



# Board Advisory Group

September 23, 2026



# Fireside Chat with CEO Kevin Patterson



# HCPF Update

# OE Message Platform Overview



# PY27 Renewal Enhancements

A simpler renewal experience that gives customers earlier clarity and greater choice



# Why Change

## The current renewal journey drives late action and peak-season support demand

### CUSTOMER CHALLENGES

- Renewal outcomes and available actions are not always clear
- Multiple notices create confusion
- Customers want to compare options without giving up renewal protection

### OPERATIONAL IMPACT

- Many customers act only after passive renewals are processed
- Renewal questions increase Broker and Service Center volume during Open Enrollment

### PY27 FOCUS

- Prompt earlier action while preserving customer choice and continuity of coverage



# What Is Changing

## 1. Eligible customers will begin Open Enrollment with renewal coverage already in place

PY26

Passive renewals were processed on December 2

PY27

Passive renewals will be processed before Open Enrollment, giving eligible customers an active PY27 enrollment on November 1, 2026

- What this enables
  - Update eligibility or compare plans without canceling renewal coverage
  - Select a new plan by December 15 for January 1 coverage
  - Select a new plan by January 15 for February 1 coverage



# What Is Changing

## 2. One notice will explain the customer's complete renewal outcome

Renewal and Enrollment notices will be consolidated for automatically renewed customers

### THE NEW NOTICE WILL SHOW

- PY26 and PY27 premiums and costs
- Household income used for the renewal
- Renewal status in clearer language
- Recommended next steps and available actions

### OTHER NOTICE CHANGES

- Renewal Exclusion Notice remains unchanged
- Suggested Renewal Notice is retired; customers will be automatically renewed or excluded



# What Is Changing

## 3. The welcome page will make the next best action clear

### AUTOMATICALLY RE-ENROLLED CUSTOMERS CAN

- Update eligibility
- Review and compare plans
- Cancel renewal coverage

### A NEW RENEWAL PLAN DETAILS PAGE WILL

- Compare PY26 and PY27 coverage and costs
- Make renewal status easier to understand
- Support an informed plan decision

Related pathways will also support customers excluded from renewal, customers with staged eligibility only, and COCO customers

# PY27 Renewals Timeline

## Customers receive renewal information before Open Enrollment:

- OCTOBER 19 — Account/ Enrollment change cutoff
- OCTOBER 20- 27 — Maintenance window and renewal processing
- AFTER OCTOBER 27 — Notices begin to be sent to customers
- NOVEMBER 1 — Open Enrollment begins with eligible renewal enrollments in place



# How We Will Measure Success

**We will monitor whether the experience drives earlier action and reduces renewal friction:**

## CUSTOMER OUTCOMES

- Earlier action in the renewal journey
- Clearer understanding of renewal status and available choices
- Less friction when updating eligibility or comparing plans

## OPERATIONAL OUTCOMES

- Fewer renewal-related calls during peak Open Enrollment
- More efficient support for Brokers, Assisters, and Service Center teams

## FEEDBACK LOOP

P&O Committee, BAG, Broker and Assister focus groups, customer surveys, and interviews will inform future improvements



