

# Board Advisory Group

January 25<sup>th</sup>, 2023



# 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.*

ConnectforHealthCO.com

- **Jane Barnes (Chair)**, Benefits in Action: Consumer Advocate
- **John Barela**, Eumetric: Technology
- **Meagan Fearing**, CSAHU: Broker
- **Erin Miller**, Colorado Children's Campaign: Consumer Advocate
- **Bethany Pray**, Colorado Center on Law Policy: Consumer 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**, CSAHU: Broker
- **Rachel Dauer**, Colorado Ovarian Cancer Alliance: Consumer Advocate
- **Eddie Sandoval**, Anthem: Issuer
- **Allison Mangiaracino**, Kaiser: Issuer
- **Rosie Duran**, Larimer Health Connect: Assister
- **Chandler Budlong-Springer**, Boulder County Health and Human Services: Assister
- **Michelle Nay**, Chaffee County: Assister
- **Allison Hiltz**, AARP: Consumer Advocate





# Approval of Minutes



# Agenda

1. Remarks from Kevin
2. Open Enrollment Update
  - OmniSalud
  - On-Exchange CSR
3. Federal Update
4. Product Development Presentation + Survey
5. Stakeholder Discussion

# Fireside with CEO Kevin Patterson





# Open Enrollment Update

- As of today, 201,758 Coloradans enrolled during Open Enrollment Period.
- That is an increase of approximately 3,000 plan enrollments above last year's total.
- For OmniSalud, we reached the 10,000 SilverEnhanced Savings Cap by December 6<sup>th</sup>!



# Expanded Eligibility for Enhanced Cost-Sharing Reductions (CSR)

Board Decision – eligibility for cost-sharing reductions offered through Silver Enhanced Savings plans will be expanded from those whose income is less than 200% FPL to those whose income is less than 250% FPL

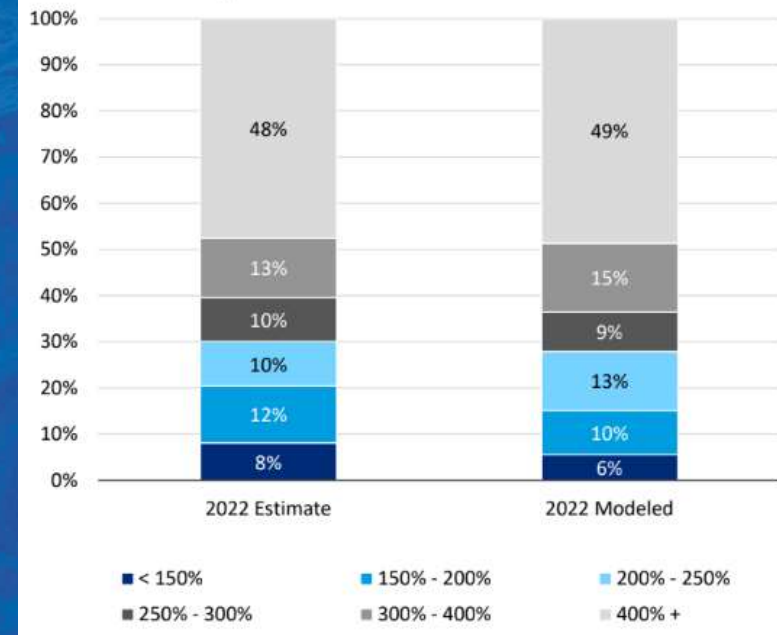
## 2024 MODELING SCENARIOS

Scenario	APTC – Eligible Population
2023	94% AV (150-200% FPL)
APTC 1	94% AV (150-200% FPL) same as 2023
APTC 2	94% AV (150-250% FPL)

