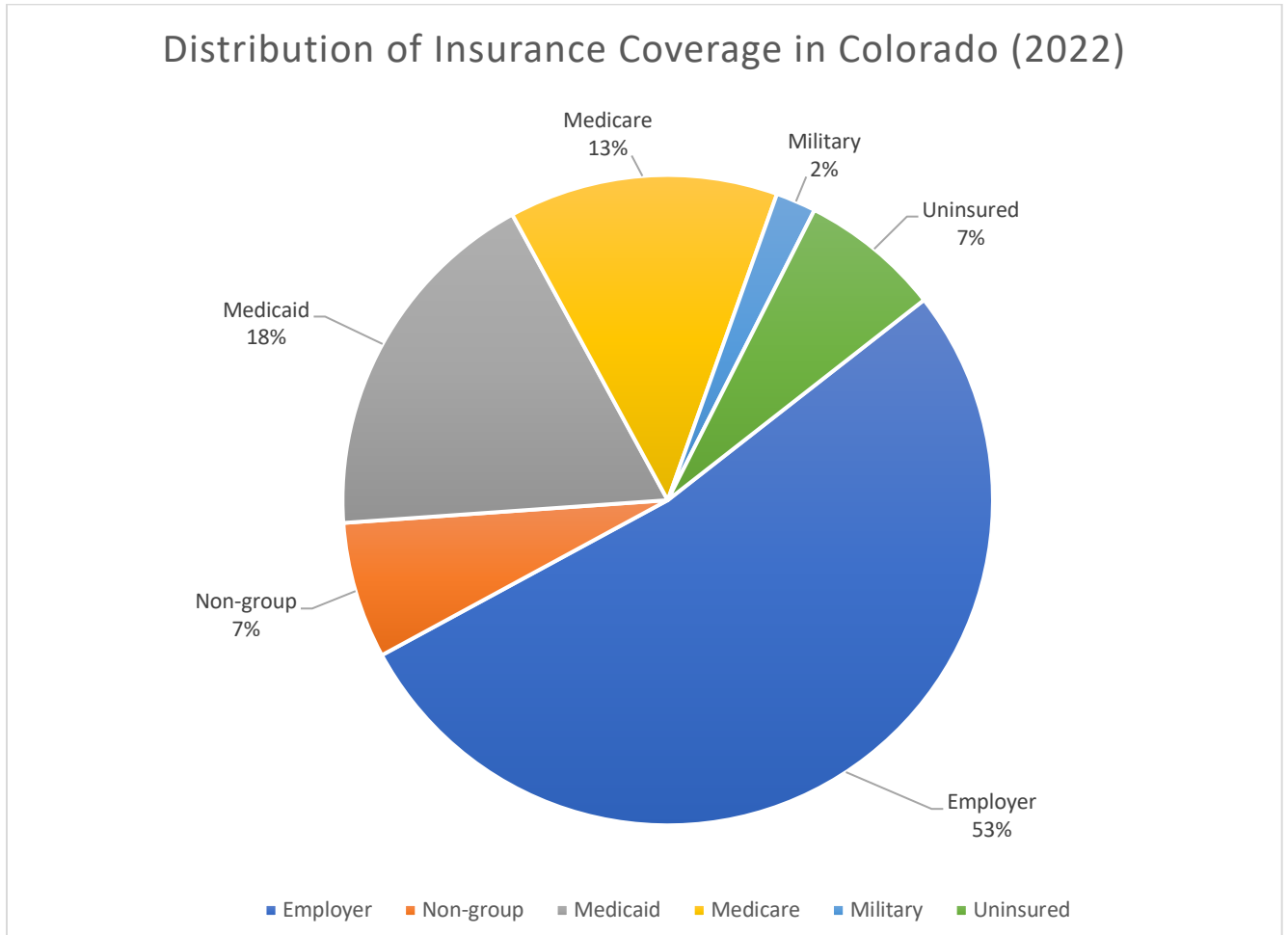


Colorado

Sources of Insurance Coverage



*Source: KFF, Health Insurance Coverage of the Total Population, 2022

Medicare

In Colorado, around [761,300](#) residents are enrolled in Medicare, 13% of the state's population (2022 data). Of those, [54%](#) are enrolled in a Medicare Advantage plan. For Colorado residents in the traditional Medicare program, the Division of Insurance (DOI) within the Colorado Department of Regulatory Affairs (DORA) regulates Medicare supplemental plans and provides [consumer-facing](#) information about plan options, which includes a list of Medicare supplemental policies and prices available.

