

Board Meeting Minutes
Conference Call
December 23, 2013
8:30 AM – 10:00 AM

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

Staff present: Camisha Bailey, Cammie Blais, Patty Fontneau, Lindy Hinman, Myung Oak Kim and Adela Flores Brennan.

Additional members of the public joined by phone

I. Business Agenda

Ellen Daehnick asked that Arnold Salazar’s comments about the media be added to the December 9th minutes.

Vote: The December 9th minutes will be reviewed at the next board meeting.

Sharon O’Hara asked for confirmation that the public were on the call. Gretchen confirmed.

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 had no new update for the board.

III. Exchange Development and Operations

1. CEO Report

Patty Fontneau provided an update of the weekly [metrics](#) for the Marketplace through December 21st. She also identified a change in policy announced by HHS on 12/19, that anyone that received a cancellation notice from their carrier will have the option to buy a catastrophic plan.

Marguerite Salazar added that her team is working with carriers and Connect for Health Colorado to make sure this is implemented appropriately. They are working on talking points identifying how it will work.

Patty made two comments: 1. This could potentially create confusion because tax credits cannot be used on Catastrophic plans. Often, the cost of the more comprehensive bronze or silver plans can be less than the Catastrophic plan if a tax credit is available. 2. She also commented that the guidance from HHS directed customers to work directly with their carriers on accessing the Catastrophic plans. In Colorado, we have the

technology to handle this change through the Marketplace – and the Carriers have indicated that they prefer that approach. HHS’s guidance will create additional confusion.

Steve ErkenBrack expressed his grave concern over the last minute change – commenting on the fact that the Catastrophic Plans are designed and priced for young, healthy people. This could raise significant pricing issues in the long term. He asked for feedback from the Colorado Association of Health Plans

Marc Reece with CAHP commented these plans have age tables for people over 30, but they weren’t designed for them. He reiterated Patty’s comment that with the tax subsidies, sometimes customers can find bronze and silver plans for cheaper than a catastrophic plan and have more coverage. The federal guidance has come with less flexibility than previous statements because we are so close to the deadline, so there still some questions to be answered.

Sharon asked for the number of people that would fall into this category. Patty commented that it’s anyone who has received a cancellation. Marguerite clarified it was 250,000 covered lives, but we don’t know how many people opted for early renewal.

2. Medicaid Application Status

Sue Birch reported the department has continued to make upgrades to the system. The current real-time determination is functioning at about 50 – 80%. Have tripled staff to process and clear all backlogged cases. Everything coming in now is processed either real-time or within days. The process going forward is to keep working everything coming in and not have any backlog as the end of the extended enrollment continues for 1/1. Sue thanked her internal teams, Maximus and the counties for all of their work keeping the cases and eligibility determination current.

Arnold Salazar asked if the current enrollment figures hit our conservative projected number. Patty commented it exceeds our conservative enrollment projections. Arnold indicated that he hopes the media picks this up. Continue to be encouraged by what has been done and is pleased with where we are.

Eric Grossman echoed what Arnold had to say and believes the real time eligibility is a good percentage. Eric asked if there was any guidance or update on payments from the carriers. Patty commented we receive information when people pay but there is a lag.

Marc added the payment information is starting to pick up. Most carriers are focused on making sure they get the invoice out to the customer. The first week of January will be the number 1 focus given the deadline.

Sharon asked what happens if someone shows up at the ER January 1. Marc explained if the consumer hasn’t paid 1st months premium they won’t have an insurance card. They will be treated as an uninsured, so will have to pay out of pocket. When they pay their premium, the carrier will reimburse those costs.

3. Operational Plans for 12/23 Through Year End

Lindy Hinman provided an overview of current operational efforts and thanked everyone for their hard work. She acknowledged the longer wait times on the phones and encouraged customers to call early in the morning or late at night for shorter wait times. The Customer Service Center has extended hours, shortened lunch breaks, added overtime and staff in Colorado Springs, Denver and an additional outbound center to accommodate more people.

Eric asked to expand transition and attrition. Lindy clarified the attrition is focused on staff departures in the service center and our efforts to stay ahead of the staffing needs.

Lindy outlined communication regarding payment deadlines. Carriers are working with us every day to make sure people are getting processed. We have deployed a white glove team to help people who need additional assistance on the ground. Payment is not due until 1/10 and each carrier has their own invoicing cycle so we are trying to get the message out regarding timing. We are also preparing for appeals as we move through this process; we have 2 appeals analysts and legal counsel to support this area.

Patty added if someone appeals both Medicaid and APTC, it is one process that the consumer would go through; however, Colorado did choose to allow folks the opportunity to appeal one or the other if they preferred.

Gretchen asked how quickly we would shift to 2/1 enrollments and the 1/15 deadline. Myung Kim explained the messaging will change back after 1/1 and we have messaging that will run next week. Patty added we have also reached out to our distribution channels to get the message out.

Gretchen opened the floor for public comment.

There was no public comment.

Gretchen commented we should be proud as a state that people have been able to access get access and thanked staff for being on the call today. The board will be back to a normal schedule in January.

IV. Adjourn

The Board meeting adjourned at 9:40 AM

Meeting adjourned: at 9:40 AM