Scenario	QI Population
2023	\$0 premium, 94% AV (0-150% FPL)
QI 1	\$0 premium, 94% AV (0-150% FPL) same as 2023
QI 2	\$0 premium, 94% AV (0-150% FPL) \$100 / person per month (150-200% FPL) – any CO Option plan
QI 3	\$0 premium, 94% AV (0-150% FPL) \$200 / person per month (150-200% FPL) – any CO Option plan
QI 4	\$0 premium, 94% AV (0-150% FPL) \$200 / person per month (150-250% FPL) – any CO Option plan

ACA Distribution by Household Income as a % of FPL





# Congress ends Continuous Medicaid Coverage

- The Omnibus Spending bill passed by Congress in December allows states to start Medicaid redeterminations
- **CO's continuous coverage ends May 31, 2023**
- Collaborating with the Department of Health Care Policy & Financing (HCPF) to help people coming off Health First Colorado (Medicaid) and CHP+ transition to Connect for Health Colorado as appropriate.

# Customer Journey: Transition to Connect for Health Colorado

Member receives their letter telling them that **they are no longer eligible for Health First Colorado/CHP+** and encouraging them to apply with **ConnectforHealthCO.com**

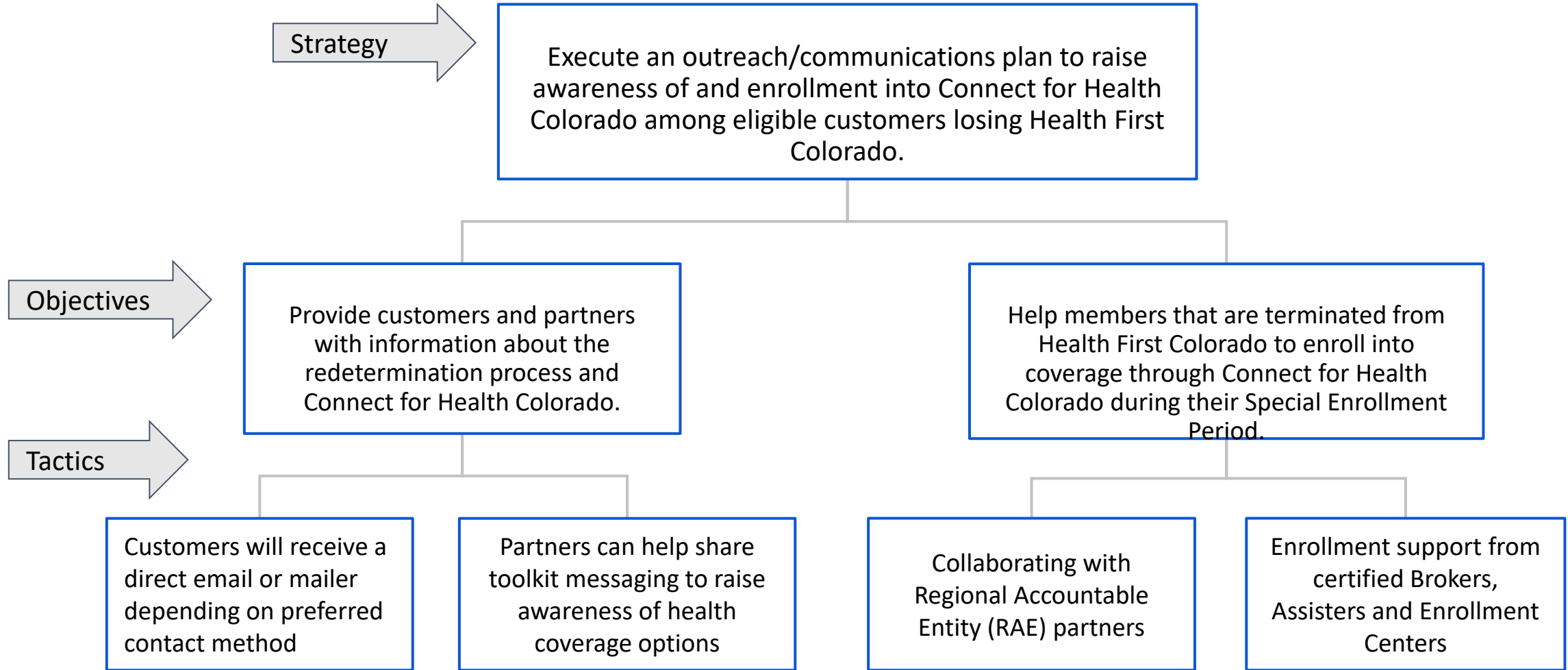
During their 60-day Special Enrollment Period, **member applies with Connect for Health Colorado on their own or with a Broker or Assister.**

