



Colorado Covering Kids and Families

CKF Coalition Meeting
Thursday, November 17, 2016

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<p>Connect for Health Colorado Updates – <i>Saphia Elfituri</i></p>	<p>Open Enrollment Update So far this year, more than 16,000 Coloradans have enrolled in coverage through Connect for Health Colorado. This is a 30 percent increase in enrollments compared to the same time last year. The busiest day for enrollments was November 9, the day after the election.</p> <p>Q: Of the 16,000 who have enrolled this year, how many are new customers? A: Connect for Health Colorado released several metrics for Open Enrollment Period Four here in conjunction with the Finance & Operations Committee meeting on November 28. According to these metrics, for 2016 coverage, 66 percent of customers were returning and 34 percent were new. So far for 2017 coverage, 83 percent are returning customers and 17 percent are new.</p> <p>Escalations Process The escalations process can be used by any assister to help resolve systems or other issues. The steps are:</p> <ol style="list-style-type: none"> 1. Call the Connect for Health Colorado Customer Service Center (855-Plans-4-You). The customer needs to be present for the call. 2. The service center representative will ask general information about the account and will request a phone number and the last four digits of the client's Social Security Number. They may also ask what type of internet browser is being used, and what steps were taken prior to the issue. 3. The service center representative will attempt to resolve the problem with the assister on the phone, but if that is not possible, 	

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	<p>the representative will open a ticket for the issue to be researched and fixed. The caller will receive the ticket number for later reference and will be told when to expect a resolution. The customer can also check on the status of the ticket through the customer portal.</p> <p>4. If the customer has not received information about a resolution by the time period described, they can call back and request to speak with a Team Lead. From there the chain of command is Supervisor, then Manager, then Director.</p> <p>Certified Application Counselors (CACs) and Health Coverage Guides (HCGs) should follow internal processes for contacting Connect for Health Colorado with issues. If a CAC or HCG is not aware of the internal process, reach out to the Assistance Network for more information.</p>	
<p>Open Enrollment Check-in</p>	<p>Coalition Member Feedback on First Weeks of Open Enrollment CKF coalition members reported consumer uncertainty of how election results will impact availability of coverage in the future, and concern by immigrants or family members of immigrants about providing information to enroll. Some consumers are eager to enroll in health coverage, while others are not applying because they believe coverage options made available through the Affordable Care Act (ACA) will be going away.</p> <p>Open Enrollment Resources Several resources are available to help assisters with open enrollment:</p> <ul style="list-style-type: none"> • Open Enrollment Toolkit: The Communications Workgroup, a joint workgroup of the Customer and Community Partner Integrated Project Team (IPT) and User Experience IPT, developed this toolkit for eligibility and enrollment professionals. It is a living document that will be updated with additional information over time. Please send suggestions for improvement to CKF. • Open Enrollment Support Calls: This document lists the support calls that are held during open enrollment, including the intended audience, date, time, and call-in information. • PEAK Enhancements and Fixes: During open enrollment, fixes made to PEAK will be added to this document within 72 hours of 	

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	<p>being moved into production. Assisters are encouraged to check this document regularly and see if PEAK issues reported to CBMS.help@state.co.us have been resolved.</p> <ul style="list-style-type: none"> • How To Reset Your PEAK Account Password: This document was created to help clients reset their own password and includes step-by-step instructions and screen shots. <p>Update: On November 23, the Governor’s Office of Information Technology (OIT) also released a PEAK Technical Support Call Center fact sheet with information about the upcoming support structure for PEAK technical issues.</p> <p>CKF’s Plan for Issue Tracking In previous years’ open enrollment periods, CKF actively tracked the technical and systems issues that were reported by coalition members and that were reported on support calls for community-based organizations with the goal of using this information to help inform needed fixes and enhancements. However, the information that CKF tracked was ultimately not detailed enough to properly identify, research, and resolve many of the issues. As a result, CKF decided to not track this information this year. Instead, CKF will hold a formal open enrollment debrief in February 2017 to gather the most pressing and problematic technical and systems issues that were experienced by assisters during open enrollment. CKF will use this information to inform advocacy for the fifth open enrollment period. Please keep this meeting in mind throughout open enrollment and be prepared to share the issues and trends – both functioning as designed and those that are truly glitches – in February.</p> <p>Reporting PEAK Issues As a reminder, PEAK users who do not have access to the Colorado Benefits Management System (CBMS) should report any PEAK issues through the CBMS.help@state.co.us email address. OIT is working on a handout that explains what information needs to be submitted to the email address and what assisters should expect to hear back, if anything. Until the handout is available, please reference pages six through eight in the</p>	

