SYSTEM INTERACTIONS & PATHWAYS TO INSURANCE







Systems & Pathways Desired Outcomes

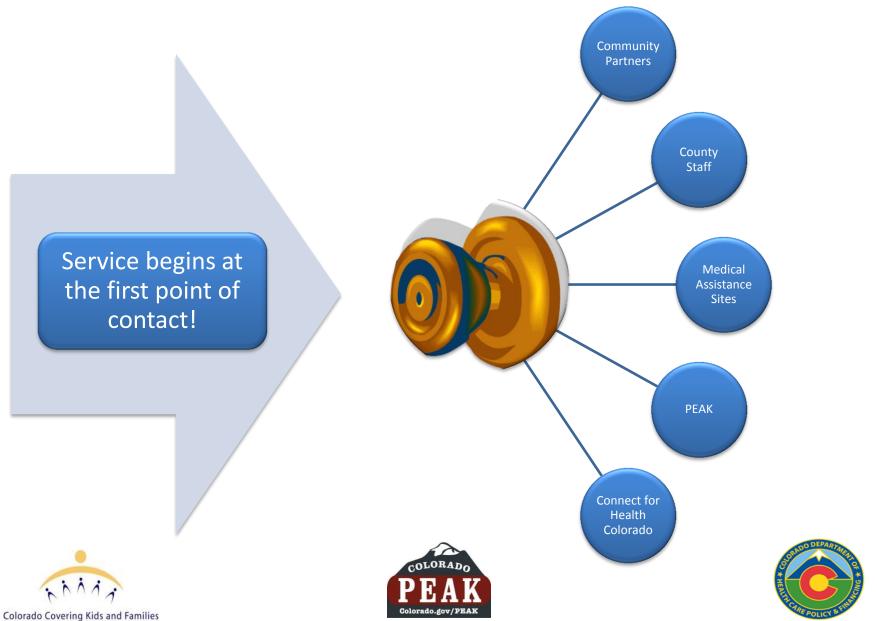
- 1 Develop a basic understanding of the key components and interactions of Colorado's interoperable insurance affordability programs.
- 2 Increase familiarity with how ACA elements underpin the system being developed in Colorado.
- 3 Be familiar with Real Time Eligibility, how it works, and when it doesn't, what happens.
- 4 Be able to explain how members of a given household might enroll in differing programs and receive differing levels of insurance affordability assistance.







Opening Doors: Any Door Is The Right Door



ACA Requirements

No wrong door to enrollment

A single streamlined application for insurance affordability programs (IAPs)

Regulations require the following:

Eligibility determinations to be based on new income and household methodologies for all IAPs

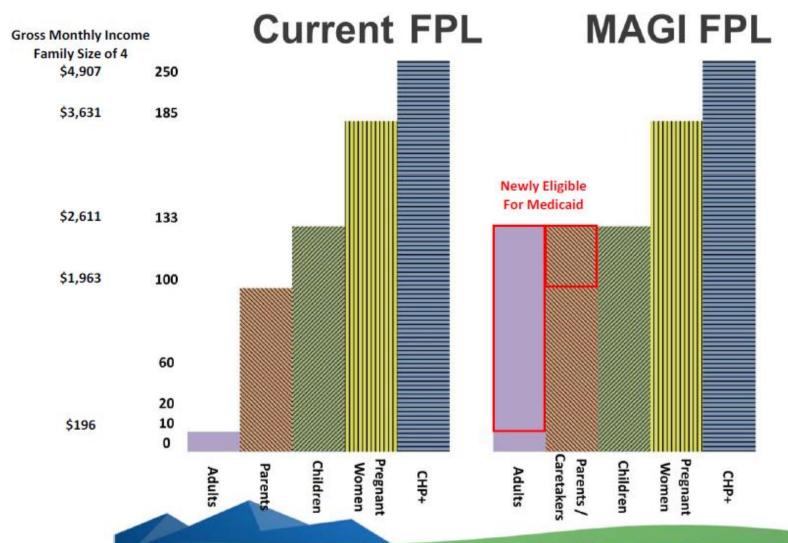
Individuals must first be determined ineligible for Medicaid/CHP+ before they are determined for Marketplace financial assistance







