

## 2012 Grant Application Colorado Health Foundation

### Organization Information

Organization Name

The commonly used name for your organization

Colorado Health Benefit Exchange

Legal Name

The name listed on the IRS Tax Status Letter

Street Address

3773 Cherry Creek N. Dr.

Suite 1025

City

Denver

State

CO

ZIP Code

80209

County

Denver

Phone

Please enter in the following format: (xxx) xxx-xxxx

(720)496-2531

Fax

Please enter in the following format: (xxx) xxx-xxxx

(720)496-2570

Web site

www.getcoveredco.org

Tax ID

Please enter without the hyphen (for example, 431234567)

453733823

Tax Status

Other

Organization Annual Budget

Please enter without commas or currency signs (for example, 100000)

43486748

### Contact Information

#### Organization CEO/Executive Director

Organization Primary Contact Prefix

Ms.

Organization Primary Contact First Name

Patty

Organization Primary Contact Last Name

Fontneau

Organization Primary Contact Suffix

<None>

Organization Primary Contact Title

Executive Director and Chief Executive Officer

Organization Primary Contact Office Phone

(720)496-2531

Organization Primary Contact Extension

Organization Primary Contact E-mail

pfontneau@COHBE.org

**Proposal Contact - required only if different from organization CEO/Executive Director**

Check the box below if the above entered contact is the contact for the proposal

No

Proposal Contact Prefix

(i.e. Mr., Ms., Dr.)

Ms.

Proposal Contact First Name

Adela

Proposal Contact Middle Initial

Proposal Contact Last Name

Flores-Brennan

Proposal Contact Suffix

(i.e. Ph.D., M.D.)

<None>

Proposal Contact Title

(i.e. Executive Director, CEO)

Navigator Manager

Proposal Contact Office Phone

Please enter in the following format: (xxx) xxx-xxxx

(720)496-2545

Proposal Contact Extension

Proposal Contact E-mail address

afbrennan@COHBE.org

**Fiscal Sponsor Information**

**Information required only if using a fiscal sponsor - if not applicable, please continue to next page**

Fiscal Sponsor Organization Name

Street Address

City

State

ZIP Code

Phone

Please enter in the following format: (xxx) xxx-xxxx

Fax

Please enter in the following format: (xxx) xxx-xxxx

Web site

Tax ID

Annual Budget Amount

Please enter without commas or currency signs (for example, 100000)

CEO/Executive Director

E-mail address

**Proposal Information**

Project Title

Exchange Navigator Program

Proposal Summary (100 words):

A one- to two-sentence description of your proposal.

This proposal will support the activities of regional Assistance Site hubs and Assistance Sites that will provide outreach, education and support to Coloradans applying for insurance affordability programs including Medicaid, CHP+ and private insurance subsidized

by advance premium tax credits and cost sharing reductions.

Type of Support: please select one.

Project Support

Total Amount Requested

Please enter without commas or currency signs (for example, 100000)

2134000

Funding Term

Enter the period of time the grant will cover (in months)

12

Total Project Budget

For General Operating requests, enter your total organizational budget

Please enter without commas or currency signs (for example, 100000)

20027844

The proposal addresses the following [funding goal](#) of The Colorado Health Foundation:

(Please select the one funding goal that best describes your proposal)

Health Coverage

Geographic Area Served

Please select at least one and up to 10 counties served or select "Colorado Statewide" from the list, as applicable

Colorado Statewide

The proposal addresses the following [Measurable Result\(s\)](#) of The Colorado Health Foundation:

Please select which measurable result(s) your proposal targets. Please select at least one.

Health Coverage-Increase number of children and adults who have adequate health coverage

Age Group

Please select the primary age group(s) targeted by your proposal. Please select at least one.

All ages

## Proposal Narrative

Proposed Activities (1000 words):

This section should answer the following questions:

- Describe what you will do and how you will do it.
- What programs and services will you offer?
- Are you using a strategy that has been proven effective by research?
- Describe the populations served by the proposed work - how many people are expected to benefit from the activities?
- What are the risks of the proposed work?

