2016 BOARD OF TRUSTEES SELF-ASSESSMENT

December 20, 2016

Background

➢**The Engagement.** The North Carolina Department of State Treasurer engaged Segal Consulting to develop and administer a self-assessment process for the current Board of Trustees (the "Board") of the North Carolina State Health Plan for Teachers and State Employees (the "Plan")

➢**Purpose.** The purpose of the self-assessment was to gather input from members of the Board on the performance and development needs of the Board

➢**Assessment Design.** The assessment was a self-assessment by the Board of the Trustees. All Board respondents completed ratings on the same 59 statements and provided open responses for each topic as needed. Eight Board members responded to the self-assessment

➢**This Material.** This report represents Segal Consulting's independent, impartial summary of the eight participating Board members' self-assessment. The report is composed of the following sections:

- *Executive Summary*
- *Detailed Findings*
- *Appendix*

Report Content

Executive Summary
Overarching Findings

The assessment's open responses and the rated statements indicate that the Board members believe that the Board is functioning adequately:

➢ On a four-point scale for each of the five assessed categories (People[1]; Board Role, Accountabilities, Decision Making; Knowledge and Stakeholder Interactions; Board Dynamics; and Meeting Effectiveness[1]), the responses were slightly above a 3 rating ("Agree")

➢ The overall self-assessment rating on the 59 rated statements was favorable. The lowest-rated statements and corresponding ratings were:
  - *Board members effectively use relationships with the General Assembly and the executive branch to share perspectives and further the interests of the State Health Plan (2.20)*
  - *The Board spends at least 75% of the meeting time in constructive discussion (vs. making or listening to presentations) (2.43)*
  - *The Board follows an explicit plan for continuous Board education, development, and performance improvement (2.50)*
  - *All Board members attend all Board meetings (2.57)*

➢ Open responses were consistent with the quantitative rating responses and provided additional context for opportunities for improvement

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[1] Board Structure statement responses and four Meeting Effectiveness statement responses have been reverse coded to reflect intent of statement (i.e., originally a Disagree response for these statements was a favorable response).

Executive Summary
Ratings by Assessed Category

The table below shows a favorable self-assessment for each assessed category (ratings for each of the 59 individual assessed statements are included in the Detailed Findings section of this report)

AVERAGE RATINGS BY CATEGORY

	Board
People	**3.21**
• Board Composition	3.13
• Board Structure and Functioning[1]	3.29
Board Role, Accountabilities, Decision Making	**3.36**
• Roles and Accountabilities	3.41
• Decision Making	3.32
Knowledge and Stakeholder Interactions	**3.00**
• Board Expertise	3.02
• Stakeholder Interaction	2.98
Board Dynamics	**3.13**
• Board Interpersonal Interactions and Engagement	3.37
• Board Development	2.89
Meeting Effectiveness[1]	**3.00**

Key: 1 – Strongly Disagree   3 – Agree
2 – Disagree   4 – Strongly Agree

[1] Board Structure statement responses and four Meeting Effectiveness statement responses have been reverse coded to reflect intent of statement (i.e., originally a Disagree response for these statements was a favorable response).

Executive Summary
Three Opportunities for Improvement

The following opportunities emerged from the quantitative rating assessment and Board member open responses:

1. **Board Education and Development Plan.** Create an explicit, continuous Board member education and development plan. In particular, focus on the gaps of expertise, knowledge, and currency for those who don't work in the healthcare industry. Enhance the onboarding program for new Board members

2. **Meeting Efficiencies.** Introduce efficiencies in the meeting structure and processes

   - **Agendas.** Before the start of each year, create formal agendas and meeting calendars. Tighten agenda contents. Use meeting time more efficiently and effectively by focusing on strategic priorities and key decisions required of the Board. Include fewer topics, thus allowing time for more in-depth discussion. Do not spend time on presentations for FYI topics where no Board action is required. Include time to examine outcomes of past decisions as a means to improve future decision making

   - **Board Materials.** Provide meeting materials to Board members with adequate time for the Board to review in advance and formulate questions that need to be addressed

3. **Stakeholder and Staff Interactions.** Cultivate individual Board member and Executive Administrator networks to "hear the voice" of the stakeholder community and with the intent of advancing the strategic priorities of the Plan. Create more planned interaction between the Board and Plan staff outside of regular Board meetings

Detailed Findings
#1 People

➢ **Rated Statements[1].** Overall rating for this category was 3.21. The lowest rated statements in this category (3.00) focused on the Board member roles and accountabilities as well as the Board member selection process

➢ **Open Responses[2].**

- There is general consensus among Board members that the current Board composition is effective, the Board is the appropriate size, and that, on the whole, Board members are committed

- Concerns raised included:
  - Attendance/participation issues in the past year
  - Newer Board members lack experience and familiarity with the Board functioning
  - Some nominating organizations have removed Board members before the end of their terms
  - Lack of clarity about how the Board member selections are made and whether the best talent is sought through the current process