Medicaid Financial Thresholds



Coverage Options by Income

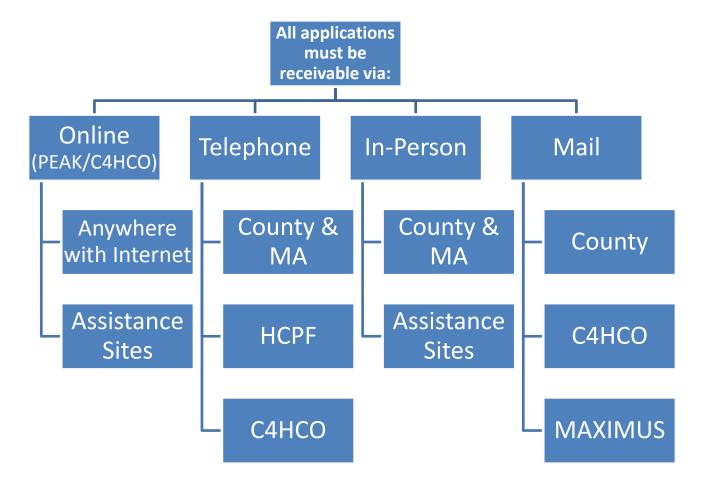
Household Income	<u>Individual</u> > \$45,960 > 400% FPL	Family of Four > \$94,200 > 400% FPL	Job-based coverage, or Full-cost coverage in the Marketplace		
	\$28,726-\$45,960 251%-400% FPL	\$58,876-\$94,200 251%-400% FPL	Job-based coverage, or Health Premium Tax Credit from the Marketplace		
	\$21,258-\$28,725 186%-250% FPL	\$43,569-\$58,875 186%-250% FPL	СНР+	СНР+	Job-based coverage, orHealth Premium TaxCredit and assistance
	\$15,283-\$21,257 134%-185% FPL	\$31,323-\$43,568 134%-185% FPL	Medicaid		with out-of-pocket costs
	≤ \$15,282 ≤ 133% FPL	≤ \$31,322 ≤ 133% FPL		Medicaid	Medicaid
			Pregnant Women	Children	Adults (non-disabled adults, not eligible for Medicare)







Insurance Affordability Program (IAP) Application "Doors"

