



COLORADO

Department of
Regulatory Agencies

Division of Insurance

Marguerite Salazar
Commissioner of Insurance

October 16, 2014

The Honorable Bill Cadman and Colleagues
Senate Minority Leader
Colorado State Senate
200 East Colfax
Denver, CO 80203

Dear Senators:

Enclosed are the charts showing the notifications of health plans being discontinued by carriers that we received after our September 15, 2014 report. As anticipated and reported to you in our September 15th letter, we received the discontinuance information from SeeChange Health Insurance Company for its 3,849 small group covered lives on September 17th. This discontinuance was due to the cease and desist orders issued in California and Colorado in late August, because of solvency issues.

In addition, the Division received notices of discontinuances, to be effective on December 31, 2014, from five other carriers: Freedom Life Insurance Company of America (individual limited benefit plans, 830 covered lives); Humana Insurance Company (individual plans, 17,936 covered lives); Humana Health Plan (individual plans, 9 covered lives); National Foundation Life Insurance Company (large group, 4 covered lives; individual limited benefit plans, 126 covered lives); and, Transamerica Life Insurance Company (small group, 4 covered lives). Please see the attached charts showing the notifications received since March 2014.

Carriers have had the prerogative, both prior to and since enactment of the Affordable Care Act (ACA), to discontinue plans for such business reasons such as updating their product portfolios, modifying their product offerings, and even withdrawing from Colorado or a Colorado market segment, so long as they notified the Division and sent consumers the appropriate notice. Humana had the option to continue the plans they have cancelled into next year

Please note that 10 carriers have elected to continue their non-ACA compliant transition plans into 2015. These plans currently cover 192,942 people. Consumers



who have these “transition” plans will be offered the ability to continue this coverage through 2015.

Both groups of consumers, those whose carrier is discontinuing and those who are renewing a transition plan, will receive a notice describing their options, including:

- Ability to purchase another health plan from the carrier (if they are offering a plan) or to purchase a plan from another carrier;
- Option to purchase a plan through Connect for Health Colorado, where they may qualify for federal financial assistance; and
- The dates of any special enrollment period they qualify for and the open enrollment period of November 15, 2014 to February 15, 2015.

The Division has promulgated Regulation 4-2-51 setting forth the Consumer Notice for Carrier Discontinuance in Appendix A, and, in Attachment C of Bulletin B-4.79, the Renewal Notices for Off-Exchange plans. Both are attached for your information.

On an unrelated note, I want to let you know that for the first time since 2010, Colorado employers will see no increase in the loss cost component of workers' compensation premiums they pay in 2015. The Division has recently approved a change of 0.0 percent for 2015 to the average loss cost component. Loss costs are the average cost of lost wages and medical payments of workers injured during the course of their employment. Although statewide loss costs will not change, individual employers may see an increase or decrease to their workers' compensation premiums based on their particular classification code or industry group.

Please advise if you have any questions.

Sincerely,

A handwritten signature in black ink that reads "Marguerite Salazar". The signature is written in a cursive, flowing style.

Marguerite Salazar
Commissioner of Insurance

Enclosures.

2014 ACA HEALTH BENEFIT PLAN DISCONTINUANCES - APPROVED DISCONTINUANCES

SIRCON FILING #	NAIC #	ENTITY NAME	RECEIVED DATE	EFFECTIVE DATE	MARKET SEGMENT	PEOPLE AFFECTED	POLICY-HOLDERS AFFECTED	REASON FOR ACTION	GRANDFATHERED STATUS	NOTICE TO CONSUMERS REVIEWED?	DOI ACTION
285653	71773	American Nat'l LIC of TX	2/18/2014	6//30/2014	Individual	6	3	\$10-16-105.1 (2)(g)	Non-grandfathered	Yes	Approved - 3/6/2014
290953	62324	Freedom LIC of America	9/23/2014	12/31/2014	Individual	387			Non-grandfathered	Yes	Approved - 10/1/2014
290952	62324	Freedom LIC of America	9/23/2014	12/31/2014	Individual	263			Non-grandfathered	Yes	Approved - 10/1/2014
290954	62324	Freedom LIC of America	9/23/2014	12/31/2014	Individual	3			Non-grandfathered	Yes	Approved - 10/1/2014
290955	62324	Freedom LIC of America	9/23/2014	12/31/2014	Individual	177			Non-grandfathered	Yes	Approved - 10/1/2014
289962	95885	Humana Health Plan Inc.	8/5/2014	1/1/2015	Large Group	1,007			Grandfathered & Non-grandfathered	Yes	Approved - 9/15/2014
289963	95885	Humana Health Plan Inc.	8/5/2014	1/1/2015	Small Group	865			Grandfathered & Non-grandfathered	Yes	Approved - 9/15/2014
289961	73288	Humana IC	8/5/2014	1/1/2015	Large Group	219			Grandfathered & Non-grandfathered	Yes	Approved - 9/15/2014
289960	73288	Humana IC	8/5/2014	1/1/2015	Small Group	6			Grandfathered & Non-grandfathered	Yes	Approved - 9/15/2014
290819	73288	Humana IC	9/16/2014	12/31/2014	Individual	8,411			Non-grandfathered	Yes	Approved - 10/1/2014
290818	73288	Humana IC	9/16/2014	12/31/2014	Individual	9,525			Non-grandfathered	Yes	Approved - 10/1/2014

