

# Colo. to end ACA exception for 190K people

Brandon Rittiman, KUSA 5:54 p.m. MDT March 13, 2015



(Photo: KUSA)

DENVER - About 190,000 Coloradans will lose access next year to health insurance plans which don't comply with the Affordable Care Act, the Colorado Division of Insurance (DOI) decided.

In March of 2014, President Barack Obama decided to give states the option of allowing people on noncompliant health plans to be grandfathered in by renewing their old plans early, while problems with insurance exchanges were ironed out.

Colorado insurance commissioner Marguerite Salazar opted to do that for 2015, but told 9NEWS on Friday that the exception is no longer needed for plans in 2016, even though Colorado could have continued them an

additional year.

"By delaying it, it doesn't give us a good pathway into full implementation of the ACA," Salazar told 9NEWS. "I feel like we gave people that year, we have a great robust market in terms of health insurance in Colorado."

Salazar said she consulted with Gov. John Hickenlooper (D-Colorado) before making the decision and says she heard passionate arguments for and against ending the noncompliant plans a year earlier than required.

Among the most powerful arguments, she said, came from business people who wanted a stronger risk pool for health insurance in the state.

Republicans think it's foolish not to allow the plans to continue for another year if the Obama administration would have allowed it, especially in light of technical glitches with Connect for Health Colorado, the state insurance exchange, in the last open enrollment which affected [automatic renewals \(/story/news/2015/01/28/glitch-cancels-up-to-3600-colorado-health-plan-renewals/22490665/\)](#) and [subsidy determinations \(/story/news/local/politics/2015/02/12/glitch-makes-colorado-health-plans-more-expensive/23323197/\)](#). 1 of 3

"I think it's horrible," said Senate President Bill Cadman, "They disregarded an opportunity to protect Coloradans."

"I would have expected a waiver to be granted so those people's needs would be put first, not supporting the failed policy of this administration," Cadman said.

"President Obama lied to the American people when he said 'if you like your plan you can keep your plan' and now Colorado families are being forced to bear the burden of that lie," Rep. Mike Coffman (R-Colorado) wrote to 9NEWS. "As someone who signed up for health insurance on the Obamacare exchange, and knows firsthand how terrible the Obamacare coverage is, I am deeply disappointed that thousands of families are being forced to leave the plans they liked."

Sen. Cory Gardner (R-Colorado) said in a press release that he was "appalled" at the decision and urged DOI to reconsider.

Salazar, a non-voting member of the board of Connect for Health, says there's enough time to make the state exchange work better before the next open enrollment period this fall.

"We've got several months now to work out a lot of those systems issues and technological problems," Salazar said. "We're working on those every day."

About 75,000 of the people who would lose the ability to renew their noncompliant plans next year are covered on individual plans, while 115,000 are on plans through work at small businesses.

Cancellation notices will go out to Coloradans covered under grandfathered plans at least 90 days before they end and must include information about ACA-compliant alternatives being offered by the company.

Companies are barred from automatically transferring those customers into compliant plans, DOI officials said.

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June 19, 2015

GORDON J KLINGENSCHMITT

6525 PACKSADDLE CT  
COLORADO SPRINGS CO 80922-1411

Policy # 0060389262

We would like to notify you that your current policy will be discontinued and terminated on 4/30/2016 because Time Insurance Company will no longer offer your current health plan in the State of Colorado.

This termination triggers a special enrollment period which allows you to select a new health plan. You will have sixty (60) 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 to replace the plan that is ending, and you can enroll in a new health benefit plan up to sixty (60) 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.

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](http://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. You can contact Connect for Health Colorado at [www.connectforhealthco.com](http://www.connectforhealthco.com) or toll free at 855-752-6749.

Assurant Health is the brand name for products underwritten and issued by John Alden Life Insurance and Time Insurance Company.

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**Subject:** Health Testimony

**From:** drmaryz@hushmail.com

**Date:** Sat, Jan 30, 2016 8:15 am

**To:** gordon@gordonforcolorado.com

**Cc:** info@gordonforcolorado.com

Honorable Legislators,

Thank you for taking the time to listen to Gordon's bill carefully

I am a Licensed Colorado Physician in practice since 1986 and full time in Colorado since 1999.

Regretfully my schedule no longer permits my presence at such hearings

I appeal to your senses and sensibility in objectively examining what has happened in healthcare in the past few years, the bureaucracy and paperwork has far eclipsed the time we as practitioners are spending treating patients.

In short, there are not enough hours in the day to 'dot every I and cross every t' completing an endless stream of forms that have become health care today

The saddest part is the lack of time to spend with patients, to honor their pain and suffering, to counsel them, to encourage them on their road to health and healing. Hours have become minutes in a relentless system that has

lost its heart and soul.

People we care for realize politics has failed in its efforts to reform health care. No matter who, public or private sector,

people clamor for real reform- reform that puts them first, not paperwork, not profits, not lip service.

The private sector is in shambles. We evaluate patients regularly who can no longer afford their copayments or deductibles,

Every few weeks we encounter a situation where the strain has led the individual to desperation, feeling suicidal, ill, unable to

work in full capacity and unable to afford the now very high deductible. What once was a 250-500 deductible is now 2000-5000,

completely out of range for a hard working middle class individual.

The myth that all is well with Medicaid is just that, a myth. Quietly people are seeing that hard work no longer pays off. They reluctantly

accept Medicaid as their only option, knowing the costs are unsustainable and concerned Medicaid benefits will be short lived. As a practitioner

who cares about the poor and uninsured, it grieves me to think that these benefits will not be available indefinitely. The Colorado Economy is weak,

as it is in other parts of the country,

and it does not take an economist to figure out there will not be enough tax dollars to sustain these programs. I do not like seeing the poor and disenfranchised

deceived and taken advantage of.

I for one would greatly appreciate options that would allow 'opting out' of this failed system. Where we could combine the best of what has worked in the past

and let go of what failed. Health care should be affordable. A Tylenol should not cost hundreds of dollars. Lab tests should not cost thousands. People on Medicaid

should have options to shift to lower cost private plans as we restore Colorado's economy. Any plans to adopt a 'one size fits all' in health care should be scrapped

immediately. People are as unique as their fingerprints and the system has already sunk to 'one size fits all'.

I implore you to carefully consider the looming federal deficit. For a practitioner like myself, making people's health and lives dependent on a debt ridden economy

makes absolutely no sense. It is the equivalent of boarding lives on the deck of the Titanic. While the violins are playing, who is watching for the iceberg ahead?

I respectfully implore each of our legislators, regardless of political party or affiliation to objectively examine the

state of health care today here in Colorado. My responsibility as a physician is to do no harm and to be a voice for my patients. I pray each of you is able to listen and hear the dangers ahead and act with conscience and integrity to save our health care here in Colorado before it is too late.

Respectfully,  
Dr Mary Zennett  
(Mary F Zesiewicz, MD)

Sent using Hushmail

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