

**Board Meeting Minutes**  
*Connect for Health Colorado Meeting Room*  
*East Tower, Suite 1025*  
*3773 Cherry Creek N Dr., Denver, CO 80209*  
**January 8, 2018**  
**8:30 AM – 11:30 AM**

**Board Members Present:** Claire Brockbank, Mike Conway, Steve ErkenBrack, Adela Flores-Brennan, Sharon O’Hara and Denise O’Leary

**Board Members Joining via Phone:** Davis Fansler, Tom Massey, Jay Norris, Marc Reece and Nathan Wilkes

**Board Members Absent:** Kyle Brown

**Staff Present:** Brian Braun, Luke Clarke, Kelly Davies, Jody Davison, Claudia Farnham-Wittner, Kate Harris, Ian McMahon, Kevin Patterson, Carolyn Pickton, Alan Schmitz, Lisa Sevier and Ezra Watland

Approximately 8 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 December 18, 2017 meeting were voted on and approved.
- There were no changes to the agenda.
- Disclosure of Conflicts of Interest: none.

**III. Board Report**

As a part of the board’s development, Sharon O’Hara offered to research various board associations to determine whether joining one of the associations would be of value to the board.

**IV. CEO Report**

The organization is in the final push towards the end of open enrollment, including several outreach opportunities over the past weekend. Last day of open enrollment is Friday, January 12.

Open Enrollment Update

Currently enrollment is 3% over last year with a cumulation of 161,512 individual plan selections. The system performance has met all agreed upon service level agreements (SLAs). The majority of issues appear to be around eligibility between the Program Eligibility and Application Kit (PEAK) system and Connect for Health Colorado and complicated households. Additional issues have been with people changing their income multiple times, which can create payload issues, causing a need for more hands-on attention to correct problems related to delays in the information transmitting between systems.

### SHOP Update

Currently Kaiser Permanente is the only on-exchange carrier for the Small Business Health Options Program (SHOP). The organization has been working with Kaiser Permanente to create a direct enrollment for SHOP. This transition has been very smooth and may take effect as soon as March for SHOP renewal.

## **V. Eligibility Changes**

The organization has been investigating the possibility of creating the ability for Connect for Health Colorado to determine eligibility for the advanced premium tax credit (APTC), transferring those who are eligible for Medicaid over to PEAK. This will require a reconnection to the Federal Data Services Hub (FDSH). The organization believes this is the most efficient process and has indicated this to the Center for Consumer Information & Insurance Oversight (CCIIO). This process will not affect the No Wrong Door Policy that the organization continues to adhere to.

The goals for the eligibility system changes include:

- Improve the customer experience
- Bring Connect for Health Colorado into compliance in significant areas
- Increase ability to predict and control technology costs
- Decrease Eligible but Not Enrolled (EBNE) population and increase enrollment overall
- Increase APTC uptake

These changes will offer more control over eligibility related costs, predictability of costs and forecasting. There is an upfront investment, which will lead to cost savings in the future, which staff review during the next Finance & Operations Committee meeting.

These changes will allow the organization to respond to and comply with the Office of the Inspector General (OIG) requirements faster.

It was noted that with this change, Connect for Health Colorado is not trying to take on Medicaid eligibility determination; but rather, will assess eligibility and transfer eligible customers to the PEAK system. The organization has done work along these lines before and past designs and tools will be leveraged and reflected in the cost of the changes.

## **VI. Finance & Operations Committee Report**

### HCPF Contracting & Medicaid Cost Allocations

The Colorado Department of Health Care Policy and Financing (HCPF) plans to provide \$3.1 MM to Connect for Health Colorado for Medicaid cost allocations for the last fiscal year. The funds should be available within the next week.

The funds for the current fiscal year will be allocated on a quarterly basis (60 days from the close of the quarter), and will begin shortly.

The allocated funds will be treated as federal funds; therefore, the organization will undergo an A-133 audit for fiscal year 2017 within the next 2 months.

### Ticketing Process Review

Claudia Farnham-Wittner, Director of Health Plan Operations, reviewed the customer service ticketing process. The call abandonment rate through November was at 2% and 3% for December.

The single issue ticket process was introduced in mid-2017:

- All activity needs to be noted in a single “issue” ticket
- A ticket is considered resolved when the “issue” is confirmed resolved
  - Issue is defined as the issue being reported by the customer/Broker/Assistor
- 3 attempt – 2 day rule for closing ticket without customer consent
  - Two phone calls followed by an email notification

If a second ticket is issued for the same problem, the second ticket’s information is added to the original ticket, and the second ticket is closed. This has caused some confusion for the customer receiving information a ticket has been closed, as they do not realize the original ticket remains open and is considered still in process. Staff is investigating improving this communication process by allowing the customer visibility into the status of the ticket.

Escalated tickets are based on the following criteria: aging beyond the expectation of the issue resolution, if a customer or customer representative requests a supervisor, or if a member has contacted the service center four or more times. The escalation path begins at the Service Center and includes supervisor/lead then manager, then moves to the director level at the corporate office.

Tickets are monitored by aging vs. abandonment with aging reports and active aging protocols. Tickets also undergo a monthly quality assurance and audit process.

Repeat caller statistics are monitored and reviewed to ensure the one-ticket process and first call resolution protocols are being followed.

## **VII. Policy Committee**

The committee will be having several key stakeholder meetings on benefit plan design within the next week.

### Legislative Update

The State Legislative Session starts this week.

### CHP+ Update

The State Budget Committee has approved funding for the Child Health Plan Plus (CHP+) program to continue through February.

The Congressional Budget Office has indicated in a letter to Senator Orrin Hatch that the projections for how CHP+ increases the deficit has changed with the results of ending the individual mandate. Projections indicate the end of the mandate will create an increase in premiums, resulting in a higher level of APTC cost to the government to cover the CHP+ population that will presumably be coming

into the marketplace. For that reason, funding CHP+ would cost less than covering the CHP+ population through the use of the marketplace and APTC.

If CHP+ is not funded, the Division of Insurance (DOI) has communicated with families of CHP+ members that they will be eligible for a special enrollment period for insurance. The DOI will be working with Connect for Health Colorado and carriers to determine what steps will be taken for people who may just now be coming into CHP+.

**VIII. Public Comment**

The following members of the public gave comment:

A.J. Ehrle IV, Independent broker

Elizabeth Walker, customer

Brad Niederman, Broker

Barton Fagan, Customer

Meeting adjourned at 10:50 am.

Respectfully submitted,

Davis Fansler  
Secretary

**Next Meeting**

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