

Board Meeting Minutes
Connect for Health Colorado Meeting Room
East Tower, Suite 1025
3773 Cherry Creek N Dr., Denver, CO 80209
December 18, 2017
8:30 AM – 11:30 AM

Board Members Present: Claire Brockbank, Kyle Brown, Mike Conway, Steve ErkenBrack, Adela Flores-Brennan, Jay Norris, Sharon O’Hara, Marc Reece and Nathan Wilkes

Board Members Joining via Phone: Davis Fansler and Tom Massey

Board Members Absent: Denise O’Leary

Staff Present: Brian Braun, Luke Clarke, Kelly Davies, Beth Deines, Claudia Farnham-Wittner, Kate Harris, Caren Henderson, Molly McClurg, Ian McMahon, Kevin Patterson, Carolyn Pickton, Jackie Sanderson, Alan Schmitz, Lisa Sevier and Ezra Watland

Approximately 6 guests attended the meeting in-person and the conference line was available for people to join by phone.

I. Call to Order

- Board Chair Adela Flores-Brennan, called the meeting to order at 8:30 am and welcomed those in attendance, both in-person and on the phone.

II. Business Agenda

- The minutes from the November 13, 2017 meeting were voted on and approved.
- There were no changes to the agenda.
- Disclosure of Conflicts of Interest: none.

III. Board Report

Ms. Flores-Brennan introduced two new board members: Tom Massey, as an ex officio, will represent the Department of Health Care Policy and Finance (HCPF) and Claire Brockbank, who is a principal at Segue Consulting.

Mr. Massey stated that his immediate priorities in working with Connect for Health Colorado are eligibility and expediting the cost sharing allocation due to the organization.

Ms. Brockbank is a purchaser on the Marketplace, and works for a health care strategy and business development firm.

The board will have a vote in the coming months to elect the officers of the board and determine the members of the Executive Committee.

Connect for Health Colorado provided an update to the Colorado Health Insurance Exchange Oversight Committee during its committee meeting on Friday, December 15, 2017.

IV. CEO Report

Enrollments are tracking ahead of last year, with a 6% growth overall. Open enrollment continues for Colorado through January 12, 2018.

Open Enrollment Update

Kelly Davies, Director of Product Development, updated the board on the system's performance for open enrollment 5 (OE5). During November, the system's performance has exceeded all agreed upon service level agreements (SLAs). Additionally, it was noted that traffic for the Quick Cost & Plan Finder tool has increased by 400%.

Preliminary enrollment numbers include:

- Total enrollment as of this date is 153,908, compared to 144,599 during this time last year
- 75% of enrollments include financial assistance vs last year's 63%
- 54% of enrollments came through brokers

Claudia Farnham-Wittner, Director of Health Plan Operations, gave a report out on customer service.

- 79% of the forecasted call volume for November occurred within the first 14 days of OE5
- 3406 calls were offered on November 1, service levels were at 90%
- Year over year comparison for the week for December 15:
 - Wednesday December 13
 - 273 more calls compared to the same day last year
 - Service levels improved from 31% in 2016 to 96% in 2017
 - Average speed of answer (ASA) improved from 21:04 min down to 1:22 min
 - Friday December 15 offered 10,765 calls
- Year over year improvements
 - First call resolution from 54% in 2016 to 79% in 2017
 - Customer satisfaction from 54% in 2016 to 79% in 2017
 - An overall 25% reduction in pending/open tickets

CHP+ Update

This portion of the agenda was moved up from the Policy Committee topic.

Kate Harris, Director of Policy and External Affairs, gave an update on the Child Health Plan Program (CHP) which is due to run out of funds after January 31, 2018. Connect for Health Colorado and the Division of Insurance (DOI) are closely monitoring the situation. Internally, the organization has made preparations to provide training, cost estimates and funding for outreach and assistance aimed at helping the parents of children, and pregnant women, currently enrolled in CHP obtain insurance once the funds have run out. Additionally, Connect for Health Colorado has weekly discussions with carriers around possible scenarios and options. There is a list of frequently asked questions on the website which can be found here.

The Governor's office is working closely with HCPF and DOI on this issue, and the Joint Budget

Committee (JBC) will make a determination within the next week as to whether the state will be able to use trust fund money to fund the program through February.

Ms. Harris noted that a timeline was included in the board packets which focuses on the work Connect for Health Colorado is doing, with state partners to provide information to everyone who is currently enrolled in CHP.

