



# ***SHOP & QHP Decertification and Individual Responsibility Appeals Update***

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*Board Meeting - August 12, 2013*

# Agenda

- Categories of Appeals
- SHOP Eligibility Appeals
- QHP Decertification Appeals
- Individual Shared Responsibility Appeals Delegation
- Operations
- Future Items

# Categories of Appeals

## August 12<sup>th</sup> Board Meeting

1. SHOP eligibility
2. QHP decertification
3. Individual Shared Responsibility Exemption

## August 26<sup>th</sup> Board Meeting

5. Agent/Broker (Producer) Arbitration
6. Individual Eligibility
  - a. Determination/Amount of APTC/CSR
  - b. Catastrophic health plan
  - c. Special enrollment period
  - d. Timeliness of Marketplace determination

## Deferred

4. Employer shared responsibility

# Uncertainties

- Volume of Appeals
- Final Regulations
- Office of Marketplace Eligibility and Appeals (OMEA) implementation and operations

# SHOP Eligibility

**Goal:** To resolve the majority of appeals through the informal resolution process

- No option to delegate to HHS
- Small businesses and their employees can appeal their eligibility for coverage in the Small Business Marketplace
- The Marketplace will conduct a review of eligibility factors of SHOP appeals and make a binding decision
  - Decisions will be made within 90 days of the appeal request (per federal guidance)
  - Any changes as a result of the appeal will be retroactive to the date of application

# QHP Decertification

**Goal:** To work in close coordination with the Division of Insurance (DOI) to resolve QHP decertification appeals

- No option to delegate to HHS
- QHP appeal rights are outlined in carrier contract
- Marketplace will coordinate with the DOI on applicable QHP certification appeals
- Carriers will receive appeal decisions within 60 days of submission

# Individual Shared Responsibility Appeals

Connect for Health Colorado Board unanimously voted for using HHS' federal service to determine individual shared responsibility exemptions (6/11/12)

- Based on figures in a September 2012 CBO report, approximately 300,000 Coloradans may be exempt.
- Advantages of delegating appeals:
  - Reduce implementation workload and risk
  - Eliminate need for Marketplace technology to send and receive exemption case info
- Disadvantages:
  - The level of coordination is unknown. Marketplace action will be required based on federal determinations.
- Unknown:
  - Office of Marketplace Eligibility and Appeals (OMEA) procedures and capacity
  - Whether Marketplace staff could track appeals statuses, if consumers call.

**Board IT and Implementation Committee and staff recommend delegating exemption appeals to HHS**

# Operations

## Staffing Decision

- 1 Paralegal and 1 Analyst will be hired in August and trained in September for go-live.
- Director of Appeals and Legal Counsel will also help process appeals

## Systems Supporting Appeals

- No new systems needed for appeals
- Service Portal, Oracle CX, OnBase, and hCentive-OnBehalfOf.

## Intake of Appeals

- Online, mail, fax, and telephone.
  - On the phone, only primary account holder or authorized rep has access
  - Health Coverage Guides, Agents and Brokers are not authorized to submit appeals on behalf of customers but may assist in the process.



# Operations

## Training

- **Goal:** Leverage existing training modules and create scenarios specific to appeals for in-class learning
- 3 weeks of training for Appeals staff
  - Online (self-guided)
  - Systems (classroom-based)
  - Scenarios (classroom-based)

# What's to come...

## August 26<sup>th</sup> Board Meeting

- Individual Eligibility Appeals
  - Recommendation on formal hearings entity
- Informal Resolution Procedures
- Agent/Broker Arbitration Procedures

# *Board Approval to Implement*

- **Recommendation:** The Board approves delegation of Individual Shared Responsibility exemption appeals to HHS.