➢ **Opportunities for Improvement.** Address the attendance and participation issues (perhaps through meeting redesign). Clarify the authority of nominating organizations to remove a Board member before the end of the term. Create/update Board member profile
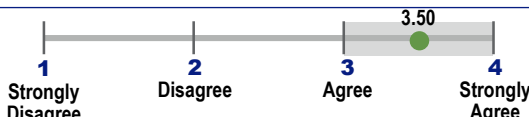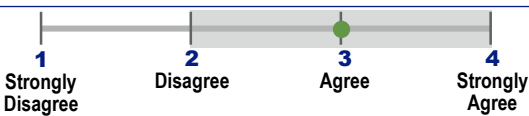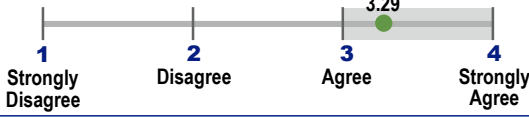
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[1] Board Structure statement responses have been reverse coded and have had "not" added to reflect intent of statement (i.e., originally a Disagree response for these statements was a favorable response).

[2] This section is a summary of the most relevant themes from the open-ended question.

Detailed Findings
#1 People: Ratings

			Board of Trustees	Number of "No Opinion" Responses
		Overall Average Section Rating	**2.42**	**7**
Board Composition	Q1	All current Board members bring demonstrated value to the Board through deep and relevant professional experience, critical relationships in the business/public sector communities, and/or unique functional skills or industry expertise		1
	Q2	The current composition of the Board results in a productive mix of cross-disciplinary perspectives and provides insights on critical issues and decisions	3.50	0
	Q3	Board members are selected based on explicitly defined skills, expertise, and other qualifications		1
	Q4	The skills, expertise, and other qualifications of current Board members are consistent with the selection criteria	3.14	1
	Q5	The current Trustee selection criteria describe the talent required to address the State Health Plan's challenges during the next 3-5 years		2
		Overall Average Sub-Section Rating	**3.13**	**5**
Board Structure and Functioning	Q1	The Board is not too small to get all required work done efficiently[1]	3.29	1
	Q2	The Board is not too large to be effective[1]	3.29	1
		Overall Average Sub-Section Rating	**3.29**	**2**

Scale for each: 1 Strongly Disagree, 2 Disagree, 3 Agree, 4 Strongly Agree

■ = Response Range   ● = Average of Responses

Segal Consulting

Detailed Findings
#2 Board Role, Accountabilities, Decision Making

➤ **Rated Statements.** Overall rating for this category was 3.36. All statements in this category received a 3 ("Agree") or greater rating. There were some "disconnects" in responses. For instance, one of the highest rated statements, at 3.63, was *"I am fully conversant on my role, accountabilities, and responsibilities as a Board member."* This contrasts with one of the lowest rated statements, at 3.17, *"All Board members understand their role, accountabilities, and responsibilities"*

➤ **Open Responses[1].**

- Difficult for the Board to understand all of the necessary detail needed to achieve the current three Strategic Plan priorities

- Appearance that some Board members feel more accountable to their nominating organization than to the Plan

- Desire to receive meeting materials further in advance of Board meetings so that meetings themselves can be focused on the most important information

- Desire for more information on the outcomes of pilots and past decisions from the Plan staff so that the Board is able to make more results-based decisions

➤ **Opportunities for Improvement.** Provide Board materials further in advance to allow Board members to better prepare for a productive discussion and decision making. Regularly review past decisions and outcomes so as to improve future decision making

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[1] This section is a summary of the most relevant themes from the open-ended question.

Detailed Findings
#2 Board Role, Accountabilities, Decision Making: Ratings

			Board of Trustees	Number of "No Opinion" Responses
		Overall Average Category Rating	3.36	13
Roles and Accountabilities	**Q1**	The Board has a clearly articulated charter and policies that guide its activities and decisions	3.67	2
	Q2	The Board regularly reviews its charter and policies and updates its governance practices/protocols in order to better serve State Health Plan members and other stakeholders	3.17	2
	Q3	All Board members understand their role, accountabilities, and responsibilities	3.17	2
	Q4	I am fully conversant on my role, accountabilities, and responsibilities as a Board member	3.63	0
		Overall Average Sub-Section Rating	3.41	6

Scale for each question:
1 Strongly Disagree — 2 Disagree — 3 Agree — 4 Strongly Agree

■ = Response Range   ● = Average of Responses

Detailed Findings
#2 Board Role, Accountabilities, Decision Making: Ratings
continued

			Board of Trustees	Number of "No Opinion" Responses
		Overall Average Category Rating	**3.36**	**13**
Decision-Making	Q1	The Board's decision-making reflects a robust understanding of its legal, fiduciary, and fiscal obligations to State Health Plan members and other stakeholders	3.43	1
	Q2	The Board has a defined and productive process for making decisions	3.14	1
	Q3	The Board's current decision-making process is helpful in facilitating the speed and quality of the Board's decision making	3.17	2
	Q4	I understand the Board's decision-making process and protocols	3.67	2
	Q5	Board meetings focus on prospective decisions to address the State Health Plan's challenges rather than retrospective reviews of outcomes of past decisions	3.14	1
	Q6	The activities and decision-making of the Board primarily focus on the State Health Plan's three main strategic priorities (Improve Members' Health, Improve Members' Experience, Ensure a Financially Stable State Health Plan)	3.38	0
		Overall Average Sub-Section Rating	**3.32**	**7**

