## Colorado Health Benefit Exchange Appeals Update

April 22, 2013 Board Meeting



#### **Board Guidance**

COHBE is required to provide individuals with an appeals process and fair hearing regarding decisions made pertaining to eligibility and tax credit/cost sharing reduction amounts, among other decisions.

There are four options available to COHBE to provide this appeal process. Staff is working with key stakeholders and state partners to evaluate the options and provide a detailed recommendation on the implementation of COHBE insurance affordability program eligibility appeals to the Board. Legislation would be needed, this session or at a future time, to make available one of the options available, the ability to delegate COHBE fair hearings to the state's Office Administrative Courts.



## **COHBE Appeals**

- On January 14th CMS released proposed regulations related to implementation of key provisions in the Affordable Care Act (ACA).
- The rule provides that Exchanges must have a formal eligibility appeals process for individuals and families applying for coverage.
- The rule intends to give state based exchanges the flexibility to oversee their appeals process or have the U.S. Department of Health and Human Services (HHS) conduct it on their behalf (with the exception of appeals for employer and employee eligibility in the SHOP).
- State based exchanges also have the option to implement an informal resolution process that will serve as a first level of review prior to the formal Exchange appeals.
- Expect final rule to be published end of May



### **COHBE Appeals**

- The Board approved guiding principles in July 2012, that include implementing a process to handle appeals in the areas in which the Exchange has control, directing people to the programs for which they are eligible, building a technology solution that will facilitate a "no wrong door" approach to coverage options, adopting best practices to ensure the verification and appeals process is automated as much as possible, and defining a process for individuals and employers to verify their information and appeal eligibility decisions.
- The Board voted in June 2012 to use the federal service for certifying exemptions from the individual mandate in its initial years of operation and to review the decision after the initial operating period.



# Scope

Appeal Of:	Responsible Authority
Eligibility determination for insurance affordability programs (IAP)	COHBE or HHS
Eligibility for QHP enrollment periods	COHBE or HHS
Eligibility for enrollment in a catastrophic plan	COHBE or HHS
Eligible amount of APTC and level of CSR	COHBE or HHS
Eligibility for the individual responsibility exemption	COHBE or HHS
Employer's potential tax liability due to an employee's eligibility for APTC or CSR	COHBE or HHS
Employer and Employee eligibility in the SHOP	СОНВЕ



## **Options for IAP Eligibility Appeals**

Because of the requirement to provide individuals with a fair hearing, COHBE staff intends to evaluate the following options for its IAP eligibility determination appeals process:

Option #	Informal Resolution	Fair Hearing
1	In-house	In-house
2	In-house	Outsource-Third Party
3	In-house	Outsource-Federal HHS
4	In-house	Outsource-Colorado Office of Administrative Courts (OAC)



### **Board Guidance**

### Question

Should COHBE pursue legislation to provide the option for the state's Office of Administrative Courts to hear its insurance affordability program eligibility determination appeals?

