

CUSTOMER EXPERIENCE & MARKETING COMMITTEE

Wednesday, September 16th @ 11:30 A.M.

50 Water Street, 7th Floor Board Room

New York, N.Y. 10004

AGENDA

Call To Order	Sally Hernandez Pinero
Old Business	
Adoption of Minutes June 9 th , 2026	Sally Hernandez Pinero
Action Items	
a. <i>Authorizing the submission of a resolution to the Board of Directors of MetroPlus Health Plan, Inc. ("MetroPlus" or the "Plan"), to authorize the Executive Director of MetroPlus Health Plan, Inc. ("MetroPlusHealth" or "the Plan") to execute a best interest renewal with CheckedUp, Inc. d/b/a Hospital Media Network (HMN) for producing and displaying MetroPlus posters and digital materials in New York City Health + Hospitals ("NYC Health + Hospitals") facilities. MetroPlus is requesting a term of 3 years, for total amount not to exceed \$2,254,500.</i>	Laura Santella-Saccone
b. <i>Authorizing the Executive Director of MetroPlus Health Plan, Inc. ("MetroPlus" or the "Plan") to execute a best interest contract with City Harvest Inc. ("City Harvest") for an amount not to exceed, \$2,000,000 for a 9-month term.</i>	Roger Milliner
New Business	
Regulatory Headwinds & Strategic Initiatives	Lila Benayoun
Salesforce Enhancements	Tomasz Kawka
QHP Landscape	Lauren Leverich Castaldo
MarTech Update	Laura Santella Saccone
Gold Signature Experience Go-Live Updates	Sudha Chatterji
Call Center Performance	Terri Woodard Lila Benayoun
Executive Session	
Adjournment	Sally Hernandez Pinero

**Minutes
of
June 9th, 2026
Customer Experience & Marketing
Committee Meeting**

MetroPlus Health Plan, Inc.
Customer Experience & Marketing Committee
Tuesday, June 9th, 2026

MetroPlus Health Plan, Inc. Customer Experience & Marketing Committee Minutes

The meeting of the Customer Experience & Marketing Committee of the MetroPlus Health Plan, Inc. (hereafter “MetroPlus or the Plan”) was held in the 7th Floor Boardroom at 50 Water Street, New York, NY 10004, the 9th day of June 2026 at 10:00 A.M., pursuant to a notice which was sent to all the Committee Members and Board of Directors of the Corporation by the Secretary. The following Directors were present in-person:

Sally Hernandez Piñero
Dr. Talya Schwartz
Vallencia Lloyd
Mark Power
Karl Silverman

Due to extraordinary circumstances, **Vallencia Lloyd** attended via Videoconference.

Vallencia Lloyd, Chair of the Customer Experience & Marketing Committee, called the meeting to order at 10:03 A.M and Angela Minerva kept the minutes, thereof.

ADOPTION OF THE MINUTES

The minutes of the Customer Experience & Marketing Committee held on March 25th, 2026, were presented to the Committee. On a motion by Vallencia Lloyd and duly seconded, the Committee adopted the minutes.

ACTION ITEM

Vallencia Lloyd advised that we begin the meeting by covering the Action Items. A **first** resolution was presented by Tali Leger, Senior Director of Procurement for Committee approval.

Authorizing the Executive Director of MetroPlus Health Plan, Inc. (“MetroPlus or “the Plan”) to execute a best interest contract with Sutherland Healthcare Solutions (“Sutherland”) to support the Gold signature experience, for a total amount not to exceed \$4,500,000 which includes a 10% contingency, for a one-year contract term with two one-year renewal options.

Tali Leger provided an overview of the Background, Best Interest Justification, Scope of Service and Board Approval Request.

Board members asked questions regarding vendor cost and financial benefit assessment; Tali Leger responded and Dr. Talya Schwartz, President & CEO further responded on how the program will be expanding.

Board members asked questions regarding retention and ROI; Dr. Talya Schwartz and Sudha Chatterji, Senior Director, Customer Experience Strategy & Retention responded.

There being no further questions or comments, on a motion by Vallencia Llyod and duly seconded, the resolution was unanimously adopted by the Committee.

NEW BUSINESS

Project Edge

Vallencia Lloyd asked that we move on to a brief presentation on Project Edge. Tomasz Kawka, Vice President of Business Transformation presented Our Journey from Opportunity to Impact, Wave 2 – Scaling the Platform from 100X is Complex, Our Roadmap – Project Edge Transformation, Wave 2 – Where We Are vs. Where We Should Be and Risks & Challenges.

Board Members asked questions regarding cost savings and efficiency; Tomasz Kawka responded.

Board Members requested to see all vendors associated with Project Edge and Cost; including forecast vs. actual; a follow-up was shared.

Provider Satisfaction

Lila Benayoun, Chief Operating Officer, presented Provider Satisfaction. Lila Benayoun presented Methodology, Executive Summary, Summary Rate Scores, Composite Summary Rate Scores, Health Plan Call Center, Service Staff, Experience and Demographic Segments.

Membership

Lauren Leverich Castaldo, Chief Financial Officer, presented Membership specifically covering Membership Trends 2025-2026.

Dr. Talya Schwartz, President & CEO asked Mark Peter, Board Member regarding if he is hearing anything from the community about enrolling and coverage, etc.; Mark Peter responded.

Board Members asked questions regarding at risk members; Dr. Talya Schwartz responded.

Lauren Leverich Castaldo went on to discuss Market Share.

Retention, Performance & Enhancements

In the interest of time, we asked the Board Members to read vs. presenting Retention, Performance & Enhancements and come back with any questions, if needed. However, Dr. Talya Schwartz did discuss What We're Doing Internally to Turn the Tide.

Board Members asked questions regarding temps; Dr. Talya Schwartz responded.

Lila Benaquoun, Chief Operating Officer, further expanded on the discussion regarding CBO's, coverage and steps we are taking to plan for 2027.

Board members made comments regarding CBO value; Dr. Talya Schwartz responded.

Call Center Stats & New QHP/EP Requirements

Lila Benayoun, Chief Operating Officer, presented Call Center Stats & New QHP/EP Requirements; specifically covering Trend in Call Center Call Volume | Members, Abandonment Rate – Members, Trend in Call Center Call Volume – Providers, Net Promoter Score (NPS), and DOH Required EP/QHP

Call Center Reporting.

Gold Enhancements

Sudha Chatterji, Senior Director, Customer Experience Strategy & Retention went on to present Gold Enhancements specifically highlighting, Elevating the Gold Experience, Gold Concierge Service Expansion, Promoting Upcoming Expanded Gold Benefits & Services and Gold CEO Outreach,

Natasha Molamusa, Director of Content Marketing & Corporate Communications discussed the Gold Landing Page Update.

Tomasz Kawka asked a question regarding member experience accessing our website via cell phones.

Board members commented on messaging; Natasha Molamusa clarified.

Spring Campaign

Natasha Molamusa, Director of Content Marketing & Corporate Communications, presented the Spring Campaign. Natasha discussed the Theme, the Strategy, Creative Advertising Subways, etc., Amazon Locker Advertising, 3-Pronged Approach and Medicare TV Spots on NY1 and Spanish Speaking Networks.

Sales Restructured Organizational Chart

Roger Milliner, Chief Growth Officer, presented the Sales Restructured Organizational Chart, specifically discussing how the restructuring will support retention and acquisition of new members.

There being no further business, Vallencia Lloyd adjourned the meeting at 11:30 A.M.

Resolution

a. Resolution

RESOLUTION

*Authorizing the submission of a resolution to the Board of Directors of MetroPlus Health Plan, Inc. ("MetroPlus" or the "Plan"), to authorize the Executive Director of MetroPlus Health Plan, Inc. ("MetroPlusHealth" or "the Plan") to execute a best interest renewal with **CheckedUp, Inc. d/b/a Hospital Media Network (HMN)** for producing and displaying MetroPlus posters and digital materials in New York City Health + Hospitals ("NYC Health + Hospitals") facilities. MetroPlus is requesting a term of 3 years, for total amount not to exceed \$2,254,500.*

WHEREAS, MetroPlus, a subsidiary corporation of NYC Health + Hospitals, is a Managed Care Organization and Prepaid Health Services Plan, certified under Article 44 of the Public Health Law of the State of New York; and

WHEREAS, MetroPlus is seeking a best interest renewal of its contract with CheckedUp, Inc. dba Hospital Media Network (HMN); and

WHEREAS, HMN produces and displays MetroPlus' promotional posters and digital materials in New York City Health + Hospitals ("NYC Health + Hospitals") facilities and across the five boroughs; and

WHEREAS, these placements effectively reach consumers in environments closely aligned with MetroPlus' target populations, growth objectives, and enrollment priorities.

WHEREAS, HMN is the exclusive vendor for NYC H+H that manages framed advertising poster space in NYC Health + Hospitals facilities; and

WHEREAS, it is in the best interest of MetroPlus to contract with HMN.

NOW THEREFORE, be it

RESOLVED, that the Executive Director of MetroPlus Health Plan, Inc. be and hereby is authorized to execute a renewal contract with CheckedUp, Inc. d/b/a Hospital Media Network (HMN) for producing and displaying MetroPlus' framed posters and digital materials in New York City Health + Hospitals ("NYC Health + Hospitals") facilities for a term of 3 years, for total amount not to exceed \$2,254,500.

EXECUTIVE SUMMARY

- OVERVIEW:** CheckedUp, Inc. dba Hospital Media Network (HMN is the exclusive vendor for NYC H+H facilities for posters and digital screen placements. Placement coordination and production management are provided by HMN.
- NEED:** HMN enables MetroPlus to secure and maintain visibility in high-value points of care that would otherwise be unavailable through alternative channels. These placements effectively reach consumers in environments closely aligned with MetroPlus' target populations, growth objectives, and enrollment priorities.
- PROPOSAL:** MetroPlus is requesting a three-year best interest renewal and an additional increase in spending authority in the amount of \$2,254,500 to allow MetroPlus to continue its arrangement with HMN for media placement at NYC H+H locations.