Medicaid and the Children's Health Insurance Program (CHIP)

In Colorado, approximately [1.03 million people](#) are enrolled in Medicaid or CHIP, 18% of the population (2022 data). The state Medicaid program is called "Health First Colorado." Colorado adopted Medicaid expansion under the Affordable Care Act and covers childless adults under

age 65 up to [138%](#) of the federal poverty level (FPL). It currently covers over [602,000](#) low-income adults (June 2023 data). Colorado Medicaid covers children up to 265% of the federal poverty level (FPL). Approximately [35%](#) of all births in Colorado are covered by Medicaid (June 2023 data).

In Colorado, the CHIP program is called “Child Health Plan Plus” (CHP+) and is [operated](#) as both an expansion of Medicaid and a separate CHIP-funded program. Medicaid covers children up to [147% FPL](#) and CHP+ fills in for children in households up to 265% FPL.

Medicaid also covers pregnant women up to [195% FPL](#), and CHP+ fills in to cover them up to 265%.

In Colorado, only a [small share](#) of Medicaid enrollees receive benefits via private managed care organizations. However, the [Colorado Department of Health Care Policy and Financing](#) contracts with private entities to serve as Regional Accountability Entities (RAEs), which build provider networks and coordinate primary care and behavioral health services for Medicaid enrollees, administer the state’s capitated behavioral health program, and monitor data to promote better care quality.

[Employer-sponsored Insurance](#)

In Colorado, roughly [3 million](#) people are covered by employer-sponsored insurance (ESI), or 53% of the total state population (2022 data). Approximately [51.2%](#) of private sector employers in Colorado offer ESI. However, offer rates vary significantly by size of firm (2022 data). In Colorado, 95.6% of large firms (50 or more employees) offer ESI, while only 40.7% of small employers offer ESI.

In Colorado, approximately [37.9%](#) of private sector businesses that offer health insurance self-fund at least one health plan (2022 data). For large firms (50 or more employees) that offer health insurance, 64.2% self-fund at least one health plan.

[Individual Market Insurance](#)

Approximately [7%](#) of Colorado residents are enrolled in the individual market (2022 data). In 2023, [201,758](#) Coloradans selected a plan through the Affordable Care Act Marketplace, which in Colorado is run by the state and is called “[Connect for Health Colorado](#).” It is more challenging to ascertain enrollment numbers for off-Marketplace individual market enrollment.

Colorado has a separate program where individuals who are ineligible for Marketplace plans or Medicaid due to immigration status can find comprehensive health insurance, called “[OmniSalud](#).” The state funds subsidies for a limited number of low-income residents eligible for OmniSalud to access coverage with no premiums and reduced cost sharing called “SilverEnhanced Savings.”

Individual market health insurance (both on- and off-Marketplace) is regulated in Colorado by the DOI. The DOI conducts oversight to ensure compliance with both state and federal health insurance laws.

Other Coverage

Some Coloradans are enrolled in other forms of insurance coverage, such as coverage for the military (TRICARE or U.S. Veterans Administration), which covers [2%](#), or approximately 112,900 residents (2022 data).

The Uninsured

Approximately [7%](#), or roughly 399,600 Colorado residents are uninsured (2022 data). Colorado has a higher uninsured rate than about half of states, but a lower uninsured rate than the national average.

Among the non-elderly population: People of color are significantly more likely to be uninsured in Colorado than White people. American Indian/Alaska Native residents have the highest [uninsured rate](#) (15.5%), followed by Hispanic residents (14.7%), Black residents (9.2%), and Asian/Native Hawaiian and Pacific Islander residents (8.0%). White residents have the lowest uninsured rate (5.7%) among all racial groups. Lack of insurance is also highly correlated with income. Approximately [12.1%](#) of people under 100% FPL and 15.9% of people between 100-199% FPL are the uninsured in Colorado, while just 4.3% of people at or above 400% FPL are uninsured.

