



POLICY COMMITTEE MEETING

MARCH 23, 2020

EASY ENROLLMENT

Easy Enrollment Implementation Planning

Engagement with Department of Revenue (DOR)

- Staff has had preliminary discussions with DOR at a very high-level regarding data sharing, specifically privacy and timeline. DOR is comfortable that we meet the applicable privacy and security needs because we already handle federal tax information.
- DOR is comfortable with the implementation timeline to share information. Once we have a signed legislation, we can engage DOR more in-depth on details. The Advisory Committee will also be part of this process.

Implementation

- Staff is working on creating different options for our evaluation so that we can have flexibility knowing we do not control the entire process. We are unable to finalize implementation details without the Advisory group.

HB 1349 COLORADO AFFORDABLE HEALTH CARE OPTION IMPACT ANALYSIS

Colorado Affordable Health Care 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.
- Recent projects with NES, Service Center transition and other modernization efforts have set a solid foundation to successfully implement a state option.

ELIGIBLE BUT NOT ENROLLED ANALYSIS

Eligible But Not Enrolled (EBNE) Analysis

- Every year Connect for Health Colorado contracts with the Colorado Health Institute to conduct an analysis of where the Eligible But Not Enrolled (EBNE) population is located.
- The analysis includes a breakdown by county and zip code of:
 - EBNE rates focusing on the uninsured
 - EBNE rates focusing on those on the individual market but not using APTCs
 - EBNE rates focusing on those on Connect for Health Colorado but not using APTCs
 - EBNE rates focusing on those on the non-Connect for Health Colorado individual market

EBNE Cont'd

- Board Advisory Group discussed additional data elements that should be included in this year's analysis and offered the following recommendations:
 - Age
 - Citizenship status
 - Primary language
 - Race/ethnicity
 - Distance to health care facilities (FQHC's, urgent care, etc.)

- Which of the above data elements would be helpful in the CHI EBNE analysis to help inform policy discussions and decisions? Are there other data elements not listed that you want included in the analysis?