Application for Contract Renewal - CheckedUp, Inc. Dba Hospital Media Network (HMN)

Laura Santella-Saccone

Chief Marketing and Brand Officer

MetroPlusHealth Customer Experience & Marketing Committee Meeting

Wednesday, September 16th, 2026

BACKGROUND

- MetroPlus is seeking a best interest renewal of its contract with CheckedUp, Inc. dba Hospital Media Network (HMN).
- HMN manages posters and digital screen placements throughout NYC Health + Hospitals.
- MetroPlus has contracted with HMN since 2006.
- The most recent resolution was approved by the MetroPlus Board of Directors in September 2022 for a four-year contract authority in the amount of \$2,648,800.
- MetroPlus is requesting a three-year best interest renewal and an additional increase in spending authority in the amount of \$2,254,500 to allow MetroPlus to continue its arrangement with HMN for media placement at NYC H+H locations.

RENEWAL JUSTIFICATION

- As the exclusive vendor for NYC Health + Hospitals facilities, HMN enables MetroPlus to secure and maintain visibility in high-value points of care that would otherwise be unavailable through alternative channels.
- Through HMN's posters and digital screens, MetroPlus displays promotional materials across NYC Health + Hospitals 11 facilities.
- MetroPlus currently has 185 TV screen placements and 300 framed posters in NYC Health + Hospitals facilities.
- These placements effectively reach consumers in environments closely aligned with MetroPlus' target populations, growth objectives, and enrollment priorities.
- Placement coordination and production management is provided by HMN.
- Continuing the contract with HMN, avoids disruption to MetroPlus' presence and limits the opportunity for competitors to secure available placements.
- By signing a three-year renewal our pricing is locked in until 2029.
 - Pricing
 - TVs are \$125 per month/per unit
 - Posters are \$107 per month/per unit
 - Additional poster placements will be \$100 per month/per unit

CONTRACT PERFORMANCE AND REACH

Strong reach, healthcare-context relevance, and exclusive NYC Health + Hospitals' visibility make HMN a highly effective and strategically valuable brand awareness channel.

- **Performance Highlights:**
 - 4.8M annual patient and visitor encounters.
 - 26.5M annual impressions (# of times our ads are viewed) through posters and digital screens.
 - Exclusive MetroPlus presence across all digital screen placements.
 - 61% share of all managed poster inventory within Health +Hospitals network.
 - \$35.54 CPM comparable to premium marketplace video channels.

APPROVAL REQUEST

- Seeking a three-year contract renewal term.
- Effective October 2026.
- Total Authority Request - \$2,254,500 which equates to a \$751,500 annual cost and includes reduced poster pricing for up to 74 additional posters.

b. Resolution

RESOLUTION

*Authorizing the Executive Director of MetroPlus Health Plan, Inc. ("MetroPlus" or the "Plan") **to execute a best interest contract with City Harvest Inc. ("City Harvest") for an amount not to exceed, \$2,000,000 for a 9-month term.***

WHEREAS, MetroPlus is certified under Section 4403(a) of the Public Health Law of the State of New York as a Health Maintenance Organization and has organized a plan for the provision of Prepaid Health Services to its members; and

WHEREAS, MetroPlus will partner with City Harvest to help expand access to nutritious food in 10 high-priority neighborhoods across New York City; and

WHEREAS, MetroPlus' funding will support increased food deliveries, recruitment of new community food partners, and investments that strengthen agency capacity; and

WHEREAS, partnering with City Harvest is in the best interest to MetroPlus.

WHEREAS, on September 16th, 2026, the MetroPlus Customer Experience & Marketing Committee considered and approved the submission of the resolution to the Board of Directors; and

NOW THEREFORE, be it

RESOLVED, the Executive Director of MetroPlus is hereby authorized to execute a 9-month best interest contract to support food security services for an amount not to exceed, \$2,000,000.

EXECUTIVE SUMMARY

AUTHORIZING METROPLUS HEALTH PLAN, INC. TO EXECUTE A BEST INTEREST CONTRACT WITH CITY HARVEST.

- BACKGROUND:** MetroPlus is seeking a best interest contract with City Harvest Inc. (“City Harvest”) for a strategic partnership to support food security across New York City. MetroPlus’ investment will enable City Harvest to expand and strengthen its emergency food response in 10 high-priority New York City neighborhoods where food insecurity significantly exceeds access to emergency food.
- NEED:** MetroPlus will partner with City Harvest to extend trusted food and health resources across priority communities. Through a coordinated outreach model NYC community members will be connected to nutritious food and community resources.
- PROPOSAL:** MetroPlus is seeking a 9-month best interest month contract for a total not-to-exceed contract amount of \$2,000,000.

Application for Contract Authority - City Harvest

Roger Milliner

Chief Growth Officer

MetroPlusHealth Customer Experience & Marketing Committee Meeting

Wednesday, September 16th, 2026

BACKGROUND

- MetroPlusHealth is seeking a best interest contract with City Harvest Inc. (“City Harvest”) for a strategic partnership to support food security across New York City.
- MetroPlusHealth’s investment will enable City Harvest to expand and strengthen its emergency food response in 10 high-priority New York City neighborhoods where food insecurity significantly exceeds access to emergency food.
- MetroPlusHealth is requesting authorization to execute a nine-month best interest contract with City Harvest for an amount, not to exceed \$2,000,000.

SCOPE OF WORK / PARTNERSHIP COMPONENTS

- Expand food access in high-need communities.
- Strengthen community food partners.
- Improve data-driven distribution.
- Increase capacity while maintaining citywide services.

A COORDINATED PLATFORM FOR FOOD ACCESS, HEALTH EQUITY AND COMMUNITY ENGAGEMENT

Six integrated components convert the investment into visible, measurable impact across priority New York City communities.

01

FOOD ACCESS & DISTRIBUTION

Support nutritious-food transportation and distribution across priority communities.

02

MOBILE MARKET ACTIVATION

Create recurring community touchpoints for food access, resource education and outreach.

03

COMMUNITY NETWORK EXPANSION

Strengthen local capacity through new agency partners and trusted neighborhood channels.

04

NUTRITION & HEALTH CONNECTION

Pair food access with nutrition education, community resources and Food Is Medicine exploration.

05

EMPLOYEE ENGAGEMENT

Mobilize MetroPlusHealth teams through repacks, Mobile Markets and year-round food drives.

06

BRAND VISIBILITY & ACCOUNTABILITY

Deliver joint visibility, defined KPIs, quarterly reporting and corrective-action oversight.

BOARD TAKEAWAY: ONE PARTNERSHIP • SIX COMPONENTS • MEASURABLE COMMUNITY AND ENTERPRISE VALUE

WHY CITY HARVEST IS A BEST-FIT NYC PARTNER

A city-built food-rescue platform with the scale, access and health-equity capabilities to execute immediately.

WHO IS CITY HARVEST?

New York City's first and largest food rescue organization, founded in 1982. City Harvest rescues nutritious surplus food and delivers it free of charge across all five boroughs.

1.4B+ pounds rescued since inception

**Five-borough infrastructure.
Nutritionally focused. Culturally responsive.**

PROVEN SCALE

Nearly 90M pounds delivered in FY26, including 66M+ pounds of fresh produce.

CITYWIDE REACH

400+ community programs, 1,800+ food donors, 23 trucks, nine Mobile Markets and 18 partner distributions.

TARGETED FIT

Data-driven deployment aligns with MetroPlusHealth priority communities across all five boroughs.

HEALTH CONNECTION

Nutrition education, community-resource access and Food Is Medicine pilot development extend impact beyond food delivery.

BOARD TAKEAWAY: ESTABLISHED CAPACITY + TRUSTED ACCESS + METROPLUSHEALTH FOOTPRINT ALIGNMENT

EXTEND TRUSTED FOOD AND HEALTH RESOURCES ACROSS PRIORITY COMMUNITIES

A coordinated outreach model connects residents to nutritious food, community resources and MetroPlusHealth support.

75,000+

UNDUPLICATED PEOPLE TARGETED

Reach residents through high-need communities and established neighborhood food-access channels.

10

PRIORITY COMMUNITIES

Targeted deployment across all five New York City boroughs.

26M

POUNDS TARGETED

Nutritious food directed to priority communities during the partnership term.

MONTHLY

COMMUNITY TOUCHPOINTS

Mobile Market tabling, resource education and outreach opportunities.

TRUSTED

LOCAL CHANNELS

Community programs and neighborhood partners help connect residents to support.

BOARD TAKEAWAY: SCALE + TARGETED GEOGRAPHY + TRUSTED ACCESS = MEASURABLE MEMBER AND COMMUNITY REACH

MAKE METROPLUSHEALTH VISIBLE, USEFUL AND MEASURABLE AT EVERY TOUCHPOINT



01

LAUNCH

Joint media moment + leadership repack

02

MONTHLY PRESENCE

Mobile Market tabling + resource education

03

EMPLOYEE ACTION

Up to 25 repack or 10 market volunteers

04

AMPLIFY

Truck, web, social, e-news and print visibility

MEASURE DELIVERY, REACH, ENGAGEMENT AND ACCOUNTABILITY

A focused scorecard translates the partnership commitment into clear, board-level indicators of progress.

26M

POUNDS TARGETED

Food delivered across priority communities

75,000+

PEOPLE TARGETED

Unduplicated residents reached

10

PRIORITY COMMUNITIES

Targeted deployment across all five boroughs

10–15

NEW AGENCY PARTNERS

Community-network expansion target

MONTHLY

ACTIVATION CADENCE

Mobile Markets, outreach or volunteer opportunities

QUARTERLY

PERFORMANCE REVIEW

KPI dashboard, oversight and corrective action

BOARD VIEW: TRACK OUTPUTS, REACH, NETWORK GROWTH AND ACTIVATION CADENCE THROUGH A QUARTERLY KPI DASHBOARD

APPROVAL REQUEST

- Seeking a 9-month best interest contract.
- **Term** | October 2026 - June 2027.
- **Total Authority Request** | \$2,000,000.