# Verification Update



# 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

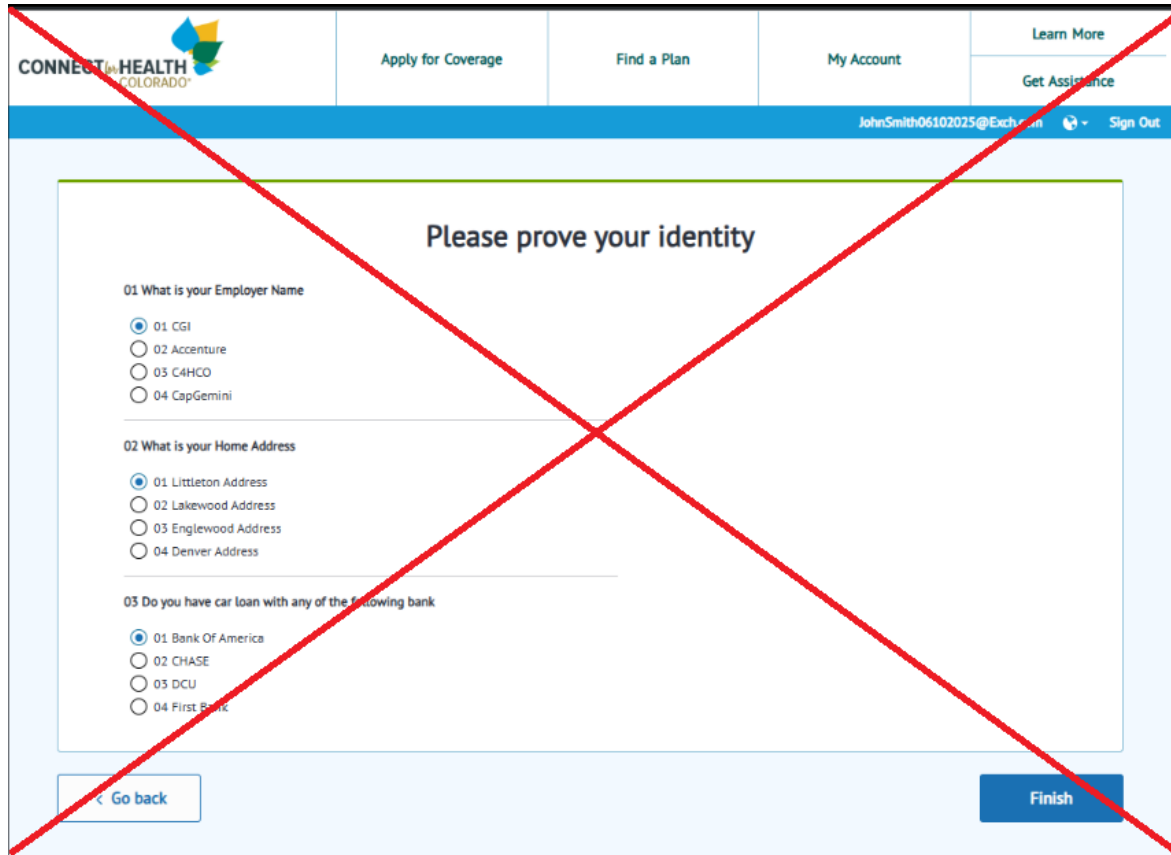


## PY27 changes

# Plan Year 27 – upcoming OE

- RIDP RBA identity proofing service
- Welcome Page tasks for verifications
- Removal of APTC tax reconciliation proof for income verifications

# Identity Proofing Service



The screenshot shows a web interface for the Identity Proofing Service. At the top, there is a navigation bar with the "CONNECT for HEALTH COLORADO" logo and links for "Apply for Coverage", "Find a Plan", "My Account", "Learn More", and "Get Assistance". Below the navigation bar, the user is logged in as "JohnSmith06102025@Exchange". The main content area is titled "Please prove your identity" and contains three questions:

- 01 What is your Employer Name
  - ☒ 01 CGI
  - ☐ 02 Accenture
  - ☐ 03 C4HCO
  - ☐ 04 CapGemini
- 02 What is your Home Address
  - ☒ 01 Littleton Address
  - ☐ 02 Lakewood Address
  - ☐ 03 Englewood Address
  - ☐ 04 Denver Address
- 03 Do you have car loan with any of the following bank
  - ☒ 01 Bank Of America
  - ☐ 02 CHASE
  - ☐ 03 DCU
  - ☐ 04 First Bank

At the bottom left, there is a "Go back" button, and at the bottom right, there is a "Finish" button. The entire screenshot is overlaid with a large red X, indicating that this service is being replaced.