State Regulators: Colorado

CMS is responsible for the oversight of Medicare Advantage plans. The CMS Regional Office for Colorado is based in Denver. Media inquiries may be submitted [here](#).

Colorado Division of Insurance (DOI)

The Colorado Division of Insurance (DOI) within the Department of Regulatory Affairs (DORA) regulates the business of insurance in the state of Colorado. For health insurance companies, DOI is responsible for:

- **Licensure:** Insurers are required to obtain a Certificate of Compliance that they are organized under state law and authorized to conduct the business of insurance. Insurers operating in Colorado must also demonstrate that they are financially solvent and capable of paying claims. Companies must obtain a Certificate of Deposit and submit financial information with the DOI on a regular basis. Insurers' annual financial statements are available [here](#).
- **Form review:** The DOI reviews health insurers' contracts and covered benefits to ensure that they comport with federal law, including the Affordable Care Act (ACA), Mental Health Parity and Addiction Equity Act (MHPAEA), Health Insurance Portability & Accountability Act (HIPAA), No Surprises Act, as well as state benefit mandates and network adequacy standards.

- **Rate review:** Health insurers must submit proposed premium rates to the DOI, and the agency has the authority to review and require adjustments before rates can be used. The DOI also has authority to enforce premium reductions required by Colorado Option plans, and in some circumstances set hospital reimbursement rates paid by insurers, within certain parameters. Rate filings are available through the National Association of Insurance Commissioner’s System for Electronic Rate and Form Filing (SERFF), which can be accessed [here](#), along with summaries of submitted and approved rates from recent years.
- **Marketing:** The DOI is responsible for oversight of insurers’ marketing tactics and discouraging unfair or deceptive tactics. The agency also licenses and oversees insurance agents and brokers.
- **Enforcement:** The DOI has authority to enforce state and federal insurance laws. Enforcement tools can range from imposing civil penalties, issuing a cease and desist order, or suspending or revoking the insurer’s license. The DOI reports the results of company market conduct examinations [here](#), and reports company enforcement actions [here](#). Consumers or providers can file complaints against insurers [here](#), and the DOI annually reports on complaints filed against insurers [here](#).
- **Appeals:** Under the ACA, insurers must provide enrollees with an internal review of adverse benefit decisions and the right to an external, independent appeal. The DOI certifies independent external review entities.

[Colorado Department of Health Care Policy & Financing \(HCPF\)](#)

Colorado’s Department of Health Care Policy & Financing (HCPF) runs the state’s Medicaid and CHIP programs, and manages the contracts with Regional Accountability Entities (RAEs) that coordinate primary care and behavioral health for Medicaid enrollees. A list of participating RAEs is available [here](#). HCPF conducts reviews of RAEs, including assessments of quality, timeliness, and access to care, as well as conducting site reviews. The agency publishes reports on various performance measures [here](#).

HCPF also contracts with managed care organizations (MCOs), which cover a small share of Medicaid enrollees in Colorado. The agency reviews MCO compliance with provider network adequacy requirements and MHPAEA, conducts site reviews of MCOs, and requires MCOs to administer member experience surveys and provide care quality performance measures.

[Colorado Attorney General](#)

The Colorado Office of the Attorney General has a [Consumer Protection Section](#) that investigates fraudulent activity, and has investigated matters such as fraudulent medical billing activity. Victims of fraud or scams can file reports [here](#). Information about consumer protection cases handled by the attorney general’s office is available [here](#).

Other Sources of Information

Health Insurance Navigators, Agents and Brokers (collectively, “consumer assisters”)
Colorado’s health insurance Marketplace (Connect for Health Colorado) provides grants to local organizations called “Navigators,” or “enrollment assisters,” that help consumers with enrollment, including the process of applying for financial help, and assist consumers with post-enrollment questions. Colorado-based insurance agents and brokers perform similar consumer assistance functions, but they are generally paid on a commission basis. These consumer assisters can be helpful sources of information about health insurance and the challenges consumers face. They can be located through [this page](#) on the Marketplace website.

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