New Business

MetroPlusHealth

Customer Experience & Marketing Committee Meeting

Wednesday, September 16th, 2026

Regulatory Headwinds & Strategic Initiatives

Lila Benayoun

Chief Operating Officer

September 2026



REGULATORY HEADWINDS IMPACTING MEMBERSHIP & RETENTION

Work/Volunteer Requirements begin for SNAP (March 2026)

- Able-Bodied Adults Ages 18-64 Without Dependents are required to meet work or volunteer hours to continue receiving benefits.

End of 12-month Continuous Coverage Provision (July 2026)

- Adults with Medicaid will no longer receive 12 months of continuous coverage.

Termination of EP 200 – 250 (July 2026)

- NYS Essential Plan Eligibility will be Reduced from 250% Federal Poverty Level (FPL) to 200% FPL.

End of Continuous Coverage for Children Age 0 – 6 (July 2026)

- Medicaid and CHP children will no longer be auto-renewed until their 6th birthday.

ADDITIONAL REGULATORY HEADWINDS ON THE WAY

Changes to Immigrant Eligibility for Federal Medicaid (October 2026)

- Restrictions on immigrant eligibility for federally subsidized Medicaid take effect (Refugees, Asylees & TPS).

Bi-Annual Redeterminations (January/March 2027)

- Starting in January, newly enrolled members will be required to validate eligibility every 6 months.
- For existing members, 6-month renewals begin with the March 2027 cohort.

Work, School, or "Community Engagement" Requirements Start for Some Medicaid Recipients (January 2027)

- Non-pregnant adults between the ages of 19 and 64 who are not exempt must complete at least 80 hours of monthly qualifying activities.

Changes to Immigrant Eligibility for Medicare (January 2027)

- Formerly eligible immigrants will lose Medicare coverage, including Refugees, Asylees, TPS, etc.

STRATEGIC INITIATIVES TO PREPARE FOR INCREASED RENEWAL FREQUENCY

Partner with DSS and HRA on current recertification struggles and suggested improvements

- Align Plan notification timeline with member timeline of 3-4 months in advance.
- Request for dedicated HRA-Plan Liaison allowing real-time insight into structural bottlenecks, application processing backlogs, and systemic delays before they result in coverage termination.
- Focus on unhoused members - establish a localized data-sharing protocol with the Department of Homeless Services (DHS) or dedicated shelter case managers, providing them with a secure, monthly roster of residents due for HRA recertification.

Amplify Member and Provider awareness of upcoming changes

- Host Townhalls, Multi-channel communication push, partner with providers in developing strategies to retain.

Partner with Key Vendors to improve prioritization and retention

- Identify at-risk members earlier who will fail to recertify and focus outreach.
- Piloting cohort of members due to recertify with vendor to elevate retention rate from current baseline.

Continue to strengthen data, reporting and efficiencies, systemic changes

- Enhanced reporting tools, Restructure Staffing needs to better support increased renewal frequency, System adjustments, leverage AI to support retention efforts.

Salesforce Enhancements

Tomasz Kawka

Vice President of Business Transformation

September 2026



PRIORITIES

Growth

- **Convert more prospects:** Turn qualified leads into enrolled members faster.
- **Strengthen retention:** Keep members engaged through better service and digital access.
- **Grow commercial lines:** Expand Gold and employer-based membership.
- **Expand reach:** Capture leads wherever members engage us.

Member Experience

- **Digital self-service:** Members handle recertification, forms and inquiries online.
- **Faster resolution:** Answer member inquiries completely and correctly on first contact.
- **One member view:** Give service teams complete, accurate information.

Provider Experience

- **Enable portal self-service:** Authorizations, claims and disputes handled without a call.
- **Accelerate credentialing:** Speed credentialing to network readiness.
- **Reduce administrative effort:** Reduce repetitive submissions and administrative rework.

KEY ENHANCEMENTS DELIVERED TO DATE IN 2026

Growth	Member Experience	Provider Experience
QR lead generation and engagement journeys: Connect prospects directly with sales team for better engagement. Hard-to-reach member retention processes: Implemented prioritization algorithm to maximize retention outcomes.	Call center AI knowledge repository chat & search: Better service through enterprise knowledge at agents' fingertips. Member portal donate life: Convenient organ donor registration and regulatory compliance.	Self-service pre-authorization requirement verification: Provider self-service that reduces avoidable calls. Bulk claims handling and multi-claim inquiry improvements: Less repetitive claim entry and streamlined review efforts. Backoffice automation: Automated validation of provider data across state and compliance systems, and the load of data into provider credentialing solution.

FEATURES PLANNED FOR UPCOMING DELIVERY

Growth	Member Experience	Provider Experience
Gold led nurturing and engagement: Routing and connectivity to QR leads to improve engagement with and experience for commercial prospects.	Re-certification document collection: Secure digital collection of recertification documents aligned with State requirements.	Credentialing improvements: Streamlined provider onboarding and maintenance.

QHP Landscape

Lauren Leverich Castaldo

Chief Financial Officer

Wednesday, September 16th, 2026



QHP 2027 COMPETITIVE LANDSCAPE

Company Name	Requested Rate	Approved Rate	Reduction
Anthem HP, LLC (Formerly Empire HealthPlus)*	11.3%	-3.1%	-127.4%
CDPHP*	1.4%	0.0%	-100.0%
Emblem (HIP)*	26.8%	0.0%	-100.0%
Excellus*	17.2%	12.2%	-29.1%
Fidelis (NY Quality Healthcare Corp)*	28.4%	8.0%	-71.8%
Healthfirst PHSP, Inc.*	14.9%	5.1%	-65.8%
Highmark (Formerly HealthNow)*	23.8%	12.2%	-48.7%
IHBC*	14.2%	0.0%	-100.0%
MetroPlus*	17.0%	0.0%	-100.0%
MVP Health Plan*	10.7%	10.7%	0.0%
Oscar*	23.8%	3.9%	-83.3%
UnitedHealthcare of NY Inc.*	52.1%	8.1%	-84.5%
Summary	20.7%	6.0%	-70.9%

- Significant reduction or 0% rate action across the competitive market for 2027.
- MetroPlus maintains current market standing.
- **Bronze:** Lowest cost is Fidelis by \$62 with MetroPlus being 3rd lowest.
- **Silver:** Lowest cost is Fidelis by \$150 with MetroPlus being 3rd lowest.

MarTech Update (SFMC Update)

Laura Santella Saccone

Chief Marketing & Brand Officer

Wednesday, September 16th, 2026



NEW | CONNECTING SALES LEADS TO ENROLLMENT!

MetroPlusHealth: Sofia, it was great meeting you. I'm Joanna from MetroPlusHealth — here to help anytime. 📱
Call me with any questions: [3472914440](tel:3472914440).
Not Sofia? Text WRONG. Text STOP to end messages. Msg&Data rates may apply.

What abt prescription drug coverage

MetroPlusHealth: You can reach me directly at [3472914440](tel:3472914440) if you have any questions.

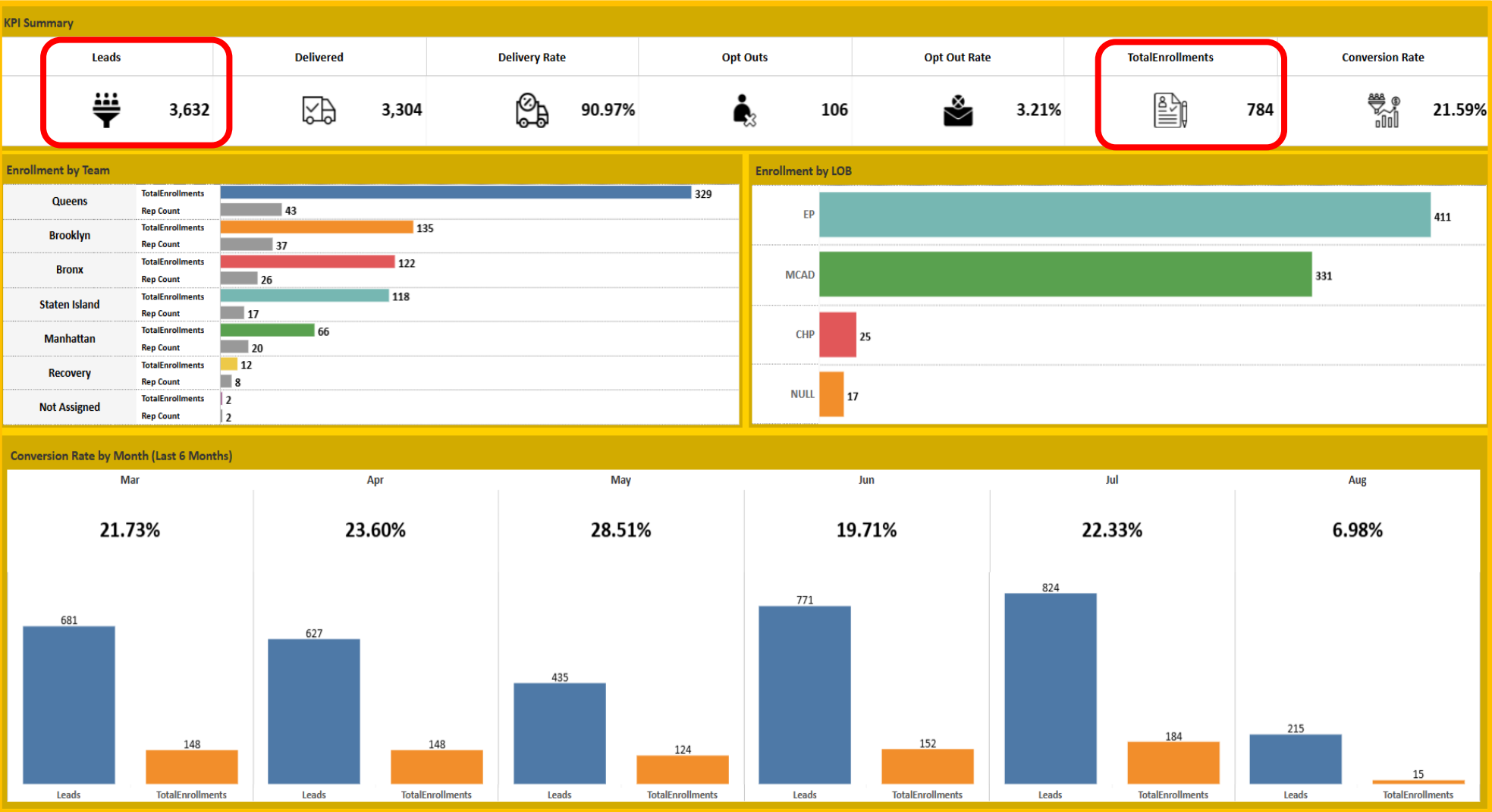
SMS 1, Android phone message

MetroPlusHealth: Hi again, Sofia! Just following up. MetroPlusHealth is proud to support thousands of NYC residents—and I'd love to help you too. ❤️ Learn more: <https://d.sfmsg.co/5pjldTMrL> 📞 Call or text me at [6469835647](tel:6469835647). Text STOP to end messages. Msg&Data rates may apply.