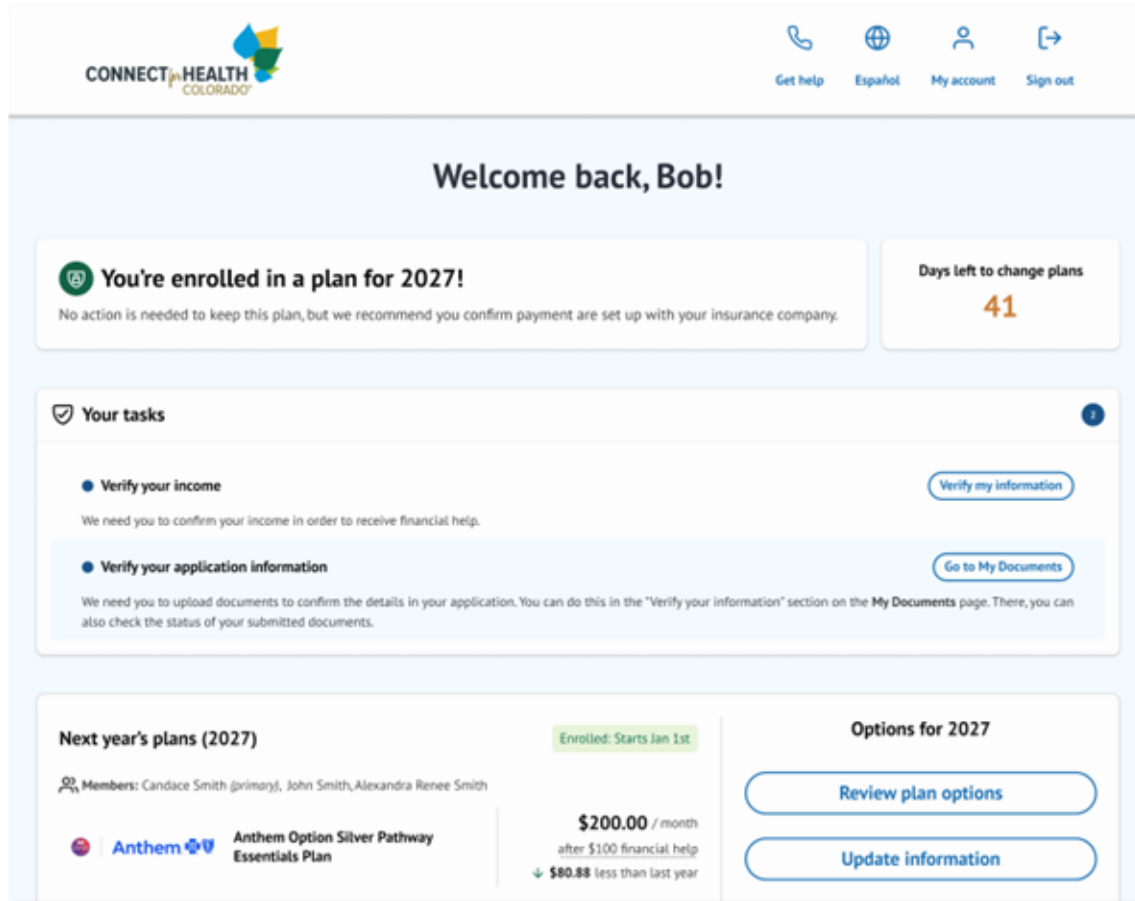
CMS mandated the transition from Knowledge-Based Authentication (KBA) to Risk-Based Authentication (RBA) before December 31, 2026.

Replaces knowledge-based questions with a risk-based evaluation using applicant identity, device, address, and phone data.

- New customers only
- Customers associated with brokers or assisters do not need to complete this process

Released 8/12/26, **87% success rate** with automated verification measured in the first two weeks

# Welcome Page Tasks for verifications



Any customer with an open verification request will see a Task on the main Welcome Page to indicate they need to take action.

Income verification will allow immediate verification through a simple self-attestation form.

Identity proofing and all other verification types will direct the user to My Documents to upload documentation

# Proof of Income Manual Verification Request

The temporary stay granted by the court in *City of Columbus v. Kennedy* (2026) impacts our approach to income verification in Plan Year 2027.

- The “Proof of Financial Help Eligibility” Manual Verification Request will become “Proof of Income.” Customers with an income discrepancy will be asked to verify their income rather than provide both income and tax-reconciliation proof.
- Customers resolving a Proof of Income request will no longer need to provide Form 8962 for tax reconciliation.
- The income self-attestation form will be updated to one question confirming income.
- The 60-day extension to verify income will be reinstated for Plan Year 2027.
- Verification of tax reconciliation will return in PY2028.



# Off-Exchange Plans on the Connect for Health Colorado Platform

# Overview

**Beginning in Plan Year 2027**, Connect for Health Colorado will offer both on-exchange **and off-exchange plans** through the same platform.

Off-exchange plans will be sold through the *business entity* of Colorado Connect, but through the *platform* of Connect for Health Colorado.

Off-exchange plans will **only** be displayed to customers that are not eligible for financial help through the exchange.

# Why?

## More options in one place.

You can come to Connect for Health Colorado to explore coverage options, regardless of whether you qualify for financial help. Offering on-exchange and off-exchange plans through the same platform makes it easier to compare more options in one place.

