

Understanding Eligibility Paths- SBM/FFM Application Pathways Review & CT 'APTC Fast Path'

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Scope & Approach

- Monad Solutions was engaged to support Connect for Health Colorado in assessing different eligibility models to **identify opportunities to streamline the eligibility application process** (Medicaid/CHIP/APTC/CSR)
- 5 SBMs¹ and the Federal Marketplace were explored
 - California
 - Connecticut
 - New York
 - Rhode Island
 - Washington
 - FFM
- Analysis focused on reviewing each State's screens/screen flows related to financial assistance applications to:
 - Understand **screen flow and typical user journey**, e.g. screens navigated, questions scheduled etc.
 - Understand **how dynamic** each eligibility application is and identify any **expedited pathways** that **improve user experience**
 - Map the expedited pathway for **'APTC fast path'** (CT)

¹ KY was also planned to be included in scope of this review, but it had to be excluded due to lack of source data being made available from KY State partners within the required timelines

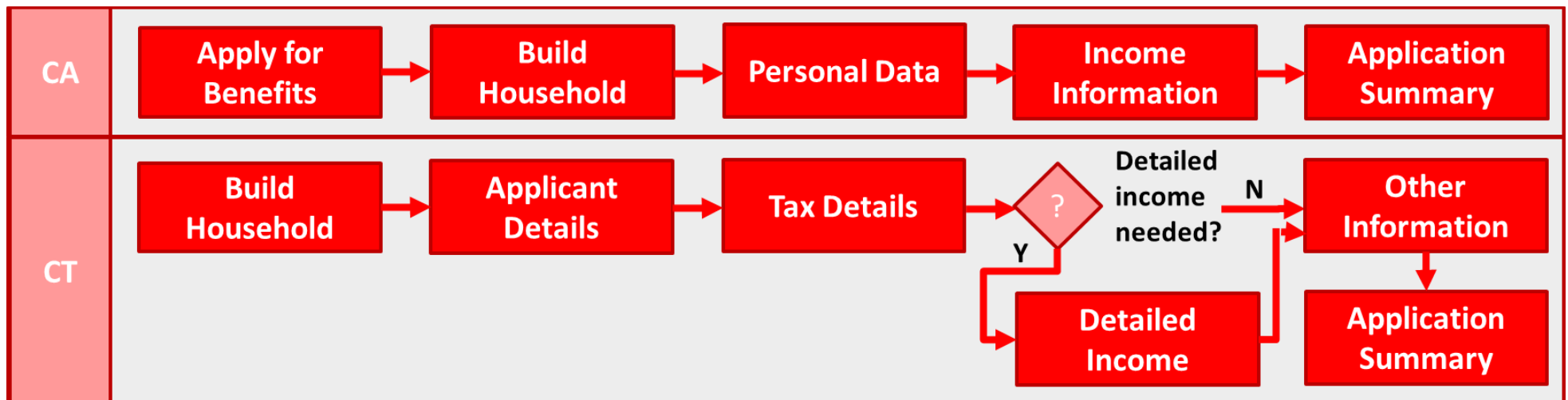


SBM/FFM Screen Flow Profiles

- All 5 SBMs analyzed and FFM followed broadly equivalent **navigation flows** through a set of application stages that serve as the core building blocks of the financial assistance application

