

Board Meeting Minutes Connect for Health Colorado Meeting Room East Tower, Suite 1025 3773 Cherry Creek N Dr., Denver, CO 80209 September 12, 2016 8:30 AM – 12:00 PM

Board Members Present: Sue Birch (until 10:30 am), Kyle Brown, Davis Fansler, Adela Flores-Brennan, Eric Grossman, Jay Norris, Sharon O'Hara, Denise O'Leary, Marguerite Salazar and Nathan Wilkes

Board Members Joining via Phone: Steve ErkenBrack and Marc Reece

Board Members Absent: None

Staff Present: Gabriela Aguilar, Abe Barela, Adiel Brasov, Luke Clarke, Cliff Craig, Christine Gavin, Karen Gordey, Kate Harris, Judith Jung, Patti Meyer, Kevin Patterson, Carolyn Pickton, Alan Schmitz, Lisa Sevier and James Turner

Approximately 8 guests attended the meeting in-person and the conference line was available for people to join by phone.

I. Call to Order

• Board Chair Adela Flores-Brennan, called the meeting to order at 8:30 am and welcomed those in attendance, both in-person and on the phone.

II. Executive Session

Ms. Flores-Brennan entertained a motion to move into Executive Session to discuss matters concerning sensitive and confidential issues around a personnel matter. A vote was called for and passed with unanimous approval.

The Executive Session is permitted pursuant to CRS 24-6-402(4)(e) & (c) and <math>24-6-402(4)(f) as applicable.

The Board returned from Executive Session at 10:25 am.

III. Business Agenda

- There was a correction to the minutes from the August 8, 2016 Board meeting, the word 'plains' was corrected from the previous spelling of 'planes', the minutes were then voted on and approved.
- The agenda was reviewed and the Policy Committee report was tabled until the October Board meeting.
- Disclosure of Conflicts of Interest: none.

IV. Board Report

Board Chair Adela Flores-Brennan gave a brief report from the September 2nd Colorado Health Insurance Exchange Oversight Committee meeting, stating that Senator Kefalas will be introducing a bill regarding a basic health plan.

Marguerite Salazar, Commissioner of the Division of Insurance (DOI), gave an update on the release of insurance plan rates for 2017. The insurance rates for 2017 will be released in the next two days. There is an average of a 24% increase in premium costs from 2016. A study titled "The Consumer Impact Analysis" was just released, indicating that there is savings available for the consumer who shops the plans and when the second lowest silver plan is chosen. Ms. Salazar also stated that APTC will be going up significantly as well, which will have a positive impact on consumers who qualify for APTC. The study will be shared with the Board at the October Board meeting.

The DOI has formed a small group to discuss the cost of healthcare in the resort areas of region 9, which currently has the highest costs of health care in the state. The Group is chaired by Lt. Governor Donna Lynne and consists of Eagle County hospital CEO's, physicians, legislators and representatives from health carriers, as well as interested parties such as Kevin Patterson. Whatever is proposed through these conversations will include all other areas of Colorado.

V. CEO Report

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James Turner, Director of Technology Operations, reviewed a proposal to execute a <u>new</u> <u>support contract with Oracle</u>. The proposed contract includes:

- A 2-year purchase commitment with a year-to-year support contract
- Cost and cash flow is neutral or better over each of the next two fiscal years including the purchase commitment
- Significant reductions in ongoing support costs after two years
- Brings forward the revert of the Unlimited License Agreement to a per-processor license from March 2017 to Sept 2016

The impact on the Marketplace includes:

- Reduces the set of products down to those actually used
 - No impact to functionality or administration capability
 - Does not reduce the ability to innovate, introduce new functionality or take on more enrollments
- Removes the 500k user limit on Oracle Identity Manager
- Allows the Marketplace to continue to use our highly virtualized environment with capacity to expand
- May require some changes to the server infrastructure to optimize processor licensing

The staff is asking for approval to move forward with due diligence around the proposed contract. If the contract is determined to be a good decision, the final details of the contract will be brought to the Finance & Operations Committee.

The board requested more information and asked for a special Finance & Operations Committee meeting within the week with a full board review in a week.

Nathan Wilkes motioned to adjourn the board meeting to Monday, September 19th. Davis Fansler seconded the motion.