## When are off-exchange plans good for customers?

- Customers that are **not eligible for financial help** may save with off-exchange silver plans. Off-exchange silver plans are not silver-loaded and often have lower premiums.
- Customers using an **ICHRA** (Individual Coverage Health reimbursement Arrangement) can only take advantage of certain tax benefits if enrolled off-exchange.

# Customers not eligible for financial help

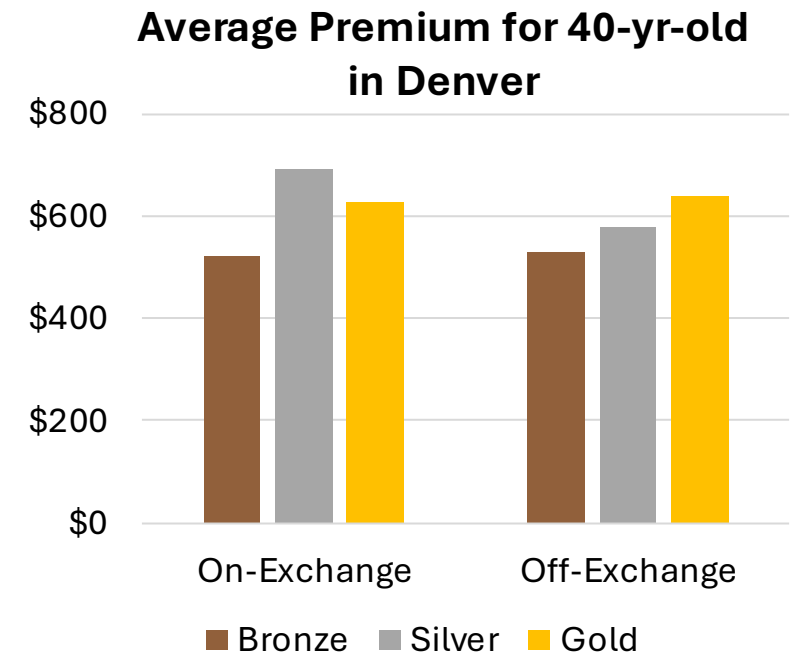
Will see:

- **All** on-exchange plans
- **Silver** off-exchange plans

Off-exchange plans will be clearly marked as **not eligible for savings**.

Customers will be made aware that even if their income changes, they will not be able to claim PTC on their taxes if enrolled in an off-exchange plan.

- Income changes that make someone newly eligible for APTC do trigger a **special enrollment period**, so customers can switch plans to enroll in an on-exchange plan.



# ICHRAs (Individual Coverage Health reimbursement Arrangement)

## Understanding ICHRA is tricky.

ICHRAs are a type of health benefit that allow employers of any size to reimburse employees tax-free for individual health insurance premiums.

**Affordability.** An ICHRA is considered affordable if the employee's contribution to the **lowest cost silver plan** would be less than a certain percentage of their income (10.22% in 2027).

- If the ICHRA is **unaffordable**, the customer can *choose* whether to use the ICHRA or opt out of the ICHRA. If they opt out, they are eligible for APTC. Customers cannot receive APTC if they use the ICHRA.
- **Customers opting out of an unaffordable ICHRA will be shown only on-exchange plans.**

# ICHRAs (Individual Coverage Health reimbursement Arrangement)

**Tax Benefits.** Customers using an ICHRA often have access to certain tax benefits if they enroll in an off-exchange plan.

- 70-80% of employers offering an ICHRA also offer a cafeteria plan (Section 125), which allow employees to receive certain benefits on a pre-tax basis.
  - If the ICHRA itself does not cover 100% of the employee's health insurance premium, employers may allow a pre-tax salary reduction through a cafeteria plan to pay the remaining portion of the premium not covered by the ICHRA, **but only if the coverage is purchased off-exchange.**

**Due to the complexity of understanding individual ICHRA arrangements, for 2027 we will be requiring ICHRA enrollments to be OBO.**

# Customers enrolling with an ICHRA

|         |                                                                                                                                                    |
|---------|----------------------------------------------------------------------------------------------------------------------------------------------------|
| OBO     | Will see: <ul style="list-style-type: none"><li>• All on-exchange plans</li><li>• All off-exchange plans</li></ul>                                 |
| Not OBO | Will see: <ul style="list-style-type: none"><li>• No plans; direction to contact a broker (<i>your</i> broker if associated) to proceed.</li></ul> |

# Three issuers will offer off-exchange plans through the C4 platform this year.



**Select  
Health**



**ROCKY MOUNTAIN**  
**HEALTH PLANS®**

A UnitedHealthcare Company



**ELEVATE**  
**HEALTH PLANS**

Denver Health Medical Plan Inc.™



# Overview of Incoming UI Improvements

# Increasing guidance to ICHRA-ready brokers

- Customers without a broker association will be **guided to a broker able to help**.
- Customers already associated to a broker will see their broker's contact information.