290817	95885	Humana Health Plan Inc.	9/16/2014	12/31/2014	Individual	9			Non-grandfathered	Yes	Approved - 10-1-2014
284844	95669	Kaiser Foundation Health Plan of CO	1/14/2014	7/1/2014	Individual	29		Act ("ACA").	Grandfathered	Yes	Approved - 2/14/2014
285311	95669	Kaiser Foundation Health Plan of CO	2/4/2014	6/30/2014	Individual	1,720		Act ("ACA").	Non-grandfathered	Yes	Approved - 2/14/2014
288267	97055	MEGA Life & Health IC, The	6/5/2014	7/1/2014	Individual	1,481	847	EXIT THE IND MARKET	Grandfathered	Yes	Approved - 6/20/2014
288268	66087	Mid-West National LIC of TN	6/5/2014	7/1/2014	Individual	812	477	EXIT THE IND MARKET	Grandfathered	Yes	Approved - 6/20/2014
290941	98205	National Foundation LIC	9/23/2014	12/31/2014	Large Group	4	n/a		Individual Non-grandfathered	Yes	Approved - 9/30/2014
290943	98205	National Foundation LIC	9/23/2014	12/31/2014	Individual	126	n/a		Individual Non-grandfathered	Yes	Approved - 9/29/2014
290895	63541	See Change Health IC, Inc.	9/17/2014	12/31/2014	Sml Group	3,849		EXIT THE SML GRP MARKET	Non-grandfathered	Yes	Approved - 9/29/2014
290897	86231	Transamerica LIC	9/18/2014	12/31/2014	Sml Group	4	2	Exit Sml Grp Mkt	Grandfathered	Yes	Approved - 9/23/2014
290098	97179	UnitedHealthcare LIC	8/12/2014	9/30/2014	Individual	8		"Non-grandfathered individual market business that must be brought into compliance with ACA requirements."	Non-grandfathered	Yes	Approved - 9/29/2014
						28,911					

2014 DISCONTINUANCES BY COUNTY

SERFF FILING #	MAIC #	285653	290953	290952	290954	290955	289962	289963	290817	289961	289960	290818	290819	284844	285311	288267	288268	290941	290943	290895	290897	290098	County Total	
ADAMS COUNTY			8	26		10	23	57				560	122	2	255	43	22			37			1,165	
ALAMOSA COUNTY		0														4								4
ARAPAHOE COUNTY			11	33		10	178	213			3	1,136	234	3	321	117	55		6	237			2,557	
ARCHULETA COUNTY						2										2	3					3	10	
BACA COUNTY													3			12	10							25
BENT COUNTY																2	1							3
BOULDER COUNTY			20	10		9		5				367	182	6	191	89	29		5	1,004			1,917	
BROOMFIELD COUNTY						4	5	16				154	19	2	43	13	6			65			345	
CHAFFEE COUNTY		1		1									5			14	15						36	
CHEYENNE COUNTY																4	1						5	
CLEAR CREEK COUNTY				2											1	4							7	
CONELIOS COUNTY				1																			1	
COSTILLA COUNTY																							0	
CROWLEY COUNTY															1	3							4	
CUSTER COUNTY				2									2			4	4						12	
DELTA COUNTY													9			6	10						25	
DENVER COUNTY			10	23		6	212	303	4			1,102	382	8	452	98	48		7	547		2	3,204	
DOLORES COUNTY															1	7							8	
DOUGLAS COUNTY												1,346	411		94	65	47		10	188			2,273	
EAGLE COUNTY			45			7				134			157		1	46	11		25	177			603	