Ms. Flores-Brennan called the motion to a vote and it was approved unanimously as follows: Yes: Steve ErkenBrack, Davis Fansler, Adela Flores-Brennan, Eric Grossman, Jay Norris, Denise O'Leary, Sharon O'Hara, Marc Reece and Nathan Wilkes. No: None Abstain: None

Mr. Wilkes motioned to table the contract discussion and potential motion to Monday, September 19th. Denise O'Leary seconded the motion.

Ms. Flores-Brennan called the motion to a vote and it was approved unanimously as follows: Yes: Steve ErkenBrack, Davis Fansler, Adela Flores-Brennan, Eric Grossman, Jay Norris, Denise O'Leary, Sharon O'Hara, Marc Reece and Nathan Wilkes. No: None Abstain: None

Kevin Patterson, CEO, gave the Board a few updates:

- Mr. Patterson will be touring south & southwest Colorado starting later in the week.
- A new state audit will begin September 30th.
- Barbara Yondorf will have a report on the Public Benefits Corporation by the end of the month.
- The Large Payment Notice Release has come out of CMS and will be reviewed at the next Policy Committee

Mr. Patterson shared a letter with the board addressed to the Marketplace's Broker Partners over an assumption that may have arisen from the draft strategic plan recently presented to the board. The assumption is around requiring customers to complete the application for financial assistance before enrolling in a health insurance plan through the Marketplace – even in cases where denied eligibility is anticipated. Connect for Health Colorado has not changed the current process which allows an expedited non-financial application process. For the future, Connect for Health Colorado is still determining the best way to ensure it is fully complying with the Centers for Medicare & Medicaid Services (CMS) while offering the best customer service to all customers. There is an increased focus on getting the tens of thousands of people who have received a Medicaid denial, but have not signed up for APTC, enrolled in insurance. It is important for the broker and assistant network communities to work together to help educate and sign up these people for insurance.

Judith Jung, COO, reviewed the Action Item list format with the board and specified some points to help better manage the list moving forward:

- Formal definition of what constitutes an action item
- Identify a process for adding items to the list
- Determine when an item is considered closed
- Determine if closed items should be archived and how
- How to assign ownership accountability
- How to establish deliverable dates

A small work group was formed to finalize the content of the list to be most effective and efficient. The list will be presented at the next board meeting. The members of the work group are Judith Jung, Davis Fansler and Sharon O'Hara.

Ms. Jung gave an update on Open Enrollment 4 (OE4) preparation.

- Training: all modules have been updated with an emphasis in creating consistency across all the channels.
 - The broker channel opened September 1st
 - There are additional upcoming broker roadshows and Building Better Health Conference
- SHOP:

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- SHOP rate increases are less than the individual market.
- Plan availability will be broader than last year
- SHOP has built up capacity to handle additional enrollment
- Carrier/Plan Changes were shown by rating areas
- Assistance Network Outreach Report
 - Assistance Site funding decision announced in July
 - 25 organization designated as Assistance Sites
 - 100 Health Coverage Guides (HCGs) anticipated statewide
 - Finalized <u>AN Geographic Funding Distribution list</u>
 - Assistance Network Regional Training was in July August
 - Regional training in collaboration with the Colorado PEAK Outreach Initiative and Enroll America
 - The application period for the Certified Application Counselor Program is August September
 - Ongoing Projects
 - Working with Marketing and Communications to provide consistent and clear messaging, talking points & marketing strategy
 - Working with customer acquisition warm leads funneled to inperson assisters
 - Assistance Network Outreach Report
 - The Community-Based Assistance Program team offered two types of training to Health Coverage Guides (HCGs) and Certified Application counselors (CACs) between March and September 2016
 - o Targeted Outreach
 - Organizations required to provide outreach work plans and target zip codes as part of their applications for funding

