

COMPANY PROFILE, Q2 2022

Community Health Options (“Health Options”), a nonprofit Consumer Operated and Oriented Plan, was founded in 2011. Its mission: To partner locally with Members, businesses, and health professionals to provide affordable, high-quality benefits that promote health and well-being.

How It Started

The founders built the organization from the ground up. They assembled a dedicated staff in Lewiston, Maine, obtained state licensure and NCQA accreditation, established a robust network of providers throughout the state and the broader New England area, and developed operational capabilities. The company began offering coverage both on and off the Marketplace effective January 1, 2014, after which a Member-led Board of Directors was established.

Operational Success

Health Options has consistently valued Member-centered care, quality, and service. We are driven by purpose and our goal is to serve Members, not profit from them. Over time, the organization has enhanced its core processes, including implementing a best-in-class claims adjudication platform, developing an expert in-house Medical Management team to include Care Management, and strengthening our Maine-based Member Services team. Today, Health Options is proud to partner with 48,000 healthcare providers, clinicians, hospitals, and pharmacies in New England, including 100% of hospitals in Maine* and most in New Hampshire. Our network also includes the finest centers of excellence in Massachusetts and a supplemental, wrap-around national network for all Members. We continue to be one of the largest carriers in the individual market and partner with over 1,200 groups, a number that continues to grow. Our financial position is strong: we hold \$121.9 million in capital and surplus, and have paid over \$2.41 billion in claims through April 2022.

Responding to COVID-19

As COVID-19 continues to impact Maine communities, Health Options has kept the focus on providing access to affordable and accessible healthcare, as well as testing and vaccinations throughout the state. Through an agreement with our pharmacy benefit manager, Express Scripts®, Members can order at-home COVID-19 tests via phone, online or through their local pharmacy counter at no cost. If a Member purchases an at-home COVID-19 test out-of-pocket, they can receive reimbursement for up to \$12 per test.** Additionally, we’ve continued \$0 urgent care telehealth for non-HSA plans in 2022.

News and Updates

During the 2022 Open Enrollment period, Health Options significantly outpaced 2021 market growth in the individual market, gaining a 36% increase in market share. We are pleased to report that our Membership continues to grow in 2022, with individual special enrollment period (SEP) enrollments delivering a 14% increase from February through the end of June. Now, the planning process for our 2023 product lineup is underway. Expanding our network, benefits, and wellness programs will enable new and existing Members to select customized benefit plans that match their individual needs. For 2023, the individual and small group markets will merge, with the goal of providing more stable pricing for both markets over time. As a result, individuals and small groups will have the opportunity to purchase any plan in the merged market. Small groups will still be able to renew throughout the year, while individuals will still have a standard open enrollment period and special enrollment period options.

Our partnership with the National Fitness Campaign (NFC) to build fitness courts in accessible public spaces continues to make good progress. We look forward to launching the first fitness court in Maine through ongoing meetings with prospective host locations. This partnership will lead to the building of 5 grant-funded courts over the next few years. To learn more: nationalfitnesscampaign.com/maine.

Key Metrics Q2 2022

\$2.41B

Payments to Providers

\$121.9M

Capital & Surplus

29,000+

Members

96%

Group Retention

*With the exception of Togus VA Medical Center

** Each Member can obtain up to eight (8) free at-home COVID-19 tests every 30 days.

Key Differentiator: A Genuine Commitment to Members

MEMBER SERVICES TEAM

Supporting Members is one of Health Options' highest priorities. The Member Services team is committed to following through on promises, including ensuring callbacks are made when indicated, and guaranteeing that Members never have homework. If a matter requires additional follow-up, our Member Services team supports the Member in finding the answers. Additionally, specialized Claims Associates address callers' claims-related concerns, and all callers are invited to take a brief post-call survey, which consistently yields a satisfaction rate of 100%. The team serves all callers with the highest level of quality, including Members, prospective Members, providers, and brokers. Recent comments from Members about their experiences include:

A provider who is also a Member of Community Health Options stated, "Every time I reach out to Member Services everyone is so dedicated, extremely educated, professional, and efficient with their time. I love being a Member and feel honored to also be a provider."

A Member stated, "Whenever I call in, I feel confident that Member Services will answer all my questions in a friendly and timely manner."

MEDICAL MANAGEMENT

Our collaborative approach helps distinguish Health Options as a caring health plan provider focused on positive health outcomes, which ultimately impacts the total cost of care. The Care Management team, which is an important part of Medical Management, partners with a range of local agencies to provide one-touch resolution when assisting Members with financial, transportation, housing, and other issues affecting their well-being. Additionally, on-staff medical and healthcare experts help Members with barriers to care including medication, durable medical equipment, authorization support, provider outreach, and formulary education. The team makes outbound calls to Members with complex needs to assist with chronic conditions and to provide post-discharge support from hospitals. Some recent feedback from a Member highlights Health Options' commitment to Members:

The Member stated, "We can't thank you enough for all your help and support and late hours worked for our daughter. Our family is truly grateful for all the assistance you have given our family."

Medical Management also includes a comprehensive Pharmacy team with two in-house pharmacists. Their priority is to keep Members updated about drug recalls and changes in medication availability, and to suggest ways to access prescription medications at a lower cost. The team provides outreach to Members with chronic conditions, including asthma and diabetes, to offer education and assistance with the cost of medications.

Philanthropic Work

Our Community Benefit Expenditure Council awards grants that support community-based health and wellness programs in our service area. Now entering our third year of giving, we have awarded more than a quarter million dollars across multiple community-based organizations throughout the state. For ten years, Health Options has been on a quest to help Mainers live their most wholesome lives. Our Spring 2022 cycle focused on small community-based programs that encouraged physical activity as a way to improve overall health and well-being. We received 29 applications and awarded nearly \$50,000 in grants to 10 recipients.

ADDITIONAL ACHIEVEMENTS

Since 2020, our Members have saved \$235K in out-of-pocket costs through our Script Saver program.

The Medical Management and Pharmacy teams continue to add to savings, totaling \$4.7 million in 2021 with programs that improve health outcomes and reduce the total cost of care.