# Support easy identification of off-exchange plans

- Off-exchange plans and policies will be labeled on every relevant page, including within the shopping experience.
- Educational language will be available throughout to help the customer understand what they can choose to enroll in.
- Customers will also be able to filter plans based on whether it is an off-exchange or on-exchange plan.

CONNECT for HEALTH COLORADO

Apply for Coverage Find a Plan My Account Learn More Get Assistance

username Sign Out

Narrow your results

Medical Plans for Group 1 - Jane

Sort by Monthly Premium: Low to High

Compare Plans 0

95 of 95 Medical Plans

Monthly Premium

Individual Deductible

Eligible for savings

☒ Show plans eligible for savings  
These plans allow you to receive tax credits if your income decreases over the year.

☒ Show plans not eligible for savings  
These plans do not qualify for tax credits, but may have lower monthly premiums than plans that do.

Not sure what to do? Find a Broker

Family Deductible

Anthem Colorado Opt

You Pay \$105.10 / month

Overall Quality Rating

Silver Metal Tier

Not eligible for savings ? This plan is not eligible for financial help like tax credits or Colorado Premium Assistance. Even if your income changes, you can't receive premium tax credits at tax filing. Compare

Deductible \$7,000 (Individual) | \$14,000 (Family)

Out of Pocket Max \$8,000 (Individual) | \$16,000 (Family)

Rx Deductible \$3,000 (Individual) | \$6,000 (Family)

Primary Care Visit 0% after deductible

Specialist Visit \$50 copay after deductible

Urgent Care Visit \$0 copay

Plan details

Select this plan

# Mitigate confusion during account creation

- The question of where to create your account (Connect for Health Colorado or Colorado Connect) has been redesigned.
  - We focused on clarifying the language to help customers understand that **this binary decision matters**.
- The entire Account Creation page is being updated to align with current C4HCO design expectations and clarify expectations.

# Other planned improvements

1. **Augment existing guidance and educational prompts** throughout the C4HCO application.
2. **Improve internal support portals** to identify off-exchange policies and members with an ICHRA.
3. **Update Book of Business to support C4 off-exchange policies** in the Broker Portal.



# Lawfully Present Immigrants



Starting January 1, 2027, **fewer lawfully present immigrants are eligible to receive financial assistance** through C4HCO.

# Immigrant Eligibility

Eligibility for **full-price plans** at Connect for Health Colorado

- Lawfully present immigrants (asylees, refugees, victims of trafficking, etc.)

Eligibility for **financial assistance** at Connect for Health Colorado

- Lawful Permanent Residents (LPR; “green card” holders)
- Cuban/Haitian entrants
- COFA migrants (individuals residing in Colorado from the Marshall Islands, Micronesia, or Palau)



# OmniSalud for Plan Year 2027

# OmniSalud: SilverEnhanced Savings plans

- For plan year 2027, OmniSalud has **6,700 SilverEnhanced Savings spots** available.
  - Monthly \$15 premium per enrollee
  - 73% AV (unchanged)
- Spots will be filled through **re-enrollment** of existing SilverEnhanced Savings customers and a **random lottery**.

# OVERVIEW: Re-enrollment and the OmniSalud Lottery

- **Re-enrollment:** Customers with SilverEnhanced Savings in plan year 2026 have a **reserved spot** for plan year 2027, but they **must enroll in coverage** between Nov 1 and Nov 30, 2026.
- **OmniSalud Lottery:** Customers who do not have SilverEnhanced Savings in plan year 2026 **may apply for the OmniSalud Lottery** between Nov 1 and Nov 30, 2026.

# NEXT STEPS: Re-enrollment and the OmniSalud Lottery

## To re-enroll in a SilverEnhanced Savings plan

- Review and update your Colorado Connect application.
- Select a health plan.
- Complete enrollment by Nov. 30, 2026.
- Pay the first month's premium to activate coverage.

