

Board Advisory Group

March 27th, 2024



Connect for Health Mission and Strategic Goals 2021-2024

[ConnectforHealthCO.com](https://connectforhealthco.com)

Our **mission**: To increase access, affordability, and choice for individuals and small employers purchasing health insurance in Colorado.

Our **strategic goals** guide our work and move forward our mission:

1. Advocate to improve access to coverage in areas of rural Colorado.
2. Maximize the number of consumers and employers who shop and enroll through the health insurance marketplace and apply for financial assistance.
3. Improve the ability of customers to attain and retain the right coverage for their needs.
4. Ensure that Connect for Health Colorado is a healthy and thriving organization.

Board Advisory Group Charter

- Established in HB16-1148
- **This Advisory Group will work to maximize the quality of the consumer experience on the exchange. This group will inform the way Connect for Health Colorado handles high-level policy decisions and provide feedback to the Board of Directors on ways of engaging consumers and other stakeholders about upcoming changes.**

Roll Call, Introductions, and Approval of the Minutes

Board Advisory Group Members

As your name is called, please turn on your camera, and state your name, location, organization, and role.

- **Rosie Duran (Chair)**, Larimer Health Connect: Assister
- **John Barela**, Eumetric: Technology
- **Melanie Herrman**, NABIP: Broker
- **Bethany Pray**, Colorado Center on Law Policy: Advocate
- **Cindy Watson**, Watson Insurance and Financial Group: Broker
- **Donna Wehe**, San Luis Valley Health: Hospital
- **Nikki Meredith**, Insurance Planning Alternatives: Broker
- **Krystin Beadling**, Yampa Valley Medical Center: Provider
- **Brandon Arnold**, Colorado Association of Health Plans: Issuer
- **Liz Tansey**, Covering Kids and Families: Consumer Advocate
- **Dr. Kavita Nair, M.D.**, UC Anschutz: Provider
- **Julia Wiswell**, NABIP: Broker
- **Rachel Dauer**, Colorado Ovarian Cancer Alliance: Consumer Advocate
- **Eddie Sandoval**, Anthem: Issuer
- **Allison Mangiaracino**, Kaiser: Issuer
- **Jane Barnes**, Benefits in Action: Advocate
- **Chandler Budlong-Springer**, Boulder County Health and Human Services: Assister
- **Michelle Nay**, Chaffee County: Assister
- **NEWLY APPOINTED: Lindsay Vigoda**, Small Business Majority: Advocate



Approval of Minutes

Agenda

- 1. Mission and Charter**
- 2. Roll Call and Approval of Minutes**
- 3. Fireside Chat with CEO Kevin Patterson**
- 4. Legislative Update**
- 5. Decision Support Tools Discussion: Compare Plans**
- 6. Eligible but not Enrolled Presentation**
- 7. Public Comment**

Fireside with CEO Kevin Patterson



Connection to Federal Data Services Hub Complete

- This is a milestone in our work to own our own technology, and a new level of organizational maturity.
- This will reduce security risks and make our systems more sustainable, more resilient, and more responsive to compliance requests.

Thank you Jane for your EIGHT years of
service!



Legislative Update: Jessalyn Hampton

Legislation with Board Positions



HB24-1035: Modernize Health Benefit Exchange Governance

- **Position:** Support
- **Sponsors:** Rep. Jodeh and Rep. Boesenecker; Sen. Jacquez-Lewis and Sen. Will
- **What does the bill do:**
 - Technical clean up bill suggested by Hon. Susan Lontine before her departure
 - Removes January 15th due date for Connect for Health Colorado's required report to the Legislature + Governor
 - Clarifies timing and frequency of Legislative Oversight Committee meetings
 - Clarifies who serves on the Legislative Oversight Committee
- **Votes:** Repassed House on 3/15/
- **Next Steps:** Governor Signature!