Rating scale: 1 Strongly Disagree, 2 Disagree, 3 Agree, 4 Strongly Agree

■ = Response Range   ● = Average of Responses

Segal Consulting

Detailed Findings
#3 Knowledge and Stakeholder Interactions

➤ ***Rated Statements.***

- This category tied the Meeting Effectiveness category for having the lowest overall rating (3.00) of all the categories in the self-assessment

- There was a large range of responses (from 1 to 4, "Strongly Disagree" to "Strongly Agree") regarding "*The full Board has the necessary knowledge of the healthcare industry and the associated economics to effectively fulfill its role,*" which had a low average rating of 2.88

- Even lower average ratings were given for having the necessary resources for decision making (2.71), sufficiency of interaction with stakeholders (2.71), effective balancing of differing stakeholder expectations (2.71), and the effective use of *"relationships with the General Assembly and the executive branch to share perspectives and further the interests of the State Plan*" (2.20), the lowest score in the total assessment

Detailed Findings
#3 Knowledge and Stakeholder Interactions continued

➢ ***Open Responses[1].***

- Focus of the Board changes drastically based on mandates from the General Assembly. Difficult to balance immediate mandates with long-term strategic priorities

- Lack of clear and timely information from the State legislature makes decision making more difficult. Desire for more in-person interaction with the legislature, members, providers, and other stakeholders

- Not all Board members have the necessary knowledge of the healthcare industry and the associated economics to effectively fulfill their role

- Plan staff has worked very hard to keep Board members informed and provide the Board with the appropriate information and benchmarks

➢ ***Opportunities for Improvement.***
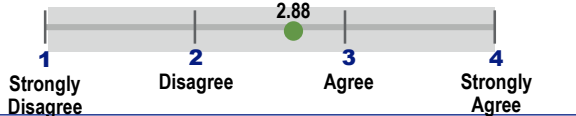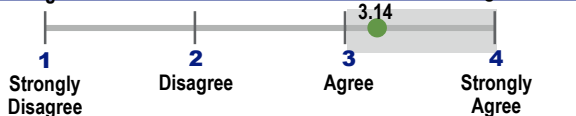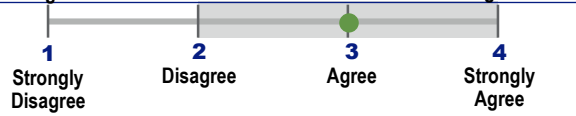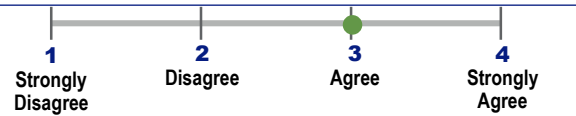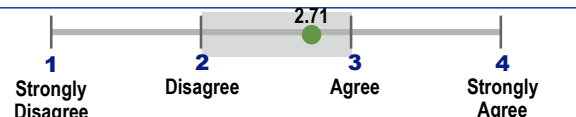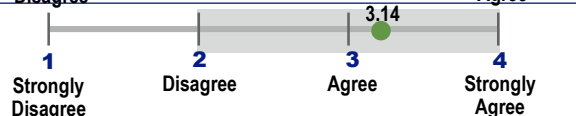
- Create formal trainings to continually update the Board's knowledge of the healthcare industry and associated economics

- Plan additional interactions with State Health Plan stakeholders to more effectively understand and address the differing expectations of State Health Plan members, the General Assembly, and other stakeholders

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[1] This section is a summary of the most relevant themes from the open-ended question.

Detailed Findings
#3 Knowledge and Stakeholder Interactions: Ratings

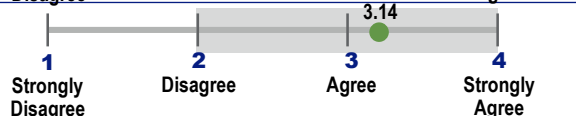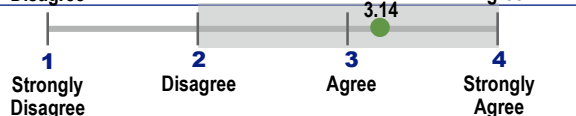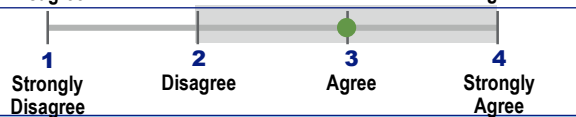|			Board of Trustees	Number of "No Opinion" Responses
		Overall Average Category Rating	**3.00**	**18**
Board Expertise	Q1	The full Board has the necessary knowledge of the healthcare industry and the associated economics to effectively fulfill its role	2.88	0
	Q2	I have the expertise and knowledge of the healthcare industry and the associated economics to effectively fulfill my role as Board member	3.14	1
	Q3	New Board members receive the "on-boarding" preparation they need to be able to immediately contribute to the Board's activities and decision-making		1
	Q4	The Board is provided with sufficient market trend updates and on-going education in order to successfully fulfill the expectations for the role		2
	Q5	The Board has the necessary resources to make the decisions asked of it by the State legislature	2.71	1
	Q6	I feel comfortable explaining the details of the State Health Plan options to others	3.14	1
	Q7	I have the necessary knowledge of healthcare policy and system levers to be able to effectively contribute to the design and evaluation of State Health Plan programs	3.14	1
	Q8	The full Board has the necessary knowledge of healthcare policy and system levers to be able to effectively contribute to the design and evaluation of State Health Plan programs	3.14	1
	Q9	Board members always have adequate pre-meeting time to review materials about which they will make decisions		0
		Overall Average Sub-Section Rating	**3.02**	**8**

