

**COHBE POLICY AND PROCESS TOPICS**

**OPEN ITEMS**

ID	Target Introduction Date	Target Decision Date	Topic	Essential Question	Reviewed Initially by: Board, Board Committee or Advisory Group	Policy	Process
1	June 11, 2012	Nov 26, 2012	Certification of Health Issuers and Qualified Health Plans – Part 3	What roles will COHBE and DOI play in the certification, decertification and recertification process? Remaining certification items include participation requirements.	Health Plan Advisory Group	✓	✓
2	Nov 12, 2012	Dec 10, 2012	Protection Against Fraud Waste and Abuse: Technology	What is the appropriate level of accountability and oversight for the Technology Vendor and application?	IT & Implementation Committee	✓	
3	Nov 12, 2012	Dec 10, 2012	Protection Against Fraud Waste and Abuse: Privacy and Security	What technical and procedural safeguards are needed to ensure that the system is secure and that COHBE resources are properly trained in security and privacy rules and regulations to maintain the integrity of our customer’s data?	IT & Implementation Committee Personnel Committee		✓
4	Dec 10, 2012	Jan 14, 2013	Potential 2013 Legislation	What, if any, legislation is needed in 2013 to support the Exchange?	Board	✓	
5	Dec 10, 2012	Jan 14, 2013	Broker Relationship – part 2	What is the appropriate type of relationship that should be developed between the Exchange and brokers?	Finance Committee SHOP Advisory Group Individual Experience Advisory Group	✓	
6	Dec 10, 2012	Jan 14, 2013	Sustainability/ Revenue Model	What is the appropriate revenue model for COHBE and what is COHBE’s plan to become self-sustaining in 2015?		✓	
7	Jan 14, 2013	Feb 11, 2013	Quality Assurance & Improvement	What quality metrics should be captured to ensure that we build an organization that strives for continuous improvement in customer service, operational efficiency, and forward thinking offerings?			✓
8	Feb 11, 2013	Mar 11, 2013	Consumer Satisfaction & Engagement	What methods should be used to track consumer satisfaction and engagement? What metrics will be used for reporting on consumer satisfaction and engagement?		✓	

<sup>7</sup>Change made on 8/12/2012

<sup>8</sup>Change made on 8/26/2012

<sup>9</sup>Change made for 9/24/2012

**COMPLETED POLICIES AND PROCESSES**

ID	Introduction Date	Decision Date	Topic	Essential Question	Reviewed Initially by: Board, Board Committee or Advisory Group	Policy	Process
1	February 2012	February 27, 2012	Administrative Structure and Risk Pool	Should the Colorado Health Benefit Exchange operate as one or two entities: DECISION: The Board decided to have one administrative structure that operates two separate Individual and SHOP Exchanges.	Board	✓	
2	February 2012	February 27, 2012	Administrative Structure and Risk Pool	Should the Colorado Health Benefit Exchange have separate or combined risk pools for the individual and small employer market? DECISION: The Board recommended to keep the individual and small group risk pools separate and to initiate a study to revisit the question within two years after go-live.	Board	✓	
3	March 2012	March 12, 2012	Interoperability with Other State Systems	Determine the level of interoperability with state health care systems. DECISION: The board approved a motion to implement a minimum interoperability approach and noted that Board and staff will continue to be in dialogue about this topic as the technical system development project progresses.	Board	✓	
4	April 2012	April 23, 2012	Small Group Market Size	Keep Small Group Market size fewer than 50 or increase to 100? DECISION: The Board agreed with the DOI recommendation to limit the size of the small group market to employers with up to 50 employees in 2014 and 2015.	Board	✓	
5	April 2012	April 23, 2012	SHOP Premium Payment Options and Payment Aggregation	What is the Exchange's responsibility related to accepting and/or aggregating payments from SHOP users? DECISION: The Board recommended that the only option for Small Employers is to aggregate their premiums through the Exchange (i.e., no direct payment to carriers) and that COHBE would conduct a study after implementation to determine if COHBE should also offer the option for employers to pay directly to carriers.	Board	✓	
6	April 2012	April 23, 2012	Premium Aggregation and Payment Options for the Individual Exchange	What is the Exchange's responsibility related to accepting and/or aggregating payments from individuals? DECISION: The Board recommended that the Individual Exchange not accept payments or conduct billing since the Exchange is required to allow individuals to pay directly to carriers and that COHBE would conduct a study should at a later time to reassess this approach.	Board	✓	