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	<p>Open Enrollment Toolkit. It is very important for assisters to report issues to this email address so that the state knows how many people are experiencing a particular issue, and can research and fix it.</p>	
<p>Medicaid Messaging Training: How to Communicate the Value of Medicaid – Michele Ames</p>	<p>Presentation Slides: Defending Health First Colorado: Supporting Medicaid's Value to Coloradans</p> <p>About six months ago, the Colorado Cross Disability Coalition (CCDC) convened a broad coalition of organizations to begin examining language to defend Health First Colorado (Colorado's Medicaid Program) and to create common messaging and assets that help organizations speak with one voice. The goal was to talk about the overarching value of Health First Colorado. The coalition discussed five main themes: quality of services, value for individuals, value for the community, value to Colorado, and Health First Colorado program basics.</p> <p>The coalition engaged in several activities to arrive at meaningful messages:</p> <ul style="list-style-type: none"> • Examined perceptions of the program, and contrasted perceptions of Medicaid with a more positive perception of Medicare. <ul style="list-style-type: none"> ○ The Kaiser Family Foundation has a 16 minute video on the history of Medicare and Medicaid, viewable here. • Examined the political reality of the importance of Medicaid to different political parties. • Examined research and found that the general public has some misconceptions about the basic facts about how Medicaid works and who it serves. There is also a dissonance in values; in polling people tend to support the services that Medicaid provides, but have a negative view of the actual Medicaid program. • Examined past state Medicaid messaging efforts, and found that arguing about the budget doesn't help move the needle, but there is benefit in talking about people and the value of the program to the 1.4 million Coloradans enrolled in Health First Colorado and over 57,000 kids enrolled through Child Health Plan <i>Plus</i> (CHP+). <p>As a result, the coalition developed a number of communication assets that</p>	

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	<p>focus on the value of Health First Colorado. The messages focus on different populations, including the value to Coloradans, the health care system, women (via breast cancer screenings), men (via prostate screenings), kids (via access to vaccinations), people with disabilities, seniors who need in home services, pregnant women, doctors, etc.</p> <p>These resources will be available for download on a website that is being created by CCDC. Resources and assets that will be available include talking points, newsletter drop-ins, sample opinion pieces and information about how to write and submit an op-ed, social media content, web content, and graphic elements. CKF will include the link to the website in a coalition update once it has launched.</p> <p>Q: What message can we give to clients who are distressed because of the uncertainty around the election?</p> <p>A: We are not sure what the right messaging is yet for that particular case, however Enroll America is suggesting simple messaging such as, “We hear you, we understand you are nervous, we are here for you, we are with you, and we can help answer questions.” Enroll America also suggested saying that even if changes do happen with the ACA or Medicaid, they will not happen overnight, so consumers have the opportunity for another year of coverage and should take advantage of it. As additional messaging for consumers is developed, CKF will share those talking points with the CKF Coalition.</p> <p>Update: Connect for Health Colorado has added an Election Questions page to their website. The page clarifies that 2017 plans cannot be cancelled mid-year if changes are made at the federal level.</p>	
CKF Updates	<p>Takeaways from Post-election Webinars</p> <p><i>Georgetown Center for Children and Families post-election debrief webinar highlights:</i></p> <ul style="list-style-type: none"> • There are big unknowns for the future of Medicaid, Children’s Health Insurance Program (CHIP), and the ACA as a result of Donald Trump winning the presidential election, and the House and 	

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	<p>Senate being controlled by Republicans. However, change and what type of change may happen are not a foregone conclusion.</p> <ul style="list-style-type: none"> • Although President-elect Trump and congressional Republicans have talked about their interest in repealing the ACA, a wholesale repeal of the whole law is unlikely as it would need 60 votes in the Senate. • There are some steps that the new president and/or Congress could take that could weaken the ACA: <ul style="list-style-type: none"> ○ President-elect Trump could drop the appeal of a lawsuit that the House of Representatives brought against President Obama several years ago which asserts that the amount of money being spent on cost sharing reductions (CSRs) is illegal because it wasn't approved by Congress. If President-elect Trump drops the appeal, CSRs may be threatened. ○ Congress could use the budget reconciliation process to repeal some parts of the ACA that have budget implications. The budget reconciliation process only requires a 51 vote majority in the Senate, and cannot be filibustered. Some things that could be eliminated through this process include the individual mandate, Advanced Premium Tax Credits, the Medicaid expansion, and some taxes which help fund the ACA. A 2015 proposed bill to repeal the ACA (which was unsuccessful) included a two year transition plan, so even if changes were made to the ACA through a reconciliation process, benefits may not end immediately. • Another Republican proposal, often championed by Paul Ryan who is again the Republican Leader in the House, is Medicaid block grants. Typically, this would mean the federal government would give each state a set amount each year to pay for all of their Medicaid services instead of matching the amount of money a state spends on the program as it does today. Although block grants do tend to save the federal government money, block grants typically also put financial strain on state programs leading to decreases in enrollment and/or decreased benefits. • The future of CHIP is still a big question. The program's funding 	