Scale for each question: 1 = Strongly Disagree, 2 = Disagree, 3 = Agree, 4 = Strongly Agree

■ = Response Range   ● = Average of Responses

Detailed Findings
#3 Knowledge and Stakeholder Interactions: Ratings continued

			Board of Trustees	Number of "No Opinion" Responses
		Overall Average Category Rating	**3.00**	**18**
Stakeholder Interaction	Q1	The Board has sufficient interaction with State Health Plan stakeholders to inform goals and key decisions	2.71	1
	Q2	The Board has sufficient interaction with State Health Plan staff members to gain necessary understanding of implications of potential decisions, industry changes, and other considerations	(range ~2–3)	1
	Q3	The Board has sufficient interaction with the Executive Administrator to gain necessary understanding of key issues and opportunities for the State Health Plan	3.43	1
	Q4	Board members effectively use relationships with the General Assembly and the executive branch to share perspectives and further the interests of the State Health Plan	2.20	3
	Q5	The Board effectively balances the differing expectations of State Health Plan members, the General Assembly, and other stakeholders	2.71	1
	Q6	The Board effectively utilizes State Health Plan staff to achieve the strategic priorities of the State Health Plan (Improve Members' Health, Improve Members' Experience, Ensure a Financially Stable State Health Plan)	(range ~2–3)	1
	Q7	State Health Plan staff is responsive to Board requests for support and information	3.38	0
	Q8	State Health Plan staff appropriately informs the Board of externalities the staff is not able to affect	3.43	1
	Q9	State Health Plan staff makes appropriate use of the Board for strategic decision-making	(range ~2–3)	1
		Overall Average Sub-Section Rating	**2.98**	**10**

Rating scale: 1 Strongly Disagree, 2 Disagree, 3 Agree, 4 Strongly Agree

■ = Response Range   ● = Average of Responses

Detailed Findings
#4 Board Dynamics

➢ ***Rated Statements.***

- Overall rating for this category was 3.13

- The strong ratings with respect to Board interpersonal interactions and engagement were dragged down by low ratings associated with Board development, in particular the 2.50 rating to the statement "*The Board follows an explicit plan for continuous Board education, development, and performance improvement*"

➢ ***Open Responses[1].***
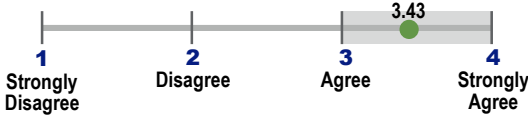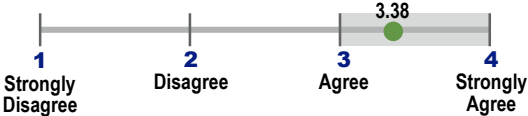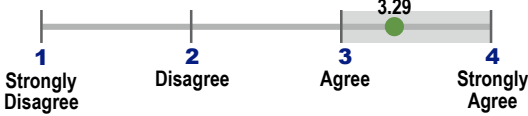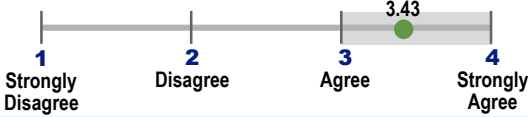
- Lack of a defined plan for Board learning and development

- Desire for a more formal onboarding program and ongoing Board training. Board members find it challenging to have the time to educate themselves about all the aspects of the work given many Board members have full-time jobs

- Vendor presentations vary in quality; preference is to interact with vendors during meetings and ask specific questions of them based on materials received and reviewed in advance of Board meetings

➢ ***Opportunities for Improvement.*** Create a formal onboarding program and ongoing Board learning and development process. Provide Board materials and vendor presentation documents further in advance of meetings (see also opportunities identified in the study category #3, Knowledge and Stakeholder Interactions)

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[1] This section is a summary of the most relevant themes from the open-ended question.

