CITIZENS PROPERTY INSURANCE CORPORATION

SUMMARY MINUTES OF THE

CONSUMER SERVICES COMMITTEE MEETING

Thursday, April 5, 2018

The Consumer Services Committee of Citizens Property Insurance Corporation (Citizens) convened telephonically on Thursday, April 5, 2018 at 10:00 a.m. (Eastern Time).

The following members of the Consumer Services Committee were present telephonically:

Freddie Schinz, Chair
Bette Brown
Greg Rokeh
Phil Zelman

Steve Bitar
Christine Ashburn
Sha'Ron James
Blake Capps

The following were present telephonically:

Barry Gilway
Bonnie Gilliland
Barbara Walker
Alden Mullins
Michael Peltier
Candace Bunker
Jeremy Pope
John Vaughan
Jay Adams
Manda Marsico
Ray Norris
Kelly Booten
Kirk Elmore
Stephen Guth
Sarah Harrell
Stephen Mostella

Judy Grunewald
Dan Sumner
Jennifer Montero
Ariel Shami
Rochelle Dori Brahm, Southern Oak Ins.
State Board of Administration
Ashlee Tising, Greenberg Traurig Law Firm
Rebecca Griffith, Sun Sentinel

MS. WALKER: Good morning and welcome to Citizens Consumer Services Committee meeting. This meeting is publicly noticed in the Florida Administrative Register. We are going to convene this meeting with roll call.

Chairman Freddie Schinz?

CHAIRMAN SCHINZ: Here.

MS. WALKER: Bette Brown?

GOVERNOR BROWN: Here.

MS. WALKER: Blake Capps?

GOVERNOR CAPPS: Here.

MS. WALKER: Greg Rokeh?

MR. ROKEH: Here.

MS. WALKER: Phil Zelman? Sha'Ron James?

MS. JAMES: Here.

MS. WALKER: Chairman, you have a quorum.

CHAIRMAN SCHINZ: Thank you very much, Barbara, I appreciate that. And once again I would like to apologize a little bit for the way the Minutes are as we had a little technical glitch, but they turned out absolutely perfect.

I would like to call the meeting to order and I would like to seek approval of the prior minutes. Do we have a motion to approve them or any discussion?

GOVERNOR BROWN: Bette Brown. Move to approve.

GOVERNOR CAPPS: Blake Capps, second.

CHAIRMAN SCHINZ: We have a motion to approve and a second. Thank you very much. We will mark those as approved and we will move on, move on to item two.

I would like to recognize Steve and Jeremy Pope as the voice of the Consumer update program, and that will be under your tab two.

MR. BITAR: Good morning, Chairman Schinz, this is Steve Bitar. Can everyone hear me all right?

CHAIRMAN SCHINZ: Yes, Steve, I appreciate it very much. We are looking forward to your report.

MR. BITAR: Thank you so much. Well, as you stated, behind tab two you will see that we actually have a presentation that we have prepared for you. I just wanted to make a couple of introductory comments and then I am going to turn it over to Jeremy Pope who is our Senior Director of Consumer and Policy Services who oversees the program and he will take you through the presentation.

I think it is important to note that we here at Citizens really find a value in what the customers have to say to us. We last year took over 700,000 calls in our call center. We have great opportunity to take advantage of those calls and try to see exactly what it is the customers are telling us.

By the same token, we all know that customers buy insurance in case they have a claim. That is the promise that we make, to pay and to make them whole when all is said and done. And so for us we basically have two programs. One takes into account the voice of the customer when they call into our customer care center, and a second program that really looks at the claims experience and this presentation really will give you an overview of each of those two programs.

Our executive team supported the concept of a voice of the customer program and authorized that to be implemented as part of our permanent infrastructure starting in 2017. And so we have a full year's worth of data plus pilot data that we used prior to the program being officially established.

So with that what I would like to do is turn it over to Jeremy Pope and let him walk you through the findings of the program and how we are using that data. So Jeremy, are you there?

MR. POPE: I am. Thank you, Steve, and good morning, committee members, and for the record, my name is Jeremy Pope, Senior Director of, Senior Director of Consumer Policy Services.

And as Steve alluded to, today I would like to provide a background of our results for 2017, and where we landed with the voice of customer program results. And I will start with slide two, and I know the background of the program has already been shared with this committee before, but just as a quick refresh, the purpose of us setting up this program being some time ago was to make sure we had a formal mechanism in place to be able to solicit policyholder feedback on a routine basis.

And this is tied directly into Citizens' strategic plan as this committee is aware and supports, and we really tied most of the customer programs to corporate goal three, to operate a streamlined, scalable and customer focused organization.

Listed in our strategic plan the voice of customer program is listed as a performance measurement. So again that full support is there at the program and what I am going to do now is transition. I am actually going to skip over to slide four because I think it paints a better illustration and Steve really just kind of talked about what those experiences look like as far as the voice of customer program, where we focus our efforts at soliciting policyholder feedback.

