

Policy & Regulations Committee

March 22, 2021



Legislation Potentially Impacting C4HCO

The 2020 Colorado State Option Impact Analysis

Staff from different departments completed an impact analysis for implementing a state option through the Exchange.

- Analysis assumed that the Colorado Affordable Health Care Option would have different display and marketing criteria than the rest of the plans sold through C4HCO. We used this assumption to assess the most complicated scenarios, rather than the easiest.
- Based on this assumption, the exchange would need to make changes to our marketing, technology, training to internal and external stakeholders, and data collection and reporting processes.

Colorado Standardized Benefit Bill ([HB21-1232](#))

- Colorado Standardized Benefit Bill was introduced on March 18th and it is a two phased approach aimed to lower healthcare costs.
- Phase 1 includes provisions to establish a plan with standardized benefits offered on and off Exchange and for issuers to lower premiums by 20% by 2024.
- If Phase 1 provisions by the issuers are not met, Phase 2 will begin in 2025, and that is the enactment of a governmental operated insurance option.

Discussion of Colorado State Option Proposal

- From the “Connect for Health Colorado Board Legislative Approach”:
 - *Connect for Health Colorado will not take a position on legislation unless the legislation will have a direct and significant impact on the continued operation of the Exchange.*
- What questions do you have?
- What information do you need to make a decision about whether or not C4HCO should take a position on this bill?

American Rescue Plan – Key Provisions

1. APTC Calculator Changes for 2021 & 2022

- Limit the cost of second lowest-cost silver premiums to 8.5% of income
- Expand eligibility for subsidies to customers over 400% FPL
- Increase subsidies for customers under 400% FPL
- Individuals with income below 150% FPL would have net \$0 premium options
- Households receiving Unemployment Insurance for at least one week eligible for full PTC for 2021

