

Board Meeting Minutes
Connect for Health Colorado Meeting Room
East Tower, Suite 1025
3773 Cherry Creek N Dr., Denver, CO 80209
November 25, 2013
8:30 AM – 12:00 PM

Board members present: Richard Betts, Susan Birch, Steve ErkenBrack, Eric Grossman, Gretchen Hammer, Sharon O’Hara, Kevin Patterson and Arnold Salazar.

Ellen Daehnick, Mike Fallon, and Nathan Wilkes joined by phoned

Staff present: Camisha Bailey, Marcia Benshoof, Cammie Blais, Patty Fontneau, Lindy Hinman, Bill Jenkins, Christa McClure, Myung Oak Kim, Lisa Sevier and Adele Work.

Approximately 25 people attended the meeting in person and additional people joined by phone.

I. Business Agenda

There were no additions or edits made to the November 11, 2013 Board meeting minutes.

Vote: The minutes were unanimously approved. There were 9 voting members present.

There were no changes made to the agenda.

There were no disclosures on any new conflicts of interest.

II. Board Development and Operations

1. Board Chair Report

Gretchen Hammer reported on the [2013 Colorado Health Access Survey](#) created by the Colorado Health Institute, which was fielded this summer and recently released. The data comes from 10,000 Coloradans who answer questions from a telephone survey about themselves and their families.

Gretchen provided the Board with an update from the Legislative Implementation Review Committee meeting. The members expressed their appreciation and discussed the streamlining of the Medicaid Eligibility determination. The members also requested the Board be more quick and proactive distancing the Marketplace from the ads that do not align with the current marketing scheme of the Marketplace and make clear what standards are in place for those using the Marketplace brand.

Steve ErkenBrack recommended that the review of the current standards of use of the brand be brought to a Board committee meeting to determine if it needs to be a policy. The Board decided it will be taken to the Policy and Regulations Committee.

III. Exchange Development and Operations

1. CEO Report

a. Marketplace update

Patty Fontneau reported the Federal government extended the 2013 open enrollment period through to 12/23. In addition, they moved the 2014 open enrollment period from October 15 – December 7 to November 15 – January 15 for a policy start date of February 1. Gretchen noted that the time change may require a redefinition of the time period in the state statute in order to line up with state regulations.

Patty provided an update on the Marketplace's [metrics](#) for October 1 – November 16 and reported steps the Customer Service Center is taking in preparation for a surge in volume as open enrollment nears the closing date.

Eric Grossman suggested the technical metrics be on a weekly or bi-weekly basis in order to see a snapshot of trends.

b. System Upgrades and Maintenance Schedule Stabilization

Patty reported on the planned technology improvements. There will be two releases in December and January and will move to a monthly basis after that.

Eric asked if there were any concerns with having a major release in December affecting people signing up. Patty assured extensive testing is taking place to make sure it will not affect people signing up.

c. Carrier Feedback

Marc Reece, Associate Director of the Colorado Association of Health Plans, provided feedback on the communication between carriers and Connect for Health Colorado. Marc explained the technical communications required between the Exchange and the carriers and that CAHP has received positive feedback about the communication of data between the two. Some carriers are seeing an increase in their call center volume regarding general Exchange questions versus specific plan questions.

Gretchen thanked Marc for reaching out to the carrier community and providing the Board with an update.

2. Division of Insurance Update

Kevin Patterson stepped in for Marguerite Salazar and indicated that an announcement from the Division of Insurance would be forthcoming.

3. Policy and Process Topics

a. **Shared Eligibility**

i. *Presentation*

Lindy Hinman presented the Shared Insurance Affordability Program Eligibility Service [policy document](#) to the Board. There are 4 requirements that were initially agreed upon by the leadership teams of Connect for Health Colorado, HCPF and the Governance Office. The current goal is to review those and get approval based on the [recommendation to move forward](#).

Sharon asked if the shared eligibility service was without a governance model. Lindy replied that the process of creating the governance model was underway. Sue added there is an Executive Steering Committee that exists for the state that drives the governance for CBMS.

Ellen asked when the Board will see the level of implementation with a timeline and resources. Lindy explained that timelines and resources would be established after the direction was approved. It's anticipated that a more detailed work plan would be available by the end of January.

