

Requirements for a Shared Eligibility Service:

1. An individual that completes an online application through either Health Care Policy and Finance (HCPF) or Connect for Health Colorado (C4HCO) should have their data sent to a shared rules engine, where modified adjusted gross income (MAGI) is run. A real-time response in the categories outlined below should be received every time:

- If answer is "not eligible for Medicaid" the applicant and application data is sent to C4HCO immediately.
- If answer is "yes eligible for Medicaid", the individual is sent through HCPF's process.
- If there are inconsistencies or missing data needed to determine MAGI, HCPF and C4HCO will work out a process to verify that information.
- Agree to develop a process that ensures C4HCO eligible proceed with eligibility determination even if applicant fails ID proofing or any federal hub calls and to support this process, agree to make any corresponding changes needed.

2. Single, logic based, dynamic application that is shared between C4HCO and the State and provides a MAGI determination. Based on this MAGI determination, an individual will be routed to the appropriate place. If routed to C4HCO, an Advanced Premium Tax Credit (APTC) and/or Cost Sharing Reduction (CSR) determination will be made. Provides a streamlined consumer experience where the customer is not asked any questions that would not pertain to their individual circumstance. Adheres to federal requirements regarding MAGI determinations. The single application design and requirements must be approved by the State, C4s Board of Directors, and CMS before build commences. C4HCO and the State will develop potential options for the consideration of other programs in the application. Any decisions regarding other state public programs that will impact the shared State and C4HCO application experience and MAGI determination require approval from C4HCO's Board of Directors. Will look to other states for both examples of single, dynamic applications as well as how they interface with other public programs.

3. New governance approach that requires a revised contract between C4HCO and the State and includes an agreed upon resolution process and strong stakeholder management (e.g., counties). As a part of this new governance, a shared project management resource will be identified to ensure good communication and a requirement that any changes to the application and the shared rules engine have to be approved by the State and C4HCO's Board of Directors prior to implementing. Need to identify a conflict resolution mechanism, as well as determine how funding streams, requirements, and constraints come into play. Prioritization for maintenance and upgrades as well as SLAs must be in place to protect both organizations. In addition, all requirements, design, and operational policies have to be approved by the State and C4HCO's Board of Directors before implementing.

4. Both Medicaid and C4HCO need to own and maintain their customer information. C4HCO has a fiduciary responsibility to the Board of Directors and carrier partners – as well as the citizens of Colorado. To achieve appropriate data governance, the system of record for customer data must be the organization that enrolled that customer.