To support the many thousands of customers it expects to serve, COHBE is creating the Connect for Health Assistance Network (Assistance Network) to provide in-person support with the health coverage application process. In compliance with federal standards, COHBE must create a designated Navigator program will serve Coloradans seeking health coverage by serving the needs of vulnerable and underserved populations, supporting outreach and education activities and facilitating the selection and enrollment in the range of public and private health insurance affordability programs (Medicaid, CHP and private coverage subsidized through premium tax credits and cost sharing reductions). COHBE plans to combine the federally required navigator program and optional in-person assister program

under one umbrella program, the Connect for Health Assistance Network. The individual organizations funded under the program will be Assistance Sites and the people they employ who provide assistance services will be Health Coverage Guides. The distinction between navigators and assisters under federal law is primarily a matter of funding: the operations of the navigator cannot be funded by federal grants, while the assisters can be funded by federal grants through the end of 2014. There is no required functional distinction in the type of services navigators and in-person assisters can or must provide. Thus, while COHBE must distinguish between navigators and in person assisters for accounting and reporting purposes, it will not distinguish between the roles and duties navigators and assisters perform. This will minimize confusion with individuals, families and businesses we are serving. Navigators and in-person assisters will be trained and certified in the same way to ensure consistent delivery of customer service. Because of the funding restrictions on the navigator requirement, the focus of this grant request will be specific to the (federally) unfunded navigator requirement.

COHBE will create a competitive grant opportunity for entities interested in performing the assistance described herein. The navigator component of the Assistance Network will be focused on providing funding to 5-6 entities (Assistance Sites) in geographically strategic areas throughout the state. COHBE will identify these organizations as regional hubs and expects these regional hubs will have greater capacity for providing navigator services relative to other entities in a given area. COHBE will offer an enhanced award if the organization agrees to accept a greater obligation to support COHBE by serving as a hub for outreach and training, and coordinating navigators and assisters throughout the region for information sharing, collaborative learning, networking and referral. The navigator component will also provide funding to 2 entities that have a particular focus or expertise in serving specific cultural, ethnic, linguistic, disability, LGBT, or small business communities in Colorado. This strategy will help ensure COHBE is able to more effectively provide access to education, outreach, application, plan selection and enrollment support relevant to Colorado's diverse population. COHBE will provide grant funding to successful applicants to support hiring and management, administrative costs, and IT. COHBE expects each of the organizations would employ 2-5 full time equivalent navigators.

Navigators will provide outreach and education about changes in health coverage, and opportunities to access coverage and new tax credits and cost sharing subsidies that will make health coverage more affordable. Navigators will provide application assistance, and guidance through the plan selection. We expect Navigators will primarily support customers in person, although they should be prepared to be able to answer questions and provide guidance over the phone. Navigators must provide impartial information and service to their customers and will be held to a conflict of interest policy, and COHBE privacy and security standards. Navigators will be required to become certified by attending training designed and delivered by COHBE and then demonstrating proficiency through a training evaluation process. To achieve certification, navigators will also be required to pass a background check.

COHBE will require monthly reporting from Navigator entities, and will generate reports to track various quality and enrollment metrics, application status, and demographic information. COHBE is also considering a secret shopper program that could help ensure quality, check for gaps in training, and monitor for steering.

The in-person assister component of the Assistance Network (not a subject of this proposal) will be focused on funding other entities throughout the state that are providing assistance to COHBE customers to further the Assistance Network's geographic and diversity reach. These entities could be smaller community organizations with a specific focus or constituents, county human services offices, and local public health organizations.

The Assistance Network will serve customers at all income levels and in both the individual and SHOP markets. We assume, however, the majority of individuals seeking assistance through this program will have incomes below 400% of poverty because this income range represents the majority of the uninsured and because individuals at this income level have access to assistance paying for coverage. The Assistance Network will be geographically distributed to ensure all areas of the state, and particularly those with higher levels of uninsured, will be served. The Colorado Health Institute provided COHBE with analysis and mapping that helps us identify the areas of highest need and will aid us in appropriately locating Assistance Sites. The Assistance Network will also focus on providing assistance to vulnerable populations and will ensure access to people with disabilities, LEP individuals, and culturally and racially diverse communities.

Because the organization, IT system, policy and processes are all new, there are risks associated with managing a new infrastructure for the first time and the potential for under or over-estimating need for these programs. To limit this risk, COHBE has been conservative in its assumptions and is also creating a program that utilizes existing community resources that are already familiar with application assistance, outreach and enrollment in health care programs. COHBE is also planning for a robust training program to ensure preparedness and service excellence.

