

# Board Advisory Group

April 29, 2026



# C4 Mission & Board Advisory Group Charter

**Connect for Health Colorado's mission:** To increase access, affordability, and choice for individuals and small employers purchasing health insurance in Colorado.

Board Advisory Group was 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

## *Roll Call*

[ConnectforHealthCO.com](http://ConnectforHealthCO.com)

- **Rosie Duran (Chair)**, Larimer Health Connect: Assister
- **John Barela**, Eumetric: Technology
- **Melanie Herrman**, NABIP: Broker
- **Bethany Pray**, Colorado Center on Law Policy: Advocate
- **Karen Seater**, KLS Health Solutions: Broker
- **Donna Wehe**, San Luis Valley Health: Hospital
- **Krystin Beadling**, Yampa Valley Medical Center: Provider
- **Kevin McFatridge**, Colorado Association of Health Plans: Issuer (Welcome!)
- **Erin Varnum**, Covering Kids and Families: Consumer Advocate
- **Dr. Kavita Nair, M.D.**, UC Anschutz: Provider
- **Julia Wiswell**, NABIP: Broker
- **Rachel Dauer**, Colorado Ovarian Cancer Alliance: Consumer Advocate
- **Eddie Sandoval**, Anthem: Issuer
- **Allison Mangiaracino**, Kaiser: Issuer
- **Jane Barnes**, Benefits in Action: Advocate
- **Chandler Budlong-Springer**, Boulder County Health and Human Services: Assister
- **Michelle Nay**, Chaffee County: Assister
- **Hunter Nelson**, Small Business Majority: Advocate
- **James Douglas**, Soul to Sole Benefits: Broker
- **Anna Cubel**, Program Manager for Hilltop Community Resources
- **Tennie Masterson**, Director of Operations and Patient Access for Conejos County Hospital and Valley Wide Health





# Approval of Minutes

# Agenda

1. Fireside Chat with Chief Executive Officer Kevin Patterson
2. By The Numbers Report with Destiny Carter
3. Annual Customer Survey with Danny O'Neil
4. New Privacy Resource with Maria Adams
5. Federal Policy Changes for Plan Year 2027 with Rachel Peters
6. Program Updates: Renewals & Verifications with Stephanie Gray & Eric Finch
7. Policy & External Affairs Update with Anneliese Steel
  - Kevin's DC Trips
  - [SB 26-178](#): Health Insurance Affordability Measures
8. Public Comment

# Fireside with Chief Executive Officer Kevin Patterson





# OE Report 2026

Destiny Carter

# New & Returning Customer Survey

April 2026



# Survey goals

To better understand the enrollment experience of new and returning customers, Connect for Health Colorado conducts an annual customer survey. The survey is designed to:

- Assess satisfaction with the application process and available plan options
- Understand why customers use Connect for Health Colorado
- Examine whether customers understand their health insurance options
- Compare the 2026 customer experience with prior years

# Methodology

- An online survey of new and returning Connect for Health Colorado customers was fielded in late January 2026 and remained open for approximately one month.
- The survey was distributed to a randomly selected subgroup of both new and returning customers.
  - Approximately 1,600 customers responded to the survey
  - 95% confidence interval:  $\hat{p} \pm 2.45\%$
- Customers received the survey in either English or Spanish based on their language preference.
- This marks the 10th annual survey used to track customer experiences with the enrollment process.
- Results can be compared with prior survey years to assess changes in the customer experience over time.

# Key Findings

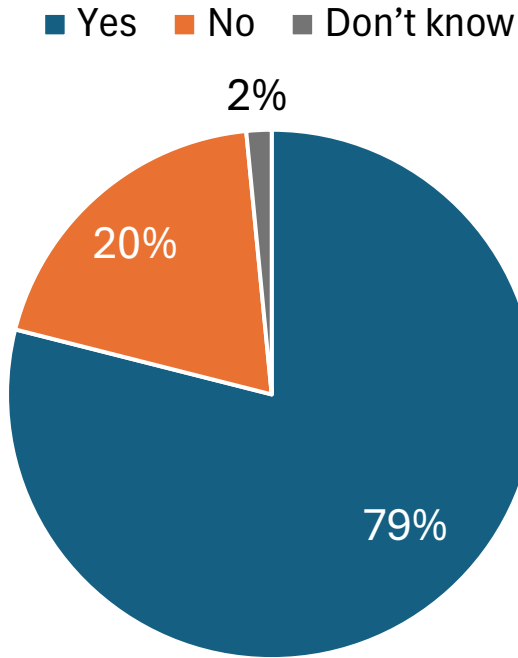
# Key Findings

1. Affordability is a challenge for many customers this year.
2. A majority of customers remain satisfied with their enrollment experience.
3. Customers receiving CPA reported higher satisfaction and fewer affordability concerns.
4. Customers above 400% FPL had the most strained experience.

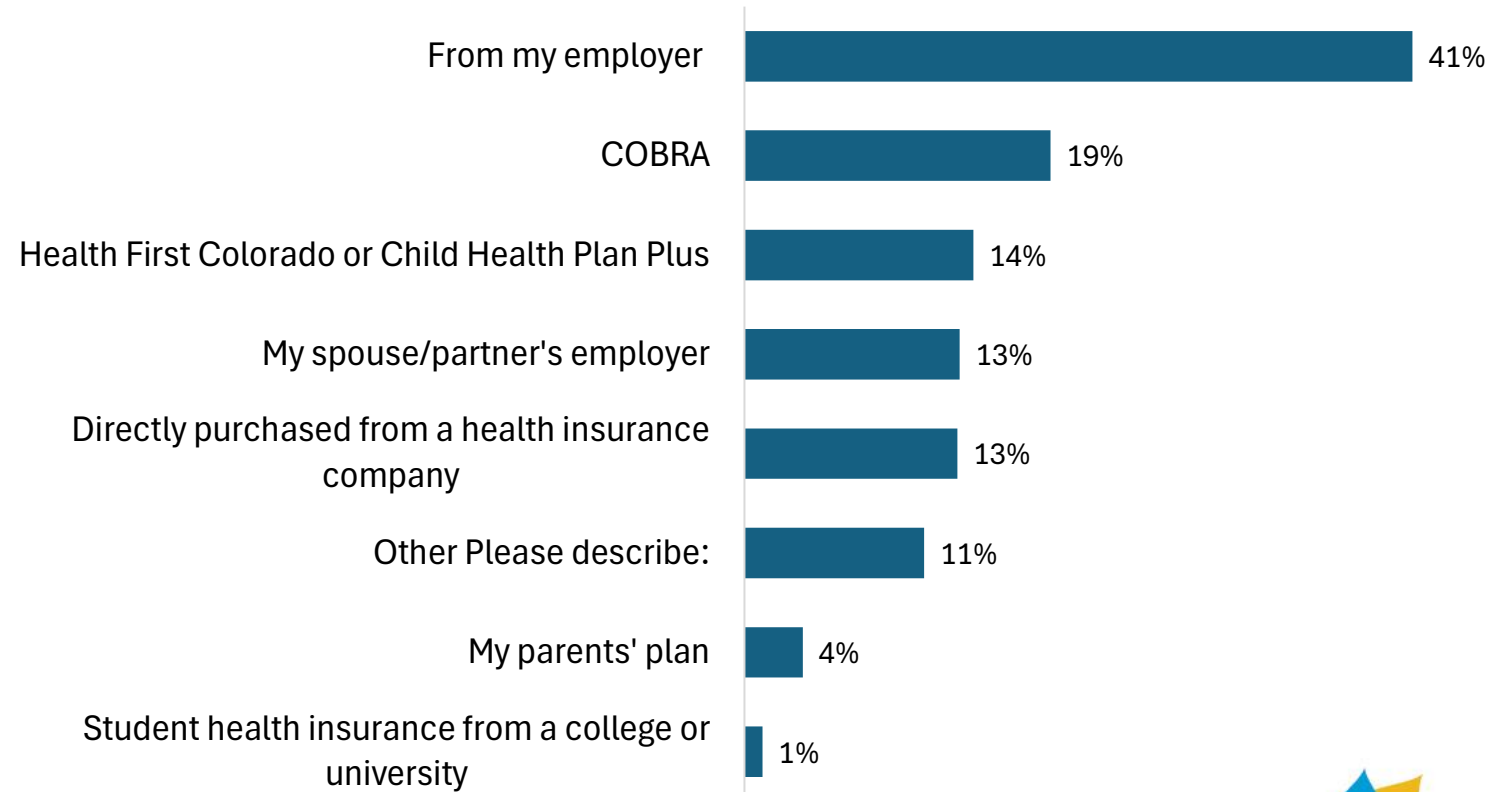
Who are our customers?