#4 Board Dynamics: Ratings

		Board of Trustees	Number of "No Opinion" Responses
Overall Average Category Rating		**3.13**	**12**
Q1	The Board is able to effectively work through complicated issues as a group	3.43	1
Q2	Board members' information requirements and requests constructively contribute to value-added decisions	3.29	1
Q3	Board members speak out, ask hard questions, and engage in effective deliberations	3.71	1
Q4	Board members are highly engaged in the fulfillment of the responsibilities and accountabilities of their role	3.43	1
Q5	The Board and State Health Plan staff view themselves as working collaboratively on behalf of State Health Plan members	3.38	0
Q6	There is a high level of trust and mutual respect among Board members	3.29	1
Q7	There is a high level of trust and mutual respect between the Board and the Executive Administrator	3.43	1
Q8	There is a high level of trust and mutual respect between the Board members and the State Treasurer	(3)	1
Overall Average Sub-Section Rating		**3.37**	**7**

Board Interpersonal Interactions and Engagement

Rating scale: 1 Strongly Disagree, 2 Disagree, 3 Agree, 4 Strongly Agree

■ = Response Range   ● = Average of Responses

Detailed Findings
#4 Board Dynamics: Ratings continued

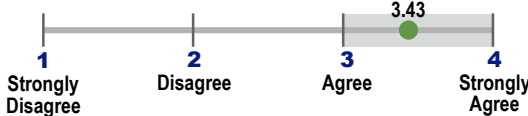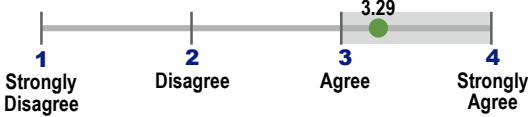|			Board of Trustees	Number of "No Opinion" Responses
		Overall Average Category Rating	**3.13**	**12**
Board Development	Q1	The Board follows an explicit plan for continuous Board education, development, and performance improvement	2.50 — range 1 (Strongly Disagree), 2 (Disagree), 3 (Agree), 4 (Strongly Agree)	2
	Q2	The Board is flexible in its practices in order to operate more effectively	3.17 — range 1 (Strongly Disagree), 2 (Disagree), 3 (Agree), 4 (Strongly Agree)	2
	Q3	State Health Plan staff help the Board stay up-to-date on relevant issues and trends that may impact the State Health Plan and the healthcare industry	range 1 (Strongly Disagree), 2 (Disagree), 3 (Agree), 4 (Strongly Agree)	1
		Overall Average Sub-Section Rating	**2.89**	**5**

■ = Response Range   ● = Average of Responses

Detailed Findings
#5 Meeting Effectiveness

➤ ***Rated statements[1].***

- Overall rating for this category was 3.00. The lowest rated statement, at 2.43, was "*The Board spends at least 75% of the meeting time in constructive discussion*"

- There was a large range of responses (from 1 to 4) regarding the adequacy of time needed at each meeting to conduct the Board's business

➤ ***Open Responses[2].***

- Desire for a more focused agenda which can be accomplished in a one-day meeting. "*Current meeting lengths are difficult given that this is a volunteer-like Board membership and many members have full-time jobs*"

- Desire to have a more consistent schedule of Board meetings and that meetings should start earlier if it is known the agenda will be longer

- Focus meetings on constructive discussion and decision-making needs rather than listening to presentations

- Desire to have agendas and meeting materials farther in advance of the meetings (see also this theme mentioned in study category #2, Board Role, Accountabilities, Decision Making)

➤ ***Opportunities for Improvement.*** Reconsider the structure, content, and length of the meetings. Keep agenda focused on key decisions required of the Board. Provide materials to Board members further in advance of the meetings to allow for adequate time to review
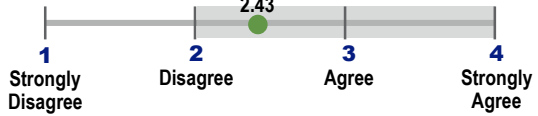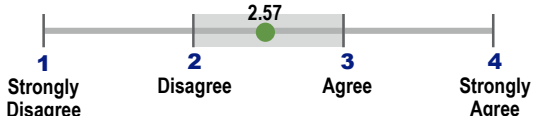
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[1] Four Meeting Effectiveness statement responses have been reverse coded and have had "does not" added to reflect intent of statement (i.e., originally a Disagree response for these statements was a favorable response).

[2] This section is a summary of the most relevant themes from the open-ended question.

Detailed Findings
#5 Meeting Effectiveness: Ratings

			Board of Trustees	Number of "No Opinion" Responses
		Overall Average Category Rating	**3.00**	**11**
Meeting Effectiveness	Q1	The Board has clear and comprehensive agendas for standing meetings	3.63	0
	Q2	The meeting calendars and agendas of the Board meetings provide sufficient time for effective reporting and integration of efforts	3.14	1
	Q3	The pre-meeting materials are well-conceived and make it easy for me to prepare for the meetings	3.13	0
	Q4	The Board spends at least 75% of the meeting time in constructive discussion (vs. making or listening to presentations)	2.43	1
	Q5	All Board members come to meetings well prepared		3
	Q6	All Board members attend all Board meetings	2.57	1
	Q7	The Board adequately documents in meeting minutes the issues, discussion points, and decisions made at each meeting	3.29	1

