

**RFP 2019-07 Advertising and Marketing Services
Stage 2 Webinar - Questions and Answers**

QUESTION	ANSWER
1. Has Covered California done any research on the high value actions (HVA's) consumers take in the shopping process?	No. Relevant background information – Covered California is a fairly new agency. When originally created, it was built from a non-Marketing perspective. The website was designed as an enrollment vehicle that was focused on protecting consumer data. It does not currently have the capability to provide Marketing this data. We are making progress and hoping to obtain more data on the customer experience/journey in the future.
2. Does Covered California have any data or research you can share on highest performing media channels? Has Covered California used an MMM (Media Mix Model) to help determine channel strategies?	We did use an MMM. However, we learned that it requires additional environmental inputs/factors (beyond media spend data and enrollment data) to get actionable insights. As far as highest performing media, digital media affords the best data tracking. Traditional media is important to us as well, and we are still searching for ways to analyze traditional media.
3. Has Covered California used data to help identify key target segments with personalized messaging?	Our database marketing efforts include personalized messaging to members and those in the enrollment funnel. Funnel messages are tailored based on where they are in the funnel (application started, application completed, etc.).
4. Does Covered California deploy any strategies for consumers who drop off in the shopping/buying process?	Yes, we deploy personalized email campaigns and direct mail efforts. See question #3 above.
5. Has Covered California used influencers as part of your social media strategy?	Our Communications Division is currently working to develop an influencer social outreach campaign. Marketing is highly unlikely to take on influencers, and if we do, it will be to support the Communications Division.
6. Can you share more of your Small Business strategy as a large number of the working uninsured are employed in companies of 50 people or less?	We do not manage this – our Sales Division does. Current theme is a choice for employer and a choice for employees. The proposal should focus on the assignment, not on the small business component.
7. How many Covered California clients will be visiting the agency during the Site Visit?	The Covered California Evaluation Team has 10 members.

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<p>8. Is 2.a) Organizational and Staff Structure meant to be an org chart of the entire agency/office, or just the team that will staff the account?</p>	<p>The organizational chart should be a basic chart of your agency and also include an org chart with photos of the proposed staff of the California based office servicing this account. You can split this into 2 different charts instead of editing your existing org chart, you may create a separate document with photos of the proposed staff.</p>
<p>9. Is Covered California open to any workshopping of ideas or strategies during this meeting?</p>	<p>Not during this process but very open to this after process is complete. We are mostly interested in evaluating the agency's ability and capacity to service our account.</p>
<p>10. Do you have any preferences around how time or areas of focus are allocated (between case study/strategy/creative/etc.) during the meeting (aside from the 20 minute Q&A minimum)?</p>	<p>I would recommend you keeping your case study tight & concentrating on the assignments.</p>
<p>11. Must we follow the exact order outlined in the assignment, or may we structure the meeting the way we feel would create the best presentation?</p>	<p>You may structure this how it works best for your team as long as all the required elements are covered.</p>
<p>12. Can you give us a sense of what the assignment for the Oral presentations in early December will be as compared to the Phase 2 site visit assignments?</p>	<p>At a minimum it will be an expansion of Assignment A, taking the creative brief to the next step in the creative process.</p>
<p>13. Between retaining current customers and gaining new ones, which is the greater priority?</p>	<p>Normally for health insurance I would say retention, but due to the transitional nature of our target markets & our level of churn, I would say acquisition.</p>
<p>14. How is attribution being measured/credited? Is it total final enrollments through Covered California only? Or is campaign performance measured through a separate survey that counts increase in insured outside of the Covered California platform?</p>	<p>For marketing campaign performance, we look at a number of KPIs, but primarily focus on Covered California enrollment. However, the organization also looks at broader metrics, including enrollment on and off-exchange, risk mix, and overall state's uninsured rate.</p>
<p>15. Can you supply the backup research reports that lead to the findings listed in the assignment as "Key Research Learnings"?</p>	<p>See research reports provided.</p>