And as Steve mentioned, the customer care center is one mechanism that we really hone in on and focus our efforts along with the claims experience. And the reason for the two customer experiences, if you will, while different, we focused on those because they had the highest traffic, you know, when it comes to servicing for Citizens.

So this illustration on slide four really just kind of paints the picture of what it looks like overall. Policyholder's calls into our call centers, they speak to a customer care representative on their needs and then they are then offered the survey. All of our surveys are voluntary and if the policyholder would like to participate, they are transferred immediately after that call into an independent team that conducts the survey.

And we keep that team independent to ensure we have some credibility with the data and making sure that we have a consistent experience overall as well.

With the claims experience, it is a little bit different. We, you know, a customer calls in to file a claim and to be honest with you, we didn't think that is the most appropriate place to up front, hey, let's capture their feedback with Citizens. So what we do there, there is a lot of sensitivity with that transaction.

So we -- our first and foremost focus is let's take that claim, let's get it in the hopper, if you will, and ensure that we meet the needs of the customers. But when that claim is actually closed out that independent team, we reach out to our policyholders and we offer to conduct a survey for them, and sometimes we conduct the survey right then and there with the claims piece and sometimes the policyholder is actually calling us back because they do want to participate and provide some feedback.

The surveys, themselves, again, I talked about them being, it is all voluntary. We, while both of these surveys are different we also have made sure that there is some commonalities associated with both of those surveys, different experiences, so we want to customize the questions appropriately. But we also wants to make sure, you know, that we walk away with some data that we can actually take action.

So there is really four areas of focus with each of our surveys, whether it be the customer care survey or the claims survey, and what I will call section one is something we focus on, is just their overall experience.

So customer called in, how is your experience overall today. You called us, you contacted Citizens because you had a need, how did we do.

And then we have a second section that really focuses on Citizens' representatives. So in this case it would be a customer care representative. In the claims experience it could be the customer care representative and/or the adjuster in that case because there are multiple parties that are involved.

So section one we are focusing on their experience, your claims experience, you are calling in, you know, for services into our call centers for the customer care piece. Section two of both of those surveys we really hone in on the representative, themselves, how were they? That is where we get into professionalism and all of those different components.

Now, the section one and two have the commonalities amongst both surveys but the questions are a little bit different and they are tailored to that experience.

Section three though is something that we have consistent amongst both of those surveys and that is just we really, really want to be able to tell from a policyholder perspective, we have got the feedback on their experience, but can we correlate that to their overall satisfaction with Citizens, and that is what section three really focuses on, whether it be the customer care survey or the claims experience.

We have asked them about everything that they have gone through and making sure that we have evaluated the representative that assisted them, but now putting that all aside, what is your overall satisfaction with Citizens, so we take time to do that as well.

The last portion of the survey, what we conclude our surveys with on both of these mechanisms is a chance for the policyholder to provide us any type of verbatims and that really is kind of free form, anything they have, any additional feedback they would like to provide back to Citizens.

In that case they are absolutely able to do so, and we take those verbatims as well, and those verbatims really help us, you know, with numbers, we feel we have very good questioning in line that is in line with the private sector as well as far as customer satisfaction and the methodologies we use to really analyze the data, but verbatims in any case really, really help us hone in and clarify where we have a gray area or provide opportunity for us that we -- we just couldn't see with the numbers. So that is why we really think the verbatim piece is extremely powerful.

On slide five, this is simply a recap of our 2017 results for the customer care survey, and you will see we set our goal at 92 percent, and the way we come up with our goal, and Steve alluded to before -- before we went out formally with this program we did some pilots as well to make sure we -- we understood the data that was coming into the organization.

We also wanted to make sure that if we, we, if we implement such a program, you know, where is the value going go to be, you know, for the policyholder and also the organization as well. So we wanted to make sure we had questions that were actionable, if you will, but also that we had some time to analyze that data to come up with goals that were realistic that made sense.

So what we did was we spent a lot of time, you know, evaluating those goals and we look at it on an annual basis to see historically how we have been doing and where do we think we want to set that benchmark in the following year. So for 2017, you know, our benchmark was 92 percent.

We closed with a 93 percent overall for the average for the year. We conducted over 10,000 surveys with the customer care servicing channel, and our response rate was 14.1 percent, which is really good. Industry standards for that percentage is right on target. So we felt that we had specifically a really good sample to take action on and to be able to categorize feedback as appropriate.

You will see we break out the, you know, the sections of those scores as well and you will also see the questioning on the bottom, these sections are kind of broken out, and the question is generalized, you can get a feel of what type of dialogue we are having with the policyholder.