Scale: 1 Strongly Disagree — 2 Disagree — 3 Agree — 4 Strongly Agree

■ = Response Range   ● = Average of Responses

Detailed Findings
#5 Meeting Effectiveness: Ratings continued

			Board of Trustees	Number of "No Opinion" Responses
		Overall Average Category Rating	**3.00**	**11**
Meeting Effectiveness	Q8	The Board does not need more meetings each year to conduct its business[1]	2.71 (range chart, 1 Strongly Disagree – 2 Disagree – 3 Agree – 4 Strongly Agree)	1
	Q9	The Board does not need fewer meetings each year to conduct its business[1]	3.14 (range chart, 1 Strongly Disagree – 2 Disagree – 3 Agree – 4 Strongly Agree)	1
	Q10	The Board does not need more time at each meeting to conduct its business[1]	(range chart, 1 Strongly Disagree – 2 Disagree – 3 Agree – 4 Strongly Agree)	1
	Q11	The Board does not need less time at each meeting to conduct its business[1]	2.86 (range chart, 1 Strongly Disagree – 2 Disagree – 3 Agree – 4 Strongly Agree)	1
	Q12	The timing of Board meetings generally works well with my schedule	(range chart, 1 Strongly Disagree – 2 Disagree – 3 Agree – 4 Strongly Agree)	0
	Q13	The location of the Board meetings is a reasonable distance for me to travel	3.13 (range chart, 1 Strongly Disagree – 2 Disagree – 3 Agree – 4 Strongly Agree)	0

■ = Response Range   ● = Average of Responses

✖ Segal Consulting   22

Appendix A
Methodology

➢Segal Consulting worked with the Department of State Treasurer to create the self-assessment survey for the Board of Trustees

➢An online version of this survey was developed by Segal. Segal sent the link to the survey to all Board members through e-mail, giving them one week to complete (Friday, November 25 through end of day Thursday, December 1). Subsequently, the survey deadline was extended four days, to end of day December 4

➢Respondents were asked to rate responses to the survey statements on a four point scale of "Strongly Disagree" to "Strongly Agree." Respondents were directed to select "No Opinion" for a particular statement if they felt they lacked enough direct contact or information to give informed input on that specific statement

➢Eight out of ten Board members completed the questionnaire

➢Segal analyzed and interpreted the data, both the ratings and open response sections. To quantitatively analyze the ratings, a numeric scale was used for this assessment as follows:

1	**2**	**3**	**4**
Strongly Disagree	Disagree	Agree	Strongly Agree
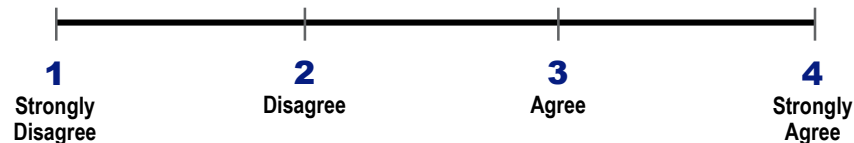
➢Rating responses and open responses were analyzed and summarized for this report to show the perceived levels of effectiveness of the Board

Appendix B
Responses of Members of the Board of Trustees

Question	Summary Calculations			Percent Distribution				
	Average	Minimum	Maximum	1	2	3	4	No Opinion
PEOPLE	**3.21**							
Board Composition	**3.13**							
All current Board members bring demonstrated value to the Board through deep and relevant professional experience, critical relationships in the business/public sector communities, and/or unique functional skills or industry expertise	3.00	2.00	4.00	0%	25%	38%	25%	13%
The current composition of the Board results in a productive mix of cross-disciplinary perspectives and provides insights on critical issues and decisions	3.50	3.00	4.00	0%	0%	50%	50%	0%
Board members are selected based on explicitly defined skills, expertise, and other qualifications	3.00	2.00	4.00	0%	13%	63%	13%	13%
The skills, expertise, and other qualifications of current Board members are consistent with the selection criteria	3.14	2.00	4.00	0%	13%	50%	25%	13%
The current Trustee selection criteria describe the talent required to address the State Health Plan's challenges during the next 3-5 years	3.00	2.00	4.00	0%	25%	25%	25%	25%
Board Structure and Functioning[1]	**3.29**							
The Board is not too small to get all required work done efficiently	3.29	3.00	4.00	0%	0%	63%	25%	13%
The Board is not too large to be effective	3.29	3.00	4.00	0%	0%	63%	25%	13%

Key: 1 – Strongly Disagree   2 – Disagree   3 – Agree   4 – Strongly Agree
No Opinion – Lack enough direct contact or information to give informed input on a specific statement

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[1] Board Structure and Functioning statement responses have been reverse coded and have had "not" added to reflect intent of statement (i.e., originally a Disagree response for these statements was a favorable response).

