

Colorado HealthOP in Liquidation

Questions & Answers

On January 4, 2016, Commissioner Marguerite Salazar was appointed as Liquidator of the Colorado HealthOP (“CO-OP”) by the Denver County District Court pursuant to §§ 10-3-504(1) and 10-3-516(1), (a) - (c) of the Colorado Revised Statutes. The Liquidation Order authorizes the Commissioner, as Liquidator, to liquidate and wind down the business of the CO-OP, and to act in all ways and exercise all powers necessary for the purpose of the Order and the liquidation provisions of Colorado insurance laws.

On November 23, 2015, the CO-OP mailed a Notice of Cancellation to all policyholders informing them that all policies will terminate on December 31, 2015 (if not previously expired). Policyholders will have **12 months from their termination date** to file health insurance claims.

1. Will my claims be paid?

The finding of insolvency triggers the Colorado Life & Health Insurance Protection Association to begin paying the covered claims of the CO-OP up to its statutory limits. The valuation of each claim is determined in accordance with policy provisions and statutory requirements.

Please refer to the Colorado Life & Health Insurance Protection Association website for further information: <http://colorado.lhiga.com/>

2. What if I submit a policy claim incurred in 2015 after my coverage with the CO-OP ends?

All policies terminated on December 31, 2015 (if not previously expired). Claims incurred on or prior to December 31, 2015 (unless your policy was terminated prior to that date) can still be reported. You will have 12 months from your policy’s termination date to file your claims.

3. If I need help with my policy or with a claim, whom should I contact?

The CO-OP’s Member Services department and claims operations will remain fully staffed during the run-off period through December 31, 2016.

The telephone number is 866-915-6619 and the service hours are from 8:00 a.m. to 10 p.m. MST, Monday through Friday.

4. What is a Proof of Claim?

A **proof of claim** is a form used by the creditor to indicate the amount of the debt owed by the debtor on the effective date of the liquidation.

Any payments made by the CO-OP, after the Liquidation date, must be made in accordance with § 10-3-541 of the Colorado Revised Statutes. The Liquidator uses the “proof of claim” process to determine the appropriate class of claims submitted. **Policyholders and their dependents are not required to file a proof of claim for their policy benefits.**



5. How do I file a Proof of Claim?

The Liquidator is in the process of establishing a “proof of claim” process for creditor claims (non-policyholder claims).

For additional instructions on how to obtain and complete the proof of claim form, **please check the Regulatory Services Group website (www.rsgca.org/cohealthop) after March 31, 2016.**

6. Company Contact Information:

Brokers, employees, and all other claimants: 720-627-8900

Policyholders: 866- 915-6619

The customer service representatives are available from 8:00 a.m. to 10 p.m. MST, Monday through Friday.