## To enter the OmniSalud Lottery

- Complete a Colorado Connect application and be determined eligible to be entered into the lottery.
- Random lottery held Dec. 1, 2026.
- If not selected through the lottery, customers may still purchase a full-price plan through Colorado Connect.

# IMPORTANT DATES: Re-enrollment and the OmniSalud Lottery

| Date          | Action                                                                                                                                                                        |
|---------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Nov. 1, 2026  | Returning SES customers may begin renewing coverage. Eligible non-SES customers may begin entering the OmniSalud Lottery.                                                     |
| Nov. 30, 2026 | Deadline for returning SES customers to complete enrollment and maintain their reserved SES spot. Last day to enter the OmniSalud Lottery.                                    |
| Dec. 1, 2026  | OmniSalud Lottery conducted for remaining SES spots.                                                                                                                          |
| Dec. 31, 2026 | Last day for customers selected through the OmniSalud Lottery to enroll for a Jan. 1, 2027 coverage effective date.                                                           |
| Jan. 15, 2027 | Last day for customers selected through the OmniSalud Lottery to enroll for 2027 coverage. Customers enrolling by this date will have a Feb. 1, 2027 coverage effective date. |

# *Immigrant Eligibility*

## Marketplace or OmniSalud?

Lawfully present immigrants who are *not eligible for financial assistance* on the Marketplace may...

- Purchase a full-price plan through the Marketplace.
- Purchase a full-price plan through OmniSalud.
- Enter the OmniSalud Lottery for SilverEnhanced Savings if household income is <150% FPL.

# Public Charge Rule Change

# New Federal Public Charge Rule Takes Effect Sept. 18

- **Public charge** is a term in U.S. immigration law used to determine whether someone applying for a visa, admission to the United States, or adjustment to lawful permanent resident status is likely to become primarily dependent on government support.
- The U.S. Department of Homeland Security (DHS) has **rescinded a 2022 rule** that clarified only public cash assistance for income maintenance and long-term institutionalization at government expense could be considered in public charge determinations.
- Now, effective Sept. 18, 2026, any means-tested public or state benefit can be considered.
  - DHS has not published a definitive list of benefits
  - Guidance indicates no single benefit will be determinative

# Key Points

- The new rule takes effect Sept. 18, 2026
- Benefits received before Sept. 18, 2026, will be evaluated under the 2022 rule
- We are encouraging Brokers, Assistors and Customer Service teams to provide general information, but to **avoid providing immigration legal advice**
  - Brokers, Assistors and Customer Service teams should refer customers to qualified legal service providers for help with these decisions



# OE Toolkit



# What is the OE toolkit?

## OE Toolkit:

- Print and Digital marketing materials to use throughout Open Enrollment and year-round.

### *Includes:*

- Open Enrollment Overview Brochure
- Job Loss Rack Card
- Financial Assistance Rack Card
- QLCE Rack Card
- 4 Posters
- Pocket Folders (with business card insert)
- 2 Social media posts per week **(NEW!)**
  - **Everything is available in Spanish!**

- New C4 Characters
- Online Store Access



**OPCIONES POR PÉRDIDA DE EMPLEO**  
**¿Perdiste tu seguro de salud?**

Connect for Health Colorado® es el mercado oficial de seguros de salud del estado donde puedes comparar todos los planes disponibles en tu área e inscribirte.

**Estamos aquí para ayudarte**  
**¿Perdiste tu empleo? Estas son tus opciones de seguro de salud.**

- ✓ Somos el único sitio donde puedes solicitar ayuda financiera para reducir el costo de tu seguro de salud.
- ✓ Recibe ayuda gratuita de nuestra red estatal de expertos certificados en inscripciones

No te quedes sin cobertura. Un seguro de salud protege tu salud y tus finanzas.  
**ConnectforHealthCO.com/es • 855-752-6749**

facebook.com/ConnectforHealthCO Instagram.com/C4HCO LinkedIn.com/company/connect-for-health-colorado

**60 días**  
 Si perdiste el seguro de salud que recibías a través de tu empleo, tienes hasta 60 días para inscribirte en un nuevo plan de salud a través de Connect for Health Colorado.

