

Board Meeting Minutes Connect for Health Colorado Meeting Room East Tower, Suite 1025 3773 Cherry Creek N Dr., Denver, CO 80209 May 13, 2013 8:30 AM – 11:52 AM

Board members present: Richard Betts, Susan Birch, Mike Fallon, Eric Grossman, Gretchen Hammer, Kevin Patterson, Robert Ruiz-Moss, Jim Riesberg, Arnold Salazar (via phone), Beth Soberg, and Nathan Wilkes.

Staff present: Camisha Bailey, Marcia Benshoof, Cammie Blais, Jessica Dunbar, Stephanie Eng, Adela Flores-Brennan, Patty Fontneau, Caren Henderson, Lindy Hinman, Kyla Hoskins, Josh Kaskin, Christa McClure, Myung Oak Kim, Jim Sugden, Heather Taber, Laura Villanueva, and Adele Work.

Approximately 20 people attended the meeting in person and additional people joined by phone.

I. Business Agenda

There were no additions or edits made to the May 6, 2013 Board meeting minutes.

Vote: The minutes were unanimously approved. There were 8 voting members present.

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 shared with the Board that the Colorado Medical Society held their spring conference in early May, which both she and Sue Birch had attended. The conference provided an opportunity to reconnect with a core group of health care folks and address questions about Connect for Health Colorado.

III. Exchange Development and Operations

1. <u>Report from CEO/ED</u>

a. Legislative Update

Patty Fontneau <u>presented</u> an update on HB 13-1245, which passed the General Assembly on March 6, 2013. Patty reviewed how the bill's passage would support ongoing operations for Connect for Health Colorado by implementing three components of Connect for Health Colorado's revenue approach. She concluded with an overview of the other impacts the legislation will have, including allowing Connect for Health Colorado to establish a separate program to offer other ancillary non-QHP products approved by the Board as well as providing the opportunity for the Board to utilize the Office of Administrative Courts for help with formal appeals.

Gretchen Hammer added that Connect for Health Colorado's relationship with the Legislative implementation Review Committee (LIRC) has changed. Instead of meeting "no more than five times per year," the language was updated to read that the Committee would meet at least two times per year. An additional caveat that the annual report goes to LIRC with financial and operational information was also added. Gretchen commented that none of these changes fall outside of planned interactions with the LIRC.

2. Finance Committee Update

a. Q1 Financial Statements

Rob Ruiz-Moss gave a high level overview of the Finance Committee's meeting with respect to the <u>Q1 Financial</u> <u>Statements</u>. He highlighted aspects of the Grant Budget Report and informed the Board that Connect for Health Colorado staff had plans to file a no cost extension to spend the 2^{nd} Level One grant funds beyond April 15^{th} .

Cammie Blais shared with the Board that Connect for Health Colorado is in the process of implementing an integrated financial system that will allow for more robust reporting to the Finance Committee and Board. The budget will transition from a grant specific view.

3. <u>Technology</u>

a. Vision Products

Patty Fontneau let the Board know that while staff was not looking for guidance on this topic today, they wanted to introduce the topic to the Board and would seek guidance in the next Board meeting.

Marcia Benshoof <u>presented</u> a potential interim approach for stand-alone vision products. She reviewed the background, pros and cons, and potential solution. She concluded with an overview of the process steps, which included plans to obtain input from the stakeholder community before the next Board meeting.

Beth Soberg asked if Connect for Health Colorado would delineate between prepaid vision plans and risk based vision plans. Patty confirmed that only insurance products regulated by the DOI would be offered.

Eric Grossman asked why the focus is on vision over dental. Marcia Benshoof replied that dental insurance plans are qualified plans and will be integrated with the system on October 1. Patty Fontneau added that Connect for Health Colorado had intended to move forward with offering vision in an integrated way until new regulations were released at the end of March.

Beth Soberg commented that many carriers allow a vision exam as part of their program and would like to make sure that consumers do not mistakenly duplicate their vision coverage. Marcia Benshoof replied that pediatric vision is the only vision benefit part of the EHBs and often only includes only the exam, not the hardware. This would allow a family to "buy-up" and be able to obtain services for the adults and the hardware for their children.

Commission Riesberg commented that the benchmark plan does include a covered vision exam. A carrier could opt to include hardware in their plan offered on the Exchange.

Eric Grossman asked that even if there is not much technical lift, would Connect for Health Colorado receive compensation if so, will the amount offset the resources needed to implement. Patty Fontneau replied that compensation would be received and that staff would need to revisit the offsetting of resources after further discussions with carriers.

Gretchen Hammer asked if staff had an anticipated decision date in mind. Patty replied the next meeting on June 10th.

Kevin Patterson asked for clarification on the number of clicks and redirects a consumer would go through. Patty Fontneau replied that after checkout, they would receive a link to the vision carriers. This link would allow a consumer to continue to shop for vision after they are finished with checkout on the Exchange. Kevin replied that the Board and staff should think about how consumers will get from Point A to Point B and make the process as smooth as possible.