#### Intermediate Milestones (500 words)

This section should answer the following questions:

- What is the timeline for the work and what are the expected milestones that will ultimately lead to your desired results?
- What evidence will you have to show that the activities took place as described and that the milestones were reached?

The timeline for this grant proposal July 1, 2013 through June 30, 2014. COHBE's first open enrollment period for the purchase of health insurance will begin on October 1, 2013 and continue through the end of March 2014. This will be the period of highest activity, although COHBE expects post enrollment support to continue past open enrollment, and that support for Medicaid and CHP+ enrollment will continue because there is no open enrollment period for those programs. The second open enrollment period begins on October 15, 2014 and ends December 7, 2014. In order to accommodate this schedule and Coloradans' need for assistance navigating the application and enrollment process, COHBE expects to issue a request for grant applications in late February, allow 6 weeks for responses and then announce grantees in early May. Disbursements will follow shortly thereafter, concentrating higher amounts in early months as organizations need start up financing and then leveling off the monthly disbursements thereafter. COHBE expects that grantee organizations will spend the spring and early summer of 2013 staffing for the coming increase in caseload and services. Organizations and navigators will begin accessing training in early summer 2013 and will help conduct outreach and education

during late summer and early fall. Once open enrollment begins on October 1, 2013, application and enrollment activities will begin in earnest and continue through March 2014. It is during open enrollment that COHBE expects to meet the bulk of its assistance milestones. However, Navigators will continue to help support customers to make post-enrollment life changes to their accounts (like adding a baby or changes in income) that can affect eligibility and enrollment. They will then begin outreach and education activities in summer of 2014 in anticipation of application and renewal support in the October 2014-December 2014 open enrollment period.

The evidence COHBE will have that activities took place and milestones were reached will be the identification of grantee organizations and award of grants; the numbers of Health Coverage Guides trained and certified; the numbers of individuals assisted through the program.

#### Method for tracking and calculating your measurable results (500 words)

This section should answer the following questions:

- What do you expect to be the ultimate result(s) of your grant activities (in terms of a numerical increase in the measurable result(s) that you identified)? Note: the results might not be fully realized until after the duration of your grant, but please give your best estimate of the potential impact.
- What is the link between the grant activities and the Foundation's measurable results?
- How will you track program data so that you can calculate and report on the final results?
- How will you use the information to improve or refine your organization, program or strategies?

October 2013 is COHBE's inaugural open enrollment period. COHBE expects the results of its grant activities to be that communities will be more educated about COHBE's existence and purpose, and uninsured and underinsured Coloradans will have enrolled in appropriate health coverage with appropriate assistance paying for coverage. It is difficult to anticipate the precise number of COHBE enrollees in 2014 and of those enrollees, the number that will be assisted by the Assistance Network. In arriving at workable estimates, COHBE analyzed data on the population of uninsured Coloradans eligible for premium tax credits plus the number of Coloradans in the individual market eligible for premium tax credits. We adjusted that number by adding in a percentage of the Medicaid expansion eligible population who could be served through navigators, and subtracting the number of people who will be ineligible due to documentation status. We then adjusted based on estimates for the number anticipated to enroll in the exchange, and for estimates of the number of people who might use a community based resource for assistance. Based on these assumptions, COHBE estimates serving approximately 141,777 individuals through the Assistance Network in 2013-2014. To serve all these individuals, COHBE estimates needing

the equivalent of 292 full time Health Coverage Guides, which could represent many hundreds of individuals working part time. Of these totals, COHBE requests funding to support 35 Enrollment Guides that will fulfill the navigator requirement and provide application support to up to individuals seeking assistance.

COHBE's efforts to support increased health coverage through the navigator component of the Assistance Network aligns with TCHF's Health Coverage Measurable Result to increase the number of children and adults who have adequate health coverage.