SMS 5, Android phone message

- Built a NEW connected lead-to-enrollment journey.
- Automated outreach to member prospects: 5 SMS messages sent over 10 days.
- **Since launch, +21% conversion rate** from lead to enrollment!

NEW | ENROLLMENT BASED PERFORMANCE DASHBOARD



- **First enterprise-wide view of acquisition performance** from lead generation to enrollment across regions and LOBs.
- **Faster, data-driven decision-making** through automated reporting.

COMING SOON | FORMASSEMBLY

What is it?

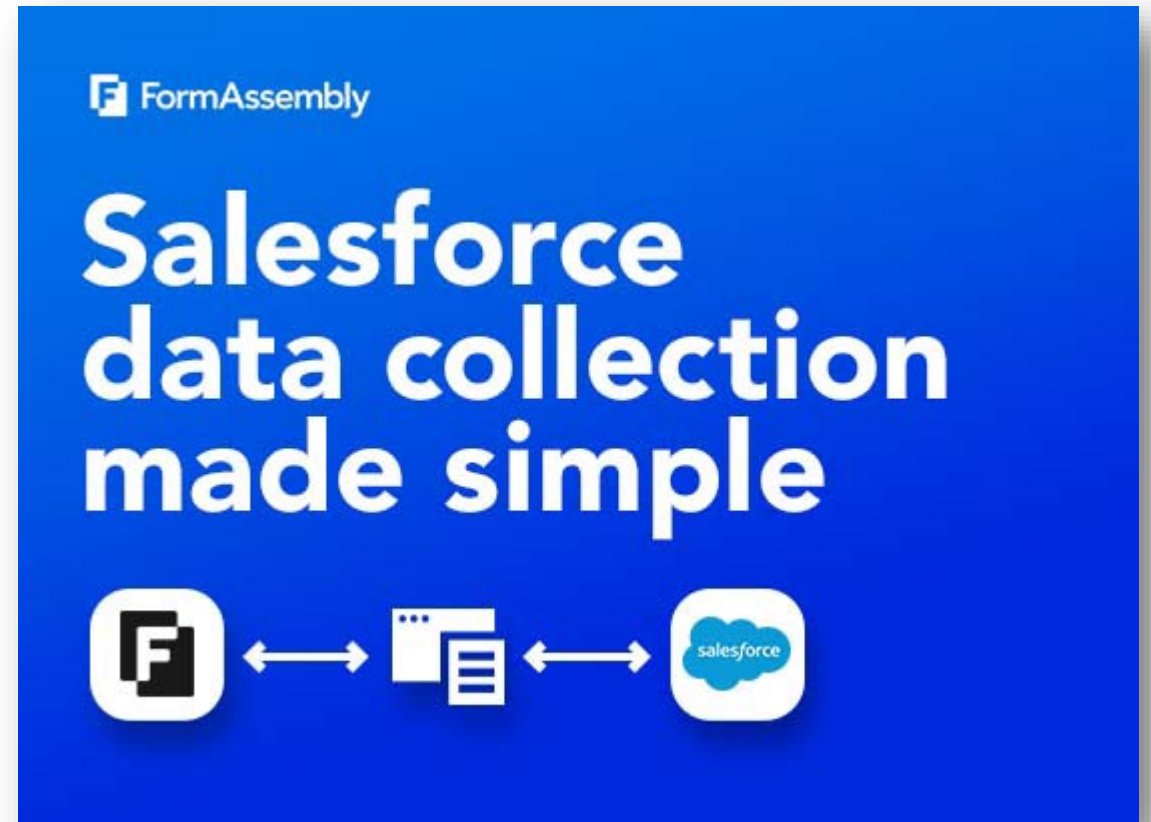
A secure, platform that streamlines information collection and document processing through Salesforce integration.

What is the key benefit?

- Faster, more accurate data collection.

How will we use it?

- **Recertification document collection!**
Useful with new frequency requirements.
- **Capture leads at events!** And deliver timely follow up, and measure results to improve future engagement.



Gold Signature Experience Go-Live Update

Sudha Chatterji

Senior Director of Customer Experience

Wednesday, September 16th, 2026



GOLD SIGNATURE EXPERIENCE

LIVE • August 31, 2026

EXPANSION SCOPE

Expanding from pilot (new members) to full concierge service for all new and existing Gold and Gold Care members — a one-stop, on-demand experience focused on education, experience, and retention.

FINAL LAUNCH MILESTONES

Soft launch • 29 Aug



Full go-live • 31 Aug

Launch monitoring begins at go-live

SERVICE PILLARS



Comprehensive Case Management Approach

- End-to-end support for new members
- Clear introduction and explanation of covered benefits
- ID Card request
- Eligibility inquiries



Access & Digital Support

- Assistance with member portal access: sign-on and password resets.
- Member Rewards assistance
- Support for access requests and troubleshooting.



Provider & Care Navigation

- Provider Participation & Network inquiries.
- PCP selection and change support
- Appointment scheduling assistance

READINESS & ACTIVATION PLAN |

READINESS COMPLETE; FIRST 30-DAY FOCUS SET



ON TRACK

FINAL LAUNCH MILESTONES

Soft launch • 29 Aug



Full go-live • 31 Aug

Launch monitoring begins at go-live

COMPLETED

GO-LIVE READINESS

- ✓ **SOW**
Executed 17 Jun
- ✓ **Equipment deployment**
Complete
- ✓ **Shadowing**
Complete
- ✓ **Hiring & onboarding**
Complete
- ✓ **Training**
Complete 20 Jul–6 Aug
- ✓ **Operational readiness**
Complete

UNDERWAY

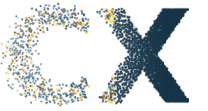
MONITORING & EXECUTION

- 1 **Stabilize operations**
Track service levels, staffing and escalations.
- 2 **Validate member experience**
Monitor utilization, satisfaction and issue resolution.
- 3 **Report the first 30 days**
Early performance readout to leadership.

PROMOTIONAL COMMUNICATIONS STATUS: Targeting go-live by 9/15/26

- 1 **Benefit Manager Outreach**
- 2 **Member Communications**
- 3 **Go-Live SMS Campaign**

CX Insights | YTD Overview



EXPERIENCE MATTERS

In a competitive marketplace, EXPERIENCE is a key differentiator.

Currently, CX Team monitors the pulse of our members with a Longitudinal Survey, After-call Survey, Disenrollment Survey and ad hoc research.

80%

say experience matters as much as products and services.

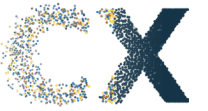
85%

expect consistent interactions across departments.

29%

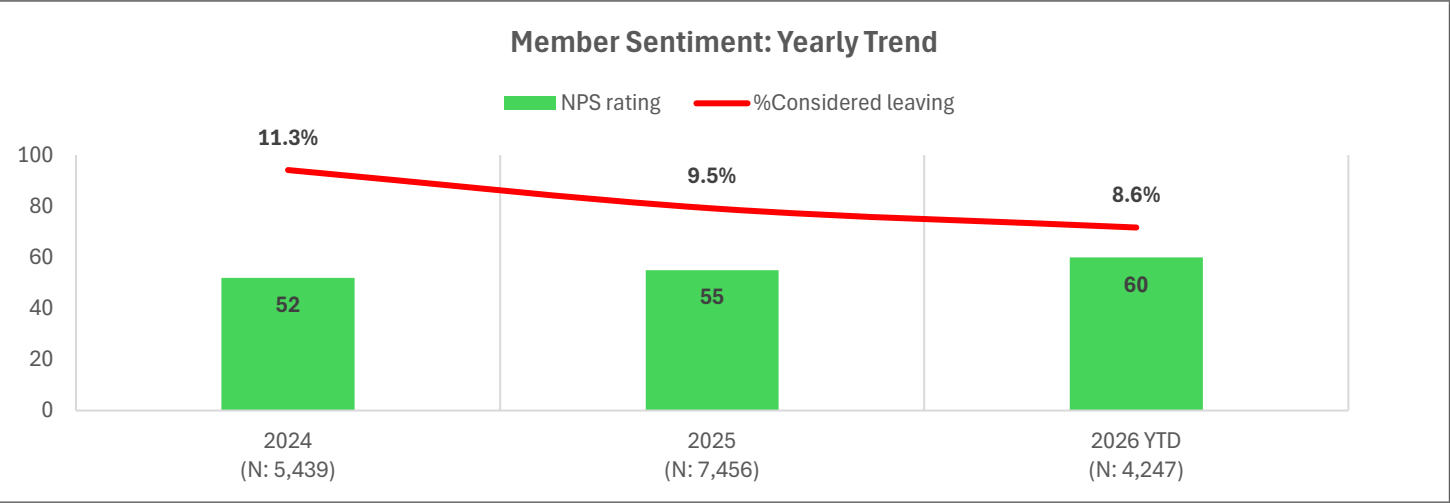
stopped using a brand because of poor customer experience.