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<p>16. Is the primary target for this effort “consumers whose preferred language is not English”?</p> <p>a. Is the preferred language primarily Spanish?</p> <p>b. What about the API population and languages? Has this segment seen an increase in coverage?</p>	<p>Our primary target is the uninsured, regardless of language spoken.</p> <p>Last year, we had a decline in enrollment among Spanish speakers & Korean speakers, so we are highlighting them more this year.</p> <p>Our NORC study clearly demonstrates the Spanish dominant market is less knowledgeable about insurance.</p>
<p>17. What types of media channels have you prioritized in the past? What media channels do you attribute the most success to?</p>	<p>We’ve used a combination of traditional and digital media, and while we have the best data for digital, we believe TV and radio have been a key in changing social norms.</p>
<p>18. What is the average cost of insurance through Covered California for a family of four compared to employer paid or direct plans?</p>	<p>Costs are similar, for example, Kaiser through Covered California and buying from Kaiser direct, are mirrored plans and mirrored costs. However Covered California is the only place to get a subsidy to help with the cost. Average cost for an enrollee of Covered California is \$5 per person and per day.</p>
<p>19. What are the key KPI’s the campaign is responsible for (e.g., site traffic, time spent on site, conversions, calls to Call Center, etc.)?</p>	<p>KPIs vary by media channel as each channel has a different role on the plan. Overall, we look at impressions and CPM, site traffic, time spent, bounce rates, engagements, account creations, and plan selections. Via our annual brand tracking study, we also monitor brand awareness, understanding and value of health insurance as well as ad campaign recall. Our Call Center gets more calls than it can handle during open enrollment, so we intentionally do not promote the Call Center.</p>
<p>20. You mention that a large percentage of uninsured are lawfully present English and Spanish speaking Latinos. What is the percentage breakout for lawfully present English and Spanish speaking Latinos vs the Asian population?</p>	<p>We will email the Cal Sims data which is the best guess-estimate.</p> <p>See Question 23 for more information on families.</p>
<p>21. It says that 9 out of 10 who have enrolled have qualified for financial assistance yet, research shows that many who would qualify still don’t know. What has been the greatest barrier to date in letting consumers know about financial assistance? Has financial assistance been prominent in the messaging to-date, if not, why?</p>	<p>People self-eliminate before checking.</p> <p>We have promoted financial assistance, but consumers still do not even try.</p> <p>Affordability remains the #1 barrier, even for those eligible for financial assistance.</p>

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<p>22. Can you please provide any demographic/psychographic/timing information about the people who retain their insurance?</p>	<p>We do not have this information.</p>
<p>23. Do families or individuals represent a larger uninsured population? What types of challenges exist between reaching each group?</p>	<p>Research shows young single healthy men are the most difficult to reach. Those with children are more willing to make sacrifices for their kids, and they want insurance for the kids but also themselves.</p> <p>The easiest group to reach are people with pre-existing conditions. We need both healthy members and members with health needs to maintain a good balanced risk mix.</p>
<p>24. Can you please provide any mindset/conversion track record of "harder to convince consumers"? What are the strategic challenges Covered California has encountered in reaching them?</p>	<p>Again, in addition to everything mentioned above, the working poor want it but find insurance less affordable than others.</p> <p>The younger & healthier see less value in having insurance.</p>
<p>25. Which ethnic groups have the highest percentage of uninsured members? Can you please provide a breakdown? Which geographies provide the biggest opportunity among the uninsured?</p>	<p>Cal Sims report shows that the largest group is Latinos - a combination of the lawfully present (our target) and those that are not lawfully present.</p>
<p>26. How many of the potential new enrollees are new to California?</p>	<p>We do not have that information.</p>
<p>27. Outside of Open Enrollment dates, do you typically see enrollment success in certain times of the year?</p>	<p>Yes. We get about 25-35K new enrollees each month through SE (Special Enrollment). Last year during OE (Open Enrollment) OE new enrollees were slightly down for the first time, and retention was up. More signed up during SE vs OE for the first time ever. To enroll during SE you need a qualifying event (loss of coverage, loss or change of job, moved, marriage, baby, etc.).</p>
<p>28. What measurement/tracking tools do you currently use (e.g. adserver, media attribution vendor, etc)? What site analytics platform do you use? What kind of user information are you currently able to track (age, gender, income, etc)?</p>	<p>We can track age, gender and income. Some of the mentioned tracking tools are being used by our current agency. We do use Google Analytics 360.</p>