# Most new customers had health insurance prior to using the Marketplace, most often from an employer

### Health Insurance During the 12 Months Prior to Enrollment (New Customers Only)

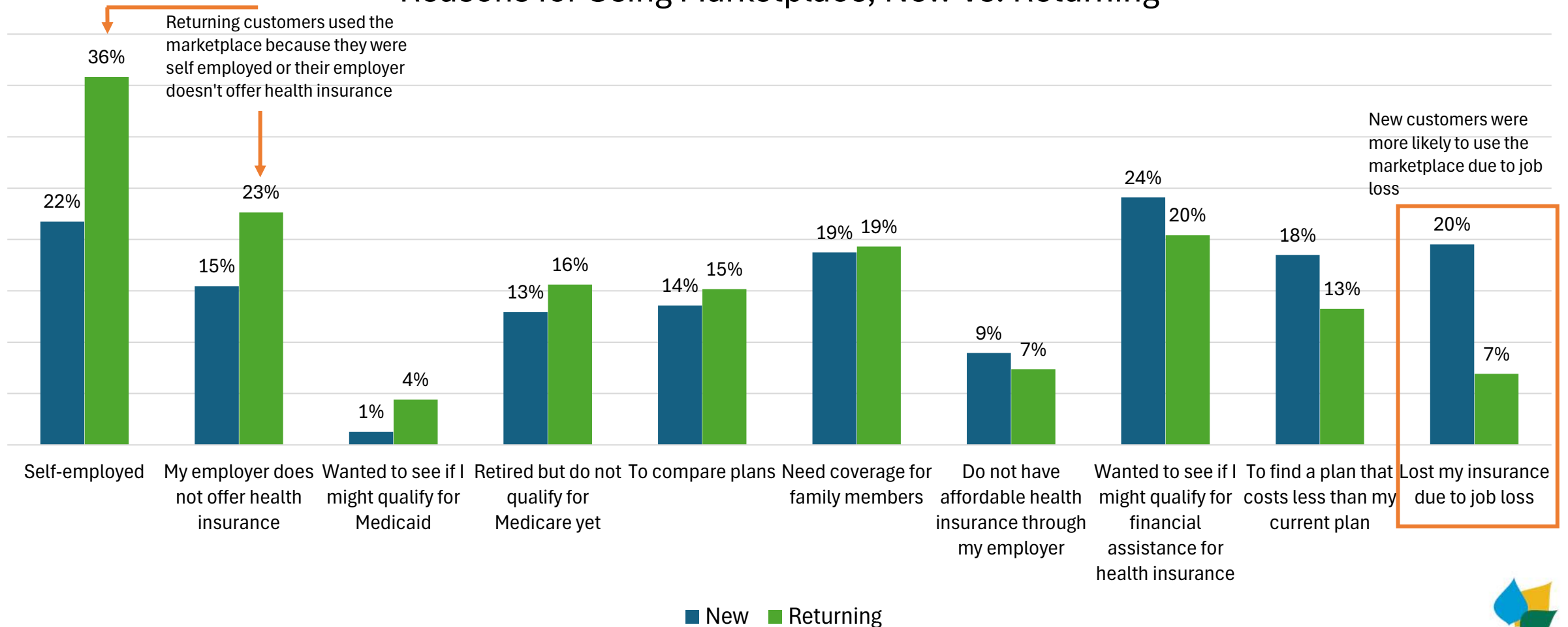


### Types of Health Insurance Prior to Enrollment (New customers only)



# Customers used the Marketplace because they were self-employed or their employer doesn't offer health insurance

## Reasons for Using Marketplace, New Vs. Returning

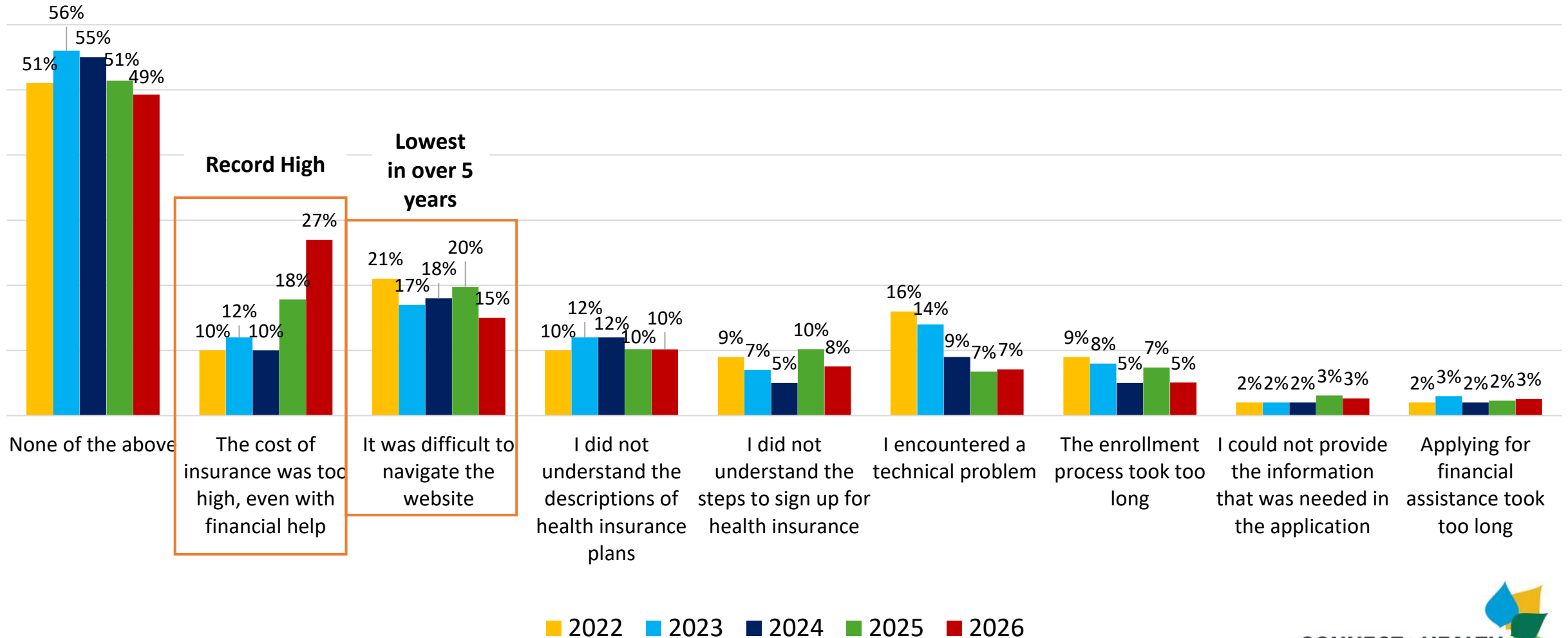


# 1. Affordability is a challenge for many customers this year.

*"I'm grateful there is a marketplace but wish there was more competition and more reasonable rates. I can afford the premium but not the money to seek medical care."*

