



## OPERATIONAL MEMO

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<b>TITLE:</b>	<b>CONTINUOUS COVERAGE UNWIND AND MEMBER COMMUNICATIONS: RAE/MCO TRANSITIONS IN COVERAGE OUTREACH</b>
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<b>DIVISION AND OFFICE:</b>	<b>HEALTH PROGRAMS OFFICE, COST CONTROL &amp; QUALITY IMPROVEMENT OFFICE, POLICY, COMMUNICATIONS &amp; ADMINISTRATION OFFICE</b>
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*HCPF Memo Series can be accessed online: <https://www.colorado.gov/hcpf/memo-series>*

**NOTE:** This memo is only for Regional Accountable Entities (RAEs) and Managed Care Organizations (MCOs) who have interest in helping connect individuals no longer eligible for Health First Colorado or Child Health Plan *Plus* (CHP+) to other health coverage options as part of their outreach plans following a determination but before coverage ends.

**The Department cannot provide legal advice. This memo is meant to provide direction on assisting members who no longer qualify for Health First Colorado or CHP+ in transitioning to a marketplace insurance plan. As such, sample messaging is provided below to outline the Department’s expectations when communicating with members. For legal advice, please contact your organization’s legal counsel.**

**Purpose and Audience:**

As a condition of enhanced funding under the Families First Coronavirus Response Act (FFCRA), the Colorado Department of Health Care Policy & Financing (HCPF) maintained continuous health care coverage for anyone enrolled in Health First Colorado (Colorado's Medicaid program) or Child Health Plan *Plus* (CHP+) during the COVID-19 pandemic. When the public health emergency (PHE) continuous coverage requirement ends, HCPF will resume standard renewal processes according to federal guidance timelines. HCPF is partnering with our Regional Accountable Entities (RAEs) and Managed Care Organizations (MCOs) to assist in outreach to members during the renewal process. The RAEs should work closely with HCPF on their communication plans and leverage Department-created messaging to help ensure consistency in outreach. Some members will be automatically renewed based on the most recent information already on file (reported information from members and/or information from other data sources), known as Ex Parte renewals. All other members will receive a renewal packet several weeks in advance of their renewal month. The packet will ask them if anything about their situation has changed, for a signature to acknowledge review of the information, and may request verification to determine whether they still qualify to receive Medical Assistance.

**The Department's goal is to ensure those who qualify take the needed actions to remain connected to coverage and those who no longer qualify are directed to health coverage options, including through the Connect for Health Colorado marketplace, employer sponsored plans or other coverage for which they may qualify.**

The Centers for Medicare and Medicaid Services (CMS) encourages states to partner with health plans during the renewal process and offered [several strategies](#) for states to consider. HCPF is pursuing several of these strategies, this memo provides additional operational information for RAE and MCO partners as we prepare together for the end of the COVID-19 continuous coverage requirement and potential transitions in coverage for members.

***Outreach Considerations for All Plans***

HCPF has important data and contract requirements that govern use of member and contact information that RAEs and MCOs should reference as they are preparing their outreach plans to ensure appropriate use of member data and discontinuing use of that data when members are no longer enrolled in Medicaid. <https://hcpf.colorado.gov/2022-memo-series-communication>

***Outreach Considerations for Plans with Exchange Options***

Some MCOs offer insurance plans on the state marketplace that members may choose if they no longer qualify for Health First Colorado or CHP+ because they are over the income limits.

There are different rules that govern marketing practices for Medicaid and private insurance at the state and federal levels. HCPF defers to the federal marketing regulations for Health First Colorado and CHP+ plans. For private insurance marketing guidance, please contact the Division of Insurance; links are included at the end of this memo.

In federal Medicaid regulation, MCOs are not permitted to solicit members to enroll in their Medicaid products; however, they are permitted to share information about marketplace coverage options, including their own (42 CFR 438.104 "*Marketing does not include communication to a Medicaid beneficiary from the issuer of a qualified health plan, as defined in 45 CFR 155.20, about the qualified health plan*"). **Please note, however, RAEs and MCOs are not permitted to use member contact information for marketing purposes after a member is disenrolled from Medicaid.**

The Colorado Division of Insurance oversees rules that govern private insurance products. They have rules related to marketing; plans should refer to these rules for marketing to non-Medicaid enrolled individuals. <https://hcpf.colorado.gov/2022-memo-series-communication>

Some RAEs and MCOs have expressed interest in additional outreach and warm handoffs to members who have received an "over income" determination. The Department and Connect for Health Colorado are working closely to support the coverage transition of customers who are no longer eligible for Health First Colorado or CHP+. This outreach will begin after customers receive final eligibility determinations. We ask that RAEs identify opportunities to expedite this process. You can support a warm handoff by helping your customers find Marketplace enrollment experts at <https://connectforhealthco.com/we-can-help/>

The sample text below is intended to guide conversations with this specific group of members who may benefit from a marketplace plan or other coverage.

### ***Sample Messaging for Transitioning to Marketplace or Other Coverage***

**For use with "over income" denial code – call scripts or emails**

*Your health care coverage is important to us. Because you no longer qualify for Health First Colorado or Child Health Plan Plus (CHP+) coverage, we want to let you know that you may have other coverage options available to you. If you or a family member are employed, your employer may offer a health plan option for you; if you are age 25 or under, you may be able to be covered on your parent's plan.*

*You do qualify for a special enrollment period to sign up for a health insurance plan, AND you may qualify for reduced-cost health insurance through Connect for Health Colorado, which is the state's official health insurance marketplace. Depending on your income and household size, you may qualify to have very low or no monthly premiums, plus health care discounts on co-pays, deductibles and prescriptions.*

*[RAE/MCO name] has plans available on the Connect for Health Colorado marketplace exchange that may include access to your current health care provider. If you need help understanding your health coverage options or finding a plan that allows you to keep seeing your current provider, you can get free help from a certified enrollment expert either in-person in your area or virtually.*

*Go to: <https://connectforhealthco.com/we-can-help/> to find a certified community-based Assister. They can help you apply for financial help and select the right plan for your health needs and your budget. You can also apply and enroll in a plan during your special enrollment period by calling the Customer Service Center at 855-752-6749.*

## **HCPF Resources:**

[OM 22-027 & PHE Unwind Plan Template](#)

[OM 23-005](#) Continuous Coverage Unwind Member Communications: Overview

[OM 23-006](#) Continuous Coverage Unwind Member Communications: Text Messaging

[OM 23-013](#) Continuous Coverage Unwind Member Communications: Revised Leveraging Data to Conduct Outreach

- [Update Your Address Campaign Toolkit](#)
- [Preparing for Renewals Toolkit](#)
- [Take Action on Your Renewal Toolkit](#)

**Partner Resources:**

Connect for Health Colorado [Assisters Map](#)

Colorado Division of Insurance Marketing Regulations: [4-2-03 - Advertisements of Accidents and Sickness Insurance](#)

Centers for Medicare and Medicaid Services (CMS) [Overview of Strategic Approach to Engaging Managed Care Plans to Maximize Continuity of Coverage as States Resume Normal Eligibility and Enrollment Operations](#)

**Department Contact:**

Rachel Reiter  
Policy, Communications & Administration Office Director  
[Rachel.Reiter@state.co.us](mailto:Rachel.Reiter@state.co.us)

Natalie Coulter  
Communications Director  
[Natalie.Coulter@state.co.us](mailto:Natalie.Coulter@state.co.us)

Alison Ledden  
PHE Communications Specialist  
[Alison.Ledden@state.co.us](mailto:Alison.Ledden@state.co.us)