Rob Ruiz-Moss commented that a carrier on the Exchange could opt to embed full vision. He stated that Connect for Heath Colorado would need to make sure that people are able to clearly identify what they have purchased so there is no overlap in vision purchase.

4. Customer Service

a. Assistance Network Updates

i. Role of Application Counselors

Adela Flores-Brennan <u>presented</u> on a new category of customer service support, called Certified Application Counselors (CACs). She shared preliminary plans to certify application counselor sites and provide training to individuals that would act in this role. Adela also highlighted that aspects of the program could change as additional guidance is received.

Nathan Wilkes asked if the CACs would or would not be compensated. Adela replied that they would not receive compensation from Connect for Health, but that we would provide support and infrastructure for training.

Gretchen Hammer asked for an example of a CAC site. Adela replied that a hospital or clinical setting would be good candidates. Connect for Health Colorado would certify the organization so there is an accountability structure in place to monitor the activities of the people working as CACs.

Gretchen Hammer suggested that Connect for Health Colorado should prospectively and strategically identify organizations that may have individuals that would serve well as CACs. Adela replied that Connect for Health Colorado has spoken with partner organizations to spread the word. More information will be shared as guidance is received and the program continues to develop.

ii. Health Coverage Guide Conflict of Interest Policy Revisions

Adela Flores-Brennan highlighted the revisions in the <u>Conflict of Interest Framework for Assistance Sites and</u> <u>Health Coverage Guides</u>. The edits ranged from a simple change in the name to ensuring that the policies all apply to the Regional Hubs.

Nathan Wilkes moved to accept the Conflict of Interest policy as amended.

Beth Soberg asked is there is a process or procedure in place for what happens when Connect for Health does identify a conflict. Adela replied that there is some language in the preamble but there are not any formal processes or procedures identified yet. Beth commented that this should be identified at some point, especially around the areas of investigating and determining a conflict.

Beth seconded the motion.

Commissioner Riesberg requested that staff include the date amended and date approved on all policy documents.

Arnold Salazar indicated he would be abstaining from the vote as he was unable to hear the full discussion.

No public comment.

Vote: The motion to accept the amended Connect for Health Assistance Network Conflict of Interest policy was unanimously approved, with one member abstaining from the vote. There were 8 voting members present. (Yes: Richard Betts, Mike Fallon, Eric Grossman, Gretchen Hammer, Robert Ruiz-Moss, Beth Soberg, and Nathan Wilkes. Abstain: Arnold Salazar).

iii. Grant Process

Adela Flores-Brennan gave an update on the <u>Grant Application Review Process</u>. She highlighted the diversity of the applications, reviewed the application considerations, and outlined the next steps.

Richard Betts asked if Adela could expand on the applications from small businesses and organizations that support small businesses. Patty Fontneau replied that since the process was still ongoing, she would prefer not to highlight specific organizations publically.

Rob Ruiz-Moss asked if organizations distinguished themselves in the applications as Navigators or Assisters. Adela replied that since Connect for Health Colorado had opted to combine the terms under Health Coverage Guides, no distinction was made. For accounting and reporting purposes, Connect for Health Colorado is tracking the groups separately.

Nathan Wilkes asked if any of the applications were denied because of incomplete applications or conflict issues. Adela replied that some applications did not make it through Phase 1 or Phase 2 due to incomplete applications or because they did not meet all the considerations.

Sue Birch asked if there was a final number of Regional Hubs. Adela replied that it was thought that there would be 5-6 Regional Hubs, but staff is continuing to evaluate needs. Gretchen Hammer added that an update should be on the June agenda.

b. Update on Notices

Kyla Hoskins presented the Eligibility Determination Notice.

Eric Grossman asked what the turnaround would be for eligibility notification. Kyla replied that via email, the notice should be delivered automatically. For mail, a daily batch will be sent out by 5am the next day as it must be received by the consumer within 5 days due to the consumer's right to appeal within a certain timeframe.

Rob Ruiz-Moss asked what happens if information is incorrectly reported. Patty Fontneau replied that the

original notification will be automatic. Consumers will have the opportunity to appeal and prove within 90 day their eligibility.

Rob Ruiz-Moss asked if there is a communication system for redetermination. Kyla Hoskins replied that there are initial, updated, and annual redeterminations.

Commissioner Riesberg commented about the placement information in the sample notice.

Jim Sandstrum from CU reviewed the development of the accessibility of the health materials. He reviewed the steps taken to bring down the language from a college level to an 8th/9th grade level.

Sue Birch asked what trade association CU is working with to test these materials. Jim Sandstrum replied that it is out of Jefferson County as they have connections with several transition groups and different pools to recruit from for testing. Sue asked him if he could reach out to Alliance Colorado as well.