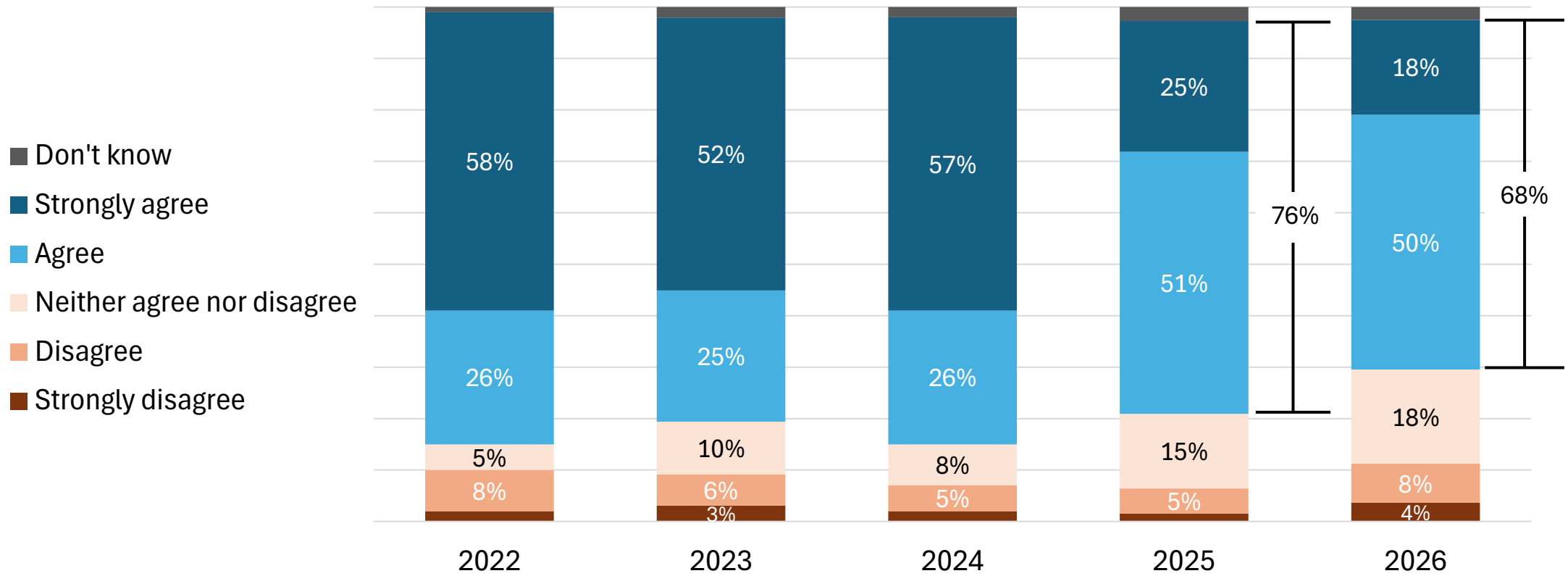
*"My frustration with health insurance isn't about Connect for Health Colorado. It's more about navigating the system available in the U.S."*

# The cost of insurance was the most commonly cited enrollment challenge



# Customers were less certain they would be able to pay their monthly premium, compared to previous years

## I will be able to pay my plan's monthly premium

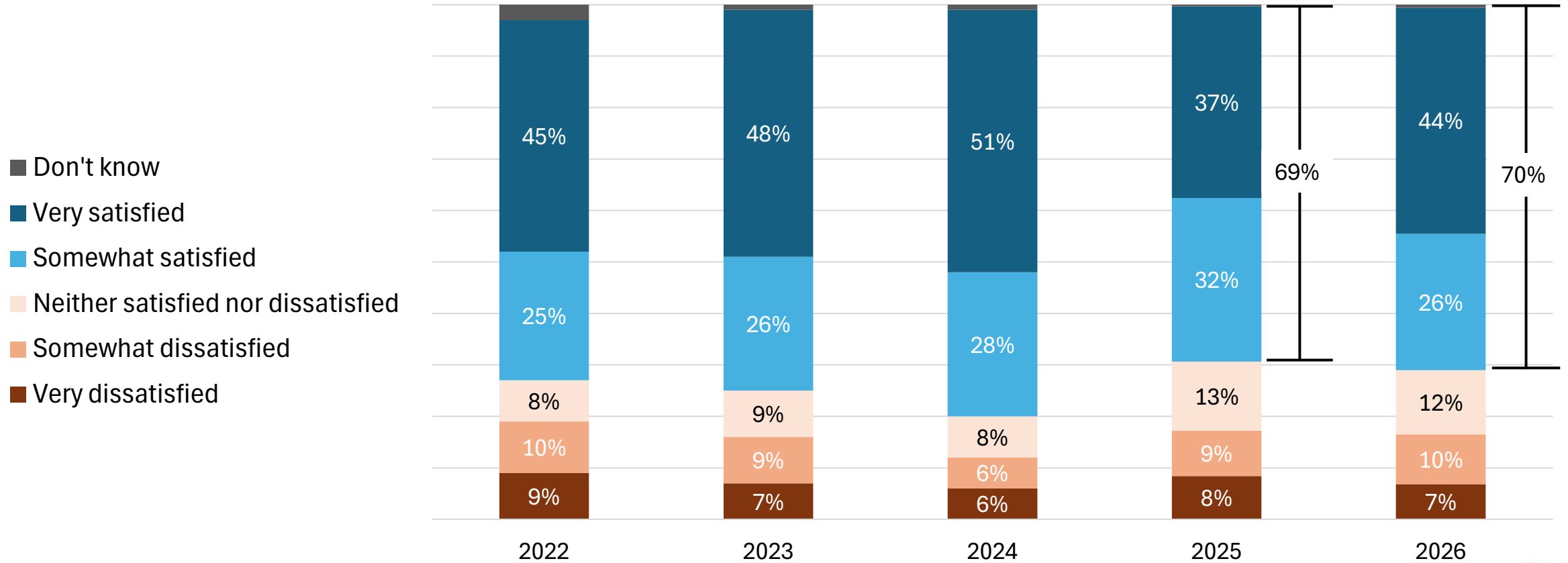


## 2. A majority of customers remain satisfied with their enrollment experience

*"I really appreciate how accessible the brokers are. It makes me feel like I have options and won't mess up because someone else is helping me."*