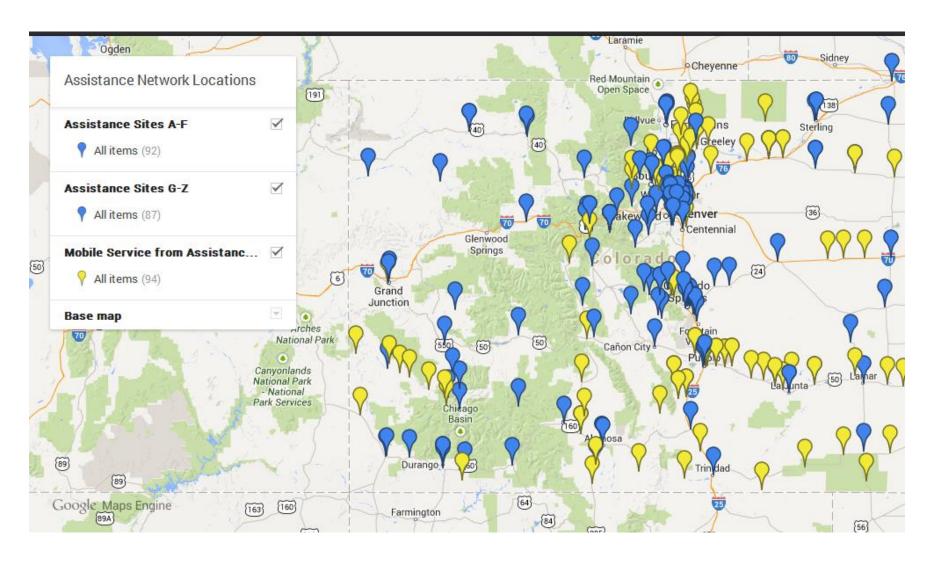








Connect 4 Health Colorado









ACA Goals for Verification

Maximize automation through data sources

Minimize need for documentation; reduce administrative burden

Simple and transparent process for consumers

Ensure program integrity

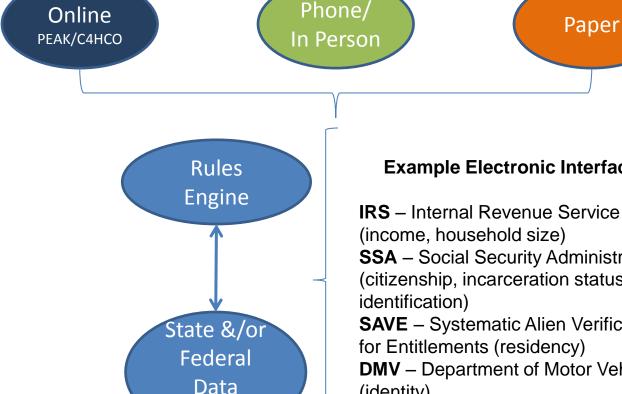






Interoperability – Electronic Verification

Single Streamlined Application (SSAp)



Sources

Example Electronic Interfaces

Paper

(income, household size) **SSA** – Social Security Administration (citizenship, incarceration status, identification)

SAVE – Systematic Alien Verification for Entitlements (residency)

DMV – Department of Motor Vehicles (identity)







Self-Sufficiency & Insurance Affordability Application Types

"Application for Public Assistance" or Single Purpose Application (SPA)

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Used to apply for Food, Cash, Adult Financial and any combinations that also include Medical Assistance Programs



As of 10/1 includes a one page addendum, "Additional Information Needed..." for use when combination application includes Medical Assistance Program

"Application for Health Coverage & Help Paying Costs" or Single Streamlined Application (SSAp)



Used to apply for both Medical Assistance and Marketplace Financial Assistance



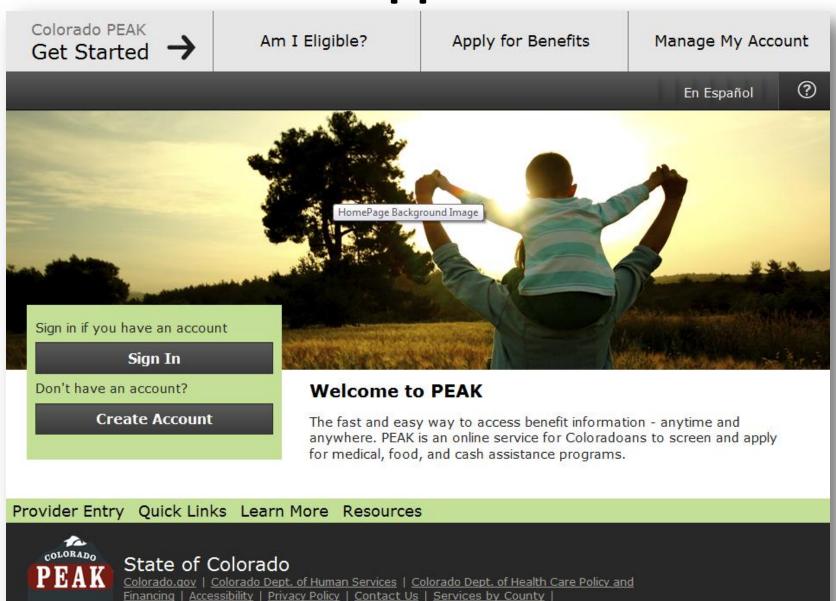
This form is currently available on the HCPF website, along with information for its use







PEAK Application



What is Real Time Eligibility (RTE)?

A client's application for Medical Program Assistance may receive <u>immediate</u> approval or denial when they submit their application via PEAK and it is successfully verified through electronic interfaces for MAGI Programs.

RTE will provide online notification and printed correspondence of determination; dating to time of application

When interfaces are not able to verify submitted information the application "exceptions" and moves to manual process

When a paper application is submitted, or an online application "exceptions", the manual process is activated

Electronic interfaces are also used for paper application verifications – RTE is not available







Real Time Eligibility



- A Real Time Eligibility determination is only available via submitting an application on PEAK
- Combination applications may receive RTE for Medical Program and the Food, Cash, Adult Financial and non-MAGI medical portion will be manually processed by the county of residence



Doorways to Real Time Eligibility



PEAK
Manage
My Account
Existing
Client

In "Report My Changes" the client may "apply" by adding Medical Assistance Program