- Partnered with Enroll America to implement data-driven outreach strategies to reach EBNE by zip code
- Enroll America cross-referenced the zip codes provided by each organization against the data provided to Connect for Health Colorado by the Colorado Health Institute in May 2016
- Data used represented estimated number of Coloradans who are eligible for advanced premium tax credits yet remain uninsured as of 2016
- County crosswalk and de-duplication of zip codes across the various organizations was performed to segment targeted outreach particularly in the Denver-metro area
- Enroll America provided supplemental work plan development training as part of the Assistance Network in-person training
- Service Center
 - Enhancements to the Service Center
 - Re-engineering of entire training curriculum
 - Password Reset process
 - New "One Ticket, One Issue" ticket management process
 - Redesign and implementation of a new Interactive Voice Response System (IVR)
 - Call Drivers which can have an impact
 - Multiple carriers leaving the exchange
 - Outreach to 180K customers who qualify for APTC and haven't purchased through the Marketplace
 - Marketing activities
 - Political change
- Technology Projects
 - Benefit Display interface enhancements
 - Effective Date Attestation improved electronic data interchange (EDI)
 - FDSH to become compliant with CMS regulations
 - Life Change Events required to remain in compliance
 - Password Reset improved customer experience & reduce service center calls
 - Payment Web Services improved payment reporting process
 - Special Fee Assessment Remove all functionality
 - Broker Transfer Allow brokers to self-serve
 - Assistance Network Allow assistors to self-serve & streamlined certification process
 - Carrier Referral and Lead Capture Design was not accepted by carriers for OE4

VI. Finance & Operations

The Finance & Operations Committee made a recommendation that the Board approve the audit form of Kundinger, Corder & Engel for Connect for Health Colorado's annual audit. The recommendation was approved by unanimous consent.

Nathan Wilkes gave a brief update from the August Finance & Operations Committee meeting:

- There was a report out on staff attrition
- BI self-service site which will be hosted in a cloud based, secure solution phase I will enable self-service for business and IT and will be rolled out in September
- A Draft proposal of the investment policy was discussed

VII. Public Comment

Public comment was made by: Brad Niederman, Niederman Insurance

Meeting adjourned at 11:36 am.

VIII. Board Meeting Continuation

The meeting reconvened on Monday, September 19, 2016 at 10:30 am.

Board Members Joining via Phone: Kyle Brown, Adela Flores-Brennan, Eric Grossman, Jay Norris, Sharon O'Hara, Denise O'Leary, Marc Reece and Nathan Wilkes

Staff Present: Brian Braun, Luke Clarke, Dave Coren, Judith Jung, Alan Schmitz, Lisa Sevier and James Turner

James Turner, CTO, reviewed the <u>proposed Oracle contract</u> with the Board, noting that there is a payment due on the existing Oracle contract September 25th, so decision needs to be executed this week. The proposed offer could be beneficial to the organization if:

- It is cost neutral over 2 years
- A tie-in for 2 years is acceptable
- It must be financially advantageous in years 3 and onwards
- Risks for this deal must be low and mitigatable
- Must not prevent the organization from taking a strategic direction with an Oracle footprint or enrollment platform as a whole
- Must be better than other options on the table

Risks have been mitigated by:

- Ensuring it is audit-proof
- Ability to scale to meet future demand
- No extra licensing requirements

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The Board returned from Executive Session at 11:10 am.

Mr. Turner made a request to the Board for approval to execute a new contract with Oracle based on the contract meeting the criteria as outlined.

Mr. Wilkes stated that a long-term roadmap for technology is essential and it is important for Connect for Health Colorado to start working on the plan. The organization needs to determine the technical environment for 2 years from now and it is up to Board and staff to get this strategic process moving forward.

Mr. Wilkes motioned to approve authorizing Connect for Health Colorado staff to complete the due diligence necessary to negotiate and execute the current contract proposal with Oracle based on the contract meeting the criteria as stated. Ms. O'Leary seconded the motion.

The motion was opened for public comment, there was none.

It was noted that this is not a procurement and it is not necessary to bring the contract back to the Board for approval prior to execution.

Ms. Flores-Brennan called the motion to a vote and it was approved unanimously as follows: Yes: Adela Flores-Brennan, Jay Norris, Denise O'Leary, Sharon O'Hara, Marc Reece and Nathan Wilkes. No: None Abstain: None

The continuation of the September 12, 2016 Board meeting adjourned at 11:27 am.

Respectfully submitted,

Davis Fansler Secretary

> Next Meeting October 10, 2016 from 8:30 am – 12:00 pm