

Colorado Health Care Coverage Easy Enrollment Advisory Committee Meeting

Meeting #6
January 4, 2021







Opening Remarks from the Easy Enrollment Advisory Committee Co-Chairs



Roll Call and Introductions; Approval of Prior Meeting Minutes

Co-Chairs:

- Monica VanBuskirk, Chief Policy and Relationships Officer, Connect for Health Colorado
- Amber Egbert, Legislative, Tax Business Rule, and Forms Coordinator, Taxation Division, Colorado Department of Revenue

Members:

- Colorado Department of Health Care Policy & Financing (HCPF) Representative:
 Marivel Klueckman, Eligibility Division Director
- Colorado Division of Insurance (DOI) Representative: Debra Judy, Deputy Commissioner of Policy Affairs
- Consumer Advocate Representative: Allison Neswood, Deputy Director of Strategic Priorities, Colorado Center on Law and Policy (CCLP)
- Small Employer Representative: Frances Coet, Partner, ATLAS CPAs & Advisors
- Insurer Representative: Jared Colturi, Operations Manager, Cigna
- Health Coverage Guide Representative: Tanya Trujillo-Martinez, Director of Community Health Development, North Colorado Health Alliance
- Insurance Producer Representative: Melanie Herrman, Seasons Insurance Agency
- Income Tax Preparer Representative: David Sullivan, Vice President, Stakeholder Relations, Intuit, Inc.
- Health Care Consumer Representative: Jeanine Draut, Owner, InPraxis Communications

 CONNECT

Guiding Principles

When asked what C4HCO and DOR need to do well to decrease the number of uninsured individuals and maximize enrollment in this program, you said:

- Process must be user-friendly. Including simple language and minimal administrative burden
- Outreach should be targeted to areas of the state with higher uninsured rates
 - Communications to individuals who are newly eligible should describe what benefits could look like
- Tax preparers must be educated on EE so that they can speak to the program
- Marginalized communities' fears around immigration must be addressed
- Prioritize health equity by addressing structural barriers faced by populations frequently excluded from the health care system



Advisory Committee Votes on Final Checkbox, Instructions and Schedule Language



Implementation Decisions

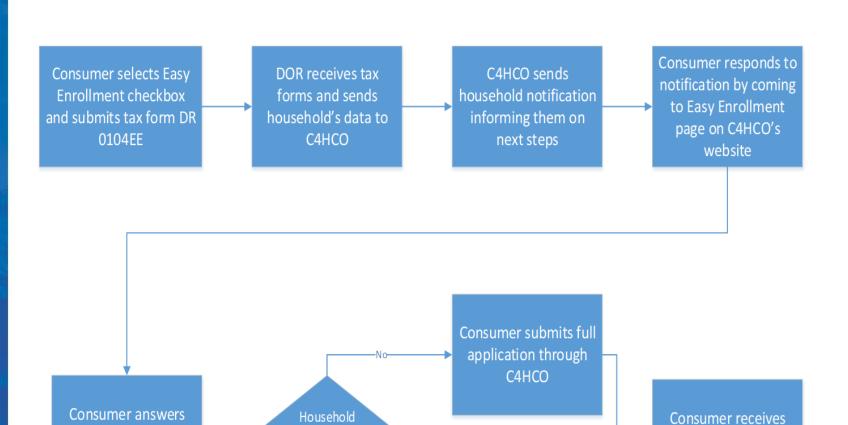


Recommended Approach for Eligibility Assessment and Noticing

- C4HCO sends notice to everyone who checks the box with clear call to action
 - Notice will not contain details of what uninsured household member(s) may qualify for based on an assessment
 - Notice will instruct uninsured household member(s) to come to C4HCO for more information and next steps



Process Flow for Recommended Approach



Consumer submits full application through PEAK

potentially eligible

for Medicaid?

questions in the "Let

Us Guide You" tool



eligibility

determination

Easy Enrollment Landing Page

 C4HCO to develop a new WordPress page

 Notice sent to customers will include a link to this new page



Key Considerations

- Straightforward approach that provides accurate noticing to customers
- Simplified "Phase 1" implementation to gather data for future evidence-based decision-making
- Does not require new eligibility engine
- Similar to approach used in MD
- Process will apply to new and existing customers



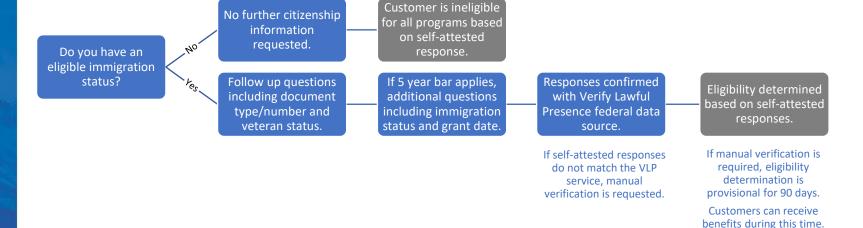
Advisory Committee Votes on Implementation Approach



Processes for Non-Citizens

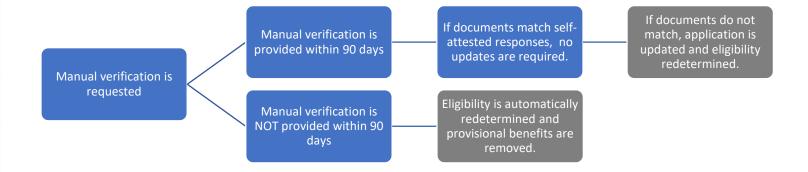


Non-Citizen Eligibility Process



- When a customer self-attests to criteria that makes them ineligible, no further information is collected, and no verification is needed
- When self-attested responses do not match federal data sources, manual verification is requested
 - Customers are informed on their eligibility notice that their determination is valid for 90 days and is dependent on the ability to produce all necessary documents
- In all cases, real-time eligibility is determined based on self-attested responses

Non-Citizen Verification Process



- Connect for Health Colorado uses information on the documents provided to update eligibility
- If documentation is not provided within 90 days, provisional benefits are removed
- In ALL scenarios where a customer's eligibility is redetermined, they receive an updated eligibility notice containing the reason for the change, new outcome, and options for next steps



Early 2021 Meeting Schedule

 Next meeting on January 21st from 3:00-4:00 (please note that all future meetings are reduced to one hour in length instead of two)

February 17th



Questions and Public Comment



Thank you!

