

Policy Committee Meeting Minutes
Connect for Health Colorado Meeting Room
East Tower, Suite 1025
3773 Cherry Creek N Dr., Denver, CO 80209
June 27, 2016
3:30 PM – 5:30 PM

Board Members Present: Adela Flores-Brennan, Jay Norris, Marc Reece and Sharon O’Hara

Staff Present: Gabriela Aguilar, Jacob Baus, Brian Braun, Luke Clarke, Beth Deines, Saphia Elfituri, Christine Gavin, Kate Harris, Kevin Patterson, Alan Schmitz and Lisa Sevier

I. Welcome and Introductions

Sharon O’Hara chaired the Policy Committee meeting and called the meeting to order at 3:30 p.m., welcoming those in attendance, both in-person and on the phone. The May Policy Committee minutes were voted on and approved.

II. Updates

a. HCPF

Marivel Klueckman, Eligibility Policy Manager with Colorado Department of Health Care Policy and Financing (HCPF) informed the Committee that the Colorado Benefits Management System (CBMS) build for the Annualized Income Policy for Medicaid is now active within their system. The CBMS system interfaces with the Connect for Health Colorado eligibility system.

Ms. Klueckman gave an update on a policy change affecting whether an applicant will qualify for the Medicaid expansion group. If the applicant has a dependent child living at home, and the applicant has not requested Medicaid, advanced premium tax credits (APTC) or cost savings reductions (CSR) for the child, and the child does not have other minimum essential coverage, the applicant will not be allowed to qualify for the Medicaid expansion group. Research has shown that it will affect a very small population, as a majority of Medicaid recipients that have children, are already enrolled in minimum essential coverage or Child Health Plan Plus (CHP+).

b. Federal Regulations – SEP Interim Final Rule

Beth Deines, Appeals & Legal Analyst, updated the Committee on the Special Enrollment Programs (SEP) interim final rule. A letter including comments from Connect for Health Colorado was sent to the Centers for Medicare and Medicaid Services (CMS) regarding proposed regulations that would have an impact on the Marketplace. The comments include:

- Seeking guidance & clarification regarding special enrollment periods based on a permanent move.
- Seeking clarity regarding amendment to carve out a special effective date for those released from incarceration but not for others.
- Seeking clarity & simplification on a rule regarding qualified individuals who were previously ineligible due to a household income below 100 percent of the federal poverty level, and who during the same timeframe was ineligible for Medicaid because they were living in a non-Medicaid expansion state.

- Connect for Health Colorado supports the deletion of an advance available option for special enrollment periods. The deletion will allow State Based Marketplaces (SBMs) to continue operating more smoothly from a technological and administrative standpoint.
- Connect for Health Colorado would like to make CMS aware of technological challenges when implementing changes such as the one that was required and then amended to remove the requirement. Lead times for development can exceed six to nine months and it is requested that CMS be mindful of these technological challenges going forward in the future.

III. **Small Business Healthcare Relief Act of 2016**

Kate Harris, Policy & Research Manager, reported on the Small Business Healthcare Relief Act of 2016 (House bill H.R.5447 & Senate bill S3060) which is moving through congress and has passed through the House of Representatives. It allows small employers to establish accounts to help their employees pay for medical expenses and premiums. It could potentially affect Connect for Health Colorado due to Advance Premium Tax Credit (APTC) eligibility. Efforts to communicate with other State based Exchanges regarding the impact, implementation, timeframe and requirements of the bill have begun.

IV. **Outreach & Communications Advisory Group (OCAG) Presentation**

Adam Fox & Mirna Castro with OCAG presented a report to the Committee on Connect for Health Colorado Open Enrollment 3 (OE3).

- What Went Well in OE3
 - Technical and system improvements made enrollment smoother.
 - The Connector tool improved workflow and referrals for Health Coverage Guides.
 - The PIN system for Health Coverage Guides made calling into the service center easier.
- Challenges in OE3
 - Glitches still remain in the technical systems.
 - Enrollments with Legal Permanent Residents were better, but workarounds that were created didn't always function properly.
 - Customer hand off challenges between brokers and Health Coverage Guides.
- Messaging and Marketing Activities
 - Messaging for finalized insurance rates.
 - Key messages and phrases to put out into the community.
 - Spanish media earned media outreach.
- Recommendations for Improvement
 - Real time data for Health Coverage Guides to better track enrollments, resolutions, etc.
 - Brokers and Health Coverage Guides may need more support or information on the various referral methods and tools between them.
 - Additional events for Health Coverage Guides and brokers facilitated by Connect for Health Colorado.
 - Support Health Coverage Guides and brokers with an overview of the major differences between plans prior to the start of open enrollment.
 - OCAG should be consulted earlier in the process in order to provide more helpful feedback on marketing/messaging materials to fulfill its advising role.

Action Item

Consider the structure of OACG and what the Board expects from the group.

Action Item

Create a formal process to re-elect or elect new leadership for OACG.

V. Participation Policy Draft

Ms. Harris presented the public participation policy draft to the Committee. The policy states that the Board directs Connect for Health Colorado staff to bring significant operational and policy issues to the full Board or Board Committees for review, discussion and to provide the opportunity for public input.

Marc Reece motioned for the participation policy draft to go to the board as amended for full approval. Jay Norris seconded the motion. Ms. O’Hara called the motion to a voice vote. The motion was passed unanimously.

Action Item

Add “shopping experience” to the list of significant issues of the public participation policy draft.

Action Item

Move “broker policy review” from the Policy Committee Agenda topics in September to July or August if possible.

VI. ColoradoCare: Amendment 69 Discussion

Mr. Patterson gave an introduction of Amendment 69 which would create a new system to pay for health care. The Committee is choosing not to take a position on the initiative at this time. Connect for Health Colorado’s legal team will take a closer look at the initiative to see how it would impact The Marketplace.

Action Item

Staff to give Board of Directors key talking points to educate on the initiative.

Action Item

The Policy Committee will ask the full Board to weigh in on Amendment 69.

VII. Public Comment

The following people had public comment:

Deb Judy – Policy Director for Colorado Consumer Health Initiatives (CCHI)

Bethany Pray – Health Care Attorney for Colorado Center for Law and Policy (CCLP)

Brad Niederman – Niederman Insurance Agency

Meeting adjourned at 5:24 p.m.

Respectfully submitted,

Sharon O’Hara

Policy Committee Chair