

**Patient Protection and Affordable Care Act
Notice of Final Benefit and Payment Parameters 2019**

Final Rules and Anticipated
Impacts for Connect for Health Colorado

April 23, 2018

Topic	Proposed Rule	Finalized Rule	Anticipated Impact
State Options for Flexibility and Innovation (45 CFR §155.106 & 155.200)	HHS sought comments on how HHS can best support innovation in SBEs by increasing flexibility, supporting SBE efforts to utilize commercial platform services, and improve financial self-sustainability of SBEs overall.	No changes were finalized.	No impact.
Navigator Program Standards (45 CFR §155.210)	This proposed rule would amend Navigator program standards by removing requirements around types of Navigator entities, and physical presence, among other proposed changes.	Finalized as proposed.	No impact. Connect for Health Colorado will continue operating its Navigator Program as it sees fit, which is permitted.
Eligibility Standards (45 CFR § 155.305(f)(4)(i))	This proposed rule removes the direct notification requirement for situations where consumers fail to reconcile APTC on their taxes.	Finalized as proposed.	No or minimal impact. Connect for Health Colorado will continue to notice customers as clearly as possible.
Income Verification (45 CFR §155.320(c)(3))	This proposed rule change would modify the ways that income verifications take place by adding new types of inconsistency triggers. Each of these triggers would result in a “Reasonable Opportunity Period” where the consumer has 90 days to provide further information to resolve an inconsistency to remain eligible.	Finalized as proposed, with two modifications. First, those individuals who are Medicaid ineligible by reason of immigration status are exempt from this requirement. Second, extraneous language was removed from the proposal.	Minimal. Please note that the advent of NES will potentially make these changes more feasible.

<p>Alternative Verification Process for Employer Sponsored Coverage (45 CFR §155.320(d))</p>	<p>This proposed rule change would extend the timeline for Exchanges to use HHS approved processes to verify enrollment in and eligibility for employer sponsored plans.</p>	<p>Finalized as proposed.</p>	<p>No impacts.</p> <p>Connect for Health Colorado is permitted to continue verifying Employer Sponsored Insurance (ESI) according to current procedure, with the option to seek approval from HHS for a different process in the future.</p>
<p>Eligibility Redetermination During a Benefit Year (45 CFR §155.330)</p>	<p>HHS sought feedback on ways to increase enrollee reporting of individual changes in circumstances within 30 days of the change.</p>	<p>No regulatory changes.</p>	<p>No impacts.</p> <p>Connect for Health Colorado has spearheaded several activities to encourage and increase individual reporting within the required 30-day timeframe. Among those activities are noticing, prompting customers to report changes upon login, and Service Center outreach for simultaneous enrollment situations.</p>
<p>Annual Eligibility Redetermination (45 CFR §155.335)</p>	<p>HHS proposed amending the length of time, currently a maximum of five (5) years, that an individual can authorize the Exchange to obtain updated tax return information.</p>	<p>Not finalized.</p>	<p>No impacts.</p> <p>Connect for Health Colorado is permitted to continue current practices.</p>
<p>Material Plan or Benefit Display Errors (45 CFR §155.420 (a)(4)(iii))</p>	<p>HHS proposed to remove metal tier limitations from the material plan or benefit display error SEP (45 CFR § 155.420(d)(12).</p>	<p>Finalized as proposed.</p>	<p>No impacts.</p> <p>Connect for Health Colorado supports increased consumer choice, which this rule provides. This rule accounts for a scenario</p>

			in which a consumer may have been unable to appropriately select a plan as a result of display errors, and so should be allowed their choice of appropriate plan.
Prior Coverage Requirements (45 CFR §155.420(a)(5))	This proposed rule change would exempt qualified individuals from the prior coverage requirement if, for at least one (1) of the last sixty (60) days, they lived in a service area where there were no QHPs were offered.	Finalized as proposed.	No impacts. Connect for Health Colorado supports flexibility on conditions for coverage, especially where circumstances are outside of consumer control. This rule provides such flexibility.
Aligning Coverage Effective Dates (45 CFR §155.420(b)(2))	This proposed rule change would align the coverage effective dates for all SEPs based on gaining or becoming a dependent, other than through marriage.	Finalized as proposed.	Minimal impacts. Connect for Health Colorado supports CMS efforts to clarify and simplify applicable regulations.
Aligning Termination Dates (45 CFR §155.430(d))	This proposed rule change would align the effective dates for all enrollee-initiated terminations and addresses inconsistencies for those who gained Medicaid or CHP+ coverage.	Finalized as proposed.	Minimal impacts. This rule gives Connect for Health Colorado flexibility to carefully manage enrollment transactions.