2. Households receiving Unemployment Insurance for at least one week eligible for full PTC for 2021

3. Temporarily lift IRS tax reconciliation requirement for PTC for at least 2020

4. Grants for SBMs to implement technology changes

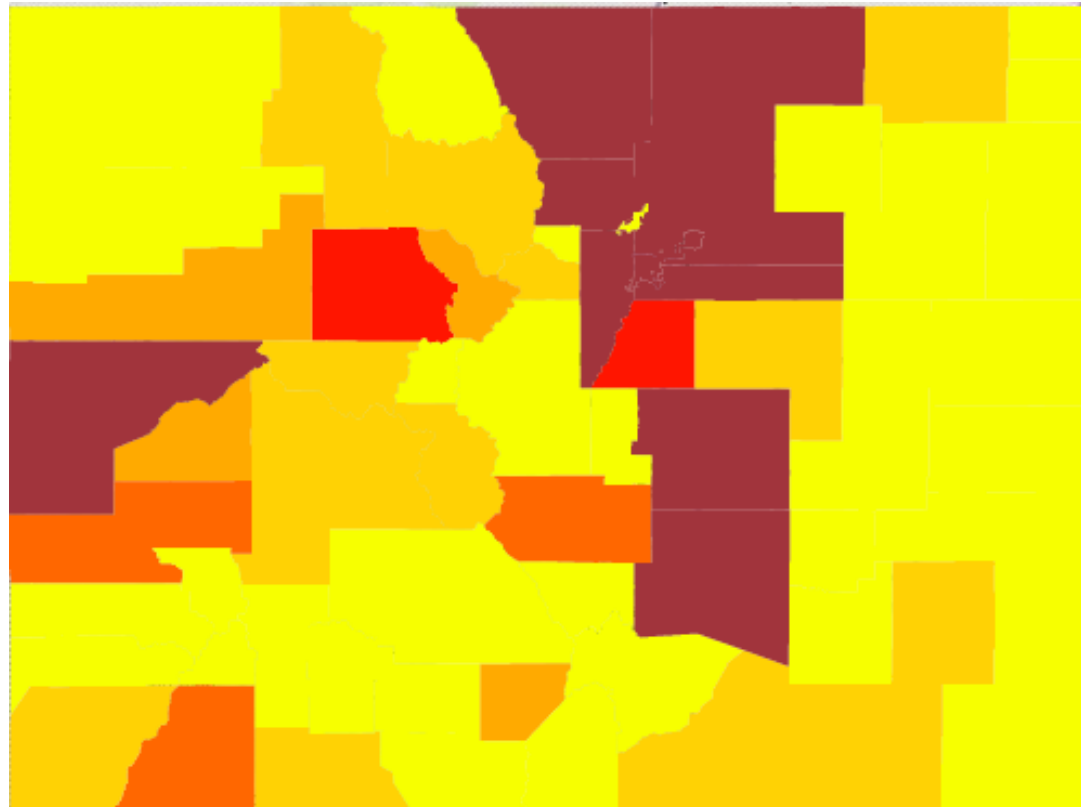
Eligible But Not Enrolled (EBNE) Report

EBNE Background

- The Colorado Health Institute conducted an analysis of the Eligible but Not Enrolled (EBNE) population by uninsured, off Exchange, on Exchange, and total individual market.
- In this context, EBNE is defined as eligible for tax credits, but not enrolled.
- The analysis included a breakdown of EBNE by age, federal poverty level (FPL), primary language, and Citizenship status.

Last Year (2020) EBNE Report Findings

- Uninsured EBNE by County



Last Year (2020) EBNE Report Findings

- Uninsured EBNE by Age: The highest margin was in the 55-64 age range.
- Uninsured EBNE by Primary Language: The highest margin was English, but Spanish was significantly high as well.
- Uninsured EBNE by FPL: The highest margin was in the 301-350% FPL range, 201-250% FPL was close.
- Uninsured EBNE by Citizenship Status: The margin was those who are citizens, but over 13,000 noncitizens are going without insurance

EBNE Report for 2021

The Board Advisory Group met on February 24th and discussed the results of the previous EBNE report.

They recommend Connect for Health Colorado should keep all of the criteria that were previously established but should add:

- Employment status of household members
- A way to quantify the households where there is employment and coverage but lack of affordability for remaining dependents in household
- Employment categories (service industry, etc.)
- Anyone effected by family glitch

Discussion: For the EBNE report that is being commissioned for the 2021 plan year are there any other factors you think we should ask for?

Policy Roadmap

Policy Roadmap Background

- As a continuation to our policy roadmap discussion, staff turned the administrative burden feedback from the Board Advisory Group and Policy Committee into problem statements.
- Policy Committee members rated the priority for addressing each problem statement.
- Staff rated the estimated level of effort for addressing each problem statement. Level of effort takes technology changes and communications/marketing into account.
- The proposed roadmap was presented to the Board Advisory Group at its February 2021 meeting.

Prioritized Problem Statements (1 being the highest priority)

- 1) **Noticing.** There is an opportunity to make Exchange notices clearer and easier for consumers to understand.
- 2) **Plan Display.** There is an opportunity to make it easier for consumers to better understand the differences between the many plans offered through the Exchange.
- 3) **Verifications.** There is an opportunity to align the types of verifications issuers accept for SEPs, to better improve and align the consumer experience.
- 4) **Alignment with Medicaid.** The differences in income eligibility criteria between Medicaid/CHP+ and APTC/CSR are confusing for consumers and often lead to churn between the different programs.

Board Advisory Group Recommendations

- The Board Advisory Group suggested these additional ideas for the Policy Committee to consider incorporating into the policy roadmap:
 - Auto-populated forms or auto-enrollment to make it easier for the customer to apply.
 - Reducing barriers for those moving over to the Exchange from Medicaid; especially when the Public Health Emergency ends to make sure that those who will lose their Medicaid will be transitioned over to the Exchange as seamlessly as possible.
- These suggestions were framed as opportunities to identify ways to “reduce hoops as opposed to making them easier to jump through.”

Discussion Questions

- What questions do you have about these ideas?
- What other information would be helpful to decide if you want to update the roadmap to incorporate these suggestions?
- How would you prioritize these suggestions in relation to the other items on the roadmap?



Board Advisory Group Input on Pandemic Barriers to Coverage

We asked the Board Advisory Group “Did you see any trends during the Pandemic that prevented Coloradans from getting insured?” They responded:

- Access to technology was a barrier with libraries as a large resource to internet closed
- Affordability/ranking of life priorities with less money to spend was also a barrier to coverage due to the pandemic

The group then suggested:

- Provide better/more focused messaging around which forms of income needed to be claimed (stimulus, unemployment, etc.)
- Do more outreach with Department of Labor regarding unemployment to catch those who remained on benefits while furloughed, but lost benefits when laid off and did not qualify for special enrollment period.