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7	February 2012	February 27, 2012	Risk Pool Management	Combine SHOP and Individual Exchange risk pool or separate risk pools? DECISION: The Board recommended keeping the individual and small group risk pools separate and to initiate a study to revisit the question within two years after implementation.	Board	✓	
8	May 14, 2012	May 30, 2012	Supplemental Plan Types / Supplemental Benefits Types	Will customers have the opportunity to shop, compare and purchase non-EHB benefits and additional plan types on the Exchange? DECISION: The Board recommended creating the technology to support the selection and comparison of supplemental plans and additional benefits beginning October 2013. The final scope of plans and benefits to be included will meet applicable certification criteria, be in the best interest of Colorado consumers and be dependent upon cost and implementation risk.	Board	✓	
9	May 14, 2012	May 30, 2012	Financial Reporting	What financial reporting is appropriate for COHBE? DECISION: The Board approved the Finance Committee's recommendations for the types of reports that will be produced and the reporting frequency that are necessary for SB 11-200 and approved financial reporting matrix. See policy document for details.	Finance Committee		✓
10	May 14, 2012	May 30, 2012	Audit Requirements	What audit requirements are appropriate for COHBE? DECISION: The Board approved the Finance Committee recommendations. See policy document for details.	Finance Committee	✓	
11	May 30, 2012	June 11, 2012	Certification of Exemption from Individual Mandate	Should COHBE use the Federal service in 2014 and 2015 to certify exemptions from the individual mandate or develop its own process to determine and report exemptions from the individual mandate? <sup>1</sup> DECISION: The Board recommended that the Exchange use the Federal service to process Individual Mandate exemption requests.	Board	✓	
12	May 30, 2012	June 11, 2012	Protection Against Fraud, Waste & Abuse: Internal Financial Processes	What framework will be developed for internal controls, risk assessments, and document processing to prevent fraud, waste and abuse? DECISION: The Board approved the recommendations from the Finance Committee. See policy document for details.	Finance Committee		✓

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13	May 30, 2012 <sup>1</sup>	June 11, 2012 <sup>1</sup>	Billing Processes	What are the appropriate processes to use to bill and reconcile payments from consumers and employers to carriers? DECISION: The Board supported Staff's recommendation that there be no separate policy for billing processes, but rather that any billing process follows the premium aggregation policy. If, during the development of the billing process model, any policy issues arise, the issue(s) would be brought back to the Finance Committee to review and make recommendations to the Board.	Finance Committee		✓
14	June 11, 2012 <sup>2</sup>	June 25, 2012	Certification of Health Issuers and Qualified Health Plans: Base Certification Requirements	What roles will COHBE and DOI play in the certification, decertification and recertification process? What are the requirements and the duration for certification? DECISION: The Board agreed with COHBE recommendations – which were in line with state and Federal guidelines and regulations – for accreditation, compliant data, claim payment disclosures, financial disclosures, formulary requirements, licensure requirements, MLR requirements, network adequacy, out-of-network disclosure, provider directory, rate review and solvency.	Rules and Regulations Committee <sup>2</sup> Health Plan Advisory Group SHOP Advisory Group <sup>2</sup> Individual Experience Advisory Group <sup>2</sup>		✓
15	June 11, 2012	June 25, 2012	Administering Premium Tax Credits/Cost Sharing Assistance	How will premium tax credits and cost sharing assistance be administered? DECISION: After careful review, Staff determined that there is really no decision needed on this. COHBE will follow Federal guidelines for administering APTC / CSR.	Health Plan Advisory Group Individual Experience Advisory Group SHOP Advisory Group <sup>3</sup>		✓
16	May 30, 2012	July 9, 2012	Management of Eligibility Appeals	What are the appropriate processes to use to manage eligibility appeals for items such as individual mandate exemptions, advanced premium tax credit and cost reduction allocations and other eligibility appeals? <sup>1</sup> DECISION: Guiding principles regarding role of Exchange in appeals process, difference between verification and appeals agreed. See policy for details	IT and Implementation Committee		✓
17	June 11, 2012	July 9, 2012 <sup>4</sup>	Standard Comparative Plan Information	What is the appropriate information to be displayed to consumers when they are shopping for and comparing qualified health plans? DECISION: Board agreed to design guidelines outlined in policy document.	SHOP Advisory Group Individual Experience Advisory Group		✓