Sources: Salesforce, State of the Connected Customer; PwC, Customer Experience Survey; MetroPlusHealth GOLD Retention Strategy & Insights and Gold Member Disenrollment Survey, 2026.



LONGITUDINAL SURVEY | MEMBER SENTIMENT

ADVOCACY AND RETENTION SENTIMENT



Core experience measure	2024	2025	2026 YTD	Change vs. 2024
Customer service is easy to reach	83.2%	85.9%	86.9%	+3.7
Representatives are helpful	85.8%	88.1%	89.0%	+3.2
Easy to find a primary care doctor	78.4%	79.6%	81.2%	+2.8
Easy to find a specialist	71.3%	73.0%	75.3%	+4.0

Longitudinal member survey. Bases: 5,439 / 7,456 / 4,247. Top-two-box.

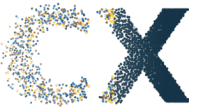
Bottom line

Timely access to PCPs and Specialists drive retention.

WHAT STANDS OUT

▲ NPS 60, up 4 points vs 2025

- Up 8 points since 2024, rising in every wave.
- 8.6% considering another plan (down from 11.3% in 2024).
- Specialist access is the weak point at 75.3%, despite the largest gain.



SENTIMENT REPORTING | 2026 YTD

RELATIONSHIP

NPS 60

▲ +5 vs 2025

SERVICE

NPS 69

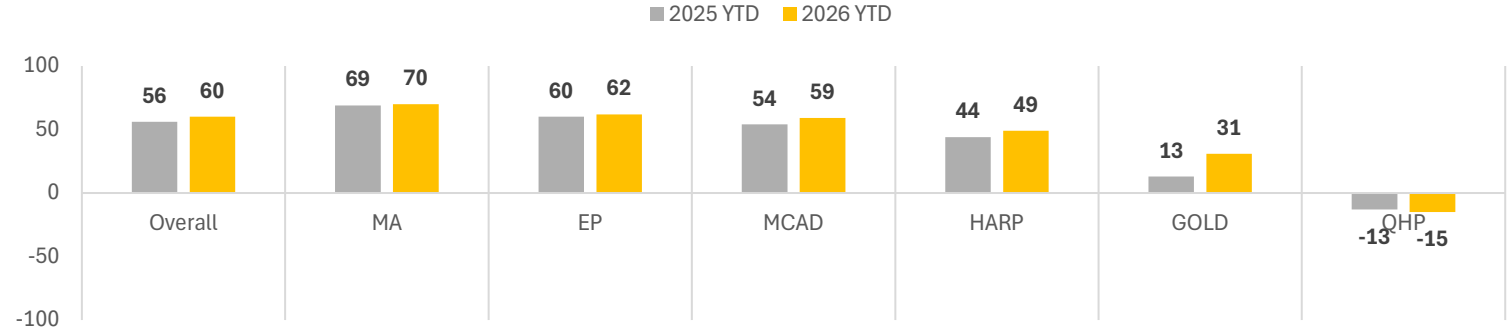
▲ +11 vs 2025

CONSIDERING LEAVING

8.6% of members surveyed

▼ down from 9.5%

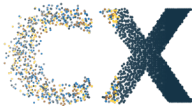
NPS: 2025 YTD vs. 2026 YTD



Time period: responses collected January through July 2025 compared with January through July 2026, so both years cover the same seven-month window. EP and MCAD account for roughly 85% of total responses (3,629 of 4,259), so overall results track closely to those two lines of business. Core experience measures are top-two-box scores: the share of members choosing one of the two most favorable responses (for example, "agree" or "strongly agree").

Members rate our agents highly and the plan relationship far lower. GOLD and QHP are the consistent soft spots.

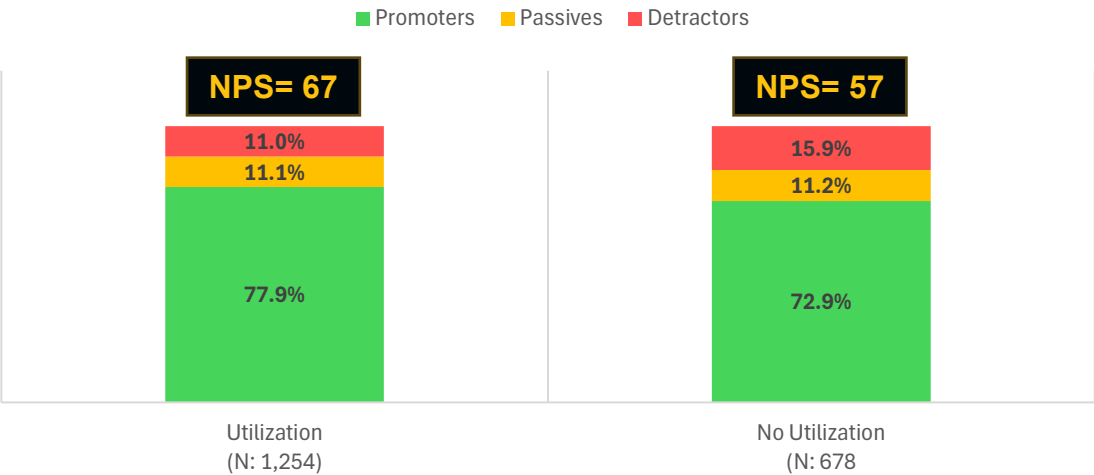
- WHAT STANDS OUT**
- ▲ NPS 60, up 4 points vs 2025
- Every segment improved YOY.
 - Members rate people highly — 89.0% say representatives are helpful, up 0.8 points.
 - Finding a specialist is the weakest measure in every segment, at 75.3% overall.



PCP UTILIZATION

SURVEY ENHANCED MAY 2026 TO TRACK POPULATION VARIANCES

NPS Rating: PCP Utilization vs. No Utilization



Core Experience Measures: PCP utilizers vs. Non-utilizers

Core experience measure	PCP visit	No PCP visit	Difference
Considered leaving the plan	7.6%	11.1%	▼ 3.5 pts lower
Customer service is easy to reach	89.7%	81.5%	▲ 8.2 pts higher
Representatives are helpful	90.5%	85.5%	▲ 5.0 pts higher
Easy to find a primary care doctor	84.6%	76.0%	▲ 8.6 pts higher
Easy to find a specialist	77.5%	71.4%	▲ 6.1 pts higher

+10 pts

NPS 67 vs. 57

-3.5 pts

Considered leaving

Why this matters

The clearest loyalty signal in the data — members with a PCP visit score higher on every measure.

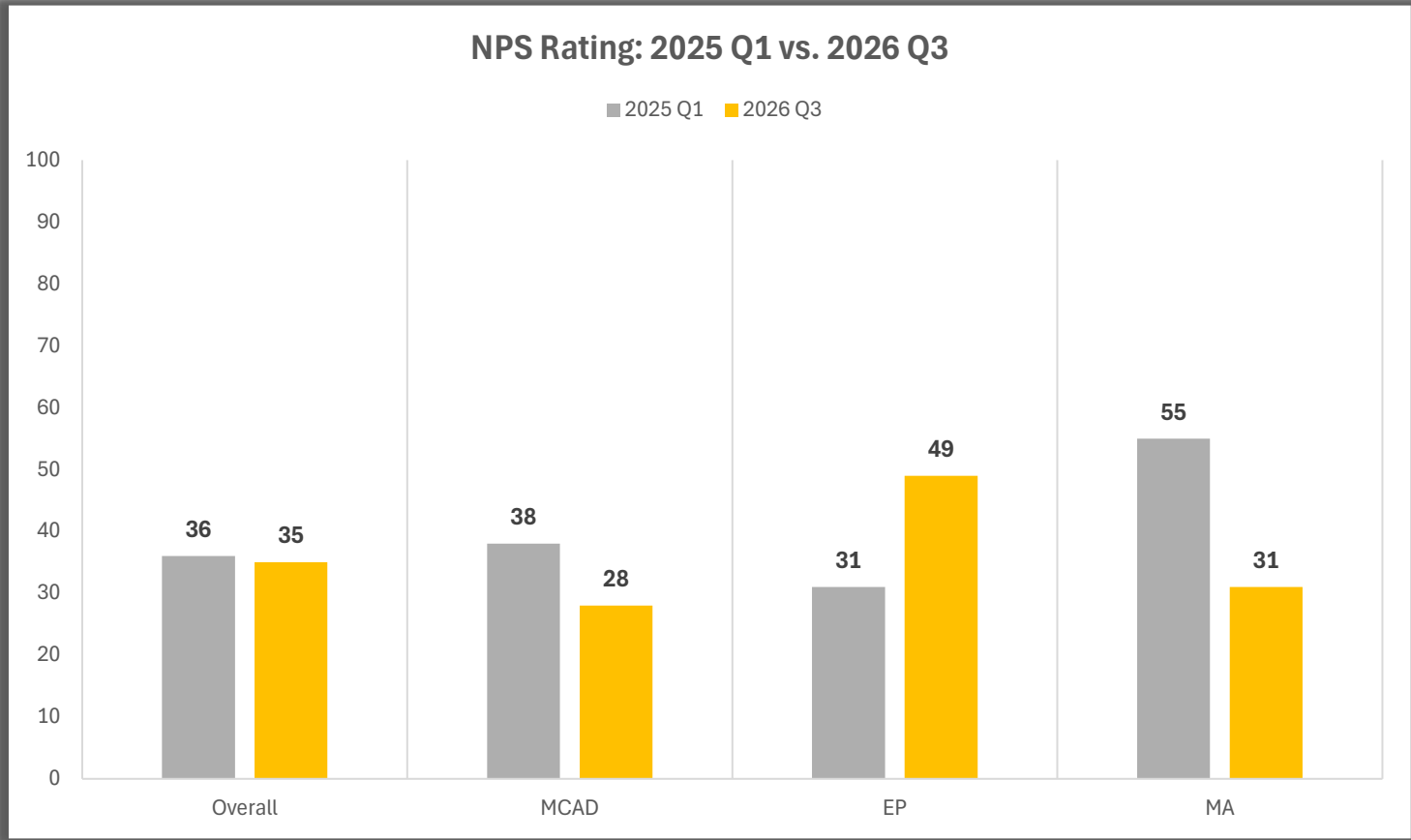
The impact of helping members use their PCP

- A first visit likely turns coverage into a care relationship.
- Access, service and referrals all score 5–9 points higher.
- Connected members are a third less likely to consider leaving.