COHBE will generate reports from its system that show total applications and application status, enrollments per navigator organization, enrollments per navigator, covered lives by program plans, and demographic information. COHBE will require each grantee organization to report information such as the number of individuals they assist, the number of times they assist an individual, the method of assistance, the amount of time spent with each individual and the outcome. Additionally, COHBE will ask grantee organizations to report on the types of outreach and education they conduct, numbers reached and success of the effort. The various reporting will help COHBE evaluate its organizational success as well as the success of the navigator program. Additionally, through the regional structure of the navigator program, COHBE is hoping to facilitate ongoing information sharing and collaborative learning that will allow for organizational learning as various new issues and solutions arise. COHBE is exploring opportunities for an online collaborative learning environment, planning meetings or webinars designed to solicit feedback and support navigators around the state, and developing channels and processes through which information can be shared on a regular basis. Because the system and processes will all be brand new, the reporting, ongoing evaluation, and information will be critical to analyzing system functionality, the experience of navigators and the customers they are supporting and overall enrollment success.

#### Organization Information (500 words)

This section should include:

- Your organization's mission statement and a brief history.
- A brief overview of your organization's current programs, activities and strategic plan.
- A description of the qualifications and track record of the individuals who will be managing and performing the activities proposed.
- A description of your Board's role in fundraising, governance and strategic planning.
- A description of your key partners.

**Mission:** The mission of the Colorado Health Benefit Exchange d/b/a Connect for Health Colorado is to increase access, affordability, and choice for individuals and small employers purchasing health insurance in Colorado. **History:** The Governor's Office obtained a planning grant in late 2010 from the federal government to fund the initial efforts to create a state health insurance exchange. In May 2011, the Colorado General Assembly passed Senate Bill 11-200, which establishes the Colorado Health Benefit Exchange (COHBE), a public entity governed by a Board of Directors. SB 11-200 also created a legislative

implementation review committee to guide the development of the Exchange. The Exchange, scheduled to open for business in October 2013, will be a new marketplace where Coloradans can shop for and buy health insurance based on quality and price. By providing easy to understand information about qualified health plans, the new Exchange marketplace will give individuals and small businesses in Colorado more control, quality choices and better protections when buying health insurance.

Programs/Activities/Strategic Plan: COHBE's primary program and activity is to create a marketplace for health insurance that is open for business on October 1, 2013. To support this effort, COHBE has engaged IT and service vendors and has entered into contracts for marketing and communications. COHBE staff is actively overseeing the work and ensuring the accurate and effective interpretation of policy and its translation into a highly functional IT system supported by a network of customer service.

Key staff: A list of our key staff is included as an attachment.

Board: A list of COHBE board members is included as an attachment. COHBE is governed by a board of directors that represents bipartisan appointments from the Colorado General Assembly and the Governor. The board is a governing board and has oversight of policy and operations. The board does not conduct fundraising activities but does approve grant requests and the budget. COHBE also has a Legislative Implementation and Review Committee as required under SB11-200. The membership of that committee has not yet been appointed for 2013. Key partners: COHBE has a wide number of stakeholders from the health insurance, broker, and consumer communities. COHBE has four active Advisory Groups, the Outreach and Communications Advisory Group, the Individual Experience Advisory Group, the Health Plan Advisory Group and the SHOP Advisory Group, all of which meet on a regular basis. COHBE also frequently hosts ad hoc combined advisory group meetings on issues of mutual interest to all stakeholders like the navigator program and the out of pocket cost calculator. All advisory group meetings are open to the public. COHBE works closely with the Division of Insurance, Governor's Office of Information Technology, and the Department of Health Care Policy on areas of mutual concern like insurance regulation, development of interfaces between COHBE and key state systems, and serving Coloradans with a continuum of insurance affordability programs.

#### Financial Information (500 words)

This section should answer the following questions:

- What are the major funding sources for your organization?
- What are the major funding sources for the work you are proposing?
- If this is a collaborative effort or partnership, who are the partners contributing to the project?
- What is the long-term funding strategy for your work?
- What percentage of your Board of Directors contributes financially to the organization?

Funding: COHBE's sole funding source at this time is federal establishment grants. However, federal law explicitly prohibits funding navigator operations using the planning

grants that currently support the overall operations of the organization. Therefore, the funding source for the work proposed under this grant must be through private grants. COHBE expects to need private grant contributions for the navigator program for the next 3-5 years, at which time COHBE expects to have stabilized its operating revenue and will fund the program through operating revenue. Because the availability of federal funding for exchange operations ends by 2015, COHBE is currently exploring a number of funding sources for the organization that will assure long term sustainability. COHBE's board of directors is not a fundraising board. No contributions are expected, required, or made by the board.