

April 10, 2015

Board of Directors
Connect for Health Colorado
3773 Cherry Creek North Drive, Suite 1025
Denver, Colorado 80209

Re: Staff Recommendation for Eligibility System Improvements

Dear Connect for Health Colorado Board of Directors:

The undersigned organizations are submitting this letter to share our view on the Connect for Health Colorado (C4HCO) staff recommendation to improve the shared eligibility system (SES). Earlier this week, we had the opportunity to meet with C4HCO staff to better understand the fixes under discussion. We appreciate the staff's outreach to us and their consideration of our previous recommendations.

In general, we support the staff's approach to undertaking the most impactful fixes within the time allowed, while continuing to evaluate a longer-term alternative solution that will reduce C4HCO's technology and support costs. We do have the following suggestions if the Board adopts this recommendation.

First, we want to ensure that the conditional application accurately assesses individuals for both MAGI and non-MAGI Medicaid. We appreciate the staff's desire to streamline the application, particularly for individuals with uncomplicated income and household circumstances who are unlikely to qualify for financial assistance. However, the SES must also accurately identify individuals that qualify for Medicaid. Individuals above the income limit for MAGI Medicaid may, nonetheless, qualify for Medicaid under a non-MAGI category if, for example, they meet requirements for being disabled, if they live in an institution, or if they have lived in foster care. The non-MAGI eligibility questions must be written to ensure that individuals who might qualify for a non-MAGI program are considered for the program, even if they are unaware that they might qualify. If the questions are not carefully designed to accomplish that purpose, individuals that could qualify for non-MAGI Medicaid may be incorrectly placed on the tax credit program even though they are entitled to Medicaid.

Second, end users and assisters must be involved in prioritizing the fixes. They are the most familiar with how the system functions for C4HCO's consumers and can provide valuable feedback to staff to ensure the system works as smoothly as possible. We identified our priorities for the next open enrollment in our March 27, 2015 letter to the C4HCO Board and in a March 27 email to C4HCO staff. We would like to continue to be part of C4HCO's and the Department of Health Care Policy and

Financing's (HCPF's) on-going priority setting discussions because we can bring the experiences of the system end users to that discussion.

Third, we believe adequate testing and training of all assisters on the SES fixes is critical. As we explained in our March 27 letter, we are very concerned about the timing to implement and ensure adequate testing and training of the SES fixes. C4HCO should set – and share with stakeholders - a firm deadline by which it will transition from implementing fixes to testing and training. Also, we urge C4HCO to have a plan in place to solve problems that may arise for those individuals who, despite the technology improvements, still face enrollment challenges and to communicate that plan with all stakeholders and assisters.

To make the staff recommendations work, clear communication at all levels between C4HCO and HCPF is critical. Contracting with a senior project manager to provide management and oversight of the overall project plan and all vendors is a positive step in this regard.

Finally, while C4HCO is designed as a marketplace for private insurance, its eligibility system is inextricably tied to Medicaid. For that reason, and given the “no wrong door” policy, C4HCO has a duty to provide a seamless enrollment experience for the customer, whether they ultimately end up with public or private coverage.

We thank the C4HCO staff for incorporating some of our earlier recommendations and we are encouraged by their commitment to actively engage stakeholders and end users throughout the implementation process.

Sincerely,

Colorado Consumer Health Initiative
Colorado Center on Law and Policy
Covering Kids and Families

cc: Gary Drews
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