Note: May–July responses only, when the PCP utilization flag went live. All LOBs.

DENTAL SURVEY | 2026 Q3

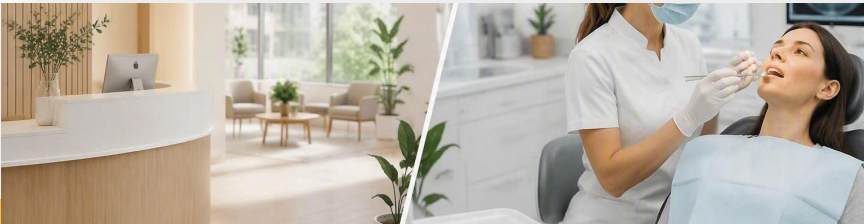
NPS STEADY AT 35, WITH ACCESS TO DENTISTS THE MAIN CONSTRAINT



Results are directional: Medicare falls below 30 responses on several measures (n=42). Experience scores are top-two-box.

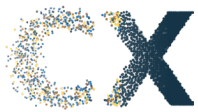
THE ACCESS EXPERIENCE

- Dental experience is increasingly constrained by network adequacy and appointment access.
- EP is now our strongest performing LOB, up 18 points to NPS of 49, while MCAD fell 10 points to 28.
- **48.6% of members** find it easy to locate an in-network dentist (**EP 53.2%; MCAD 46.0%**).
 - **56.4%** of members rate making an appointment easy (**EP 62.1%; MCAD 53.3%**)
 - **32%** of Members identify “coverage gaps” as their main frustration (up from 29% in 2025 Q1).
 - ***Note:** we currently do not have additional data on what “coverage gaps” members are referencing.*

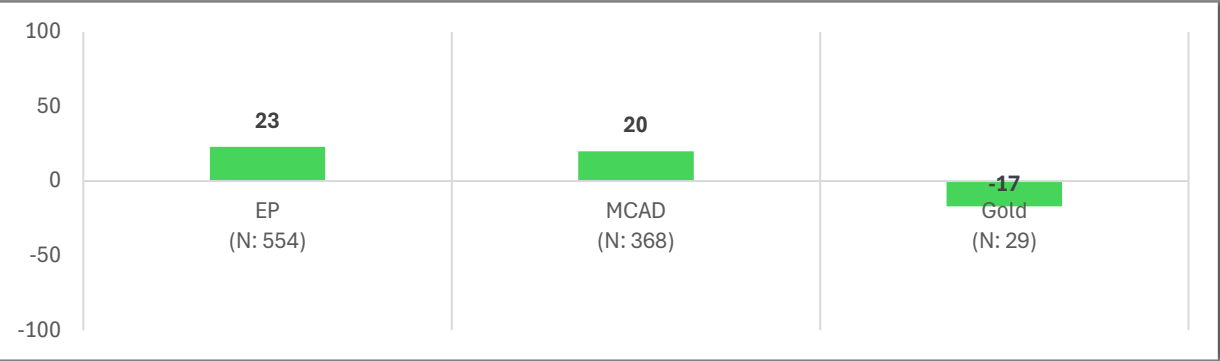


DISENROLLMENT SURVEY | WHY MEMBERS LEAVE

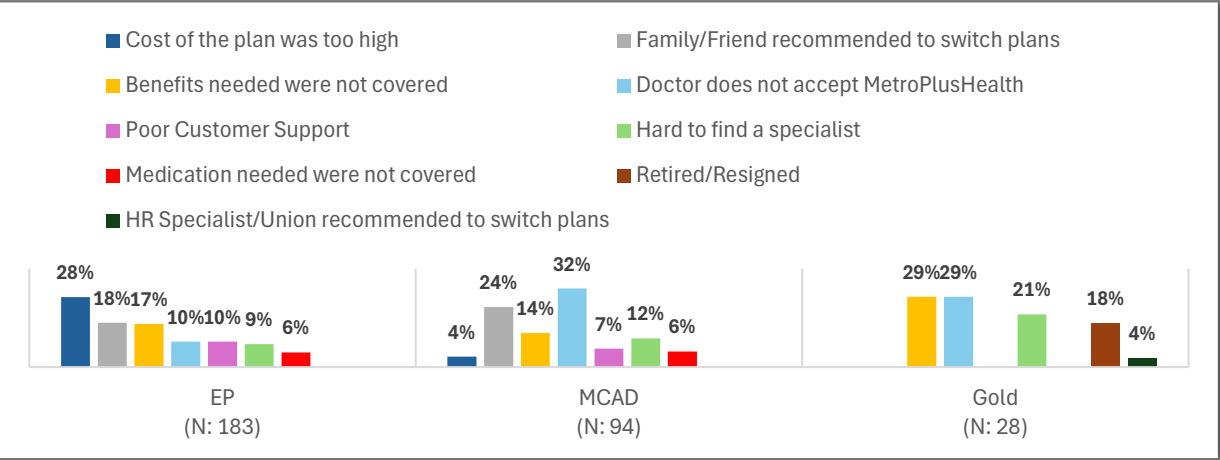
COST DRIVES ESSENTIAL PLAN EXITS; NETWORK ACCESS DRIVES MEDICAID EXITS



DISENROLLMENT NPS BY LINE OF BUSINESS



REASONS FOR LEAVING THE PLAN



Disenrollment survey. Results are 2026 YTD (January–July).

Sample sizes are low and responses are difficult to fully vet at this time.

- **28%** of EP leavers cite cost (the perception of cost) as their top reason, versus 4% of MCAD leavers.
- **32%** of MCAD leavers cite doctor acceptance as their top reason for leaving the plan
- **-17 NPS** among Gold leavers, the only negative LOB versus +23 EP and +20 MCAD.

STRATEGIC PRIORITIES | TURNING INSIGHTS INTO ACTION



1

Improve Specialist Access

THE EVIDENCE

Weakest measure in every segment — 75.3% overall, 61.3% in GOLD

THE ACTION

Expand capacity in high-demand specialties, starting with dental.



2

Increase PCP Engagement

THE EVIDENCE

Members who saw a PCP scored 10 points higher on NPS

THE ACTION

Launch targeted journeys to drive first PCP visits.



3

Focus on Emerging Risk Segments

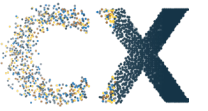
THE EVIDENCE

GOLD sentiment fell in Q2, concentrated in ages 30–44

THE ACTION

Address GOLD members ages 30–44 and EP affordability perceptions.

NPS 60 · switching intent 8.6% — the base we're protecting.



EVOLVING OUR EXPERIENCE MEASUREMENT STRATEGY

Strategic shift "Was the member satisfied?" to "How strong is the relationship, and what does it predict?"

CURRENT STATE

Survey-led

- NPS, CSAT and service experience
- Broad pain points
- Reported by survey or touchpoint

4 ONGOING

- Longitudinal survey
- After-call survey
- Disenrollment survey
- Dental experience survey
- + other ad hoc

LIMITATIONS

Insight gaps limit action

- Satisfaction does not explain trust, loyalty or retention.
- Limited root-cause and cross-journey insight.
- Weak link to behavioral and business outcomes.

EVOLVING STRATEGY

Relationship and outcome focused

- Add trust, loyalty and switching intent.
- Connect feedback across journeys by member ID.
- Test which experiences drive retention.

4 UPCOMING

- Provider access audits
- GOLD call analysis
- Competitive health plan survey
- Journey measurement strategy

Bottom line

Predictive analytics and the competitor benchmark turn measurement from a scorecard into an early-warning system.