But you are also notice on the right hand side, the verbatim piece, and that is the really powerful piece for us where we take all of those verbatims and we categorize them in certain categories, and that just helps us look for various trending.

You will notice anytime I see other, let's see, I hate another category, if you will, but the reason we have other is because there is so many different things that pop up and that really has put together where we don't have areas that have mass training.

We put everything else in that bucket but we still break it out and analyze that data, and what we also do, and I will talk about this, because this gets into what are we doing with some the data. When we start talking about actions, you know, if there is something for example, website related, you know, we know that we are enhancing our website, we will go back and say, you know, with the various project groups internally and say, hey, what feedback do we have? What customer verbatims do we have that are tied to our website so we can ensure as we implement various projects within the organization we truly are tying it back to the voice of the customer which is critical.

And there are some components that, you know, we get some feedback on certain things that we can't necessarily change, but that feedback is still really, really good, because it helps us know, okay, well, we may not be able to change certain aspects to let's say our rates, we do not -- maybe there is an opportunity for us to educate our policyholders.

So again, feedback is very, very powerful, and overall in 2017, we are really excited about the results where we landed with the customer care results.

On slide six, this is now the 2017 results for the claims survey. So a lot of hands go in on the claims piece. I mentioned we have the claims FMOL intake where you have got a customer service representative just taking that loss, the initial loss information with the policyholder, but then you have to go through an adjuster and that time the adjusters are contracted with Citizens, but we still want to get that feedback.

But with the claims piece, and again, the goal is set at 86 percent for 2017, based on historical data that we had, we actually closed with 87 percent. We conducted almost 600 surveys and the response rate with the claims piece is 35.6 percent, and that I got to tell you, when we first kicked this off we were just kind of surprised to be honest with you, because we were calling out the policyholders with this survey mechanism, getting ahold of them. At times, completing the survey right then and there over the phone, but other times they are calling us back in because they would like to leave feedback on their experience.

Really, really excited about that response rate that we have, and again, you can see that the questions that are lined on the left bottom side of the portion of the kind of the generalized category of what the questions related to and what type of dialogue we would be having with the policyholder.

But again, section three, no matter the customer care survey or the claims survey, those are identical and that again really to make sure we are really comparing apples to apples when we start to analyze some of this data, both on a short term and a long term perspective.

On slide, I think the next slide following this same claims piece, this one really, really helps, it takes section three from both of our surveys and kind of shows us where we land at and it is 84 percent with overall comprehensive satisfaction with Citizens.

That section three, what we measure is their overall stat with Citizens, but also the ease of doing business with Citizens. And what I concluded in that metric is really, you know, what are the number of attempts policyholders have to take to make sure that their needs are serviced.

So you know, do they have to call in repeated times? Do they have a lot of issues with their claims experience and have to call back? So that is really what we try to measure, the overall satisfaction with Citizens, but also their effort, the customer effort to get a resolution to their needs or their, yes, their needs, I should say.

And then also in question 3.3 within section three, we just, we like to collect feedback on their overall satisfaction with their agent.

Obviously, these agents are appointed through is, but what is really exciting and Carl Rothman's group just does an excellent job with the agent workforce, managing that workforce and educating that workforce. We provide a monthly report to him and his team and they are able to take that data and they able to hone in on potential opportunities they have throughout state and with the various agencies.

And what is exciting, too, is we have shared some of this data also even at some of the agent roundtables and surprisingly agents are really interested in this data and they want to know and this really helps us. It helps Carl's team as well. If he starts see a major trend throughout a lot of agencies, maybe there is an opportunity there for us to educate or whatever it may be.

So at the end of the day that is a really good report mechanism that we are providing the agency management group because they are able to sit through, to include that in some of the discussions and the training efforts that are ongoing with the agency management area.

Slide eight I think really, really paints kind of a picture of the data we just looked that and gives a historical overview, and this page in my opinion, I mean, we should be extremely proud, not just employees but also our Board and this committee just because of the support that you provide, you know, to us ongoing because this to me, and I have been with this company almost 12 years and we truly have evolved, and I just, when we looked at all of the data and we kind of measured it out and looked at it and we broke it out, this was just, with all of the effort that we have made with advancements of our technologies, of our processes, and also just our talent acquisition with employees bases and strong partnerships with our vendors, this to me shows our progress.

And if you look, the manner of section three is that overall satisfaction with Citizens, and you know, Citizens overall doing business or a sub breakout of section three, every year we have made a positive trend, and I just think that is tremendous because I think we have evolved as an organization and it is important for us not to lose sight of this and for us to continue to analyze the data that comes into the -- to the organization as the markets change and also our policyholders' needs change as well.

So again I just wanted to highlight slide eight because I think it is just a tale-tell sign of we are on the right track and we have been on the right track and for us to continue that momentum within the organization.

I want to also, I want to slide into, transition to slide nine. This is something that I want to make sure this committee was aware of, because it is service recovery and that is, that is basically a program that we activate when needed within the voice of the customer process.