EL PASO COUNTY			51	42		18	528	146	2			3	3,079	1,430		3	89	134	1			22	431		3	5,982
ELBERT COUNTY			4	6									71	18		7	17	10								133
FREMONT COUNTY				1										7		12	6							2		28
GARFIELD COUNTY			37			19								23		33	8					2	15	184	1	322
GILPIN COUNTY																										0
GRAND COUNTY			1											2		18	8					2	7			38
GUNNISON COUNTY																							4			80
HINSDALE COUNTY																										0
HUERFANO COUNTY																	1		1							2
JACKSON COUNTY														1												309
JEFFERSON COUNTY			23	22	1	17	61	62	2				1,517	346	5	307	132	55			15	254			2,512	
KIOWA COUNTY																	2	14								16
KIT CARSON COUNTY																										25
LA PLATA COUNTY			9			5								4	1	24	28	10			3	3				63
LAKE COUNTY			1			1								3		4	3									12
LARIMER COUNTY			12	11		14							3	2,782	1	11	85	45			5	111				3,165
LAS ANIMAS COUNTY																										11
LINCOLN COUNTY																6	3	5								4
LOGAN COUNTY																3	1									11
MESA COUNTY		4	6	12										6												36
MINERAL COUNTY			3	4		7								43		1	43	18			1					120
MOFFAT COUNTY																	1									1
MONTEZUMA COUNTY			1													11										12
MONTROSE COUNTY						3											3	2								8
MORGAN COUNTY																	7	10								17
OTERO COUNTY			8	3										5			3	4						10		33
														3		1	3	21								28

DEPARTMENT OF REGULATORY AGENCIES

Division of Insurance

3 CCR 702-4

LIFE, ACCIDENT AND HEALTH

Regulation 4-2-51

CARRIER DISCONTINUANCE OF A HEALTH BENEFIT PLAN

Section 1	Authority
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Section 1 Authority

This regulation is promulgated under the authority of §§ 10-1-109, 10-16-105.1(6)(a), 10-16-105.7(3)(c), and 10-16-109, C.R.S.

Section 2 Scope and Purpose

The purpose of this regulation is to establish standards for carriers in discontinuing health benefit plans pursuant to the requirements of Colorado law.

Section 3 Applicability

This regulation shall apply to individual and small group health benefit plans subject to the individual and group health insurance laws of Colorado.

Section 4 Definitions

- A. "Carrier" shall, for the purposes of this regulation, have the same meaning as found at § 10-16-102(8), C.R.S.
- B. "Creditable coverage" shall, for purposes of this regulation, have the same meaning as found at § 10-16-102(16), C.R.S.
- C. "Exchange" shall, for the purposes of this regulation, have the same meaning as set forth in § 10-16-102(26), C.R.S.
- D. "Health benefit plan" shall, for the purposes of this regulation, have the same meaning as found at § 10-16-102(32), C.R.S.