Call Center Performance

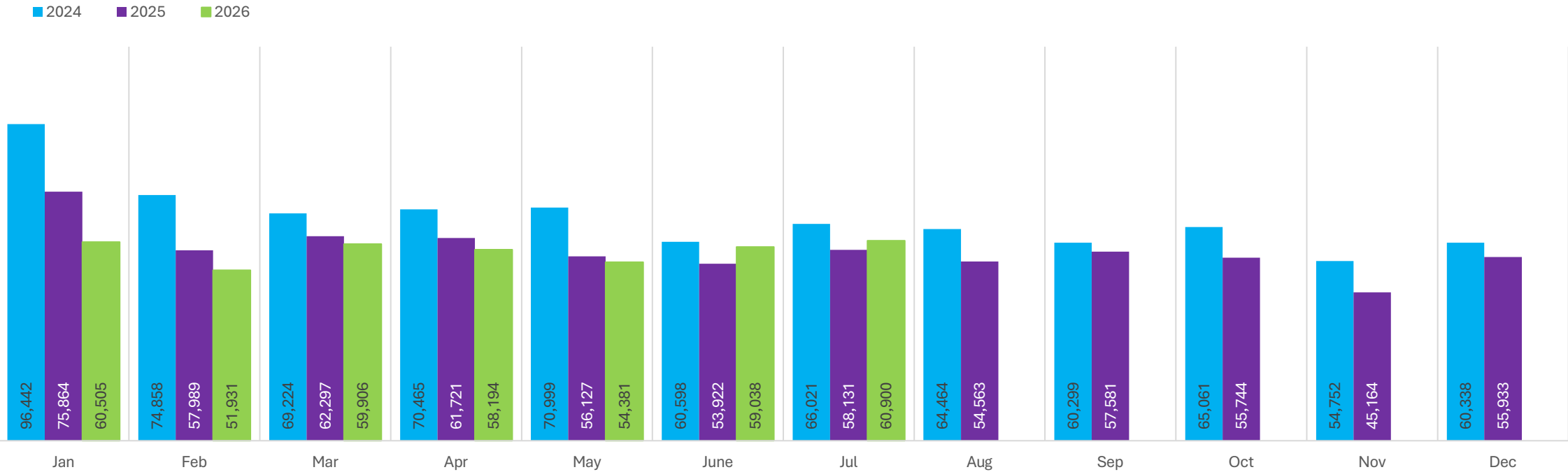
Terri Woodard, Senior Director of Customer Service – Call Center

Lila Benayoun, Chief Operating Officer



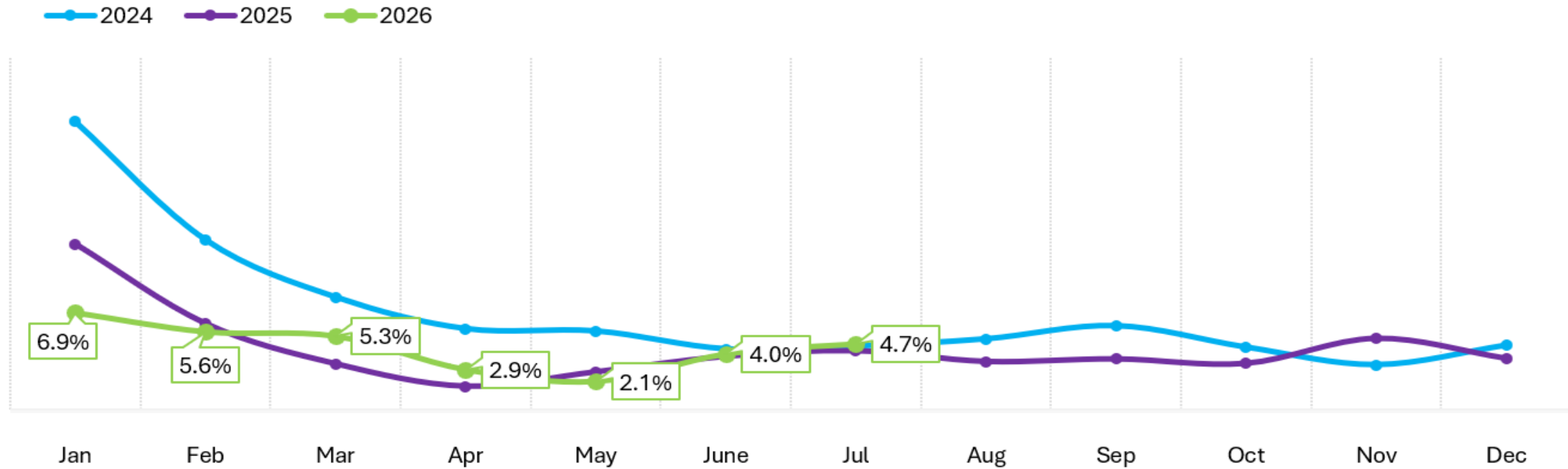
Wednesday, September 16th, 2026

TREND IN CALL CENTER CALL VOLUME | MEMBERS



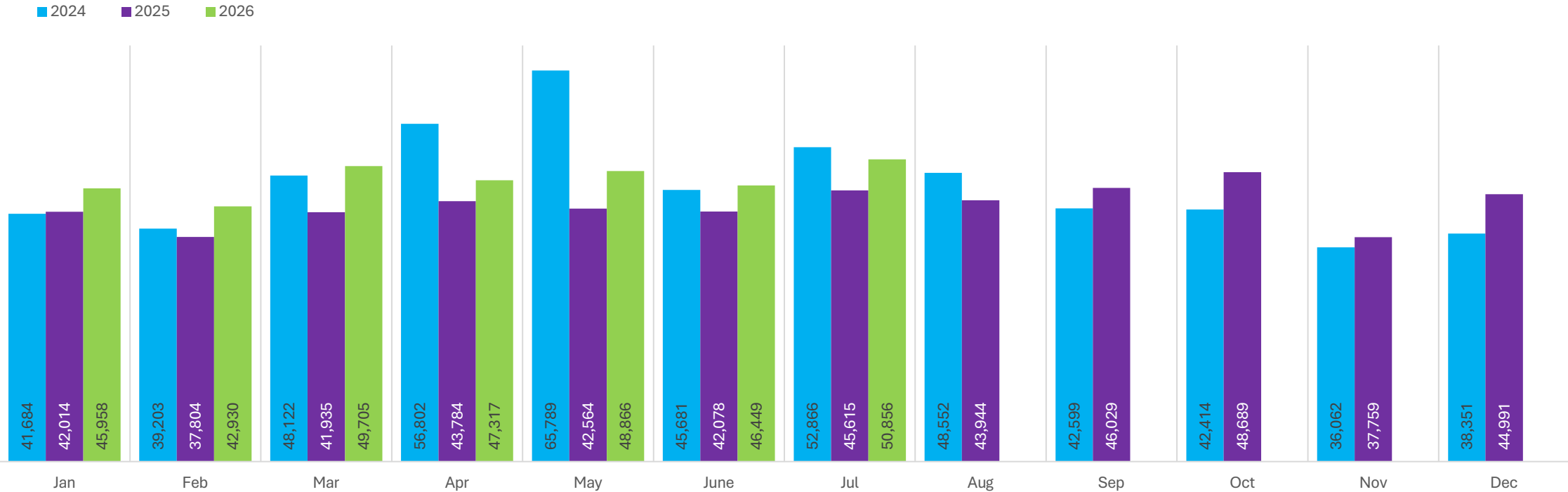
- Member Call Volume remain relatively stable during 2Q26.
- Volume of member communication activity doubled along with sunset of EP5 tier (FPL 200-250) drove slight uptick for month of July.

ABANDONMENT RATE | MEMBERS



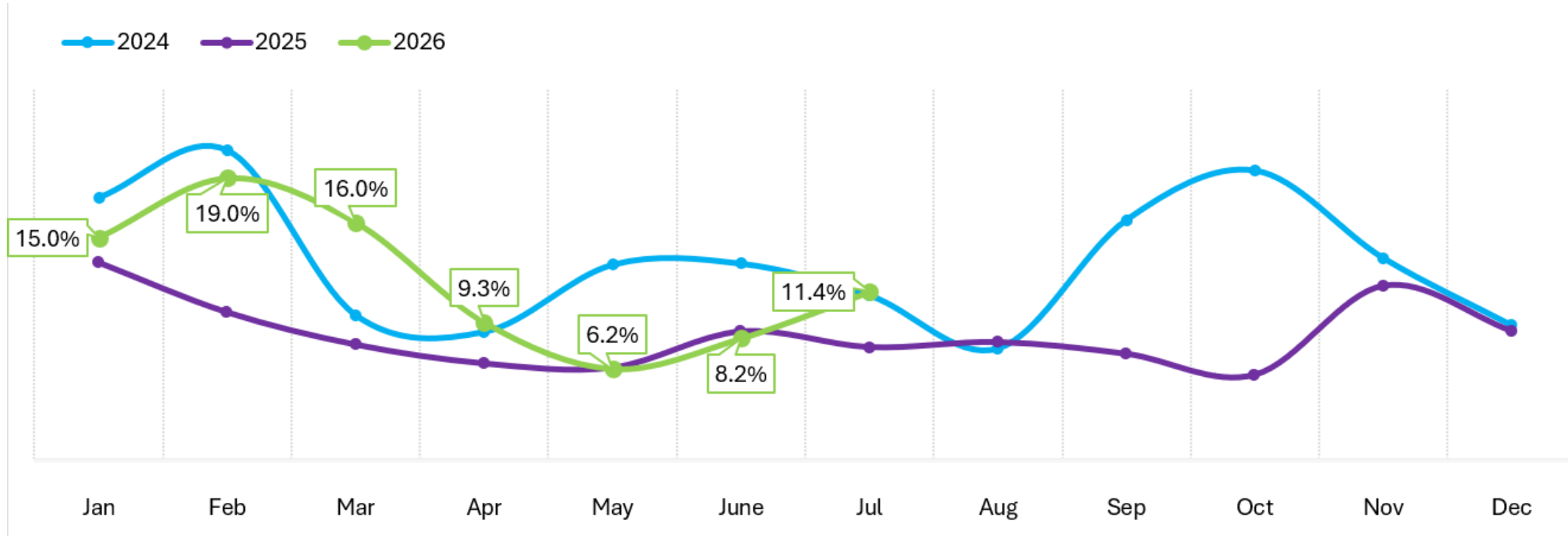
- Member abandonment remain stable at <5% during 2Q26.
- Continue to make operational improvements to increase 1st call resolution and member experience by introducing new AI support tools.

TREND IN CALL CENTER CALL VOLUME | PROVIDERS



- Provider call volume remain stable with slight uptick in July.
- Top provider call reasons continue to include Prior Authorization, Claims Status, Eligibility Verification and Benefit Verification.