So, you know, we are out there, we are collecting a lot of feedback, whether it be, as I mentioned, the customer care survey or the claims survey, but at any time, you know, when we are going through those surveys and we notice that a policyholder rates us extremely low, we take the time right then and there.

We don't wait until the very end of the survey to collect the customer verbatim, but whether that, we ask them to maybe expound on their score so we can interpret that. What we find a lot of times is they have an issue that potentially we can mitigate, we can jump in and we can help resolve. So a lot of times this is basically turning a negative customer experience into a positive one, and we have received so many accolades from policyholders on this, because they are kind of shocked.

They took the time to conduct a survey but what we have noticed throughout that survey and that questioning, like something is not right, which has probed us to ask additional questions, or we can just tell by the verbatim straight up, hey, this policyholder is not satisfied and, you know what, there is something we can do right now.

So we have this independent team that I mentioned earlier that is conducting these surveys. They are actually empowered, you know, with even a system access level and they also have contacts in the appropriate areas of the organization whether it be accounting, whether it be in underwriting, to reach out to look at, you know, certain scenarios and I would say a lot of them are unique scenarios to say, hey, you know what, this customer is not happy about this. What can we do?

Sometimes it also lends us to potentially educate an agent. It could be educating an internal employee or a lot of times just clarifying the policyholder the why behind a response that they received or whatever the case may be.

This service recovery team really I think I think of white gloves, what we did with the Irma response, with the outbound calling campaign and this is kind of like, this really in my opinion is, service recovery is aligned to that same customer outreach, if you will, because we truly are there for the customer and at they are shocked.

And we have found with our service recovery results, in 2017, 18 percent of the service recovery alerts, when you hear that we have got certain mechanisms built in to our customer survey process that trigger an alert to make sure staff and also our reporting team know, hey, what, what -- what are they going to need for here, there is an opportunity potentially here. We found about 18 percent of them we have actually been able to take action on. So that we felt from our perspective it is definitely a value add, and the accolades, the customers appear as I mentioned we received a lot, but they are always shocked, like wow, I am really, you know, you guys, I was upset at first, but you were able to do this, thank you. So it really makes the staff feel really good that that staff is empowered to do that.

They love it. Because they feel like, you know, they are the hero, so we, we share those stories internally across the various areas because I think it really helps staff connect what they do day in, day out, and that is really what the purpose of this voice of customer program is, too, you know, we have many areas of our organization where it is not, they are not customer facing, they are in the mail room, they are in accounting, they are in various aspects of the organization and what we try to do with this voice of customer needs results really tie in to all employees within Citizens to understand what they do day in and day out does matter and how their work connects ultimately to the customer experience. So again, we are really excited about that, and one of the big benefits of this program.

On slide 10, I am just going to recap, really where we are at and what we are focused on in 2018. I mentioned that we are breaking out verbatim. 2018 we are being a very aggressive on what we can do with these verbatims more and really tie our actions to strategic goals and objectives.

You know, we have our Enterprise themes and we want to make sure while we are looking at all of these different components and we are looking at what customers are asking for, where is the opportunity for us to also align this to our strategic direction, which is value add, and we have been doing that as well.

We are more than ever with our Enterprise projects and initiatives, you know, before we had a voice to customer program, we would go to our Board, we would ask for dollars spend for certain technologies potentially or services, we would come up with projects internally and we all had our justifications on why we thought this was important. And what we have found now with all of this voice of customer feedback it gives us greater justifications, whether it is for purchases within the company, advancement of technologies or even process changes.

We now have what I would think is a deeper justification, that not only do we think this, but here is what the customers -- here is what is trending. Here is what they are asking for. So how can we make sure we can meet these needs and in most cases it is a benefit to the organization, whether it be efficiency or whatever. And then it is a benefit obviously for the policyholders.

So it is really is a win/win. We are bringing a lot of awareness to that internally and making sure when we go out there with new projects or new technologies, you know, let's scope various designs, let's make sure scopes will work. Some of the requirements for those components actually include the voice of the customer.

We are also in 2018, we are focused on providing recommendation enhancements to various areas where we have enough data that has been trending. We are providing these recommendations to the various areas that again are not so close to the customer experience that they are fully aware that, hey, you know what, you know, the customer has been asking about this process change, we didn't know that.

So we are documenting that more and we are getting more and more folks involved within the organization. So it is really becoming I would say a cross functional effort around voice of the customer which is powerful.

One thing I didn't mention and what the claims survey, again, we talk about, you know, transparency and also bringing more awareness around it is the claims group is even taking that, that monthly, the monthly results and they are tying it into the adjuster score cards at the infancy level.

