, ability to accept certain data), HSD (rejected or faulty account transfers, ability to accept certain data), poorly constructed carrier reconciliation processes
Numerous manual workarounds	Some of these workarounds directly impact how consumer records are maintained by beWellnm within Optum/NFP systems; in some cases different beWellnm staff developed their own manual processes to make sure consumers were enrolled
Inadequate issue tracking and resolution	Multiple “systems” - including ServiceNow, ALM, email and spreadsheets – are being used to record problem/issues and track their resolution which little if any coding, root cause analysis and linking

## INTERVIEW THEMES AND LEARNINGS cont.

THEME	COMMENTS/OBSERVATIONS/TAKEAWAYS
Vendor inflexibility	<p>Vendors – particularly Optum – drove most of the discussions about system requirements and, particularly, associated specifications. Moreover, despite multiple requests both Optum and NFP resisted tailoring contract deliverables – particularly functional specification documents – to reflect their systems’ configurations for beWellnm which reduces the value of these artifacts. Finally, numerous interviewees cited problems with consumer account migration, account transfers, the consumer portal and carrier reconciliation which illustrate a certain unwillingness on the part of Optum to make system and process changes. It should also be noted that on numerous occasions Optum requested lead time to make content changes in the consumer portal which seemed inordinate for a system that was purportedly “modern” and “flexible”.</p>
Insufficient vendor commitment	<p>From the perspective of beWellnm’s line staff, Optum “packed up and went home” in November which limited their ability to work through problems/issues with Optum, which required that most problems/issues be reporting using email. Moreover, no war room/command center was set up for the cutover/transition in New Mexico. Furthermore, some of the fixes meant to address critical system deficiencies have taken months to promote to production. Finally, on numerous occasions Optum/NFP and beWellnm resources working closely with Optum/NFP have made statements such as “the system is working as designed” in response to problems such as the proliferation of duplicate consumer accounts.</p> <p>All of these events reinforced the belief among beWellnm personnel that beWellnm was not a top priority for Optum, and that Optum did not have the sense of urgency required to address certain system liabilities in a timely manner.</p>



## PREVIEW OF FINAL REPORT

Topic
Executive Summary
Discussion and Recommendations: Information Systems
Discussion and Recommendations: Outsourced Operations
Discussion and Recommendations: Insourced Operations
Discussion and Recommendations: Project Management
Discussion and Recommendations: Stakeholder Engagement (Outreach, Communications, Training/Onboarding)
Discussion and Recommendations: Organizational Realignment
Implementation Plan
Key Metrics

# IV&V Project Health Checks and Readiness Assessment Summary of Findings



## HEALTH CHECK 1 AND 2 SCORING METHODOLOGY

**4=** Concern poses a **severe** threat to the project – on-time completion, on-budget completion AND solution quality and performance are all compromised if the concern is not resolved within the next 30 days

**3=** Concern poses a **major** threat to the project:

- Some combination of on-time completion, on-budget completion OR solution quality and performance is compromised if the concern is not resolved within the next 30 days
- On-time completion, on-budget completion AND solution quality and performance are all compromised if the concern is not addressed promptly, but the concern does not have to be resolved within the next 30 days

**2=** Concern poses a **significant** threat to the project:

- On-time completion, on-budget completion OR solution quality and performance is compromised if the concern is not resolved within the next 30 days
- Some combination of on-time completion, on-budget completion OR solution quality and performance is compromised if the concern is not addressed promptly, but the concern does not have to be resolved within the next 30 days

**1=** Concern poses a **moderate** threat to the project:

- On-time completion, on-budget completion OR solution quality and performance is compromised if the concern is not addressed promptly, but the concern does not have to be resolved within the next 30 days

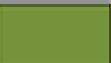



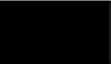
## HEALTH CHECK 3 SCORING METHODOLOGY

### Criticality rating:

- Highest - very difficult if not impossible to make substantive project progress without immediate action.
- High – very difficult to make substantive project progress without action, but immediate action is not required.
- Medium - action is designed to significantly improve the ability to manage the project OR action is important to the project's success but short-term workarounds are *feasible*.