Appendix B
Responses of Members of the Board of Trustees continued

Question	Summary Calculations			Percent Distribution				
	Average	Minimum	Maximum	1	2	3	4	No Opinion
BOARD ROLE, ACCOUNTABILITIES, DECISION MAKING	**3.36**							
Roles and Accountabilities	**3.41**							
The Board has a clearly articulated charter and policies that guide its activities and decisions	3.67	3.00	4.00	0%	0%	25%	50%	25%
The Board regularly reviews its charter and policies and updates its governance practices/protocols in order to better serve State Health Plan members and other stakeholders	3.17	2.00	4.00	0%	13%	38%	25%	25%
All Board members understand their role, accountabilities, and responsibilities	3.17	2.00	4.00	0%	25%	13%	38%	25%
I am fully conversant on my role, accountabilities, and responsibilities as a Board member	3.63	3.00	4.00	0%	0%	38%	63%	0%
Decision Making	**3.32**							
The Board's decision-making reflects a robust understanding of its legal, fiduciary, and fiscal obligations to State Health Plan members and other stakeholders	3.43	2.00	4.00	0%	13%	25%	50%	13%
The Board has a defined and productive process for making decisions	3.14	2.00	4.00	0%	25%	25%	38%	13%
The Board's current decision-making process is helpful in facilitating the speed and quality of the Board's decision making	3.17	2.00	4.00	0%	13%	38%	25%	25%
I understand the Board's decision-making process and protocols	3.67	3.00	4.00	0%	0%	25%	50%	25%
Board meetings focus on prospective decisions to address the State Health Plan's challenges rather than retrospective reviews of outcomes of past decisions	3.14	3.00	4.00	0%	0%	75%	13%	13%
The activities and decision-making of the Board primarily focus on the State Health Plan's three main strategic priorities (Improve Members' Health, Improve Members' Experience, Ensure a Financially Stable State Health Plan)	3.38	3.00	4.00	0%	0%	63%	38%	0%

Key: 1 – Strongly Disagree   2 – Disagree   3 – Agree   4 – Strongly Agree
No Opinion – Lack enough direct contact or information to give informed input on a specific statement

Appendix B
Responses of Members of the Board of Trustees continued

Question	Summary Calculations			Percent Distribution				
	Average	Minimum	Maximum	1	2	3	4	No Opinion
KNOWLEDGE AND STAKEHOLDER INTERACTIONS	**3.00**							
Board Expertise	**3.02**							
The full Board has the necessary knowledge of the healthcare industry and the associated economics to effectively fulfill its role	2.88	1.00	4.00	13%	13%	50%	25%	0%
I have the expertise and knowledge of the healthcare industry and the associated economics to effectively fulfill my role as Board member	3.14	3.00	4.00	0%	0%	75%	13%	13%
New Board members receive the "on-boarding" preparation they need to be able to immediately contribute to the Board's activities and decision-making	3.00	2.00	4.00	0%	13%	63%	13%	13%
The Board is provided with sufficient market trend updates and on-going education in order to successfully fulfill the expectations for the role	3.00	3.00	3.00	0%	0%	75%	0%	25%
The Board has the necessary resources to make the decisions asked of it by the State legislature	2.71	2.00	3.00	0%	25%	63%	0%	13%
I feel comfortable explaining the details of the State Health Plan options to others	3.14	2.00	4.00	0%	13%	50%	25%	13%
I have the necessary knowledge of healthcare policy and system levers to be able to effectively contribute to the design and evaluation of State Health Plan programs	3.14	2.00	4.00	0%	13%	50%	25%	13%
The full Board has the necessary knowledge of healthcare policy and system levers to be able to effectively contribute to the design and evaluation of State Health Plan programs	3.14	2.00	4.00	0%	13%	50%	25%	13%
Board members always have adequate pre-meeting time to review materials about which they will make decisions	3.00	2.00	4.00	0%	13%	75%	13%	0%

Key: 1 – Strongly Disagree   2 – Disagree   3 – Agree   4 – Strongly Agree
No Opinion– Lack enough direct contact or information to give informed input on a specific statement

Segal Consulting

Appendix B
Responses of Members of the Board of Trustees continued

Question	Summary Calculations			Percent Distribution				
	Average	Minimum	Maximum	1	2	3	4	No Opinion
KNOWLEDGE AND STAKEHOLDER INTERACTIONS	**3.00**							
Stakeholder Interaction	**2.98**							
The Board has sufficient interaction with State Health Plan stakeholders to inform goals and key decisions	2.71	2.00	3.00	0%	25%	63%	0%	13%
The Board has sufficient interaction with State Health Plan staff members to gain necessary understanding of implications of potential decisions, industry changes, and other considerations	3.00	2.00	4.00	0%	13%	63%	13%	13%
The Board has sufficient interaction with the Executive Administrator to gain necessary understanding of key issues and opportunities for the State Health Plan	3.43	3.00	4.00	0%	0%	50%	38%	13%
Board members effectively use relationships with the General Assembly and the executive branch to share perspectives and further the interests of the State Health Plan	2.20	1.00	3.00	13%	25%	25%	0%	38%
The Board effectively balances the differing expectations of State Health Plan members, the General Assembly, and other stakeholders	2.71	2.00	3.00	0%	25%	63%	0%	13%
The Board effectively utilizes State Health Plan staff to achieve the strategic priorities of the State Health Plan (Improve Members' Health, Improve Members' Experience, Ensure a Financially Stable State Health Plan)	3.00	2.00	4.00	0%	25%	38%	25%	13%
State Health Plan staff is responsive to Board requests for support and information	3.38	3.00	4.00	0%	0%	63%	38%	0%
State Health Plan staff appropriately informs the Board of externalities the staff is not able to affect	3.43	3.00	4.00	0%	0%	50%	38%	13%
State Health Plan staff makes appropriate use of the Board for strategic decision-making	3.00	2.00	4.00	0%	25%	38%	25%	13%