So adjusting firms that are contracted with Citizens that are performing our work actually receive data and feedback and a score on their adjusting firm that is broken out. So that again is value add and helps us really just make sure that we are managing our partners appropriately as well, but again, not just coming up with various metrics that we think are important, but also sharing that customer perspective, which is key.

On 2018, focused in addition to what I just mentioned, I mentioned the department of action plans which include the recommendations an enhancements to the appropriate areas. Self service, we are going to have an update today in this committee meeting around this initiative.

We are taking so much feedback and I am really proud of the organization because we are, you know, we are talking about various components of self service and now we are like, well, how do we design? Because with self service if we don't design this appropriate can actually backfire and we can cause a greater workload to the organization.

So it is critical that while we move down this self service road map that we continue to include the customer feedback as far as one, prioritizing what we implement, because, you know, we have so many resources, what is going to give us the greatest bang for our bucks to the organization, but then also what -- what is the number one thing that customers are asking for, let's make sure we incorporate that feedback, and that is what we are doing.

I mentioned the agency education and support and then also the senior leadership team, our SLT, we have various projects and there is -- they are representing a cross functional group of members that are tackling various opportunities within the organization and one of them is with the customer.

So we have a sub group right now of SLT members that are working on getting involved with voice of the customer and also really looking at utilization adoption rates with our self service channels where we could potentially look at and spring up with ideas.

I really like that because a lot of these members are not close to the customer experience, and this is -- we are getting an outside, I guess I would say outside perspective, but it is also continuing that awareness internally wide, the voice of customer, so important.

Again, that is just an initiative we have focused this year. We have SLT members I wanted to make sure that this group was aware that all of the hierarchy are really behind this and involved with this component. And having said that, Chairman Schinz, that concludes my update.

I would be happy to answer any questions if there are any that are remaining.

CHAIRMAN SCHINZ: Jeremy, thank you so much for such a -- such a well prepared update, and I am sure the whole committee and the whole BOG is very, very pleased with the continued rankings that we are getting from our customers.

As you know, our major focus is our customers and we need -- we need to keep them happy and be able to fulfill their questions and their needs.

With that being said, does anyone have any questions or any comments for Jeremy before we move on to the next item?

MR. ZELMAN: Chairman, this is Phil Zelman, I just want to let you know I have joined the meeting.

GOVERNOR BROWN: Chairman, this is Bette Brown. I have a couple of questions.

CHAIRMAN SCHINZ: Yes, ma'am, please go ahead.

GOVERNOR BROWN: Okay. When you talk about the voice of the customer and there is two areas it looks like we need some help in or need some improvement. I am not sure what they mean.

So you have got contact agency for contacting Citizens and contact agent to assist with filing claims. We don't have a very good, maybe the perception is -- can you go into some detail what that means and why our scores is in the 40s and 50s?

MR. POPE: Yes, and Governor Brow, I am glad you asked that question. So a couple of things that I will mention, and that is in section three of the survey. We do not calculate, both of those questions that you mentioned are not factored into the score of our customer, into our voice of customer results and partially because that is a yes or no question.

And what that really is, we just want to have a pulse check and understand more of that.

So it is not necessarily, there is multiple different ways that we have looked at that internally. So, one, did you contact your agent before contacting Citizens.

We just want to know, and one of the reasons that helps us gauge that, you know, we have a lot of @27:25 (inaudible) on our website today and we want to know, do we have enough self service tools out there for agents potentially. Why is it that, you know, a customer may potentially call us before they call their agent.

Some of it is based on availability. They call both and they get ahold of us first. There is a lot of different components with that. So I would say with those two questions that you mentioned I would necessarily say it is bad, but I think what I would say is we are further exploring, you know, where we have opportunities that makes sense, because I think at the end of the day we want to make sure the policyholder has an avenue and they are to be serviced.

And if their agent is not there we are obviously there. But we have also gone out there as a company with, you know, with some of our Call Citizens First campaign and really that, that is one of the things that, you know, we, and at the end of the day we are just happy they called us if they are filing a claim. So, you know, whether it is through their agent or going through us, we definitely, you know, it is not necessarily a negative factor.

So that I hope that answers your question on that portion, and then what ties to it is that they, should they file their, did the agent file the claim for them. And again, that is really an indicator, we are just curious, to be honest with you.

Agents do have the ability to file claims, but keep in mind that a lot of times that, especially with Irma was a great example, a lot of those agencies were closed so they had to call us, and that is okay. That really just helps us, especially when we go out there to make improvements to the process and work flow that are associated with the claims process, you know, how much of it, we need to make sure, we don't lose sight of that because, when we say 10 percent are filed through the agent or whatever that number is, we have some additional metrics on the back end where we actually know how many agents actually filed the claim, but we don't want to lose sight of the various servicing channels that, you know, customers have an option for. But the numbers that we see, both of those questions are excluded.