E. "SERFF" means, for the purposes of this regulation, System for Electronic Rate and Form Filings.

Section 5 Rules

- A. Prior to discontinuing any grandfathered or non-grandfathered individual or small group health benefit plans, a carrier must notify the Division of Insurance (Division) of such discontinuance by submitting a filing to the Division. All filings shall be submitted electronically via SERFF by a licensed entity. Failure to supply the required information specified in this regulation will render the filing incomplete, and such a filing may be rejected. A separate filing must be sent for each Line of Business being discontinued. The SERFF filing should be submitted as:
1. Type of Filing "Other"; and
 2. Type of Insurance (TOI) code H21, or for HMO's code HOrg03.
- B. Until an individual or small group health benefit plan becomes subject to the provisions of HB13-1266, carriers electing to discontinue individual or small group plans must do so in accordance with the requirements found at § 10-16-201.5, C.R.S. (2012).
- C. For plans issued after January 1, 2014, carriers that elect to non-renew or discontinue individual or small group health benefit plans must do so in accordance with the requirements found at § 10-16-105.1(2)(g), C.R.S. The carrier shall offer policyholders the option of purchasing any other health benefit plan currently being offered by the carrier for which they qualify.
- D. The carrier shall provide notice of the decision not to renew or continue coverage to each policyholder at least ninety (90) days prior to the date of nonrenewal or discontinuance.
- E. Carriers shall include notice to the policyholder of eligibility for special enrollment periods, as established pursuant to § 10-16-105.7, C.R.S., with the nonrenewal or discontinuance notice.
- F. Carriers must use the notification language provided in Attachment A in order to provide sufficient notification to policyholders.
- G. Carrier discontinuance of a health benefit qualifies the policyholder for a special enrollment period pursuant to § 10-16-105.7(3), C.R.S. as an involuntary loss of creditable coverage.
- H. Carriers shall provide the following information in SERFF to the Division when discontinuing plans:
1. The Form Schedule Tab in SERFF must be completed with the form name, form number, edition date, form type, and action for each policy form that is being discontinued. Listing the readability score and attaching the actual forms is not required.
 2. Copies of all proposed policyholder notices for Division review.
 3. A letter addressed to the Commissioner that contains a summary of the carrier's discontinuance actions must be attached as a supporting document and must contain the following information:
 - a. Effective date of the discontinuance and/or exit from the market;
 - b. The reason for the carrier's action;
 - c. The market segment being discontinued;

- d. Number of people affected (by county); and
 - e. Grandfathered/Non-Grandfathered status.
4. The form found in Appendix B of this regulation shall be completed and included with this filing.
 5. The form found in Appendix C of this regulation shall be completed and included with this filing.

Section 6 Severability

If any provisions of this regulation or the application thereof to any person or circumstances are for any reason held to be invalid, the remainder of the regulation shall not be affected in any way.

Section 7 Enforcement

Noncompliance with this regulation may result in the imposition of any of the sanctions made available in the Colorado statutes pertaining to the business of insurance, or other laws, which include the imposition of civil penalties, issuance of cease and desist orders, and/or suspensions or revocation of license, subject to the requirements of due process.

Section 8 Effective Date

This regulation is effective August 15, 2014.

Section 9 History

Regulation effective August 15, 2014.

Appendix A – Carrier Discontinuance Notice

Notice to Consumers for Carrier Discontinuance (Pursuant to § 10-16-201.5, C.R.S. (2012) and § 10-16-105.1, C.R.S.)

"We would like to notify you that your current policy will be discontinued or not renewed ninety (90) days from now, on (Month, Day, Year) because (company name) will no longer offer your current health plan in the State of Colorado.

This discontinuance triggers a special enrollment period which allows you to select a new health plan. You will have thirty (30) days before your plan ends and sixty (60) days after the date your plan ends to enroll in a new plan.

You may begin shopping for a new health benefit plan immediately to replace the plan that is ending, and you can enroll in a new health benefit plan up to thirty (30) days before your current plan ends, but you will need to be able to provide proof that your current plan is ending to the carrier of the plan you want to enroll in.

This notice can serve as the proof required for enrollment in a new plan. Knowing your plan is ending gives you the ability to enroll in a new plan with coverage beginning no earlier than the day this coverage ends so that you may avoid a gap in coverage.

[If carrier is offering new individual plans, use:

Your options include:

- Purchasing another individual health plan from us;
- Purchasing a plan from another carrier; or
- Purchasing a new plan through Connect for Health Colorado, where you may qualify for federal financial assistance (www.connectforhealthco.com).]

[If carrier does not offer new individual plans, use:

We are not going to be selling new individual plans so you won't be able to buy a new plan from us. Your options include:

- Purchasing a new plan from another carrier.
- Purchasing a new plan through Connect for Health Colorado, where you may qualify for federal financial assistance (www.connectforhealthco.com).

You should schedule the start date of your new plan to match the end date of this plan to avoid a gap in coverage.

