

Board Meeting Minutes

Connect for Health Colorado Meeting Room
East Tower, Suite 1025
3773 Cherry Creek N Dr., Denver, CO 80209
September 14, 2015
8:00 AM – 12:00 PM

Board Members Present: Sue Birch, Davis Fansler, Adela Flores-Brennan, Denise O'Leary, Jay Norris, Sharon O'Hara, David Padrino, Marc Reece, Marguerite Salazar and Nathan Wilkes

Board Members Joining via Phone: Steve ErkenBrack and Eric Grossman.

Board Members Absent: None

Staff Present: Marcia Benshoof, Brian Braun, Luke Clarke, John Neumeier, Kevin Patterson, Carolyn Pickton, Taylor Roddy, Alan Schmitz, Lisa Sevier and Adele Work.

Approximately 17 guests attended the meeting in-person and the conference line was available for people to join by phone.

I. Call to Order

• Board Chair Sharon O'Hara, called the meeting to order at 8:07 am and welcomed those in attendance, both in-person and on the phone.

II. Executive Session

Ms. O'Hara entertained a motion to move into Executive Session to discuss a matters concerning sensitive and confidential issues around a contractual issue and 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)(f) and 24-6-402(4)(e) & (c).

The Board returned from Executive Session at 9:22 am.

III. Business Agenda

- The minutes from the August 10th Board meeting were voted on and approved.
- The agenda was reviewed and no changes were made.
- Disclosure of Conflicts of Interest: None.

IV. Contracts & Policy

General Counsel, Alan Schmitz, introduced a contract for Board Approval. The contract is with Full Tilt, LLC, the consulting company owned and operated by Marcia Benshoof. The contract is for Marcia Benshoof's expertise and is to run for a period of six months as a C-level consulting relationship.

Ms. O'Hara called the contract to a vote. The contract was passed as follows:

Yes: Davis Fansler, Adela Flores-Brennan, Eric Grossman, Jay Norris, Sharon O'Hara, Denise O'Leary, Marc Reece and Nathan Wilkes.

No: None Abstain: None

Mr. Schmitz discussed a recommendation by the Policy Committee that Connect for Health Colorado not implement a large employer appeal process, instead giving those appeals to the Department of Health and Human Services (HHS). The Marketplace will continue to send notice to employers when an employee is seeking financial assistance to purchase coverage through Connect for Health Colorado. It was noted that these appeals pertain to employers with 100 plus employees and have nothing to do with SHOP. Additionally the appeals would demand a large amount of resources that are needed for more pressing customer needs.

Davis Fansler motioned that Connect for Health not implement a large employer appeal process. Adela Flores-Brennan seconded the motion.

The motion was approved unanimously by a voice vote.

V. Board Development and Operations

Ms. O'Hara reported on the September 11th Legislative Oversight Committee meeting. The search for a permanent CEO was discussed, with the Oversight Committee indicating that the Connect for Health Colorado Board should proceed with the CEO search with the best interest of the organization in mind.

Ms. Flores-Brennan stated that the Committee discussed possible legislation. Although the Marketplace did not have any legislation to suggest, it was noted that there will be future opportunity to bring proposals through the individual legislators.

Ms. O'Hara thanked the Colorado Health Foundation for sponsoring the Building Better Health Conference for the second year. The conference will take place on September 28th and 29th.

VI. Marketplace Development and Operations

Interim CEO Kevin Patterson updated the Board on the following:

- The focus for the <u>Assistance Network sites</u> has been on location with the thought in mind that there should be no need for people to have to make separate trips to get information on health insurance. Through the Colorado Health Access Survey (CHAS) the organization is able to determine where the underinsured are and concentrate efforts in those areas in order to reach those that need it most. Mr. Patterson noted that there is a strong alignment with Certified Application Counselors (CAC's) through the health system and brokers.
- Connect for Health Colorado is being asked to participate in a lessons learned
 presentation as the only state to successfully submit the 2015 policy level enrollment
 file. Due to the Marketplace collaborating with CGI the organization has been able to
 stay in front of the other exchanges with this information.