Key: 1 – Strongly Disagree   2 – Disagree   3 – Agree   4 – Strongly Agree
No Opinion– Lack enough direct contact or information to give informed input on a specific statement

Appendix B
Responses of Members of the Board of Trustees continued

Question	Summary Calculations			Percent Distribution				
	Average	Minimum	Maximum	1	2	3	4	No Opinion
BOARD DYNAMICS	**3.13**							
Board Interpersonal Interactions and Engagement	**3.37**							
The Board is able to effectively work through complicated issues as a group	3.43	3.00	4.00	0%	0%	50%	38%	13%
Board members' information requirements and requests constructively contribute to value-added decisions	3.29	3.00	4.00	0%	0%	63%	25%	13%
Board members speak out, ask hard questions, and engage in effective deliberations	3.71	3.00	4.00	0%	0%	25%	63%	13%
Board members are highly engaged in the fulfillment of the responsibilities and accountabilities of their role	3.43	3.00	4.00	0%	0%	50%	38%	13%
The Board and State Health Plan staff view themselves as working collaboratively on behalf of State Health Plan members	3.38	3.00	4.00	0%	0%	63%	38%	0%
There is a high level of trust and mutual respect among Board members	3.29	3.00	4.00	0%	0%	63%	25%	13%
There is a high level of trust and mutual respect between the Board and the Executive Administrator	3.43	3.00	4.00	0%	0%	50%	38%	13%
There is a high level of trust and mutual respect between the Board members and the State Treasurer	3.00	1.00	4.00	13%	0%	50%	25%	13%
Board Development	**2.89**							
The Board follows an explicit plan for continuous Board education, development, and performance improvement	2.50	2.00	3.00	0%	38%	38%	0%	25%
The Board is flexible in its practices in order to operate more effectively	3.17	3.00	4.00	0%	0%	63%	13%	25%
State Health Plan staff help the Board stay up-to-date on relevant issues and trends that may impact the State Health Plan and the healthcare industry	3.00	3.00	3.00	0%	0%	88%	0%	13%

Key: 1 – Strongly Disagree   2 – Disagree   3 – Agree   4 – Strongly Agree
No Opinion – Lack enough direct contact or information to give informed input on a specific statement

Appendix B
Responses of Members of the Board of Trustees continued

Question	Summary Calculations			Percent Distribution				
	Average	Minimum	Maximum	1	2	3	4	No Opinion
MEETING EFFECTIVENESS	**3.00**							
The Board has clear and comprehensive agendas for standing meetings	3.63	3.00	4.00	0%	0%	38%	63%	0%
The meeting calendars and agendas of the Board meetings provide sufficient time for effective reporting and integration of efforts	3.14	2.00	4.00	0%	13%	50%	25%	13%
The pre-meeting materials are well-conceived and make it easy for me to prepare for the meetings	3.13	2.00	4.00	0%	13%	63%	25%	0%
The Board spends at least 75% of the meeting time in constructive discussion (vs. making or listening to presentations)	2.43	2.00	4.00	0%	63%	13%	13%	13%
All Board members come to meetings well prepared	3.00	2.00	4.00	0%	13%	38%	13%	38%
All Board members attend all Board meetings	2.57	2.00	3.00	0%	38%	50%	0%	13%
The Board adequately documents in meeting minutes the issues, discussion points, and decisions made at each meeting	3.29	3.00	4.00	0%	0%	63%	25%	13%
The Board does not need more meetings each year to conduct its business[1]	2.71	2.00	3.00	0%	25%	63%	0%	13%
The Board does not need fewer meetings each year to conduct its business[1]	3.14	3.00	4.00	0%	0%	75%	13%	13%
The Board does not need more time at each meeting to conduct its business[1]	3.00	2.00	4.00	0%	13%	63%	13%	13%
The Board does not need less time at each meeting to conduct its business[1]	2.86	1.00	4.00	13%	0%	63%	13%	13%
The timing of Board meetings generally works well with my schedule	3.00	2.00	4.00	0%	13%	75%	13%	0%
The location of the Board meetings is a reasonable distance for me to travel	3.13	3.00	4.00	0%	0%	88%	13%	0%

Key: 1 – Strongly Disagree   2 – Disagree   3 – Agree   4 – Strongly Agree
No Opinion – Lack enough direct contact or information to give informed input on a specific statement

[1] Four Meeting Effectiveness statement responses have been reverse coded and have had "does not" added to reflect intent of statement (i.e., originally a Disagree response for these statements was a favorable response).