The only question, you know, that go into the overall satisfaction with Citizens end up being the Citizens overall all satisfaction either doing business, and then we do ask them their overall service, their satisfaction with their agent, but we, you know, in regards to them calling us first or assistance with the claim, that is not factored into the scores.

GOVERNOR BROWN: Right, thank you, Jeremy. That makes sense. I got it now. Thank you very much.

MR. POPE: Perfect. You are welcome. Thank you.

CHAIRMAN SCHINZ: Jeremy, thank you for answering, answering those questions. Does anyone else have any questions contained in tab two for Jeremy before we move on to tab three?

GOVERNOR CAPPS: Hi, Mr. Chairman, this is Blake Capps. I have one question.

CHAIRMAN SCHINZ: Please. Phil, did you say you had a question?

MR. ZELMAN: No, I just wanted to let you know that I was -- I had joined the meeting.

CHAIRMAN SCHINZ: Okay, great, thank you very much. All right, well, let's go ahead with no other questions, let's move on to tab three and I recognize Jeremy Pope for the self service strategy. And once again, I want to --go ahead. Is someone saying something?

A VOICE: I think Governor Capps had a question.

CHAIRMAN SCHINZ: Okay, I am sorry, please go ahead.

GOVERNOR CAPPS: Yes, this is Blake Capps. I had one question. I wonder if you could just tell me how the recovery, service recovery works. Like, say I am in the midst of a phone survey about Citizens, and I -- I log a complaint of some kind, some negative impression.

Do you guys like jump on the line right then and say, hello, you know, I would like to address the issue right now? Is that, practically speaking, is that the way that works?

MR. POPE: Yes, Governor Capps, that is exactly how it works. When, in that -- what will happen is they complete the survey but once those red flags are triggered that representative sets the expectation with the policyholder right then and there because this is usually some of our what I would say senior staff and they have, that they are empowered really to help out with one contact resolution in some way, shape or form or have the appropriate contacts to escalate outside of our each our normal escalation process.

They are empowered to go, a lot of times, Governor Capps, we would set the expectation and we will call them back, but we would like to look into this further if it is okay with that policyholder and that right there, a lot of times the same day we are contacting them back for various scenarios.

It could be something we have to look into and it may be a little bit more prolonged, but at the end of the day we are keeping tabs with that policyholder. But yes, I would, to answer your question, it is an immediate activation of a resolution for the policyholder.

MR. BITAR: And Governor Capps, this is Steve Bitar.

GOVERNOR CAPPS: And --

MR. BITAR: Just to kind to add to that, it is important to note that the surveys are actually being conducted by a live person. It is not being done by a recording, and that live person is a trained Citizens employee.

So if the customer during the course of the survey tells the survey administrator that, you know, I submitted a mailing address change three weeks ago, nothing has happened, I haven't heard anything, our employee can actually go into the system, see where that has been submitted, maybe it got hung up in the system, maybe it was misdirected.

They could find it and from a service recovery perspective tell that customer, I see it right here, I apologize for the oversight. I have made the change myself and you should get confirmation of that in writing overnight and it will be mailed out to you tomorrow for instance. So that is how that situation works.

GOVERNOR CAPPS: Right, that is very interesting and commendable. When you turn this person around from a negative to a positive, then does that get calculated into the overall satisfaction rates as a positive instead of a negative, like for example --

MR. POPE: I am sorry, that is a great question, Governor Capps. And we don't and the reason we don't and there is different -- there is a couple of different ways to look at it.

We have kind of adopted, we don't want to skew the results. And so from our perspective the results are the results themselves. So what we hope is, okay, yes, we have turned the situation around. The next time they have a survey with Citizens hopefully maybe they may look at us in a more positive light, or, you know, they may have a different impression with Citizens in one way, shape or form.

But we do not go back and change or re-survey the policyholder on that initial servicing request that came into the organization.

GOVERNOR CAPPS: Okay. Great, thank you.

CHAIRMAN SCHINZ: Thank you, Blake, for your questions. Does anyone else have any questions of Jeremy before we move on?

Thank you. Without any, let's go ahead and turn to tab three over to Jeremy for the self-service strategy update, please.

MR. POPE: Thank you, Governor Schinz, and again, I am going to start off with slide two, and this was provided to us by one of our project managers with the self-service implementation.

And I have some updated figures because these materials were created before we had some of these updates. But on slide two one of the exciting things, just to give an update on some our progress with self-service, what we have implemented and what is on the near horizon, if you will.

We on March 7th launched our My Portal which is, My Policy, I should say, which is our customer portal that replaced our legacy system, and we are really excited about this because this system has a lot more, you know, I guess the possibilities and the abilities for advancement and enhancements in the future are significant and we really think that we are definitely going to progress in the self-service arena over the next few months and years, which -- which matches what we see in the private market, but also at the end of the day meets our customer needs.