You can contact us, your insurance advisor, or Connect for Health Colorado for assistance and additional information. [Insert Connect for Health Colorado's contact information and Carrier contact information]

**APPENDIX C – HEALTH BENEFIT PLAN DISCONTINUANCES BY COUNTY DATA TEMPLATE
(WITH EXAMPLES):**

CANCELLATIONS BY COUNTY FOR [CARRIER NAME] FOR [MONTH], [YEAR]:					
SERFF FILING #:		111111	222222	333333	COUNTY TOTAL:
NAIC #:		44444	55555	66666	
PLAN/PRODUCT NAME:		Plan X	Plan Y	Plan Z	
ADAMS COUNTY			2	3	5
ALAMOSA COUNTY					
APAPAHOE COUNTY			3	6	9
ARCHULETA COUNTY					
BACA COUNTY					
BENT COUNTY					
BOULDER COUNTY			6	100	106
BROOMFIELD COUNTY			2	43	45
CHAFFEE COUNTY		1			1
CHEYENNE COUNTY					
CLEAR CREEK COUNTY				1	1
CONEJOS COUNTY					
COSTILLA COUNTY					
CROWLEY COUNTY				1	1
CUSTER COUNTY					
DELTA COUNTY					
DENVER COUNTY			8	200	208
DOLORES COUNTY				1	1
DOUGLAS COUNTY				50	50
EAGLE COUNTY				1	1
EL PASO COUNTY				3	3
ELBERT COUNTY					

**APPENDIX C – HEALTH BENEFIT PLAN DISCONTINUANCES DATA TEMPLATE BY COUNTY
(WITH EXAMPLES) CONTINUED:**

CANCELLATIONS BY COUNTY FOR [CARRIER NAME] FOR [MONTH], [YEAR]:					
SERFF FILING #:		111111	222222	333333	COUNTY TOTAL:
NAIC #:		44444	55555	66666	
PLAN/PRODUCT NAME:		Plan X	Plan Y	Plan Z	
FREMONT COUNTY			2	9	11
GARFIELD COUNTY					
GILPIN COUNTY					
GRAND COUNTY			3	150	153
GUNNISON COUNTY					
HINSDALE COUNTY					
HUERFANO COUNTY			6	40	46
JACKSON COUNTY			2	30	32
JEFFERSON COUNTY		1			1
KIOWA COUNTY					
KIT CARSON COUNTY				1	1
LA PLATA COUNTY					
LAKE COUNTY					
LARIMER COUNTY				1	1
LAS ANIMAS COUNTY					
LINCOLN COUNTY					
LOGAN COUNTY			8	125	133
MESA COUNTY				1	1
MINERAL COUNTY				60	60
MOFFAT COUNTY				1	1
MONTEZUMA COUNTY				3	3
MONTROSE COUNTY					
MORGAN COUNTY					

**APPENDIX C – HEALTH BENEFIT PLAN DISCONTINUANCES DATA TEMPLATE BY COUNTY
(WITH EXAMPLES) CONTINUED:**

CANCELLATIONS BY COUNTY FOR [CARRIER NAME] FOR [MONTH], [YEAR]:				
SERFF FILING #:	111111	222222	333333	COUNTY TOTAL:
NAIC #:	44444	55555	66666	
PLAN/PRODUCT NAME:	Plan X	Plan Y	Plan Z	
OTERO COUNTY		2	12	14
OURAY COUNTY				
PARK COUNTY		3	45	48
PHILLIPS COUNTY				
PITKIN COUNTY				
PROWERS COUNTY		6	150	156
PUEBLO COUNTY		2	11	13
RIO BLANCO COUNTY	1			1
RIO GRAND COUNTY				
ROUTT COUNTY			1	1
SAGUACHE COUNTY				
SAN JUAN COUNTY				
SAN MIGUEL COUNTY			1	1
SEDGWICK COUNTY				
SUMMIT COUNTY				
TELLER COUNTY		8	120	128
WASHINGTON COUNTY			1	1
WELD COUNTY			75	75
YUMA COUNTY			1	1
OUT OF STATE			3	3
TOTAL:	3	63		1616



COLORADO

Department of
Regulatory Agencies

Division of Insurance

Bulletin No. B-4.79

Renewal and Redetermination Notices for Use by Carriers and Connect for Health Colorado

I. Background and Purpose

The purpose of this bulletin is to provide the template for a combined renewal and redetermination notice to be co-branded and used by carriers and Connect for Health Colorado; a template for a co-branded notice for those consumers who have a health benefit plan through Connect for Health Colorado who cannot be automatically renewed; and to provide a renewal notice template to be used by carriers for off-exchange plans.

Bulletins are the Division of Insurance's (Division's) interpretations of existing insurance law or general statements of Division policy. Bulletins themselves neither establish binding norms nor finally determine issues or rights.

II. Applicability and Scope

This bulletin is intended for all carriers who offer individual health benefit plans for sale in Colorado, both on and off of the Exchange.

