

**QUESTIONS SUBMITTED BY MEMBERS OF THE LEGISLATIVE HEALTH BENEFIT EXCHANGE
IMPLEMENTATION REVIEW COMMITTEE FOR APRIL 1, 2015 MEETING**

For Connect for Health Colorado

From Senator Kefalas

- (1) What is status of interoperability between CBMS (Medicaid) and Connect for Health computer system (private insurance)? How is functionality being measured? How close are we to real-time Medicaid eligibility denial so that customers can quickly apply for private insurance plan?
- (2) Has Connect for Health conducted customer service surveys? If so, what have been the results and have responses been more favorable over time? If surveys have not been conducted ,why not?
- (3) What is relationship between plans offered within health benefit exchange and plans outside of exchange? How are insurance brokers operating in this new health insurance landscape?
- (4) Does Connect for Health CO have a role in addressing problems with carriers such as Health Care Cooperative regarding their customer service and computer glitches? If so, how does it help to address problems? If not, why not?
- (5) Has Connect for Health done a SWOT analysis - strengths, weaknesses, opportunities and threats?

From Representative Landgraf

- (1) What has been done to address the deficiencies found in the sample audit? What new policies are in place?
- (2) What reason is there for the overpayment on contracts? Has that money been refunded? Or earned?

For the Office of the State Auditor

From Representative McCann

- (1) Was there any evidence of fraud discovered or wrongful payment to a vendor for services not rendered?

*Addressed in response from Office of the State Auditor dated March 24, 2015 -
Question 8.*