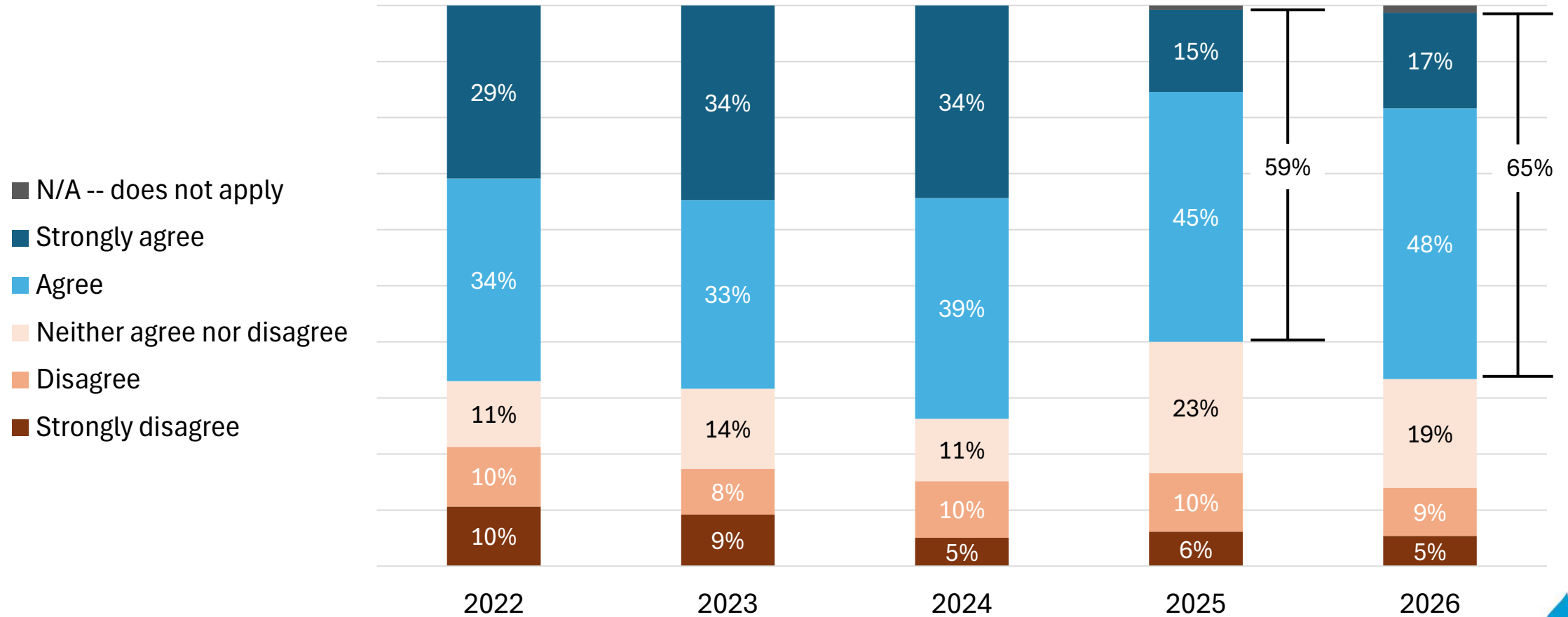
# Customers in 2026 were slightly more likely to be “very satisfied” with their enrollment experience compared to last year

## Satisfaction With Enrollment Experience



# Customers in 2026 found enrolling to be slightly easier than 2025

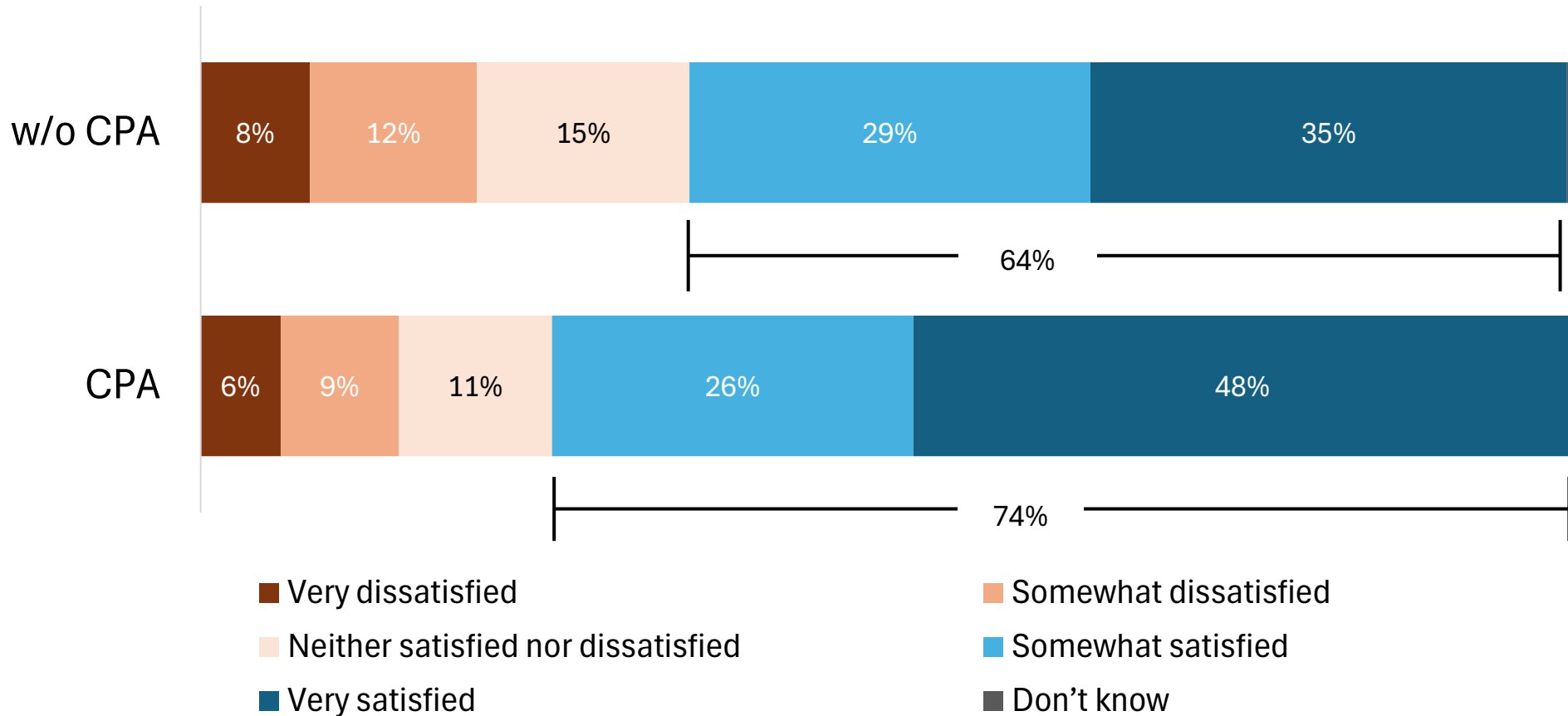
Overall, enrolling in a health insurance plan through C4HCO was easy