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<p>29. Are there different consumer segment strategies established and how has the messaging reflected the differences, e.g. current members (retention), hard-to-reach populations/low income, younger prospects (Millennials 26+)</p>	<p>We primarily communicated effectively with our current members through email and direct mail correspondence throughout the year. The hard to reach are not so much “hard to reach” but rather we see them as “harder to convince.” It’s not that we are not reaching them or that they did not see the message, but rather it is hard to convince them. So we need to do more work to convince them.</p> <p>Our Millennial efforts are minimal toward this specific population, general messaging is used. Our percentage of millennial members is acceptable.</p>
<p>30. You mention that the challenges persist 'despite a variety of strategic and tactical approaches to resolve them.' Are there any clear signs to why past efforts fell short of full resolution, or is the current hypothesis just that these are fundamentally hard problems? a. Can you share any research on the effectiveness of the current brand platform? On the effectiveness of past campaigns overall?</p>	<p>At this point, we believe it is a fundamentally hard problem.</p> <p>In regard to the brand platform research, for more information you can refer to our NORC research data that was sent out.</p>
<p>31. What has your channel breakdown been historically?</p>	<p>Covered California uses most available channels out there – we balance between digital and traditional channels (TV, DRTV, radio, OOH, digital, search, social, email, direct mail, newsprint). We do not have a specific break down to provide you.</p>
<p>32. How successful have you been reaching your target goals?</p>	<p>Many variables affect enrollment, however, we have met or exceeded important key target goals over the past six years. Last year, new enrollment was slightly less than previous years, but several factors contributed to this: a stronger economy created jobs with employer sponsored coverage, and the federal mandate was eliminated. In 2020 there will be a California mandate.</p>
<p>33. Does the marketing program work in collaboration with community outreach? How?</p>	<p>We have 2 types of community partners – Agents and Navigators. We provide materials, collateral and signage. We have a print store from which our partners can purchase the materials to help get the word out. Agents mostly have their own promotions and we provide a digital tool kit for their use. Navigators are in the community and are usually nonprofit and promote free assistance. They are very supportive and will spend the time to hand hold the community members through the process.</p>

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<p>34. What marketing synergies are there with health care providers?</p>	<p>We have very good relationships with our 11 contracted health carriers. By contract, our carriers provide us their media plan before implementation, dollars spent and media used that we hold confidential. We also share all our details, so there is good information going back and forth. We promote the health plans in our advertising and many of the Health Carriers also co-brand and cross promote Covered California with their own brand. There is synergy in part, because they want Covered California to be successful in encouraging people to sign up.</p>
<p>35. Are there specific geographic challenges, i.e. regions with lower enrollment?</p>	<p>Geographic and health care challenges precede Covered California and have to do with factors such as areas that have fewer doctors and hospitals. The general enrollment is steady throughout the state. There is some geographical data available in the research reports that were provided.</p>
<p>36. How do brand efforts differ from direct response (if at all)?</p>	<p>Brand ads tend to be more emotional and deal with motivating consumers and the value of insurance and the emotional desire to have insurance. Direct Response across the board is about how to sign up, when and where, with emphasis on financial help.</p>
<p>37. Can you provide any information on how the decision-making process for the different segments varies (if at all)? Phone, website, agents, community advisors, etc.</p>	<p>Our goal is to offer consumers a choice, and we equally promote all the methods: phone, website, agents, community advisors.</p> <p>In one of the research reports we sent, there are some differences in segments by how they like to get their information and how they like to enroll.</p>
<p>38. What are the highest friction areas in conversion?</p>	<p>Affordability is the highest friction point for new consumers. Beyond that our data is lacking, however, our data is improving every year.</p>
<p>39. Per your assignment document, research and measurement are important in campaign development and performance tracking. How does Covered California measure advertising effectiveness? Methodology? Key KPI's?</p>	<p>To measure effectiveness, we've established KPIs. These vary by media channel as each channel has a different role on the plan. Overall, we look at impressions and CPM, site traffic, time spent, bounce rates, engagements, account creations, and plan selections. Via our annual brand tracking study, we also monitor brand awareness, understanding and value of health insurance as well as ad campaign recall.</p> <p>Digital Ads are tagged so we can track through plan selection. Data, measurement & analysis of that data is an area we need assistance on. We are and have been limited by the quality of the data we have available to us.</p>
<p>40. Covered California is in a very unique space in the marketplace. Who, if anyone, do you see as your competition?</p>	<p>While we do not have direct competitors, health carriers who don't contract with us benefit from our advertisements.</p> <p>Our biggest competition, if any, might be high volume online agents who do not contract with us, and compete using search terms from the ads, benefit from our advertising and are looking at high quantity over customer service.</p>