III. Division Position

Attachment A contains the co-branded combined renewal and redetermination notice template to be used by carriers and Connect for Health Colorado to be sent to those consumers eligible for automatic renewal into 2015. This notice will be sent by Connect for Health Colorado and contain the logo of the relevant carrier. If this notice is sent by Connect for Health Colorado, the carrier need not send the same notice to the same consumer.

Attachment B contains the co-branded combined notice template to be used by carriers and Connect for Health Colorado to be sent to those consumers not eligible for automatic renewal into 2015. This notice will be sent by Connect for Health Colorado and contain the logo of the relevant carrier. If this notice is sent by Connect for Health Colorado, the carrier need not send the same notice to the same consumer.

Attachment C contains the renewal notice template to be used by carriers for consumers whose health benefit plan was purchased outside of Connect for Health Colorado. This notice will be sent by the carrier, as the consumer did not obtain coverage through Connect for Health Colorado. The Division understands that carriers may have developed their own off-exchange renewal notices for plan year 2015. This notice may be used for plan year 2015 renewals.



IV. Additional Division Resources

For More Information

Colorado Division of Insurance
Life and Health Section, Consumer Affairs
1560 Broadway, Suite 850
Denver, CO 80202
Tel. 303-894-7499
Internet: <http://www.dora.colorado.gov/insurance>

V. History

- Issued September 22, 2014

Attachment A: Co-Branded Renewal/Redetermination Notice

Dear [Policyholder or Name],

We would like to let you know that your current health insurance coverage is coming up for renewal. Your current plan [Plan name] will continue to be offered in the upcoming 2015 plan year. You will be automatically re-enrolled on [Date] so you can keep your current coverage. Although the benefits have not changed, you should check to confirm that your provider is still in the plan's network. If you do not choose a new plan before [Date] you will be re-enrolled in your current plan. You can change plans if you want to by visiting ConnectforHealthCO.com, or speaking with your Broker or Health Coverage Guide.

Once you have paid the January premium for your 2015 plan, you cannot change plans unless you have a qualifying life change event, such as the birth of a child, or getting married.

[IF CONSUMER RECEIVES APTC: You are currently saving \$[2014 Dollar amount] each month because of a federal tax credit. You may be able to continue to get a tax credit or a better plan for your budget by visiting ConnectforHealthCO.com during this year's Open Enrollment.]

The Open Enrollment period for 2015 is from November 15, 2014 to February 15, 2015, but once you have paid the January premium, you cannot change plans unless you have a qualifying life change event.

[IF CONSUMER DOES NOT RECEIVE APTC INDICATE "N/A" WITHIN TABLE:

Your Current Monthly Tax Credit*:	Your Current Monthly Premium:	Your Monthly Premium After the Tax Credit Was:
[\$[2014 Monthly APTC]	[\$[2014 Monthly Premium]	[\$[2014 Dollar amount]

Your New Monthly Tax Credit for 2015 is Estimated to Be*:	Your Monthly Premium for the Same Plan in 2015 Will Be:	Your Estimated Monthly Premium for 2015 After the Tax Credit Is:
[\$[2015 Estimated Monthly APTC]	[\$[2015 Monthly Premium]	[\$[2015 Dollar amount]

* The monthly tax credit is based upon the price of the second lowest silver plan in your geographic area for the coverage year and your current household income.]

Changes that are being made to your current health plan:

- Premium – Your new premium starts in January. Your new and estimated premium will be \$[Dollar amount] each month.

[IF CONSUMER RECEIVES APTC: This amount is based on the premium tax credit you may qualify for during the 2015 plan year, which will lower your monthly premium to \$[2015 Dollar amount]. You can check to see if you have other options or if you can get a bigger tax credit at: ConnectforHealthCO.com]

[IF CONSUMER RECEIVES APTC: If you also qualify for Cost Sharing Reductions (CSR) that lower out-of-pocket costs, make sure you enroll in a Silver level plan through Connect for Health Colorado to get these savings. Members of a federally recognized Indian tribe and Alaska Natives may receive CSR benefits by enrolling in any level plan (i.e. bronze, silver, gold).