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18	June 11, 2012 <sup>2</sup>	July 23, 2012 <sup>6</sup>	Employer and Employee Choice Architecture – Plan Selection Options	What, if any, restrictions should COHBE place on employers and employees in the SHOP? How, if at all, should COHBE limit the number of plans from which employers can choose? DECISION: Board agreed to allow employers to select from 4 options. See policy document for details.	Health Plan Advisory Group SHOP Advisory Group		✓
19	July 9, 2012 <sup>1</sup>	July 23, 2012 <sup>1</sup>	Open Enrollment Period and Mid-Year Plan Changes	What is the optimal open enrollment period? Are there any special implications around mid-year plan changes that COHBE should consider? DECISION: The Board agreed to use the standard open enrollment periods defined by HHS at least for the first years.	Board <sup>1</sup>		✓
20	July 9, 2012 <sup>5</sup>	July 23, 2012 <sup>5</sup>	Display and Pricing of Supplemental Plans <sup>5</sup>	How should vision and dental plans be sold on the Exchange in relationship to QHPs? Shall carriers be required to bundle vision and dental plans into QHPs? Shall dental and vision plans be available in a standalone add-on fashion on the Exchange? Shall there be both options offered on the Exchange, bundles and standalone add-ons? <sup>5</sup> DECISION: The Board agreed that the system should be developed in such a way as to provide the maximum flexibility for offering and displaying supplemental plans.	Health Plan Advisory Group SHOP Advisory Group Individual Experience Advisory Group <sup>5</sup>		✓
21	June 11, 2012	Aug 13, 2012 <sup>6</sup>	Single Streamlined Application	Is there an advantage to Colorado to create a custom enrollment form, or should COHBE use a standard enrollment form that will support multi-state interoperability and partnership? DECISION: Use data elements provided by CMS for application, add elements as appropriate for Colorado.	Individual Experience Advisory Group SHOP Advisory Group		✓
22	July 23, 2012 <sup>6</sup>	Aug 13, 2012 <sup>6</sup>	Complaint Management	What is the appropriate approach and process for handling complaints? DECISION: Board approved guiding principles identified in document. See policy for details.	Board		✓
23	June 11, 2012	Aug 27, 2012 <sup>6</sup>	Navigator Role and Compensation	What is the appropriate type of relationship that should be developed between the Exchange and navigators? What will be used to identify navigators? Will navigators be compensated by the Exchange and if so, how? DECISION: Board approved guiding principles. See policy for details.	Finance Committee Individual Experience Advisory Group		✓

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24	June 11, 2012	Aug 27, 2012 <sup>6</sup>	Broker Relationship and Compensation	What is the appropriate type of relationship that should be developed between the Exchange and brokers? Will brokers be appointed and certified? DECISION: Board approved guiding principles. See policy for details.	Finance Committee SHOP Advisory Group Individual Experience Advisory Group		✓
25	June 11, 2012	Aug 27, 2012 <sup>7</sup>	Certification of Health Issuers and Qualified Health Plans – Part 2	What roles will COHBE and DOI play in the certification, decertification and recertification process? Part 2 Decision on the following certification items: Marketing requirements, Plan differentiation, essential benefit validation, essential community health providers. DECISION: Board approved recommendations. See policy for details.	Health Plan Advisory Group		✓
26	July 23, 2012	Aug 27, 2012	Customer Service Center	What functions will be provided by the customer service center and which are handled elsewhere? What is the handoff process? How do we ensure that the customer service received is consistently high across all functions? DECISION: Board approved guiding principles. See policy for details.	Health Plan Advisory Group SHOP Advisory Group Individual Experience Advisory Group		✓
27	June 11, 2012	Sept 24, 2012 <sup>9</sup>	Protection Against Fraud Waste and Abuse: Subscriber Data	What accountability does COHBE have to verify self-attested information provided by customers of the Exchange?	Finance Committee	✓	
28	July 23, 2012 <sup>6</sup>	Sept 24, 2012 <sup>9</sup>	Consumer & Employer Rights & Responsibilities	What responsibilities will be allocated to employers and consumers and how will COHBE protect their rights?	SHOP Advisory Group Individual Experience Advisory Group		✓
29	Sept 24, 2012 <sup>9</sup>	N/A <sup>9</sup>	Administration of Risk Adjustment	What is the appropriate Risk Adjustment model for Colorado?	Board	✓	
30	Sept 24, 2012 <sup>9</sup>	N/A <sup>9</sup>	Administration of Transitional Re-Insurance and Risk Corridor Programs	What is the appropriate Reinsurance program for Colorado?	Board	✓	
31	June 11, 2012	Nov 12, 2012	Protection Against Fraud Waste and Abuse: Health Plans	To be allowed to participate in Exchanges, carriers must meet specific legislative regulations. What are COHBE's obligations to ensure carriers meet these regulations and what accountability do we have if a carrier fails to comply?	Finance Committee	✓	

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32	June 11, 2012	Nov 12, 2012	Employer and Employee Choice Architecture: Contribution and Participation	What, if any, percentage of employees should COHBE require of a small business to participate? How should COHBE regulate employers' contributions to their employees' health insurance premiums? To what extent should defined contributions be available to employers? 7	Health Plan Advisory Group SHOP Advisory Group <sup>7</sup>	✓	
33	Oct 8, 2012	Nov 12, 2012	Tribal Relations	Based on discussions with Tribal leaders and other parties, COHBE staff will prepare and present our recommendations for addressing the unique concerns of Colorado's Native American population.			