CONNECT, HEALTH COLORADO

**JOB LOSS OPTIONS**  
**Did you lose your health insurance?**

Connect for Health Colorado® is the state's official health insurance marketplace where you can compare all the available private plans in your area and enroll.

**We are here to help**  
**Health insurance options after job loss**

- ✓ We are the only place you can apply for financial help to lower the cost of health insurance
- ✓ You can get free help from our statewide network of certified experts

Don't risk going uninsured. Health Insurance protects your health and your finances.  
**ConnectforHealthCO.com • 855-752-6749**

facebook.com/ConnectforHealthCO Instagram.com/C4HCO LinkedIn.com/company/connect-for-health-colorado

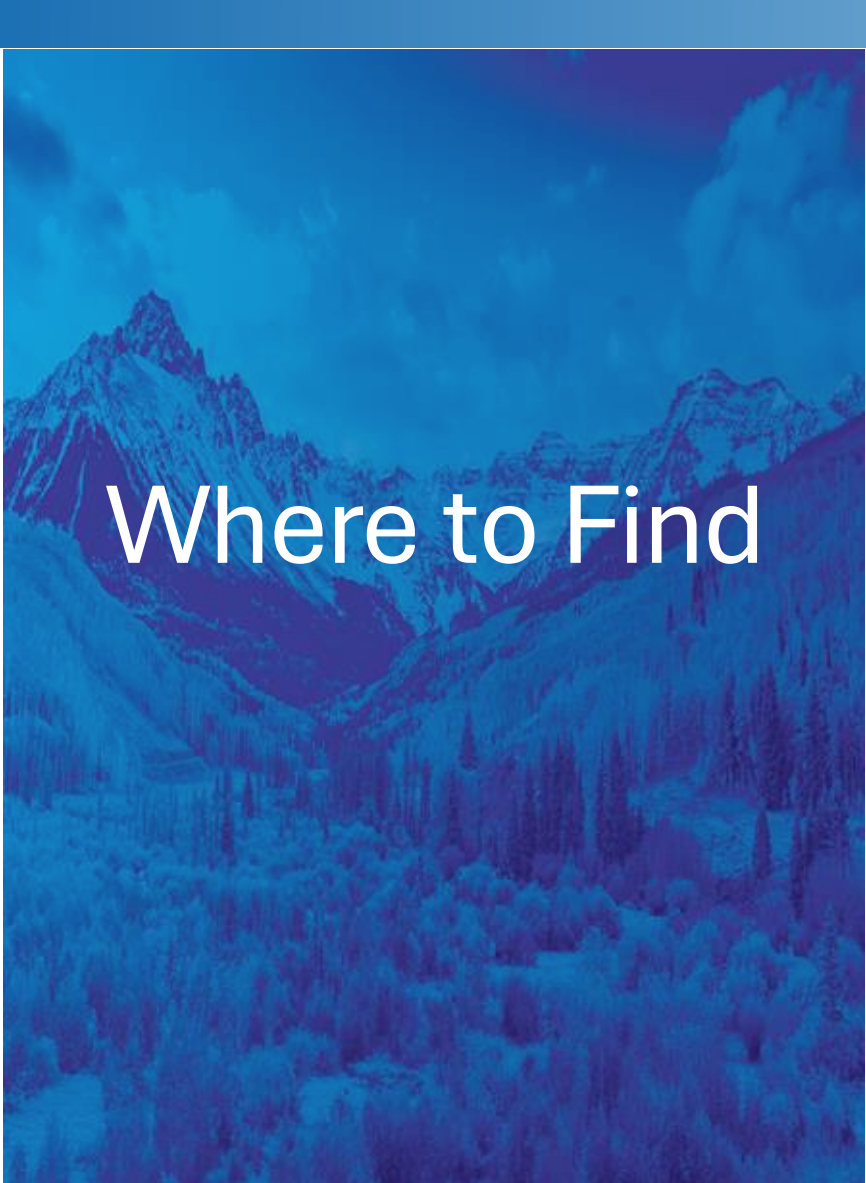
**60 DAYS**  
 If you lose your health insurance from your job, you have 60 days to find a new plan through Connect for Health Colorado.

CONNECT, HEALTH COLORADO

# OE Social Media Posts

- Previously there were only 5 provided post for all of OE.
- This year there will be a folder that is updated live weekly providing 2 posts per week!
- All posts will have the dedicated co-branding space!





# Where to Find

- <https://c4h.co/PY27oetoolkit>