Important information about your tax credit

We have estimated that you will receive [2015 Monthly APTC] in tax credits each month to lower your monthly premium. To make sure you get the full savings you deserve, you should update your information with us for the 2015 plan year during the open enrollment period beginning November 15. You can do this online, in person, or by phone. This will help make sure you get the right premium tax credit amount and don't owe money on your next tax return because your household size, income, or other eligibility information was different than we estimated. If you do nothing, your tax credit for 2015 will be [2015 Monthly APTC.] Please note that your final tax credit is determined when you file your federal income tax return for the year.]

[INCLUDE IF NO TAX CREDIT WAS RECEIVED IN 2014:

If you didn't receive a tax credit in 2014

Tax credits and other cost savings may be available to people who have a health plan through Connect for Health Colorado. To find out if you qualify based on your income and household size, go to ConnectforHealthCO.com.]

If you go back to update your application and want to keep this plan, make sure you choose [Plan name and Plan ID] again. There may have been a Plan ID change or a plan name change. Please contact Connect for Health Colorado if you have any questions.

What if I want to change plans?

- The 2015 Open Enrollment period is from November 15, 2014 to February 15, 2015. If you would like to switch to a different plan with coverage that starts on January 1, 2015, the deadline to enroll is December 15, 2014. **Remember:** once you pay a premium for January 2015, you won't be able to switch plans unless you have a qualifying life change event.
- You can choose a new plan from [Issuer name] or another insurance company or HMO through Connect for Health Colorado. You or your family may also qualify for Medicaid or the Children's Health Insurance Program (CHP+), both of which are public programs that offer low cost health coverage.
- You can choose to buy a new health plan directly from an insurance company or HMO. But remember: If you qualify for financial assistance, you can get those savings only if you enroll through Connect for Health Colorado.
- You can always contact your insurance company, HMO, Broker, Health Coverage Guide, or a Connect for Health Colorado Customer Service Representative for any help you may need.

What else should I look at before deciding to keep or change my plan?

Call or visit your health insurance company or HMO's website to make sure your doctor and other health care providers will be in the network next year. Also check to make sure any prescription medications you take will be covered.

If you have experienced a change in your eligibility for financial assistance, including an income change, you need to advise Connect for Health Colorado within thirty (30) days of receiving this notice so that your financial assistance can be adjusted accordingly.

Questions?

- For plan or benefits questions, please call [Issuer Name and Contact Information and Hours of Operation].

- For Tax Credit and eligibility questions, please call a Connect for Health Colorado Customer Service Representative at 1-855-752-6789 (TTY: 1- 855-346-3432)
- Visit ConnectforHealthCO.com to learn more about qualifying for financial assistance, or to find local, in-person assistance.

Getting Help in Other Languages

[Include the tagline below for the top languages spoken by 10% or more of the population in the state.

Spanish (Español): Para obtener asistencia en Español, llame al [Issuer Contact Information].

Thank you,

[Connect for Health Colorado logo]

[Carrier logo]

Attachment B: Co-Branded Renewal/No Redetermination Notice

Dear [Policyholder or Name],

Thank you for your business. Shopping with Connect for Health Colorado means you have access to more health insurance options and financial assistance to help pay for your healthcare costs. You also have access to our large network of free, in-person assistance from a Health Coverage Guide or Broker. We would like to let you know that your current health insurance coverage is coming up for renewal. Your current plan may continue to be offered in the upcoming 2015 plan year.

You will need to contact your insurance company, HMO, Broker, Health Coverage Guide, or a Connect for Health Colorado Customer Service Representative to get information about your new 2015 premium and to continue your coverage as we cannot automatically renew your plan or determine your eligibility for tax credits, if applicable.

[IF CONSUMER RECEIVES APTC: In 2014, you saved \$[Dollar amount] each month because of a federal tax credit. You may be able to continue to get a tax credit or a better plan for your budget by visiting ConnectforHealthCO.com during this year's Open Enrollment.]

The Open Enrollment period for 2015 is from November 15, 2014 to February 15, 2015, but if you want your 2015 plan to be effective on January 1, you **MUST** renew/enroll no later than December 15, 2014. Also, once you have paid the January premium, you cannot change plans unless you have a qualifying life change event.

[IF CONSUMER DOES NOT RECEIVE APTC INDICATE "N/A" WITHIN TABLE:

Your Current Monthly Tax Credit*:	Your Current Monthly Premium:	Your Monthly Premium After the Tax Credit Was:
[\$[2014 Monthly APTC]	[\$[2014 Monthly Premium]	[\$[2014 Dollar amount]

* The monthly tax credit is based upon the price of the second lowest silver plan in your geographic area for the coverage year and your current household income.]