3. Customers receiving CPA reported higher satisfaction and fewer affordability concerns.

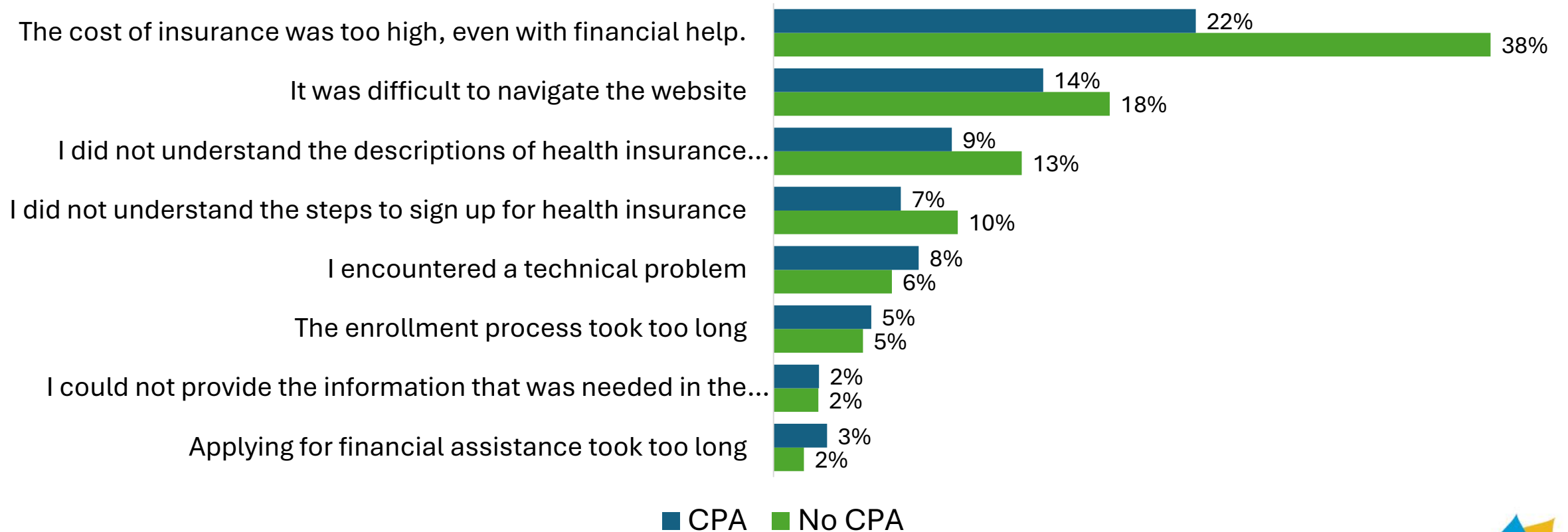
# 74% of customers receiving CPA were satisfied, compared to 64% of customers not receiving CPA