Arnold Salazar moved to accept the staff recommendation. Eric Grossman seconded the motion.

No further Board discussion.

ii. Public comment

Matt Pfeifer, Chronic Care Collaborative, commends HCPF for creating a more dynamic application process, are in support of a shared eligibility system and encourage implementation as soon as possible. Suggest that it be ready in time for people with a special enrollment period.

iii. Vote

Vote: The motion to accept staff recommendation was passed with a vote of 8 yes and 1 abstention. There were 9 voting members present. (Yes: Richard Betts, Steve ErkenBrack, Mike Fallon, Eric Grossman, Gretchen Hammer, Sharon O'Hara, Arnold Salazar, and Nathan Wilkes. Abstain: Ellen Daehnick).

4. Audit Update

Steve Corder and Tiffany Knight, auditors with Kunderling, Corder & Engle, presented the [audit report](#) for the year ended June 30, 2013. Two audits were conducted, a financial statement audit and an OMB Circular A-133 audit to test COHBE's compliance with Federal rules and regulations.

Richard commented on the robust nature of the discussion at the Finance Committee and added if anyone had any questions or would like more information about the adjustments to the financial statements needed in order to close the year end books, please bring them to the Committee.

5. Consumer Protection and System Security

Cammie Blais and Bill Jenkins presented on the [consumer protection and system security](#) in place to keep customer information secure. A security system with motion sensors and cameras has been placed in the Customer Service Center as well as the Denver office. All staff has been equipped with identification badges and there is a certification process with background checks and other security measures for Health Coverage Guides and Brokers.

Bill reported an information security and privacy program is being implemented which will be updated continuously; have taken Federal requirements and Board policy guidance to develop series of control areas that are being rolled out in order to be in compliance with Minimum Acceptable Risk Standards (MARS-E).

Eric asked for clarification on the proactive work being done to catch intrusions to the system before they occur. Bill assured there are firewalls and intrusion detection methods in place that are constantly reviewed to prevent an attack on the system. Patty added multiple levels of vulnerability and penetration testing has been performed

and that foreign IP addresses are not able to access the site in order to minimize vulnerability.

6. Experience

Tim Bolin, Connect for Health Colorado Customer Service Center, shared experiences/feedback from the Customer Service Center. They are seeing an increase of positivity from customers in the past couple of weeks. The early challenges seen were account creation and password management. The current main concern is the amount of time needed to complete an application. The Customer Service Center is taking calls on a daily basis with people very satisfied with the care they have received.

Sharon asked if there is an ongoing list of where improvements can be made. Tim responded there is a current list they go through regularly on improvements that can be made.

Steve asked if it's the Medicaid eligibility process that has created increased positivity. Tim responded it's part of the increased efficiency of the website but also the increased efficiency of the staff due to experience. Sue added that we are at about 80% real time eligibility and are also educating people to have their information ready before they call in making the process smoother.

Gretchen asked for an update at the December 9 board meeting on plans to handle the volumes in December and the plan to handle those who apply and but are not able to purchase insurance due to a wait on their Medicaid eligibility determination.

7. Legal Entity/Ancillary Products

Cammie Blais and Marcia Benshoof [presented](#) on ancillary products and services and the need for a separate legal structure. CMS have provided [guidance](#) for the setup of the structure for ancillary services. Recommend establishing a separate legal entity to develop and coordinate ancillary products and services. Language was added in the HB13-1245 legislation to create a separate entity.

Gretchen clarified this is the introduction of the policy document that will go through a Board committee to be voted by the Board at a later date and request the staff provide a timeline, contribution to sustainability and resource allocation so the Board can better understand the topic.

Steve asked who we would be competing with. Patty explained it would be a distribution channel, so we would not be competing with others but rather partnering with them to sell products. It was approved by legislators to be approved by the Board.

8. Public Comment

George Swan, retired hospital administrator, commented on the consumer protection noting when googling Connect for Health Colorado, ended up on a fake site. Also wanted to reiterate the public would benefit from having a balanced score card.

Eric commented on the current numbers, the conversion rates and what things are being done in order to make sure we hit our goal by the end of December.

Gretchen concluded the meeting noting the Board will meet next on Monday, December 9.

IV. **Adjourn**

The Board meeting adjourned at 11:45 AM.

Meeting adjourned: at 11:45 AM