Unfortunately, we are unable to automatically renew your current plan.

[IF CONSUMER RECEIVES APTC: We are also unable to re-determine what your federal tax credit will be for 2015 as additional financial information is needed. Please call a Connect for Health Colorado Customer Service Representative at 1-855-752-6789 (TTY: 1-855-346-3432) as soon as possible so we can update your financial information.]

If you need assistance shopping for a plan, you can contact your insurance company, HMO, Broker, Health Coverage Guide, or a Connect for Health Colorado Customer Service Representative

Why Can't We Automatically Renew Your Plan and Eligibility?

There could be multiple reasons why we are unable to automatically renew your coverage and/or determine your eligibility for the tax credit including:

- We do not have enough information to re-determine your eligibility for a tax credit.
- You or a member of your household will be 65 years old as of January 1, 2015, and potentially eligible for coverage through Medicare.
- You or a member of your household is no longer eligible for your plan. For example, if you are enrolled in a catastrophic plan and will be 30 years old as of January 1, you no longer qualify for this plan and will need to shop for a new 2015 plan.

- Your insurance company or HMO is no longer offering your current plan in 2015.

If you have experienced a change in your eligibility for financial assistance, including an income change, you need to advise Connect for Health Colorado within thirty (30) days of receiving this notice so that your financial assistance can be adjusted accordingly.

Questions?

- For 2015 premium information or for plan or benefits questions, please call [Issuer Name and Contact Information and Hours of Operation].
- For Tax Credit and eligibility questions, please call a Connect for Health Colorado Customer Service Representative at 1-855-752-6789 (TTY: 1- 855-346-3432)
- Visit ConnectforHealthCO.com to learn more about qualifying for financial assistance, or to find local, in-person assistance.

Getting Help in Other Languages

[Include the tagline below for the top languages spoken by 10% or more of the population in the state.

Spanish (Español): Para obtener asistencia en Español, llame al [Issuer Contact Information].

Thank you,

[Connect for Health Colorado logo]

[Carrier logo]

Attachment C: Off-Exchange Renewal Notice

Dear [Policyholder Name or Covered Person Name],

We would like to let you know that your current health insurance coverage is coming up for renewal. Your current plan [Plan name] will continue to be offered in the upcoming 2015 plan year. You can change plans if you want by visiting [Carrier website] or ConnectforHealthCO.com, or by speaking with your Agent or your Health Coverage Guide.

Changes that are being made to your current health plan:

- Premium – Your new premium starts in January. Your new premium will be \$[Dollar amount] each month.

Tax credits and other cost savings may be available to people who purchase a health plan through Connect for Health Colorado. To find out if you qualify based on your income and household size, go to ConnectforHealthCO.com.

What if I want to change plans?

- The 2015 Open Enrollment period is from November 15, 2014 to February 15, 2015. If you want a new plan with coverage that starts on January 1, 2015, the deadline to enroll is December 15, 2014.
- You may choose a new plan from us or another insurance company or HMO, or through Connect for Health Colorado (ConnectforHealthCO.com). You or your family may also qualify for Medicaid or the Children's Health Insurance Program (CHP+).
- If you qualify for lower costs, you can get those savings only if you enroll through Connect for Health Colorado.
- You can always contact your insurance company, HMO, Agent, Health Coverage Guide, or a Connect for Health Colorado Customer Service Representative for any help you may need.

What else should I look at before deciding to keep or change my plan?

Call or visit your health insurance company or HMO's website to make sure your doctor and other health care providers are currently listed in the company's network, as they are subject to change. Also check to make sure any prescription medications you take will be covered.

Questions?

- For plan or benefits questions, please call [Issuer Name and Contact Information and Hours of Operation].
- For Tax Credit and eligibility questions, please call a Connect for Health Colorado Customer Service Representative at 1-855-752-6789 (TTY: 1- 855-346-3432)
- Visit ConnectforHealthCO.com to learn more about qualifying for financial assistance, or to find local, in-person assistance.

Getting Help in Other Languages

[Include the tagline below for the top languages spoken by 10% or more of the population in the state.

Spanish (Español): Para obtener asistencia en Español, llame al [Issuer Contact Information].

Thank you,

[Carrier logo]