## Satisfaction with Enrollment Experience



# Only 22% of customers receiving CPA cited the cost of insurance as a major challenge, compared to 38% without CPA

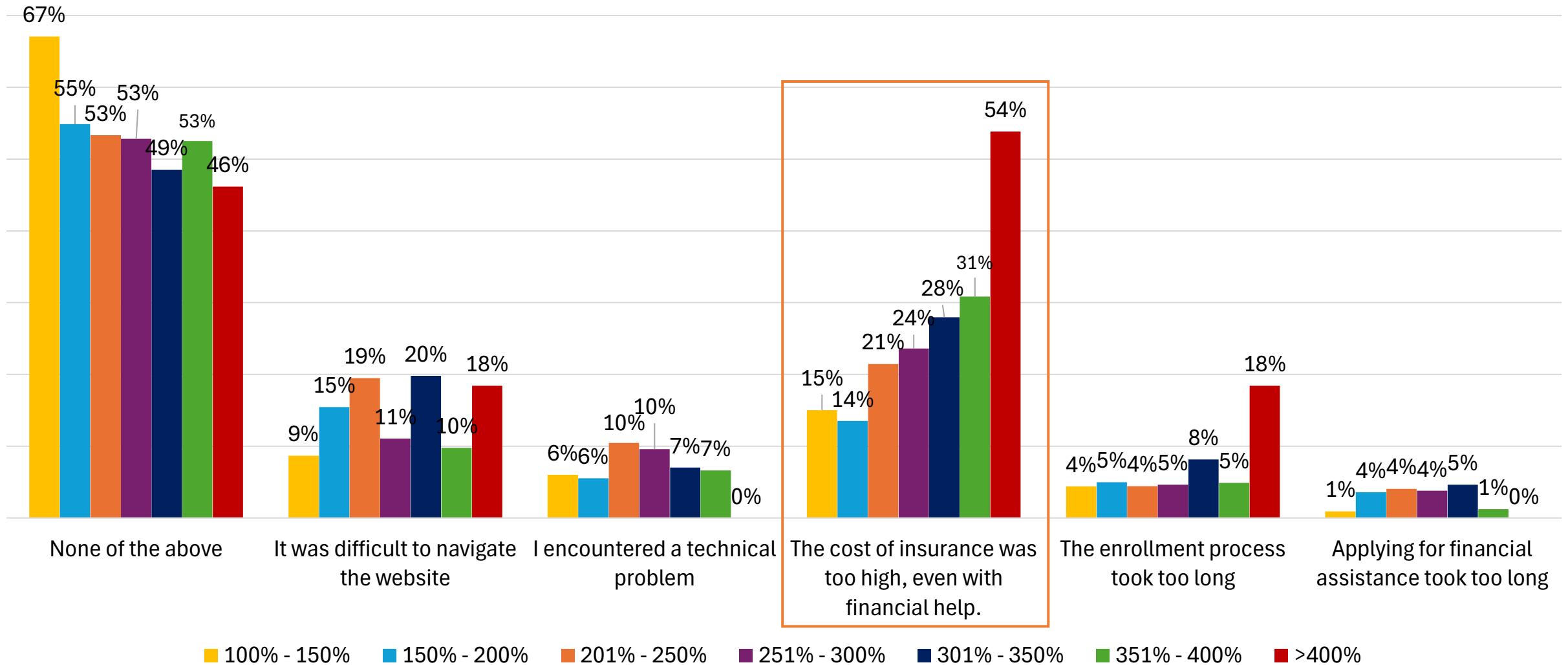
## Enrollment Challenges



4. Customers above 400% FPL had the most strained experience

# Customers over 400% FPL faced the most challenges in 2026

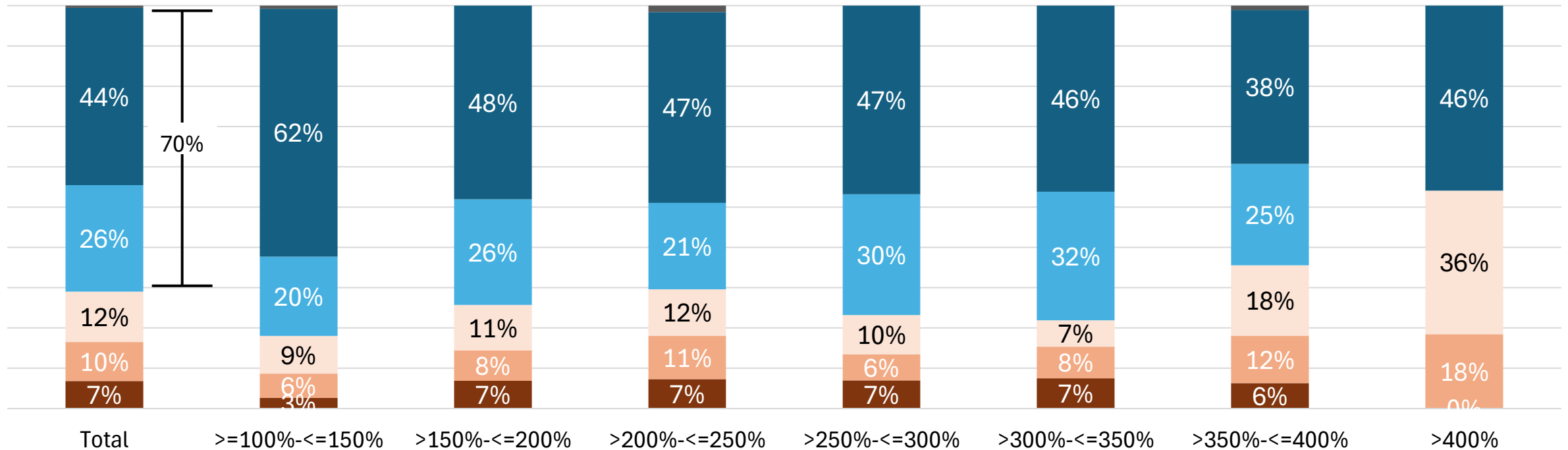
## Enrollment Challenges



# Customers >400% FPL were least likely to report being satisfied with their enrollment experience.

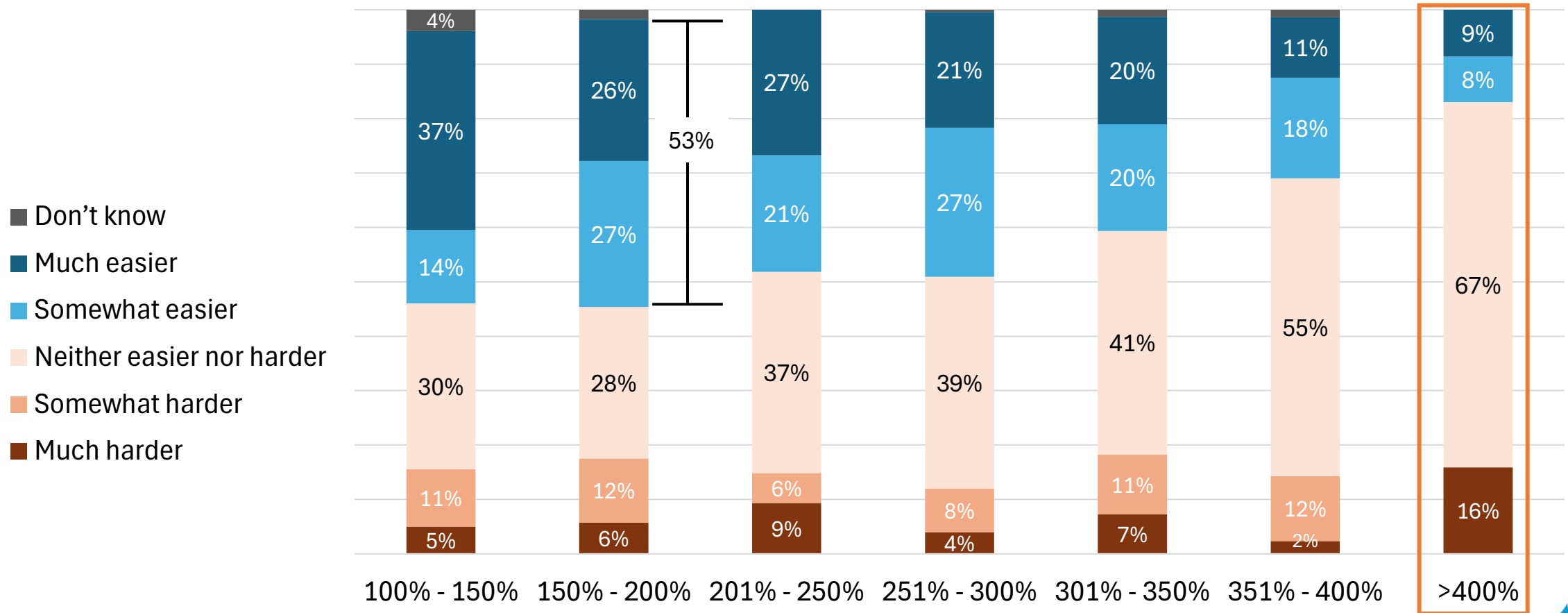
## Satisfaction with Enrollment Experience

■ Don't know ■ Very satisfied ■ Somewhat satisfied ■ Neither satisfied nor dissatisfied ■ Somewhat dissatisfied ■ Very dissatisfied



# Customers >400% FPL were the least likely to say their renewal experience was easier

## Renewal experience compared to previous year



Questions?