Member selects a health insurance plan. Their **coverage begins on the first day of the month following plan selection.**

**Member is covered for 2023!**



# Medicaid to Marketplace Bridge







# How Do We Build Our Products: Product Lifecycle

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





# How did we get here?

Over the last several years Connect for Health Colorado has completed several projects to replace our prior licensed software with a C4 owned and operated technology platform. This focus on owning our own technology allows us several opportunities going forward:

- C4 is not limited by commercial product offerings. We now have the ability to make changes without paying high product customization fees.
- Ability to develop user tests and prototypes to vet potential solutions.
- More control over timing and ability to shift focus based on market and consumer needs = more flexible.

# Product Development Process

- Use data, stakeholder/customer feedback and user research to identify the problem to solve.
  - By focusing on the problem not the solution, we can ensure we are meeting the needs of the impacted population.
  - Allows us to explore/test multiple solutions rather than jump to a solution that might not meet the need.
- For large efforts/projects the team will create a user research and stakeholder engagement plan.
  - Plan to include goals, assumed problem statement(hypothesis), assumptions, target audience, timeline, recruitment methods, etc.
  - Team will conduct interview, create surveys and use existing/new data.
- Once potential solutions are identified the team will create mock-ups, prototypes and workflows to further vet and test.
  - Test screen flow, ask users to complete tasks, get feedback on language, colors and design.

# Example

Connect for Health received feedback from enrollment partners that the text on the “What’s Next” page was confusing.

Problem to Solve: Customers do not know what their next call to action is or what to expect and this leads to confusion and lack of confidence with the enrollment process.

The team reviewed feedback received and determined more information was needed to identify potential solutions. They created a test that was shared with brokers and potential customers.



# We want your help!

Connect for Health Product Development would appreciate the opportunity to engage with this audience and get additional feedback/participation in our research. The following test supports our work on the “What’s Next” page and will be open until EOD Friday 1/27.

<https://app.usabilityhub.com/do/1dcc0dc5f60e/4021>

Going forward we will be looking for additional opportunities to engage this audience as we explore decision support tools and plan display.





# Stakeholder Discussion



# Stakeholder Discussion

- **Guiding Question: How do we ensure customers can attain and retain the best health coverage for their circumstances?**
- **Goal: Generate 3-5 guiding principles to apply when considering future topics such as plan display, renewals, and enhanced decision support tools.**

# Developing Guiding Principles: Example from Easy Enrollment Advisory Committee

**When asked what C4HCO and DOR need to do well to decrease the number of uninsured individuals and maximize enrollment in this program, the Easy Enrollment Advisory Committee 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



# Discussion

- What are the top challenges customers face when choosing a plan?
  - How do you navigate these challenges currently?
- What's the number one thing customers ask for when enrolling?
- What tools or resources have your customers found helpful?

# Discussion continued

- What's the number one thing you have to point out to customers when they're shopping?
- What are the top challenges customers with high barriers to health coverage face?
  - Our strategic plan acknowledges the need for an action plan to serve different populations of Coloradans:
    - Age 55+
    - Rural Colorado
    - Historically under-enrolled in health coverage

# Draft Guiding Principals

- Major themes from discussion questions?



# Public Comment

Thank you!  
See you March 29th  
Jessalyn's contact info: [jhampton@c4hco.com](mailto:jhampton@c4hco.com)