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<p>41. Among the Hispanic segment, does research show how larger size of the families are impacted in their likelihood to enroll?</p>	<p>The specific data is not available. We do know that having children does make a difference across all segments and encourages people to enroll and want to have insurance to protect their kids.</p>
<p>42. Why are you looking for a new agency partner?</p>	<p>Our current contract expires in May 2020, giving us the opportunity to be sure we have the best possible partner and combination of agencies to move Covered California forward.</p>
<p>43. Can you share how enrollment has trended from OE 1 through 6?</p>	<p>During OE1 there was a large surge of enrollment as pre-existing conditions were not allowed pre-Obama Care. Since then, it has stayed about the same with a little increase each year. We must find new people each year to replace those who churn out.</p>
<p>44. For each ethnic/racial segment, what is the #1 reason for churn? Are there significant differences in drop-off rates?</p>	<p>No there are not significant differences by ethnicity.</p> <p>The #1 reason people leave us is because their income has changed and they either qualify for Medi-Cal or they get a new job with employer-based insurance.</p> <p>The #1 reason people come to us is due to losing their job and they lose their employer-based insurance, or they have a change of financial circumstances.</p> <p>Over 50% of the people who sign up during SE have lost their job and lost their insurance.</p>
<p>45. Are there any conversion metrics on the mobile site?</p>	<p>These are not available at this time.</p>
<p>46. Is the primary audience aware of what health insurance is and how it works and are just choosing not to pursue (because they think they can't afford it) or is there a significant portion of the audience who actually doesn't understand what insurance is and how it works.</p>	<p>It is both. Significant portions of people do not understand what insurance is or how it works. It's a complicated, confusing subject for everyone. That, in combination with the cost, are the largest barriers to pursuing coverage.</p>
<p>47. How has the budget historically been divided between multicultural (English), Spanish dominant (in language), Asian (in language), other?</p>	<p>We will send you a document that gives an example of how we distributed our money last year. It does not indicate how we will do it in the future. We look at each population holistically, not based on a % of the population. We look at those who are not English language dominant, not how many people are in the total group.</p>

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	We also look at the general market and how we address the different segments in the general market campaign.
48. Historically, what is the breakdown between brand and direct response in terms of budget allocation?	We aim at a 60/40 split – DR to Brand. This is not black and white and is not reflective of how we would do it in the future. This will give you an idea of how we have done it in the past.
49. Also, would we be able to access jpegs of your logo (color, black and white)?	Bidders can access various file types of our logo using the link below. The Brand Style Guide linked at the bottom gives direction on the correct (and incorrect) usage of the Covered California official logo. https://hbex.coveredca.com/toolkit/logos.html
50. Can you share the media percentage that is spent on DRTV vs. general broadcast?	Our Spot TV buy vs. DRTV buy varies by segment, but on average it's approx. 75% vs. 25% respectively.
51. In the RFP in Section IV the formatting requirements are specific to the format for Stage 1 but we did not see detail for the formatting requirements for Stage 2. Are we allowed some creative license in presenting our agency credentials and initial thinking for Covered California?	Per the Stage 2 Instructions, the presentation materials that will be provided to the Covered California Evaluation Team should adhere to the format requirements noted in the RFP Section IV Submission Requirements. Bidders may use some creative license during the Site Visit presentation showcasing the agency credentials and initial thinking for Covered California. Bidders should provide 8 copies plus a master of the presentation to the Covered California evaluation team. For complete details, refer to RFP Section IV Submission Requirements.