# New Privacy Resource

Maria Adams

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



# Your Privacy at Connect for Health

Program / Situation	Information Collected*	Who Has Access*	Why it's Collected	What We Do NOT Collect	Your Options
Enrollment in a Health Plan	Name, DOB, household size and composition, address, email, citizenship or immigration status	C4HCO, Insurance Company, Federal Data Services Hub	<ul style="list-style-type: none"> <li>• Determine eligibility for coverage</li> <li>• Send enrollment info to insurance company</li> </ul>	<ul style="list-style-type: none"> <li>✗ We do NOT collect your medical records</li> <li>✗ We do NOT see your doctor visit history</li> <li>✗ We do NOT access your bank account</li> </ul>	<ul style="list-style-type: none"> <li>✓ Access your data</li> <li>✓ Correct information</li> <li>✓ File a complaint</li> <li>✓ Limit certain communications</li> <li>✓ Appeal decision</li> </ul>
Financial Help (Tax Credits / Cost-Sharing Reductions)	Income, tax filing status, access to other coverage, tribal membership	C4HCO, Insurance Company, Federal Data Services Hub	<ul style="list-style-type: none"> <li>• Determine eligibility for coverage</li> <li>• Determine eligibility for financial help and calculate amounts</li> </ul>	<ul style="list-style-type: none"> <li>✗ We do NOT control your tax refund</li> </ul>	<ul style="list-style-type: none"> <li>✓ Access your data</li> <li>✓ Correct information</li> <li>✓ File a complaint</li> <li>✓ Limit certain communications</li> <li>✓ Appeal decision</li> </ul>
Working with a Broker or Assister	Application information and any additional information you choose to share	Certified Brokers or Assisters (only if you give permission)	<ul style="list-style-type: none"> <li>• Help you complete your application</li> <li>• Help you respond to verification requests</li> <li>• Help you address other coverage or eligibility issues</li> </ul>	<ul style="list-style-type: none"> <li>✗ They cannot access your account without your consent</li> <li>✗ They cannot see medical records</li> </ul>	<ul style="list-style-type: none"> <li>✓ You can remove a broker/assister at any time</li> </ul>
Website Usage (Cookies/Analytics)	IP address, browser type, pages visited, actions taken	Website analytics vendors (for system performance only)	<ul style="list-style-type: none"> <li>• Improve website performance</li> <li>• Fix technical issues</li> <li>• Better understand user behavior</li> </ul>	<ul style="list-style-type: none"> <li>✗ Not used to determine eligibility</li> <li>✗ Not sold for marketing</li> </ul>	<ul style="list-style-type: none"> <li>✓ You can adjust browser cookie settings</li> </ul>

# Your Privacy at Colorado Connect

Program / Situation	Information Collected*	Who Has Access*	Why it's Collected	What We Do NOT Collect	Your Options
Colorado Connect (OmniSalud)	Name, Address, Income information, Household members  We do NOT ask for immigration status	Colorado Connect secure systems, Insurance Company	<ul style="list-style-type: none"> <li>• Determine eligibility for coverage</li> <li>• Determine financial help (silver enhanced savings)</li> <li>• Lottery is used if spots are limited</li> </ul>	<ul style="list-style-type: none"> <li>✗ We do NOT collect your immigration status</li> <li>✗ We do NOT share your information with DHS or federal immigration enforcement</li> <li>✗ Your information is not used for public charge decisions</li> </ul>	<ul style="list-style-type: none"> <li>✓ Access your data</li> <li>✓ Correct information</li> <li>✓ File a complaint</li> </ul>
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*\* Illustrative, Non-Exhaustive List*

# Your Privacy with HCPF

Link to Press Statement: <https://hcpf.colorado.gov/press-release/hcpf-statement-on-medicaid-data-shared-with-cms>

Link to FAQ: <https://hcpf.colorado.gov/cac-frequently-asked-questions#PrivacyandSecurity>

ConnectforHealthCO.com



# Policy Changes Affecting Connect for Health Colorado

PY2027 and PY2028



# Federal Policy Changes for 2027

1. The Open Enrollment (OE) period will be ***shorter*** for PY2027.

New regulations require the OE period to be no more than 9 weeks long and to end by December 31.

All customers who enroll during OE must have coverage that begins on January 1.

**Open Enrollment in Colorado will extend from November 1 until December 31.**

# Federal Policy Changes for 2027

## 2. Fewer lawfully present immigrants will be eligible for financial assistance in 2027.

Federal legislation requires that only “eligible aliens” can receive financial help on the marketplace.

Eligible aliens =

- Lawful permanent residents (green card holders)
- Cuban/Haitian entrants
- COFA migrants (citizens of Palau, Micronesia, and the Marshall Islands that may live and work in the United States under the Compacts of Free Association)

**Other lawfully present immigrants may still purchase a full price plan on the marketplace (e.g., refugees, asylees) but will not be eligible for financial help.**

We estimate this will impact about 9,500 currently financially assisted lawfully present customers.

# Federal Policy Changes for 2028

## 1. Pre-enrollment verification for APTC

Beginning 2028, customers will no longer be able to receive provisional financial help before satisfying all manual verification requests.

Currently, customers can receive provisional APTC for up to 90 days while documents are requested and verified.

**This requirement will go into effect in 2028.**

*We are monitoring additional proposed regulations for 2028 that are not yet final.*

# Upcoming Product Priorities

PY2027 and PY2028



# How our systems evolve to support policy changes

As policy requirements shift, there is increasing pressure for the application, renewal and verification experience to evolve so customers can easily **enroll** and **keep coverage**.

So, we identified the areas where **we believe system improvements will have the biggest impact** on customers and enrollment outcomes over the next couple of years:

## Adapting to Policy Changes

- Ensuring the system can support upcoming federal and state requirements while maintaining a stable experience for customers and partners.

## Simplifying Verifications

- Making it easier for customers to resolve eligibility and income verifications with faster feedback and fewer manual steps.

## Improving Renewals

- Helping returning customers clearly understand their coverage options and maintain their benefits with less confusion and fewer barriers.

## Next Steps

Each step includes checkpoints with all stakeholders

### **For each improvement effort:**

- 1. Research** to confirm problems to solve and user needs
- 2. Design** for PY27 improvements, including prototyping, testing, and validation
- 3. Implement and operationalize** PY27 improvements

# Verifications Transformation

OE27 Product Strategy Objective



# Improve the verifications experience

Plan Year 28  
brings big changes

## Why solve this problem

With the PY28 requirement that verifications be resolved before receiving financial help, our Manual Verification Request (MVR) process can no longer be "after the fact". Completing a verification must be an "upfront", real-time experience to avoid financial help impacts to customers or loss of enrollments.

## Why now

Although the new rule is for PY28, we are looking to design and implement workflow changes and new solutions for PY27 to allow an opportunity for customers, brokers/assisters, and C4 operations to get familiar with the changes AND provide ourselves the opportunity to iterate and refine.

## Primary goals

1. Clearly understand the current challenges and opportunities for improvement in the existing system
2. Define the most impactful areas of risk incurred with a "pre-enrollment process". What new challenges arise, what existing challenges are worsened?
3. Identify the biggest risks in PY28 that we don't want to miss learning about in PY27

# Verification problem themes

## P1

### **Manual processing of document uploads limits immediate resolution**

Manual, person-by-person review of uploaded verification documents cannot scale to faster timelines, delaying enrollments and creating significant operational strain.

## P2

### **Customers may not understand action is required**

Customers often miss or misunderstand verification requests and their consequences because requirements are poorly surfaced in the flow and notices are easy to overlook or never perceived.