Richard Betts asked Kyla if there was any feedback from the advisory groups about the "Notice to Your Employer" as he thought the language seems inflammatory. Kyla replied that the only feedback received on this section was placement related.

Sue Birch asked Kyla to share what further work is being done to reach out to other communities. Kyla replied there will be Spanish translation of all notices to ensure that they are worded correctly and culturally relevant. Every notice will also have the Call Center number that will have additional language capability if needed.

Commissioner Riesberg commented that there should maybe be suggested deadlines or referenced to what the time limits are for enrolling. Beth Soberg agreed. Kyla replied that she could look at putting that information into other notices.

Kyla Hoskins informed the Board that all feedback on notices is due to CMS by the end of the month, so any additional feedback should be sent within the week.

c. Overview of Application Process

Jessica Dunbar gave an <u>overview</u> of the application development and shopping experience that is under way. She presented two scenarios – one showing the application steps for someone looking to obtain financial assistance and the other showing the application steps for someone who is only looking to shop for insurance without any financial assistance. Jessica also addressed the recently released short form and informed the Board that Connect for Health Colorado that the online system supported the shortened route and the organization was mapping the paper application to see what was feasible.

Rob Ruiz-Moss asked if someone could browse, shop, and pick a plan they want before going through the financial assistance application. Jessica replied that a direct path to shopping is available, and the opportunity to browse plans anonymously exists as well. Although a plan can be selected, they would not be able to enroll or submit payment before completing an account.

Rob Ruiz-Moss asked if someone is employed and their employer provides affordable insurance, how that would be identified Patty Fontneau replied that Connect for Health Colorado would send a notice to the employer when the individual enrolls. The employer is provided the opportunity to appeal at that point. In addition, the IRS will also notify the employer after the tax year – providing a second opportunity for the employer to appeal.

Rob Ruiz-Moss commented that there should be clarification in the employee shopping experience about the

consequences if their employer does provide sufficient coverage.

There was additional discussion of the process to attest to income and when verification would be required. Jessica commented that additional information would be provided during demonstrations of the single streamline application that would occur later in the summer.

d. Broker Certification Program

Jim Sugden <u>presented</u> an update on the Broker and Assistance Network Certification Program. He reviewed a high level curriculum map and reviewed the various training modules. Much of it will be available online, and some of it will be in a classroom setting. Jim went on to review samples of the training screens and the timeline. He concluded with an overview of the Broker Review Process and the elements still under development.

Beth Soberg commented that removing a broker from the training schedule if a carrier challenges their appointment seems harsh. Jim Sugden replied that the intent is to have an expeditious process for that challenge. It would be in no one's interest to have the Broker continue through the training process if ultimately their time and energy as well as the expense of training is lost if the challenge is upheld.

Eric Grossman asked if agencies will be able to obtain the training instead of their agents. Patty Fontneau replied that the individual agent must go through the training. Jim Sugden added that it is Connect for Health Colorado's position that anyone dealing with the public in the sale of insurance will need to be certified.

Beth Soberg asked if the Board has taken any action in the past that enables or prohibit accrual towards a broker bonus program or requirements to disclose this information. Patty Fontneau replied that the policy adopted by the Board is that compensation has to be the same both in and out of the Exchange.

Commissioner Riesberg commented that three terms have been used interchangeable – producer, agent, and broker. He suggested that someone along the line, Connect for Health Colorado will need to work on its wording and pick a term so those in the community can have clarity.

5. Outreach, Education and Marketing

a. Brand Launch Presentation

Myung Oak Kim <u>presented</u> on the recent brand launch and the various components. This first launch is statewide and will have a presence in the small communities and papers as well.

Myung played a <u>TV ad</u> and a 60 second radio spot for the Board. She returned to the presentation to show examples of the print ads, bus ads, and light rail ads

Commissioner Riesberg asked if anything was being done in the Albuquerque market since Durango does not receive Denver channels. Myung replied that they are aware of this and are working on it.

Myung moved on to the website and showcased the various social media links, including Connect for Health Colorado's own YouTube channel. She highlighted the FAQs and Board & Stakeholders links in the top right corner of every page. Myung shared that the visitor statistics for the first week were 6,000 unique hits with an average time of 4-5 minutes on the website.

Patty Fontneau shared with the Board that Phase 1 is around awareness; Phase 2 will happen later on in the

summer and will be more of a call to action.

Mike Fallon asked if Phase 2 will concentrate on the requirements of the law. Myung replied that it is one of the pieces of information among others.

Sue Birch commented that the website was very user friendly and provides a great transition into getting people acclimated with the information.

Myung concluded by asking Board members to take a look at the YouTube channel for stories from real people about insurance from both a small business and family perspective.

IV. Adjourn

The Board meeting adjourned at 11:52 AM. Gretchen Hammer reminded the Board that the next meeting would be June 10th.