The board authorized staff to send a letter to the JBC endorsing the use of the trust fund money to fund the CHP program for the month of February, if it is needed.

Strategic Plan Update – Tactical Plan

Kevin Patterson, Chief Executive Officer, gave an update on the tactical plan portion of the organization's strategic plan. The areas of focus for the next fiscal year include:

- Managing costs
- Targeted, data-supported outreach
- Enhanced broker and Assister education, communication, training and support
- Improved customer experience
- Carrier process and reporting improvements
- New/refined financial policies, processes and dashboards
- Finalization/approval of key finance mechanisms
- Completed the employee survey, to be reported on in January

A summary involving completed key activities for each strategic goal was reviewed:

- Goal #1
 - DOI stakeholder meetings
 - Targeted outreach and marketing
 - Added an additional FTE focused on county engagement
- Goal #2
 - Used data for targeted notifications
 - Used appointment outcome tracking
 - Implemented "Preferred Plan" option
 - Implemented Enrollment Centers across the state
 - MA Site team working with the Assistance channels
 - New functionality to simplify the re-enrollment process
 - Broker survey
- Goal #3
 - Quick Cost Plan Finder Tool enhancements
 - Educational activities
 - Service Center restructuring
 - Enhancements to the change reporting process
 - New appeals and complaints processes
 - Reconciliation process improvements
- Goal #4
 - New reserve policy
 - Medicaid Cost Allocation Plan approved by the Centers for Medicare & Medicaid

Services (CMS)

- Expense reporting process finalized with HCPF
- Grant opportunity research
- New project intake process
- Implemented real-time budget to actual financial management dashboard reporting
- Employee survey

Additionally, the organization continues to engage in key activities around each of the goals.

CIO

An offer has been extended to, and accepted by, Kelly Guthner, he will be joining the organization in late January in the role of CIO.

Broker Compensation Update

Connect for Health Colorado has no connection with Kaiser Permanente's broker compensation plan. The organization is reviewing its process for clarifying criteria around enrollment centers and increasing transparency around the centers.

V. Finance & Operations Committee Report

Supplemental Budget Update

The organization is reviewing requests for a supplemental budget using the cost allocation funds. Within the next month there should be more clarity on the use of the funds, including an allocation for reserves.

There are some immediate funds that may be needed and will be addressed accordingly in the January board meeting.

Reserve Policy

The reserve policy will be presented as part of the supplemental budget and will include long term plans.

VI. Policy Committee

Marc Reece has been reaching out to carriers to get feedback on benefit standardization, including plan choice and optionality in order to simplify and improve the informed-decision making process for Marketplace customers.

Legislative Update

The GOP Tax Bill is scheduled to be voted on within the week. This version of the bill does include the repeal of the Affordable Care Act's individual mandate. This repeal won't be affective until 2019; however, an October 2017 study by the Kaiser Family Foundation indicates that the majority of people would still be motivated to enroll in health insurance despite the repeal of the mandate.

2019 Proposed Payment Notice

Twice a year CMS releases proposed regulations, or changes to current regulations, Connect for Health Colorado offers comment on the proposed regulations/changes and CMS is required to take all comments into account when making the final decision.

Comments to the 2019 Notice of Payment Parameters were submitted by organization in late November and the final regulations will be released some time in February. Some highlights include:

- State options for flexibility and innovation – the organization is in support of state flexibility
- Navigator program standards – the organization is neutral
- Income inconsistencies – the organization opposes
- Alternative verifications process to check for eligibility for employer sponsored insurance – the organization supports
- Eligibility redetermination during a benefit year – no proposed changes, HHS was seeking feedback, which the organization provided
- Annual eligibility redetermination – the organization opposes
- Material plan or benefit display errors – the organization supports
- Prior coverage requirements – the organization supports
- Aligning coverage effective dates – the organization supports
- Aligning termination dates – the organization opposes
- Termination dates for individuals who gain Medicaid or CHP – the organization opposes

VII. Public Comment

The following members of the public gave comment:

A.J. Ehrle IV, independent broker

Claire Shemeta, customer

Chris Adams, Broker

Chuck Hoppe, Broker

Dave Scherer, Customer

Loni Kreutzer, broker

Addendum [A1](#) & [A2](#) attached

Meeting adjourned at 11:20 am.

Respectfully submitted,

Davis Fansler

Secretary

Next Meeting

January 8, 2018 from 8:30 am – 12:00 pm