## ■ READINESS REVIEW SCORING METHODOLOGY

### Legend:

-  Level of readiness assessed AND deemed **adequate** relative to upcoming project milestones.
-  Level of readiness assessed AND deemed to be **concerning** relative to upcoming project milestones; monitoring is warranted.
-  Level of readiness assessed AND deemed to be **highly concerning** relative to upcoming project milestones; in our estimation **resolution is required before the end of August**; close monitoring is warranted.
-  Level of readiness assessed AND deemed to be **critically deficient**; in our estimation **resolution is required within the next 1-2 weeks** to prevent major adverse impact to the project.
-  Level of readiness not yet assessed

## SUMMARY OF HEALTH CHECK 1 (DECEMBER 2019) FINDINGS

Finding Area	Finding Summary	IV&V Finding Rating	beWellnm-Recommended Rating adjustment
Meeting Management	No prep time, no advance reading time, poor facilitation	1 = Moderate	1 = Moderate
Leadership/Project Management	Inconsistent communications and workflow management	2 = Significant	2 = Significant
Leadership/Project Management	Lack of staffing focus, hiring, train, retain	2 = Significant	1 = Moderate
Vendor Management	Retention and consistent participation of key vendor staff	2 = Significant	1 = Moderate
Leadership/Project Management	Multiple conflicting and poorly managed project management plan approaches	2 = Significant	1 = Moderate
Stakeholder Engagement	Carrier engagement lacks focus and leadership	2 = Significant	2 = Significant
Stakeholder Engagement	Need more clarity on how things will change	1 = Moderate	1 = Moderate
Requirements / Functional Scope Management	Management of new scope items	2 = Significant	1 = Moderate
Requirements / Functional Scope Management	Requirements ownership and meaning is unclear	2 = Significant	2 = Significant
Leadership/Project Management	Ineffective cross-dependency activity management	2 = Significant	2 = Significant

## SUMMARY OF HEALTH CHECK 2 (JULY 2020) FINDINGS

Finding Area	Finding Summary	IV&V Finding Rating	beWellnm-Recommended Rating Adjustment
Leadership/ Project Management	Lack of clear ownership of various aspects of the project	2 = Significant	2 = Significant
Stakeholder Engagement	Ineffective coordination and collaboration with HSD	3 = Major	3 - Major
Leadership/Project Management	Multiple conflicting and poorly managed project management plan approaches	2 = Significant	2 = Significant
Vendor Management	Low quality deliverables in content and attention to detail	2 = Significant	2 = Significant
Stakeholder Engagement	Lack of timely, coordinated and well planned stakeholder engagement (most notably Carriers)	1 = Moderate	1 = Moderate
Leadership/Project Management	Lack of engagement, coordination and communications with project and organization line staff	1 = Moderate	1 = Moderate
Leadership/Project Management	Delayed development and training on policies and procedures for project and operation	1 = Moderate	1 = Moderate
Vendor Management	Optum, NFP and PCG not having right level and mix of resources on project	1 = Moderate	1 = Moderate

## ■ SUMMARY OF HEALTH CHECK 3 (MARCH 2021) FINDINGS

Finding Area	Finding Summary	IV&V Finding Rating	beWellnm-Recommended Rating Adjustment
Leadership/Project Management	Recommendation: Build out project plan	Highest	Highest
Stakeholder Engagement	Recommendation: Build stakeholder engagement and communications plan	High	High
Stakeholder Engagement	Recommendation: Formal round of stakeholder engagement	High	High
Leadership/Project Management	Recommendation: Formalize UAT protocols	High	High
Leadership/Project Management	Recommendation: Need UAT tests, scenarios, tools	High	High
Leadership/Project Management	Recommendation: Need comprehensive, detailed, aggressive training plan	Medium	Medium