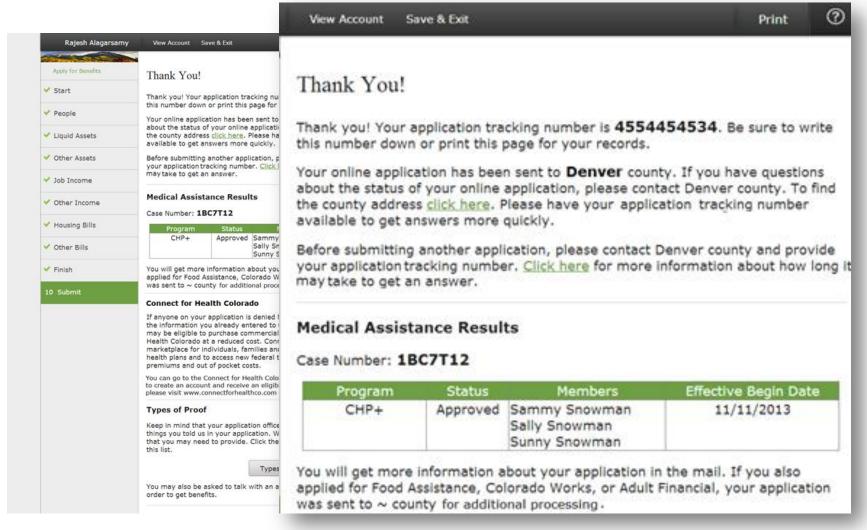
C4HCO Client requesting financial assistance Application will be processed for Medical Assistance eligibility 1st







Real Time Results

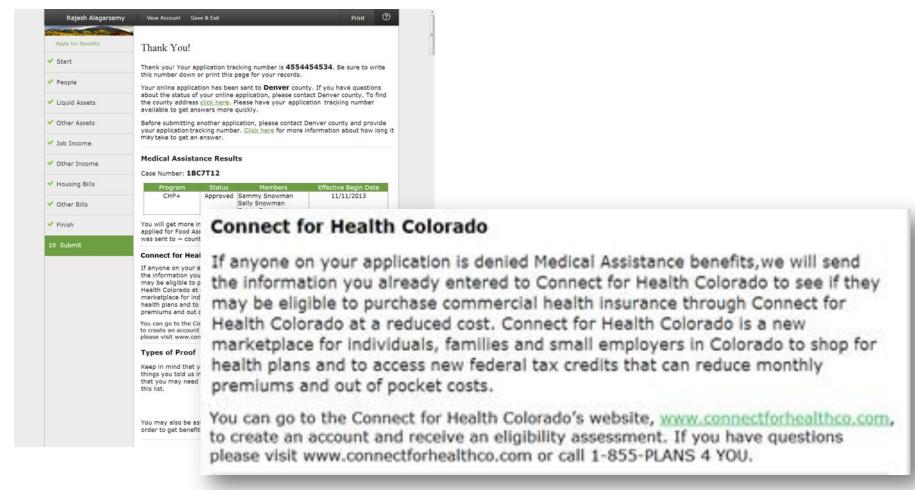








Medical Assistance Program Denial & Referral to Connect for Health Colorado









Newly Eligible 1/1/2014 Communication

Important Consideration for Newly Medicaid Eligible

Thank you for your recent application for Medical Assistance. We are in the process of expanding the Medical Assistance program so that more people will be eligible. You are not eligible for Medical Assistance now, but you might be eligible for benefits starting on January 1, 2014.

You do not need to re-apply or to do anything else with your application at this time. We will use the information you provided on your application and review your case prior to December 15th to determine if you are eligible for benefits starting on January 1, 2014. You will be sent a letter letting you know whether or not you are eligible for benefits.

If you need medical care before January 1, 2014, visit Colorado.gov/hcpf/fc information about discounted services under the Colorado Indigent Care Program (CICT) of call 303-866-3513 in the Denver Metro area or 1-800-221-3943 outside the Denver Metro area.

Sincerely,

Medicaid Customer Service







Application Processing



Local County Office

- Food and Cash Assistance PEAK applications
- Combination cases that include Medical Assistance that "exception" to the manual process
- Paper applications submitted to the county
- Change Reports)



Medical Vendor

- The majority of Medical Assistance ONLY applications entered through PEAK that "exception" to manual process
- Medical only paper applications submitted to the medical vendor







Wrap-Up

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