I am excited to announce on March 7th we went live with our My Policy customer portal. Before that we -- we conducted a survey and that survey conducted or that survey included agents that are also customers to Citizens, and it was great because we wanted to really cut down any bones with the system and also collect their feedback and we had really favorable feedback with the agent population that participated in our survey.

So we felt pretty good going live, but as you can imagine with any type of go live implementation you are still a little nervous until it goes, you know, you actually pull the trigger. So March 7th we went live with this portal and I have got to

say with much success. It was a cross functional effort. Our system and operations team just did a phenomenal job just with assisting with the BU, with the development and obviously taking lead with implementation. They worked countless hours to get this up and running, and I definitely would consider this a successful launch.

We had minor, minor blips with some technology in the beginning, but so minor there was no impact. We didn't see calls into the organization or anything like that, so it was, it was great.

I can tell you as of yesterday we have 11,000 users registered and that is policyholders registered with the system. To give you a perspective, we had 54,000 users registered with the legacy system. So right now we are at 11,000 and we have not, what I would say activated an aggressive marketing campaign around it yet, but we are in the midst of conversations on how we tackle that.

We did, however, make sure we had a strong communication plan in place that was led by Christine Ashburn's team that really zoned in. There was 54,000 members that were registered with the legacy system, making sure they knew about this new system and some of the enhancements and expanded functionality that were included when we went live on March 7th.

And then we also wanted to target everybody who had an open claim or date of loss and the claim was opened from -- from September 1st to present. So anybody who filed a claim with a date of loss of September 1st through present, were also contacted to make sure they were aware because with this platform we actually, policyholders can get or gather some claim information, they couldn't do that with the legacy system.

So we went live on March 7th, as of yesterday morning we have 11,000 members that are registered through the system. That number will continue to grow. We have not received negative feedback into the organization. We have been measuring call volumes as well because we have dedicated staff there to assist users if they have any questions with registration at all, they are available to help them.

And again, with this new system, enhanced system it really allows for viewing the policy data, claims and even claims payment information which is exciting, and this was really our first step at getting this, this platform live, over the past couple of weeks.

What I would like to also reference is slide three, because this is where we headed with self service and what is on the -- the horizon, if you will, as far as expanding our functionality as an organization, and I am really excited the next four bullets, if you will, I am going to summarize what these are and some of the timeframes we are looking at, but what is being worked on right now is claims FNOL intake to allow policyholders to file a claim through this portal.

That is actively and aggressively being worked on. We have requirement sessions that are kicked off across the organization and this is something, this committee I am sure recalls the Board of Governors to make sure this was last year they asked, next storm season we want the ability for policyholders to be able to file claims online and we will have that.

We are targeting mid June where the FNOL intake for policyholders will be live through our portal, and that is great. It is not only great for just, you know, enable the policyholders another servicing charge or another option but it also gives us some contingency, too.

You know, right now we rely on our, our call centers that are available 24/7, to assist policyholders in filing claims or providing claims vetted and then we also have the agent servicing channel, where policyholders if they wanted to they could call or stop into their agent's office to file the claim.

We really by having this expanded functionality and opening the service charge online I think is going to give us just greater continuity, especially if we have something that happens just as a safe fail. If a phone line goes down or something like that, which we don't expect, but if that does or we have a service failure somewhere throughout the FNOL intake process, we have another channel to be able to rely on as well.

So again, just overall continuity is going to be greater for us when it comes to claims FNOL intake. So again, by mid June that is when we expect that functionality to be up and live.

The next three bullets are additional functionalities that are on the horizon that are being worked on, and that are in our planning cycle. So policy access documents via the portal and we have kind of branded that internally as an electronic document delivery, but at the end of the day, you know, to summarize, this gives -- will give policyholders the ability to retrieve some of their policy documents through our portal and that is, you know, that one gives policyholder choice which is great with -- in preference on how they want to receive some of the materials, but also will potentially, will definitely be a savings to the company when we start to look at what that adoption rate looks like and we are not having to mail out documents we are not necessarily required by law to send out, so we are excited about that.

We are working on a design and second quarter and there is a development activity is planned for the third quarter. The way, based on priority of projects and resources, we are looking, this will be implemented as of right now, looking to be 2019, and as we firm up some of our planning cycles we will be able to nail that date down more aggressively. But right now it is expected and it is forecast that this will more than likely run into 2019, but all the work, as you can imagine with the requirement gathering and the design and those different components have started and will continue until we get to that point of implementation.

The next piece is electronic payments to policyholders, and this includes claims payment, this includes even premium refunds for us to be able to do. There is a solicitation in progress and that is for us to acquire the ability to be able to perform this functionality for our policyholders and this is on target right now to go to BOG in September, where we will be asking the Board to approve spend for the selected vendors, but we do have the formal solicitation process that has kicked off being let by our accounting group and more to come on that, but the implementation does look to go into 2019 for that as well for electronic payments.

