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## A message from SVP Sales and Marketing Michael Munoz



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As you know, over the past few weeks we have experienced unprecedented challenges as a result of the work required to enroll members in our new Affordable Care Act (ACA)-compliant products.

This has led to significant delays in several business areas, which we understand have been frustrating for you, your customers, and our members. While other health insurers across the country are facing similar challenges enrolling members with new ACA health plans, we are deeply concerned that we have not met your expectations during this critical time, and for that we are truly sorry.

Although we anticipated and planned for a higher-than-usual call volume, it was clearly not enough. The influx of new members with questions about their new benefits, in addition to peak season issues with ID cards and portal access, challenged our call centers and resulted in excessive wait times for callers.

Working closely with you, we have made great progress and remain focused on promptly resolving all outstanding issues and preventing them from happening in the future. Here are several key steps we have taken:

- **Resolved critical issues.** To rapidly address the most urgent issues affecting our members, we quickly put triage teams in place to focus exclusively on identifying and executing solutions to emergent issues. We completed reconciliation for all small group customers and reissued ID cards to members wherever an issue was uncovered. We also established an email inquiries mailbox to swiftly respond to new requests for cards, set up a simple intake tool to capture primary care physician selections, and leveraged our social media channels in new ways to capture and resolve member concerns.
- **Reengineered processes.** Using what we've learned through our triage process, we then turned our attention to understanding the root cause and systemic issues. We now know there were delays in entering enrollment data as well as in our ID card generation. Problems in the data transfer to our pharmacy benefits manager affected member eligibility and caused preauthorization issues at the point of sale. Process improvement teams are working diligently to implement solutions that will improve future enrollments.

- **Restored service.** Restoring normal service levels for your customers and our members is one of our highest priorities. We've expanded our customer service hours until 8 p.m. on weeknights and from 9 a.m. to 2 p.m. EST on Saturdays until March. We've added additional staff and representatives to answer member questions. We will continue to leverage all available resources to provide prompt customer service during this critical time.

## **Communications to your customers**

While we have made progress, we still have work to do, and will continue to provide you with updates as we work to resolve these issues.

We know that you are receiving questions from your customers, so we've included a [key points summary](#) that you can share with your customers. We are conducting proactive outreach for our group employers as well.

Again, we sincerely regret that we have not provided you, your customers, and our members with the experience you expect and deserve from AmeriHealth New Jersey. You have our commitment that we will continue to do everything we can to regain your confidence. Thank you for your patience, but more importantly, for your continued partnership.

Sincerely,

A handwritten signature in black ink, appearing to be 'Michael Munoz', with a large, stylized flourish underneath.

Michael Munoz  
Senior Vice President, Sales and Marketing