## P3

### **Customers may not understand how to respond to verification requests**

Customers and brokers struggle to complete verifications because upload pathways and self-attestation options are hard to discover, inconsistently adopted, or unavailable in more complex account scenarios.

## P4

### **Internal reporting challenges limit visibility, troubleshooting capabilities and measurement of improvement outcomes**

Fragmented, weakly-related verification data across systems makes it difficult to see how MVRs behave, troubleshoot issues, and measure the impact of any improvements.

## P5

### **Customers may not understand what documents will satisfy the request**

Customers often miss or misunderstand verification requests and their consequences because requirements are poorly surfaced in the flow and notices are easy to overlook or never perceived.

## P6

### **The system may recheck data and reopen verifications unnecessarily**

Each application submission can trigger fresh data checks that reopen or extend MVRs, causing avoidable churn and repeated verification cycles.

## P7

### **Customers may not have all required documentation during an initial appointment**

Enrollment appointments are frequently disrupted or repeated because customers don't bring all potentially needed documents and assisters must navigate inconsistent formats and workflows.

## P8

### **Customer operations face process and staffing challenges**

Customer Operations must manually reconcile uploads, system data, and enrollments with limited visibility, making workload forecasting, staffing, and efficient case handling difficult.

## P9

### **Customers may not know if their upload satisfies the request**

Customers lack clear, real-time status and specific feedback on their submitted documents, leading to guesswork, repeat uploads, and high support call volume.

## P10

### **Brokers and assisters may not know status of their customers' MVRs**

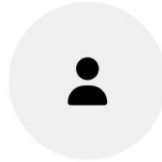
Brokers and assisters have limited visibility into MVR status and CRM communications, forcing them into manual follow-ups that increase administrative burden and slow resolution.

# Verifications Solution Shape to guide design



## Verifications data model

Develop the foundational data model that enables positive confirmation of verified data and tracking of actions over time



## Verification resolution workflow

Design the experience of resolving verifications within the application workflow



## Doc reader integration

Determine how the doc reader solution works within the full context of the verifications experience and how it can be implemented



## Communication

Explore persistent indicators of outstanding users actions (tasks) and lightweight communication methods (notifications)



## Simplification

Explore removing FTR obfuscation, additional attestation options, and ensuring that data is not re-verified unnecessarily



## Renewals

For renewal income verification, provide a clear experience to satisfy verification before effective date

## Next Steps

Each step  
includes  
checkpoints  
with  
Assisters and  
Brokers

1. **Assister and broker** interviews to further support problem themes
2. **Solution design** for "upfront" verification resolution experience
3. **Prototyping** of document reader technology solution
4. **Testing** with internal and external stakeholders
5. **Delivery** of solutions for PY27 and PY28

# Renewals Enhancements

OE27 Product Strategy Objective



# Problems to Solve

Feedback from our  
Brokers and  
Assisters drove  
our problems to  
validate

## Problem Signals

Elevated confusion and negative customer reactions were seen during renewals, especially around December 2:

- Board feedback raising concern about customer reactions
- Multiple brokers reporting being flooded with calls
- Reports of customers stating they didn't want auto-renewal plans and that they wanted to shop
- Cancellations and plan changes shortly after renewal enrollments were processed

## Problems to Validate

1. For customers who took action after being passively renewed, why didn't they take action earlier?
2. How can we increase visibility and choice for customers without them losing their staged renewal?

## Out of Scope for OE27

What are we not solving for in plan year 2027?

- ⊘ Renewing at the individual or policy level
- ⊘ Updates to crosswalk logic
- ⊘ Changes to exclusion logic

Out of scope items  
are still being  
considered for  
future plan years

# Path to Open Enrollment

Each step includes checkpoints with Assistants and Brokers

1. **User Research** including customer interviews
2. **Confirmed** problems to solve
3. **Design** for PY27 improvements
4. **Implementation** of PY27 improvements
5. **Staging** of PY27 renewals before OE begins



# Policy & External Affairs Update

Anneliese Steel

# Federal Policy Updates

Kevin met with most of the Colorado delegation during visits in March and April. He was there to educate about Open Enrollment trends and affordability.

- Senator Bennet
- Senator Hickenlooper
- Congresswoman Boebert
- Congressman Crow
- Congresswoman DeGette
- Congressman Evans
- Congressman Hurd
- Congressman Neguse
- Congresswoman Pettersen
- Center for Medicare and Medicaid Services\*
- Health and Human Services\*

\*Meetings with HHS and CMS were in partnership with the National Association of State-Based Marketplaces.

# Health Insurance Affordability Enterprise Funding

April 29, 2026



# SB26-178: Health Insurance Affordability Measures

**Sponsors:** Senators Mullica & Jodeh, Representatives Brown & Gilchrist

## **What the Bill Does: One-time \$144 M funding boost to the Health Insurance Affordability Enterprise**

- \$100 M one-time 25-year interest-bearing loan from Unclaimed Property Trust Fund
- \$40 M one-time special assessment on health insurance issuers covering over 20K lives; this amount would be equally divided among qualified carriers.
- Up to \$4 M would be redirected from Connect for Health Colorado's future education efforts to HIAE

# What Does SB26-178 Pay For?

## What the Bill Does: One-time \$144 M funding boost to the Health Insurance Affordability Enterprise

- HIAE Waterfall: 50% Reinsurance, 25% premium affordability programs on the exchange (CPA), 20% OmniSalud, 5% admin/other (NHAC \$1)
- This funding would enable HIAE to maintain Plan Year 2026 level funding for Colorado Premium Assistance, Reinsurance, and OmniSalud.
  - In PY 2026, Colorado Premium Assistance was a flat subsidy of \$80 per customer with \$29 per additional family member. It was limited to customers below 400% FPL. This subsidy is available only to Connect for Health Colorado customers, but the money does not flow through Connect for Health Colorado.
  - Without an additional \$140 M, funding for Colorado Premium Assistance is expected to drop 80-90%. In PY 27, HIAE projects that CPA would be \$10 per enrollee and \$4 per additional family member in PY 2027, and funding for OmniSalud is expected to be cut by 40% to approximately 3,000 spots.

Projected Plan Year  
2027 without this bill



Net premiums for financially  
assisted customers on Exchange

**INCREASE**

# Impact on Connect for Health Colorado

## **Impact on Connect for Health Colorado:**

- Direct subsidy to Connect for Health Colorado customers, CPA subsidy only available on the Marketplace
- Supports affordability for select customers on Connect for Health Colorado and Colorado Connect

## **Relation to Mission:**

- Increases access, affordability, and choice for customers shopping on Connect for Health and Colorado Connect

## **Relation to Focus Areas:**

- Growing the Individual Market: An affordable Marketplace is more competitive
- Attracting Rural Customers: 25% of customers who received CPA live in rural counties
- Customer Retention: Financial assistance is a key driver of customer retention
  - 176,410 customers received CPA in PY 2026 – 69% of customers

## **Relation to Connect for Health Colorado's Mission:**

- Increases access to affordable health insurance choices for customers.

# APPENDIX



# Public Comment