Again, looking at all the priorities of other projects and -- and just from a resource perspective that looks like where we are at, where we are landing with it right now.

The last component, and again these are what we would say immediate expansions of self-service that we see in the near horizon is the update contact information via the My Policy portal.

And this is really going to allow -- this is definitely planned for 2019 from an implementation perspective, but this is going to allow policyholders the capability to update their e-mail address and phone number through our portal, which is great because they wouldn't necessarily have to call us or go talk to their agent and we are looking at, you know, how do we do that, but also make sure that we keep, we are working on policyholder engagement with self-service.

We also want to make sure that our agent engagement is there as well, so we can keep agents in the loop with those changes as well, and that will help us with a number of things, making sure that, you know, the customer data that we have on file is accurate, but also give us the ability to acquire maybe missing information we don't have with some policyholders to be able to contact us directly and will help us with future marketing campaigns when we are trying to contact our policyholders.

So that we are excited about, too. As you can imagine, that is a mass strategy, mass clean up and strategy that we are talking through. Discussions have already started on what that approach will be and we look forward to providing this committee updates in the future once that work kicks off.

And Chairman Schinz, that really concludes the update. The rest of the deck is really just a further break out, and I do believe slide three just really recaps what we are focused on, but I would be happy to answer any questions around the self-service component if there are any.

CHAIRMAN SCHINZ: Jeremy, I have a question. Are we -- are we on track or do we need to go ahead and try to expedite the track for the final delivery? And also are we having -- are we having the IT people and the software people help monitor to make sure that we don't have any glitches?

MR. POPE: Yes, you know, I will start with the glitches and just the partnership with our -- our system and ops group has just really been, you know, phenomenal at ensuring that, you know, we have the right requirements, but there is a lot, we have various test systems that we do before we go live with any of these implementations.

I would say a strenuous testing process that we have to make sure that we did that. That is one of the reasons even with the portal, before we just went live we did what we called a soft launch, even outside of testing.

We went from testing into a soft launch where we had users in the live production system so we could try to see, are there other glitches and bugs. The same methodology, the same approach to some degree, although it may alter a little bit, would definitely be tied to each of these different components with self-service because I go back to that first comment, if we don't do self-service appropriately it can back fire and we have got to make sure that we are working on all cylinders.

So that approach, yes, is there, we are comfortable with that approach and that continued approach with Kelly Booten's team and as far as the timeline, we are definitely, you know, as far as these timelines that we have set up we feel are realistic and also still are aggressive to some degree, especially when we have -- we also have some initial, there is various other projects but one of our big projects that we have, as I know that this committee and Board is aware of, but we have our Guidewire platform.

There is a big upgrade that is going on this year and there is a -- there is a huge amount of resources tied to that.

We work -- the timelines associated with the self service component are tied around those as well, making sure where we have capacity we are definitely aligning those resources with the self service component and so we feel pretty, we feel really good about the timeline that is established and that if there are changes to the timelines we definitely would make this committee updated as appropriate in the future.

CHAIRMAN SCHINZ: Thank you, Jeremy. I appreciate that, that answers my question. Does anybody else on the committee have any questions for Jeremy on section three, on the self service strategy update?

Thank you, with none, I would like to bring our final agenda, which is item number four for new business. Does anyone have any new business they would like to bring before the Board?

Well, I have one and what I would like to do is add to the June CSC agenda, I would like Christine to please have for the committee an overview of the communication plan with the new manage repair program and the $10,000 water limit at our next meeting.

I think this would be a good thing for everybody to be able to have and to review and I would certainly -- it will certainly be important to understand all that we are doing to be sure our customers are made aware of the policy changes as our policies roll into the new form starting in August. But Christine, if you could do that for us I would greatly appreciate it.

MS. ASHBURN: Thank you, Chairman, I would be happy to do that.

CHAIRMAN SCHINZ: Pardon, Christine?

MS. ASHBURN: I would be happy, absolutely will be happy to do that. I am taking some notes.

CHAIRMAN SCHINZ: Okay. Well, thank you very much for that. If there are no additional questions I would like to thank everybody for their time and remind you that our next Board, that our next CSC meeting will be June 14th at 10:00 a.m. prior to the BOG meeting in June.

And with all that being said I thank everybody for their participation. And does anyone have any comments or any questions or is there a motion to go ahead and adjourn?

MR. ZELMAN: Motion to adjourn.

CHAIRMAN SCHINZ: There is a first. Do I have a second?

GOVERNOR BROWN: This is Bette Brown. I will second. CHAIRMAN SCHINZ: Bette Brown second. Thank you very much and I appreciate everybody's time and look forward to seeing everyone next weekend in Orlando. This meeting is now adjourned. Thank you.

(Whereupon, the meeting was adjourned.)