## SUMMARY OF HEALTH CHECK 3 (MARCH 2021) FINDINGS cont.

Finding Area	Finding Summary	IV&V Finding Rating	beWellnm-Recommended Rating Adjustment
Leadership/ Project Management	Recommendation: Rebuild formal transparent status reporting	High	High
Leadership/ Project Management	Recommendation: More proactive, transparent informative status monitoring	High	High
Leadership/ Project Management	Recommendation: More effective meeting management	High	High
Leadership/ Project Management	Recommendation: Streamlining of issue resolution	Medium	Medium
Leadership/ Project Management	Recommendation: Improve document management	Medium	Medium
Leadership/ Project Management	Recommendation: All key personnel should have back up staff for key meetings and activities	Medium	Medium
Vendor Management	Recommendation: Greater vendor transparency on testing and readiness	Medium	Medium
Leadership/Project Management	Recommendation: (Start) contingency planning	Highest	Highest
Leadership/Project Management	Recommendation: Greater focus on CMS needs and issues	Highest	Highest
Vendor Management	Recommendation: finalization of system integration testing (SIT) needs	Highest	Highest
Leadership/Project Management	Recommendation: Greater focus on cutover planning	High	High
Leadership/Project Management	Recommendation: Thorough, transparent readiness assessment	High	High
Leadership/Project Management	Recommendation: IV&V assessment of security plan	High	High
Leadership/Project Management	Recommendation: Need to fill operations manager	Medium	Medium

## SUMMARY OF READINESS REVIEW (AUGUST 2021) FINDINGS

Finding Area	Finding Summary	IV&V Finding Rating	beWellnm-Recommended Rating Adjustment
Stakeholder Engagement	Inadequate for brokers/navigators, carriers, broader community and HSD. - Carrier onboarding: no clarity on who from beWellnm or Optum/NFP should be engaging carriers on various topics/subjects - Broker and assister onboarding: no clarity on approach to training; concerns about training rigor	Yellow: Concerning	Green: Adequate
Leadership/Project Management	Training delivery, material, preparation not close to ready	Orange: Highly Concerning	Yellow: Concerning
Requirement/Functional Scope Management	Staff not ready, CEC not ready, P&Ps not ready. - CEC: showing no signs of being ready in terms of staff, facility, operating model. CEC staffing significantly inadequate with no evidence of an approach to assessing CEC staff competency post training. Additionally, buildout of the CEC facility was not complete – concerns about connectivity, power, computing resources for CEC personnel, mailroom equipment, wall monitors and other aspects of the site were not fully built out or thoroughly tested - beWellnm: multiple critical positions not filled or trained at the time HMA conducted the review - Management of issues/questions from complex cases including mixed households: protocols for handling these situations were still being discussed/developed at the time we conducted the review	Orange: Highly Concerning	Orange: Highly Concerning
Data & Technical Readiness	User acceptance testing, integration testing (not with federal partners, but rather with New Mexico partners) and performance testing were incomplete and inadequate. Moreover, no substantive evidence of unit testing was ever provided and the limited data provided showed multiple poor test results.	Orange: Highly Concerning	Orange: Highly Concerning
Leadership/Project Management	Deployment, cutover and transition to steady state - no tools, methodology or staffing. IV&V strongly recommended a go-live “command center” and provided detailed recommendations on how to successfully stand up and run it.	Red: Critically Concerning	Orange: Highly Concerning
Leadership/Project Management	Risk mitigation and contingency planning was minimal – backup plans for certain scenarios with reasonable probability of occurrence were not developed	Orange: Highly Concerning	Orange: Highly Concerning

**SUMMARY OF READINESS REVIEW (AUGUST 2021) FINDINGS** *other major issues/concerns flagged*

Finding Area	Summary of Issue/Concern
Data & Technical Readiness	Concerns regarding assuring continuity of insurance coverage "to the maximum extent possible"
Leadership/Project Management	Resolve single point of failure within the DigiPros operation (only one resource has in-depth knowledge of notice generation systems)
Data & Technical Readiness	Inadequate, untested transition plan for consumers and brokers
Leadership/Project Management	