SB024-093: Continuity of Health-Care Coverage Change

- **What the bill does:**

- Requires continuity of care for up to 90 days for individuals undergoing treatment in specific circumstances (*serious and complex conditions, terminally ill, or nonelective surgery*) and for pregnant people through their postpartum care if:
 - Transitioning from Medicaid to private coverage
 - Their private coverage was not renewed because the issuer no longer offers plans they are eligible for
 - Issuer shall reimburse at standard in-network rate
 - Patient cannot be balance billed

- **Sponsors:** Sen. Michaelson Jenet, Rep. Amabile

- **Votes:** Passed House 48-15

- **Next Steps: Governor's Signature**





Updates: Legislation without Board Position

HB24-1258: Credit Covered Person Expenses Insurer Insolvency

- **What the bill does:**

- For individual and small group health plans, if an individual's issuer leaves the market mid-plan year and can no longer provide coverage, the individual's new issuer must credit out-of-pocket expenses paid
- Provides methods for recouping expenses and increase in claims liability because of crediting out-of-pocket expenses

- **Sponsors:** Reps. Brown and Boesenecker, Sen. Roberts

- **Next Action:** Passed Senate Health March 20th and sent to Approps

HB24-1258, cont.

- **Impact to Connect for Health Colorado:**

- Will help Coloradans better make the transition to other ind/small group coverage in the event on a mid-year market exit, will encourage customers to re-enroll

- **Relation to Connect for Health Colorado's Mission:**

- Increases access, affordability, and choice of coverage for customers needing to seek new coverage in the event of a mid-year market exit

- **Relation to Connect for Health Colorado's Strategic Plan:**

- Allows Coloradans to attain new coverage for their health care needs and circumstances without worrying about resetting deductibles or out-of-pocket maxes

- **Registered Lobby Positions: Key Support and Opposition (as of 3/7)**

- Advocacy groups in support, providers and issuers monitoring, no registered amend or opposition

- **Policy Committee Recommendation:** Support, will be taken up by Exec and Ops Committee Thursday 3/28



Questions + Legislative Updates from Members



Decision Support Tools- Compare Plans: Jessalyn Hampton

Let us guide you

Tell us about your household [Help me understand this page](#)

Which of the following situation apply to you or anyone in your household applying for health insurance?
(select all that apply)

- Is anyone in your household applying for coverage 65 or older? [?](#)
- Is anyone in your household enrolled in Health First Colorado (Colorado's Medicaid Program), Child Health Plan *Plus* (CHP+), or Medicare? [?](#)
- Is anyone in your household applying for coverage under 26 and formerly in foster care?
- Does anyone in your household applying for coverage live in a medical facility or nursing home? [?](#)
- Does anyone in your household applying for coverage have a physical disability or mental health condition that limits their ability to work, attend school, or take care of their daily activities (like dressing and bathing)? [?](#)

[Help](#)

- Existing customer log in, account creation, or option to log into PEAK
- Let Us Guide You page asks questions to help determine if someone is likely to be Medicaid or CHP+ eligible → recommend PEAK account

High Level Customer Journey Part One: Account Creation and Let Us Guide You Pages

Tell us about yourself

Help me understand this page

First name

Middle name or initial optional

Last name

Suffix optional

Date of birth

[Help](#)

- Complete identity verification
- Asks for name, address, tribal affiliations, incarceration, SSN, etc.
- Asks citizenship questions
- Ability to add/remove other members of the household, and much complete the Tell Us About Yourself questions for each household member
- After all household members are added, customer clicks “Apply for Financial Help”
- Another chance to be screened for Medicaid and CHP+

High Level Customer Journey Part Two: Tell Us About Yourself

Here's what your household qualifies for

Ann Chovy

Ann did not apply for health coverage.

Cesar Salad

3 Benefits

Premium Tax Credit
Cost-Sharing Reductions
Qualified Health Plan

Total Savings

\$433.96/mo

[View Application Summary >](#)

Overview



[Premium Tax Credit >](#)

A tax credit designed to help pay for your monthly premium.



[Cost-Sharing Reductions >](#)

Subsidies designed to lower the amount you pay when you receive care.