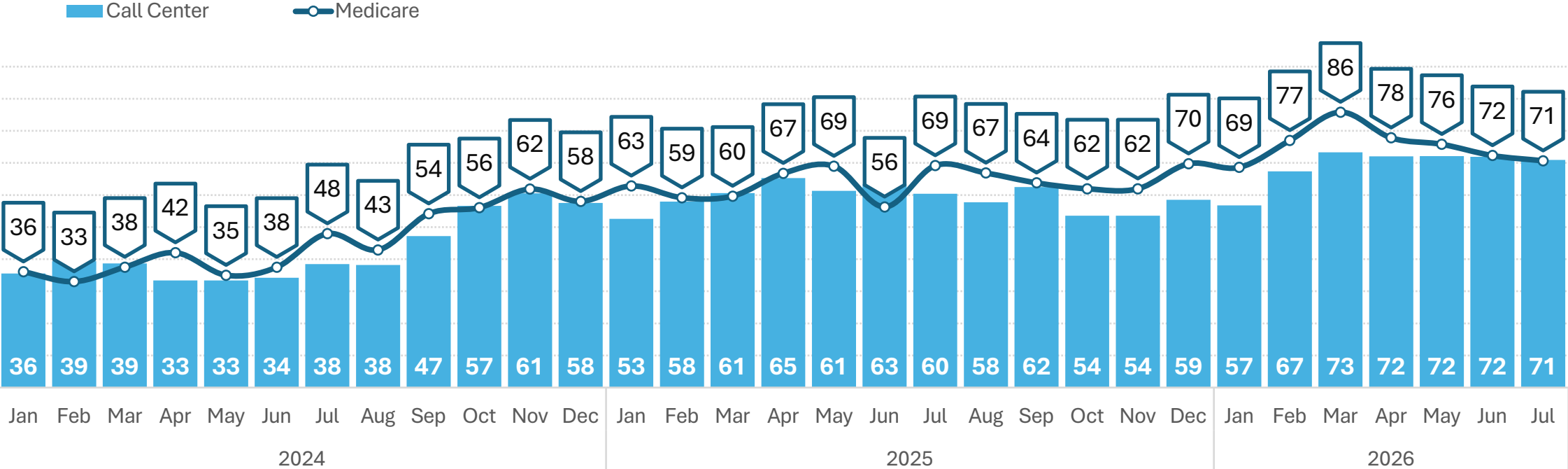
ABANDONMENT RATE | PROVIDERS



- Overall 2Q26 Provider abandonment rate below goal of 10%. Slight uptick in July due to increase call volume, staffing availability, and the need to prioritize member lines during peak periods.
- Discussions ongoing with large Provider regarding their implementation of instituting virtual assistants in replacement of actual resources to perform plan outreach calls.

Quality

NPS



- Call Center NPS continues to remain strong in 2Q26; outperforming industry NPS benchmark reflecting a consistently positive member experience.
- Medicare also remain strong in 2Q26, staff adds in June/July impacted slightly; early reports for August indicates recovery
- Ongoing investments in employee development, quality initiatives, and service improvements continue to support high customer satisfaction and strong Net Promoter Scores across the Call Center.

CS AI Automation

AI-ENABLED SERVICE TOOLS TARGET THREE HIGH-FRICTION CS WORKFLOWS

The goal is faster, more consistent access to information for representatives serving members and providers.

01 Quick Knowledge search

Chatbox to find relevant guidance using logic rather than keyword-only retrieval.

Improve access to updated information across a large content library. Improves CS reps confidence in responding to members/providers quickly and accurately

ETA Launch: September 2026

02 Conversation intelligence

Search call transcripts across applicable teams.

Summarize long calls to identify patterns, coaching opportunities and system gaps.

Launched: July 2026

03 Authorization guidance

Provider Authorization Look Up Tool
Replace reliance on manually searched Excel documents.

Support more current CPT authorization information and reduce outdated-form risk.

Launched: September 2026

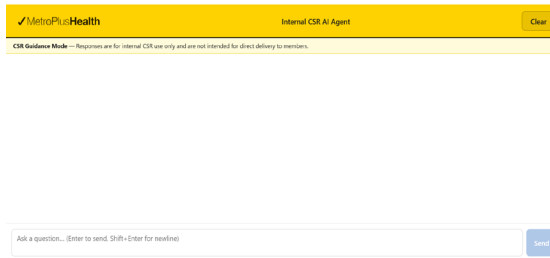
EXECUTIVE TAKEAWAY

Focus AI on practical workflow improvements that strengthen representative accuracy, speed and insight.

THREE USE CASES, ONE SHARED VALUE PROPOSITION

Move from manual, fragmented searching to guided access, broader analysis and more current information.

WIKI SEARCH



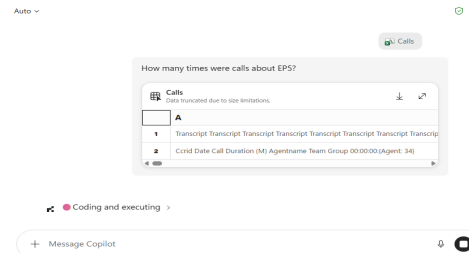
CURRENT

Keyword-driven retrieval across thousands of articles and documents.

AI-ENABLED FUTURE

AI logic surfaces the best response from the available knowledge.

TRANSCRIPT SEARCH



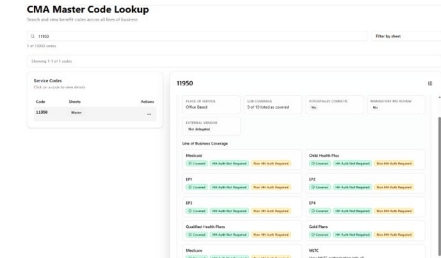
CURRENT

Calls are reviewed individually, and long-call analysis takes significant time.

AI-ENABLED FUTURE

AI identifies trends and summarizes opportunities for coaching and system enhancements.

AUTH SEARCH



CURRENT

Representatives search Excel documents that can become outdated.

AI-ENABLED FUTURE

A regularly updated tool supports more current authorization guidance.

Appendix

CX TEAM 2026 Q2+ ACTIVITIES

GOLD

- **Gold Onboarding Journey** — Launched
- **Gold Member Retention Journey** — In process
- **Gold Concierge Expansion** — On track for Aug. 31 launch, including promotion campaigns
- **Gold Rewards Campaigns** — Launched
- **Gold No-Referrals Specialist Campaign** — Launched
- **Gold Focus Group** — Launched

ESSENTIAL PLAN

- **EP Onboarding Journey** — Launched
- **EP Member Retention Journey** — Kicking off
- **EP Rewards Campaigns** — Launched

MEDICARE

- **Medicare Onboarding Journey** — Relaunch underway
- **Medicare Member Retention Journey** — In process
- **Medicare Age-in Campaign** — Direct mail scheduled for Sept. 1
- **Medicare Countdown Email** — Launch target for Late August

CROSS-PRODUCT & OTHER

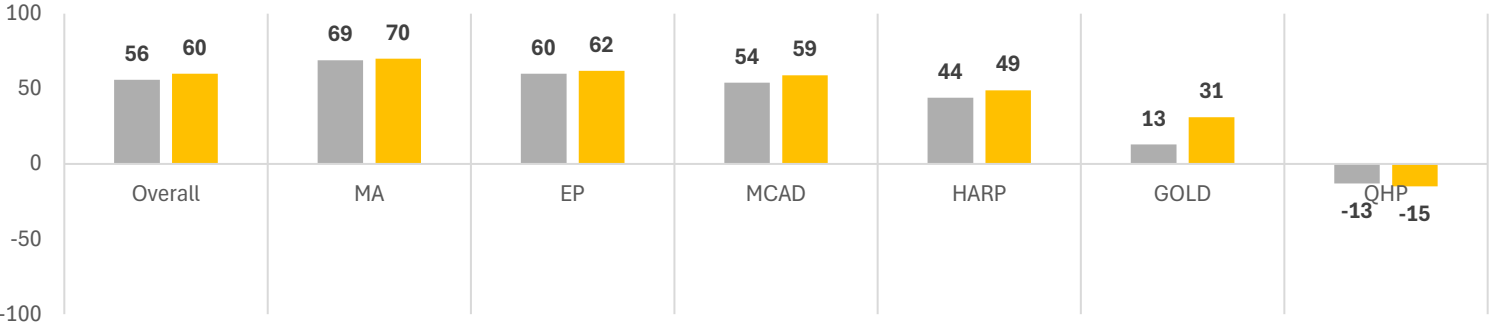
- **Predictive Analytics** — In process
- **Competitive Insights Survey** — In process
- **Secret Shopper** — Provider Directory In process
- **Provider Referral Flow** — Process enhancement
- **HAARP Disenrollment Study** — In process
- **Dental Ad Hoc Survey** — Analysis complete; long-term approach under review
- **CX Insights Enhancements** — In process



LONGITUDINAL SURVEY | MEMBER SENTIMENT TREND

NPS 2025 YTD vs. 2026 YTD

■ 2025 YTD ■ 2026 YTD



Core experience measure	Overall	MA	EP	MCAD	HARP	GOLD	QHP
% Considered leaving	8.6% ▼ -0.7	3.6% ▼ -1.8	7.0% ▼ -1.2	9.1% ▲ +0.2	15.9% ▲ +1.4	23.4% ▼ -3.8	37.0% ▼ -4.0
Customer service is easy to reach	86.9% ▲ +0.9	95.1% ▲ +0.7	89.3% ▲ +1.9	85.9% ▲ +0.9	72.4% ▼ -14.7	72.7% ▲ +6.9	37.0% ▼ -20.0
Representatives are helpful	89.0% ▲ +0.8	96.3% ▲ +1.0	91.5% ▲ +2.4	88.2% ▲ +0.8	72.4% ▼ -16.0	70.5% ▼ -4.5	51.1% ▼ -14.0
Easy to find a primary care doctor	81.2% ▲ +1.5	89.6% ▲ +1.4	81.9% ▲ +1.4	80.5% ▲ +2.1	76.3% ▲ +1.9	70.6% ▲ +1.2	50.0% ▼ -14.6
Easy to find a specialist	75.3% ▲ +2.4	81.3% ▲ +3.3	76.5% ▲ +3.0	74.8% ▲ +2.1	72.4% ▲ +0.9	61.3% ▲ +3.4	44.4% ▼ -4.0

Time period: responses collected January through July 2025 compared with January through July 2026, so both years cover the same seven-month window.
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