- While open enrollment is critically important, Connect for Health Colorado needs to
 have a broader context as to what the Marketplace can do. It is necessary to talk about
 new products, new services and other value propositions. There is an opportunity to use
 the strategic planning process to map out how much more the Marketplace can do.
 Along these lines, the State Network has agreed to assist Connect for Health Colorado
 by sending a top team to help build a strategic plan that focuses on these opportunities.
- An additional support tool will be added to the decision making tools on December 1st.
 With assistance from the Colorado Health Foundation, the Marketplace will add an Out-of-Pocket Cost Estimator. These decision making tools are designed to make it easier for customers to shop and make the best decisions for their health insurance needs.
- There will be a Harvard study to assess how people make decisions on health insurance and how the available information can affect these decisions. Ms. Flores-Brennan also pointed out that the Rand Corporation has been contract by the Office of the Assistant Secretary for Planning and Evaluation (ASPE) to do an analyses on people who switch plan tiers.
- For open enrollment 3 (OE3):
 - All code has been delivered by all the vendors on or before schedule.
 - End-to-end testing started on time on September 10th.
 - SES functional testing will continue into the next week and will run parallel with the end-to-end testing.
 - A joint team of the Marketplace, CGI, HCPF, OIT and Deloitte is doing functional testing.
 - Defects, execution and pass rates are being corrected in builds over the next week. The expectation is to see a higher execution rate and a higher pass rate for testing.

Action item

Send the list of the assistance sites with executed contracts to the Board.

VII. Financial Update

The CFO, Brian Braun, gave the Board a summary of the financials through June, 2015.

The <u>Financial performance</u> for the year is in line with the revised expectations. Revenue sources are mostly at or ahead of budget. There is a major expense variance due to higher costs from the Customer Service Center. The other large variance, on a cash basis, is for the purchase of software licenses, the accrued expense of which is spread over multiple years.

Action item

• Determine the biggest risk in the budget going forward.

It is Connect for Health Colorado's policy to require Board approval for choosing A133/Financial auditing company. The Finance and Operations Committee approved the staff's recommendation to continue with Kundinger, Corder and Engle, P.C.

The Board approved the recommendation unanimously by a voice vote.

VIII. Simultaneous Enrollment

Chief Strategy and Sales Officer, Marcia Benshoof, updated the Board on <u>simultaneous</u> enrollment (SE):

- SE is dual enrollment that occurs when an individual covered through a private insurance health plan on the Marketplace becomes eligible for Medicaid, or vice versa.
- Medicaid eligibility can be determined retroactively.
- Most retroactive determinations are dated with in the preceding 90 days and some determinations are applied further than 90 days in arrears.
- Private health insurance is not retroactive coverage.
- Eligibility for Medicaid can be determined more than once in a 12 month period.
- QHP eligibility is made for one policy year cycle.
- Colorado was the first state to identify and set forth a process for addressing SE.
- CMS and the IRS requires Marketplaces to administer APTC/CSR for eligible individuals and families.
- Connect for Health Colorado is required to remove financial assistance in the instance of SE.
- There is limited guidance from federal regulatory agencies.
- Guidance offered by CMS in March 2015 seemed to conflict with IRS guidance.
- SE has an impact on the consumers, carriers and providers.
- Connect for Health Colorado has been working with HCPF to create an automated report which has been in the testing process since June.

The short term plan for dealing with SE is to stabilize a monthly, automated customer intervention process, obtain guidance from CMS as to consumers being "made whole" per their August 2015 update and collaborate with HCPF on 1095's for 2015.

The mid-term plan is to participate where appropriate on 2014 workgroup recommendations and research Arkansas and other states churn reduction efforts.

Action item

 Provide the Board with the states that are making churn reduction efforts.

Sue Birch stated that in the future the state can create an eligibility alignment with household composition, income and determination. HCPF, Connect for Health Colorado and the Governor's Office have begun determining the best way the bring this together.

Currently, the Marketplace has an outbound team that reaches out to the customers that may be subject to churn. This team understands the dynamics and help the customers with the decisions they need to make.

IX. Public Comment

Debra Judy, Policy Director of the Colorado Consumer Health Initiative, appreciates the active approach to catch when a person may become simultaneously enrolled; however, there is still concern about the premium and cost share. Ms. Judy also asked for further clarification as to when there will be stakeholder testing with the Shared Eligibility System.

Ms. Benshoof announced that the stakeholder testing is scheduled for September 23rd through October 1st and will take place and the Connect for Health Colorado offices. There will be 425 available slots for testing, an email will be going out to advocates, brokers, Health Coverage Guides and carriers.

Meeting adjourned at 11:08 am.

Respectfully submitted,

Davis Fansler Secretary

Next Meeting

October 12, 2015 from 8:30 am - 12:00 pm