High Level Customer Journey Part Three: Eligibility Determination

- Enter income and tax status for each household member
- Declare other coverage (Medicaid, Medicare, Tricare, ESI, etc.)
- Sign Financial Assistance application and agree to screening
- Another chance to be redirected towards Medicaid and CHP+ if appropriate
- Receive eligibility, customer clicks “View Results and Shop”

Medical Plans for Group 1 - May and Kale

Narrow your results

83 of 83 Medical Plans

Sort by Monthly Premium- Low to High

Compare Plans 0

Monthly Premium

Individual Deductible

Family Deductible

0 18250

Insurance Company

Metal Tier

Reset Filters

ELEVATE COLORADO OPTION
Denver Health Medical Plan Inc..

Elevate Colorado Option Bronze

Individual Deductible	\$7,000	Primary Care Copay (after deductible)	\$50
Family Deductible	\$14,000	Specialist Coinsurance (after deductible)	50%
Individual Out-of-Pocket Max	\$9,100	Urgent Care Coinsurance (after deductible)	50%
Family Out-of-Pocket Max	\$18,200		

Bronze *Not Rated

Vision Rx

Monthly Premium \$717.08 After \$710.83 tax credit \$6.25/mo

High Level Customer Journey Part Four: Enrollment Groups and Shopping

- Tobacco question
- Customer creates enrollment groups for household members (allows different members of the household to enroll in different plans)
 - Shops for each group
 - Can view plan details and documents
 - **Can compare up to 3 plans side-by-side**
 - Repeat for dental
 - Displays selected plans and net premium

Select up to 3 plans to compare



KP Select CO Silver 5000/25

Individual Deductible	\$75	Primary Care Copay	\$10
Family Deductible	\$150	Specialist Copay	\$20
Individual Out-of-Pocket Max	\$2,200	Urgent Care Copay	\$50
Family Out-of-Pocket Max	\$4,400		



Cost-Sharing
Reduction



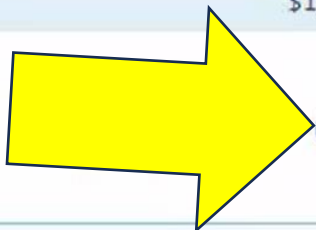
Silver



5/5

Monthly Premium **\$1,195.52** After **\$1,075.73** tax credit **\$119.79 /mo**

[Plan Details](#)




[Compare](#)

[Select this Plan](#)

Compare Plans Feature

Shopping for

Jessalyn [redacted]
Zip code [redacted]
Income [redacted]


 Want advice or have questions?
Talk to a certified expert
>





KP Select CO Silver
5000/25
HMO/Silver

Cigna Connect Colorado
Option Silver
EPO/Silver

Select Health Value Silver
\$3200 Medical Deductible
EPO/Silver

 Summary of benefits and coverage

 Summary of benefits and coverage

 Summary of benefits and coverage

Choose plan

Choose plan

Choose plan

Cost snapshot

Yearly cost estimate 	\$4,904/yr	\$4,734/yr	\$5,011/yr
Estimated monthly premium 	\$370.94	\$358.87	\$379.06
Estimated advanced premium tax credit 	--	--	--
Annual deductible 	\$5,000 individual	\$4,750 individual	\$3,200 individual
Annual out-of-pocket maximum 	\$9,450 individual	\$9,450 individual	\$9,450 individual
In-network pharmacy benefits  copayment  / coinsurance 	Generic Drugs \$15 / Not Applicable Specialty Drugs Not Applicable / 40% Coinsurance after deductible Preferred Brand Drugs	Generic Drugs \$20 / Not Applicable Specialty Drugs \$650 / Not Applicable Preferred Brand Drugs \$125 / Not Applicable	Generic Drugs \$15 / Not Applicable Specialty Drugs Not Applicable / 50% Coinsurance after deductible Preferred Brand Drugs

Prescriptions have either a copayment OR you pay the full allowable cost until the deductible

Comparison looks similar to this (this screenshot is from QCPF)

As we consider how to improve the compare plans tool...

- What kinds of questions do you or customers ask to arrive at the 3 plans you end up comparing?
 - Or, what considerations do you wish customers had in mind when choosing 3 plans to compare?
- What does the current functionality do well?
- What do you wish the tool did differently?
- Any other feedback you want to pass along to our designers?

Next steps: you will receive an email this week
to complete user testing for compare plans
functionality