

Request for demographic information

Colorado Option Standardized Plan

To help meet the requirements of [Colorado law](#), we are requesting that all members with a Rocky Mountain Health Maintenance Organization Colorado Option Standardized Plan provide us with the following demographic information:

- Race and ethnicity
- Sexual orientation and gender identity
- Ability status

Submitting this information to us is voluntary.

If you choose not to submit this information when it is requested from you, please select the option that reads: “I choose not to disclose my demographic information.”

Your information is confidential

Demographic data collected will be confidential and deidentified. Rocky Mountain Health Maintenance Organization and the state of Colorado will keep personally identifiable information confidential and won't disclose any information without your written consent.

How the state will use this information

The state of Colorado will use this information to better understand the opportunities for improving racial health equity, reducing health disparities for covered persons who experience higher rates of health disparities and inequities and providing aggregate information regarding the demographic diversity of Rocky Mountain Health Maintenance Organization's covered population.

Questions?

If you have any questions, please contact (888) 809-6539.