



COLORADO DEPARTMENT OF HEALTH CARE POLICY & FINANCING

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 Bill Ritter, Jr., Governor • Joan Henneberry, Executive Director

Health Reform Implementation Board Meeting

August 10, 2010
 10:00 a.m. – 11:30 a.m.
 225 E. 16th Ave.
 Denver, CO 80203

ATTENDEES	Joan Henneberry, Lorez Meinhold, Jo Donlin, Lauren Plunkett, Guy Mellor, Craig Welling, Jillian Jacobellis, Ned Calonge, Clarke Becker (phone)
RECORDER	Teresa Manocchio

CALL TO ORDER	
Meeting was called to order at 10:00 a.m. by Joan Henneberry.	

AGENDA ITEM	Communications Staff
DISCUSSION	<p>Lorez passed out an updated outreach chart, with the most recent presentations and groups spoken to. For communications, she discussed hiring a part time person to help with writing an implementation plan.</p> <p>Check the Governor's Health Reform Web site or the Department of Health Care Policy and Financing's Implementation Board page for updates, meeting times, locations, and additional materials.</p>

AGENDA ITEM	Planned Outreach Meetings
DISCUSSION	There are several meetings scheduled, in various locations: Ft. Collins, Glenwood Springs, etc. Anyone who would like Joan or Lorez to come and speak with their group should contact them.

AGENDA ITEM	Grant Updates
DISCUSSION	<p>Division Of Insurance (DOI):</p> <ul style="list-style-type: none"> • Will hear soon about Rate Review, which will be \$1 million. It was supposed to be delivered August 7, so possibly today. Meetings are in place to move forward quickly when received. • Consumer Assistance grant: requires the agency to report back on efficiency and effectiveness, and is a 1-year, \$475,000 to \$2 million grant. Sustainability once the year is up is the biggest concern. Some states already have large ombudsman programs, but does Colorado have the capacity in its community to sustain? Due September 10, 2010. Jo Donlin says a decision about a lead agency needs to be made this week, or the application cannot proceed. • Joan stressed the importance of saying no to grant opportunities when it is simply too much work to take on, and if Colorado cannot deliver then it is perfectly rational to decline certain grants. The Consumer Assistance grant needs to be far enough along by the end of August to go to the Governor; grant

ready to present to Governor and consumers by August 22.

Colorado Department of Public Health and Environment (CDPHE):

- Nurse Home Visitation grant submitted, Primary Care grant submitted, CDC supplemental grants are either in the process or already submitted, and two public health infrastructure grants were submitted to the Office of Planning and Partnership; one for \$300,000 and one for \$700,000 to \$1.2 million.
- Health Facilities grant was submitted yesterday, August 9, and the Disease Control and Epi grants are moving forward. PPACA amended title V, aimed at reducing teen pregnancy. CDPHE and the Department of Education will likely move forward; due August 31.
- Workforce: Primary Care grants submitted, and waiting for FOA on others. Liza Fox-Wylie announced that a few of the nursing schools received grants last week, and suggested that someone look into what PA programs are doing through community colleges.

Colorado Department of Health Care Policy and Financing (HCPF):

- Applying for Money Follows the Person planning grant, with proposal due September 1, 2010 and implementation plan due in January 2011. Major stakeholder consensus is needed to determine how to use these funds to help people make the transitions out of institutions. There has been extensive collaboration with other agencies and consumers to develop an Olmstead plan for Colorado, which may serve as an excellent starting point for Money Follows the Person.
- Applying for exchange planning grant, which is due September 1, request any amount up to \$1 million. Most of the questions will not be answered fully in the planning grant application, but will likely wait for the full implementation plan. The Board needs to decide who will be the lead agency to take the planning grant. Suggestions include HCPF, DOI or the Governor's Office. Dr. Calonge pointed out advantages in all areas, and suggests that the benefit design expertise of HCPF makes it a likely administrator of the planning grant.
- The changes in the Governor's Office could make grant administration problematic. The planning grant must be received by a state agency, but can be sub-contracted out to a foundation or other non-profit, as a third-party administrator. The third party administrator would remain under the oversight of the Board, as they could administer the grant but not make governance or policy decisions. Delays in procurement possibly can be avoided by writing the third part administrator in to the grant from the beginning.
- Where the Exchange ultimately resides is up to the legislature in 2011.

AGENDA ITEM	Legislative Meetings
DISCUSSION	There will be briefings for legislators, likely at the end of August for House and Senate Democrats, to keep them up to speed on progress of the Health Insurance Exchange forums.

AGENDA ITEM	Other
DISCUSSION	Meaningful Use Requirements (MUR): <ul style="list-style-type: none">• The public comment period has resulted in four proposed criteria, but CDPHE is also interested in additional criteria: immunization registries, newborn screening, a Body Mass Index (BMI) screening which might possibly raise the profile of obesity to a state level, reportable public health disease and

	<p>syndromic surveillance.</p> <ul style="list-style-type: none"> • If they cannot be included in national requirements, Colorado may still be able to go a step further – there are narrowly defined state options available. Could possibly be included in CDPHE’s legislative agenda for 2011. <p>Benefit Changes:</p> <ul style="list-style-type: none"> • Flex Spending Account (FSA) benefits have changed, and will be implemented January 1, 2011 because of the fiscal year: over the counter drugs will no longer be eligible for flex spending. • Extension of coverage to children up to 26 years will be the biggest change, and goes in to effect on July 1, 2011 (the first day of the next planning year after September 23, 2010). The issues of who may be grandfathered are different than expected, and it is unsure if certain scenarios apply.
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AGENDA ITEM	Public Comment
DISCUSSION	<p>Thank you for your work, and we are also diligently working on the issues: minimizing adverse selection, ensuring choice, etc.</p> <p>Some decisions will be made about medical loss ratios soon, and the NAIC is making recommendations and decisions in Seattle: how much money goes in to which bucket for what kinds of services, and so on. The 80% rule states that 80% of each dollar goes towards medical care, and the key deadline is getting the NAIC members to agree on what qualifies as medical care, hopefully by next week.</p> <p>Colorado law sets standards at 65%, 70% and 75%, but the 80% is effective as of January 1, 2011 so legislation in the 2011 session will not be required.</p>

MEETING ADJOURNED	Meeting adjourned at 11:25 a.m. by Joan Henneberry.
APPROVAL OF MINUTES	
NEXT MEETING	<p>September 14, 2010 10:00 a.m. – 11:30 a.m. Department of Health Care Policy and Financing 225 E. 16th Ave. Denver, CO 80203 1st Floor Conference Room</p>