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	<p>needs to be reauthorized by Congress by September 2017 in order to continue, but because of questions about what may happen to the larger Medicaid program, it is hard to tell how Congress might see CHIP in that debate. CHIP could be considered separately, but would probably more likely be wrapped into discussions about Medicaid.</p> <p><i>Families USA post-election webinar highlights:</i> Families USA is in the beginning stages of creating a new campaign called “Keeping America Covered.” There is currently a petition available to sign, and more information will be released soon about the goals of the campaign and how to join it. Families USA also plans to host a series of post-election webinars focused on defending health care in 2017. The first in the series is available here. They are also collecting consumer and assister stories here.</p> <p><i>Colorado Consumer Health Initiative:</i> The Colorado Consumer Health Initiative is continuing to collect stories about the importance of the ACA and health care, which may be used to help defend some of the state’s coverage gains. Use this link to submit a story to the story bank.</p> <p>Future of CHP+ Given the uncertainty of what the election results mean for CHIP, it is hard to know what will happen in Colorado with the CHP+ program. However, over the last year the Colorado Department of Health Care Policy and Financing (HCPF) has engaged stakeholders to think through what the state may be able to do in Colorado if Congress does not extend funding for the CHIP program by September 2017. HCPF examined three main policy options which they could pursue if federal CHIP funding isn’t extended. The options are: 1) a Medicaid expansion up to 260 percent of the Federal Poverty Level (FPL) for children and pregnant women currently eligible for CHP+, 2) a Medicaid buy-in program up to 260 percent FPL so that children and pregnant women currently eligible for CHP+ could buy into Medicaid coverage by paying a monthly premium, or 3) a mix of the two with a Medicaid expansion up to 195 percent FPL for children, and</p>	

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	<p>then a buy-in program for pregnant women and children from 195-260 percent FPL. Costs to the state vary for each proposal. Soon HCPF will release a list of legislation they plan to pursue in the 2017 legislative session, and there may be more information about HCPF's plans for the future of CHP+ in those proposals. CKF is monitoring this closely and will continue to keep the coalition updated.</p> <p>Update on refugee policy change Refugees, asylees, and some other immigrant statuses will no longer be found ineligible for Health First Colorado or Child Health Plan Plus if they do not change their immigration status after seven years. HCPF issued an agency letter describing the policy change which was made based on federal guidance. CBMS and state rules will be updated at the end of December 2016, but the policy change is effective September 2015. HCPF has identified individuals whose benefits were terminated, solely based upon the seven-year time limit, going back to September 2015, and will continue to identify impacted individuals to override the terminations. If an individual's termination was not overridden, please contact HCPF. For a list of the impacted immigration statuses, and HCPF contact information, please review the agency letter.</p> <p>Comment: Refugees should be adjusting their status to become a Legal Permanent Resident within a year. If you are working with refugees, please advise them to contact an immigrant lawyer to begin this process. For more information, please see the U.S. Citizenship and Immigration Services information page here: https://www.uscis.gov/green-card/green-card-through-refugee-or-asylee-status</p> <p>Health First Colorado materials available Printed materials are now available to help health care providers, advocacy groups, community organizations, and others who outreach to members and the community to spread the word about Health First Colorado, the new name for Colorado's Medicaid program. Materials include:</p> <ul style="list-style-type: none"> • Posters available in English and Spanish • Quick fact cards available in English and a limited number in 	

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	<p>Spanish.</p> <p>Materials may be picked up from HCPF's main office at 1570 Grant St. during regular business hours (Monday - Friday, 8:00 a.m. to 5:00 p.m.). Assistants can park in the loading area in front of the building to pick up materials. Please let the front desk staff know how many of each item you need.</p> <p>Electronic versions of the printed materials, as well as web banners in multiple sizes, audio messages and sample social media and blog posts, are also available online to help providers and community partners educate and inform members, patients, and their communities about the name change.</p>	
Next Meeting	Thursday, December 15, 2016, from 9:00 to 11:00 a.m.	