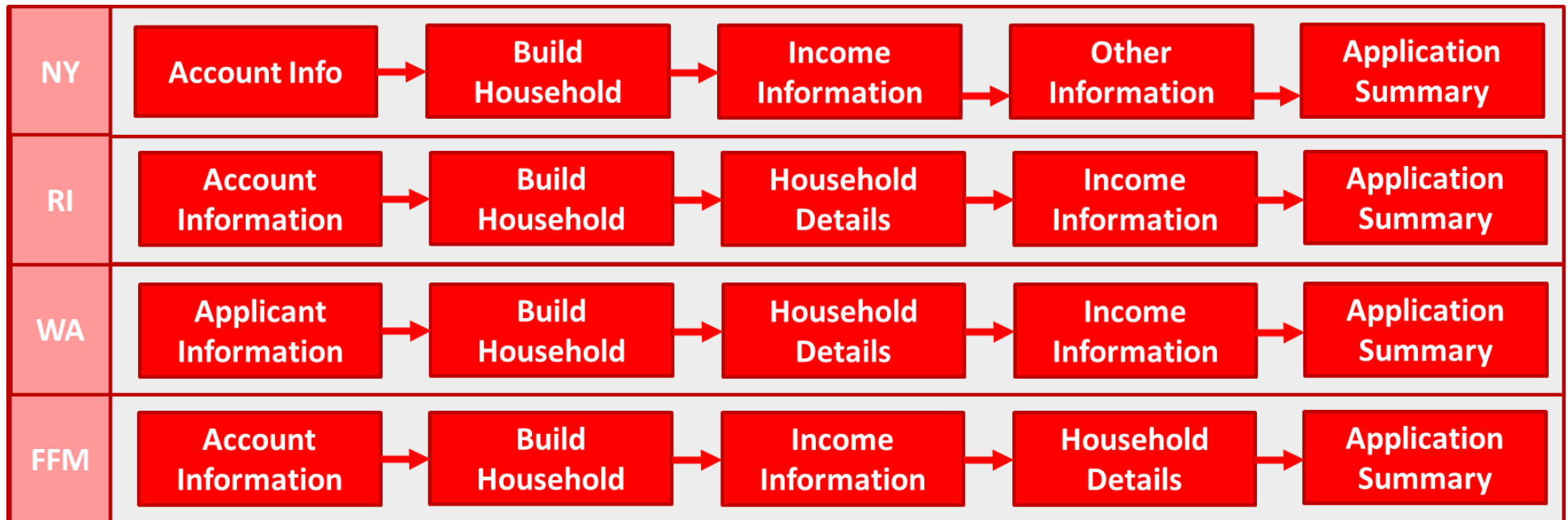


- While the application stages were represented across almost all SBMs/FFM applications, the **sequencing** (screen order) and substantive **content** (questions) of **each application stage** sometimes **differed** between States/FFM
- These navigation flow differences between SBMs/FFM can be seen on the screen flow profiles displayed below and on the next slide



SBM/FFM Screen Flow Profiles

- The diagram below continues the **comparative mapping** of the **primary navigation blocks** between the SBMs/FFM analyzed for New York, Rhode Island, Washington State and FFM



Comparative SBM/FFM Screen Flows

- All 5 SBMs analyzed and FFM followed **broadly equivalent navigation flows** through the set of application stages, though the screen order, question scheduling and navigation sequence differs between SBMs/FFM
- There is therefore variability in the SBMs/FFM profiles of the typical number of screens and questions scheduled for financial assistance applications

SBM/FFM:	# screens:	# questions:
CA	22	153
CT	No data	No data
NY	23	106
RI	14	105
WA	16	86
FFM	13	73

- Nevertheless, this raw count of screens and the typical number of questions scheduled across those screens does not necessarily help us to discern the quality of the user experience navigating the application process

- To address user experience, it is vital to **focus on the user journey**, and the **navigation pathways** through the online application process, particularly through **dynamic screen flows** that guide the user journey **based on data the customer has already provided**
- Compared to the more linear navigation pathways shared across the SBMs/FFM, **Connecticut presented a highly dynamic navigation** approach including an **'APTC fast path'** (described in the next slides)

CT – An Expedited ‘APTC Fast Path’

- Access Health CT adopts a highly **customer-centric navigation** approach through the online application process for subsidized health insurance, with a **‘quick flow’** for APTC only applicants
- **The navigation screen flow is based on customer eligibility**
 - This determines the set of screens and associated application questions that the customer needs to complete
 - **Pathway decision** is based on their **calculated FPL%** that is **assessed at the *earliest* opportunity** in the application process
- **The subsidized customer eligibility profiles include:**
 - APTC Only Applicants (Quick Flow) (*outside range for Medicaid/CHIP*)
 - Non-APTC Quick Flow Applicants (*may be APTC/CSR/Medicaid/CHIP, or need to estimate income*)
 - Medicaid & CHIP Only Applicants
 - Mixed Household Applicants



CT – An Expedited ‘APTC Fast Path’

- Screens are categorized and grouped based on the defined customer eligibility profiles
 - So that the screen flow can be **dynamically adjusted** based on the customer’s household composition, household income, and associated FPL threshold determination
 - The customer’s FPL% is **assessed after tax information is entered** at the ***earliest* opportunity** in the application process when sufficient data is available to make a decision to trigger the ‘APTC fast path’
- This culminates in a **tailored customer journey** that makes it more **efficient** to apply for coverage, reduces unnecessary question responses, and **improves customer experience**
- Customers are **only asked to answer questions that are needed** for Access Health CT to be able to assess the customer’s program eligibility only for the set of target programs that the application household ***could*** be eligible for



CT – ‘APTC Fast Path’ Triggering

- The Access Health CT application includes **two routes** through to **APTC ‘quick flow’**:
 - 1- Triggered from the **Income Information** screen, or (**true ‘Fast Path’**)
 - 2- Triggered following the **Detailed Income and Deductions** screens
- Triggering criteria for APTC ‘quick flow’ via route 1:
 - Following the **Tax Information** screens and **Income Confirmation** process, a **dynamic screen flow decision** is executed
 - The applicant is navigated through to the **APTC ‘quick flow’** if **both**:
 - *the application household’s income amount exceeds the monthly FPL threshold amount*
 - *the application household’s income is above the APTC threshold*
 - If these criteria are **not** met, then the applicant continues through the **Detailed Income screens**.
 - The applicant can also go through the **Detailed Income** screens if they elect to build their income due to changes since previous tax data
- Triggering criteria for APTC ‘quick flow’ via route 2:
 - Application household is determined to be **above the APTC threshold** after they have entered detailed Income and Deductions information

