

Colorado Department of Health Care Policy & Financing



SMART Act Presentation

November 6, 2013



Our Mission:

Improving health care access
and outcomes for the **people**
we serve while demonstrating sound
stewardship of financial resources



Presentation Agenda

- Department Overview
- FY2014-15 Budget Overview
- Strategic Plan
- Accountable Care Collaborative & HB13-1196 Update
- Budget Requests
- Legislative Agenda
- Updates



What We Do

The Department of Health Care Policy and Financing (HCPF) is the State agency responsible for the administration of:

- Medicaid
- Child Health Plan *Plus* (CHP+)
- Other health care and long-term services and supports for eligible low-income families, children, older persons, and persons with disabilities



Medicaid & CHP+

Medicaid

- Medicaid is a program that provides health coverage for low-income pregnant women, parents, single adults, children, persons with disabilities, and seniors.
- Receives approximately 50% of its funding from the federal government

Child Health Plan *Plus* (CHP+)

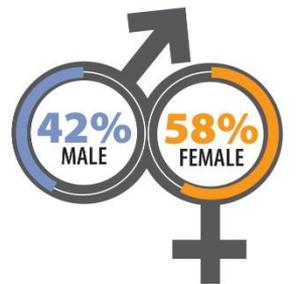
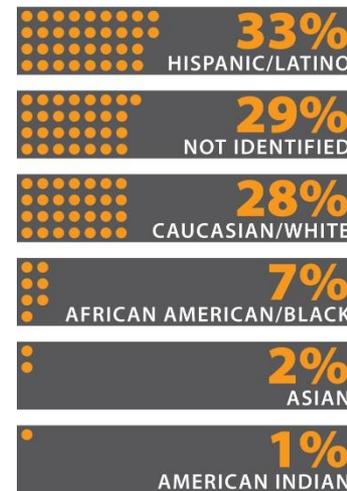
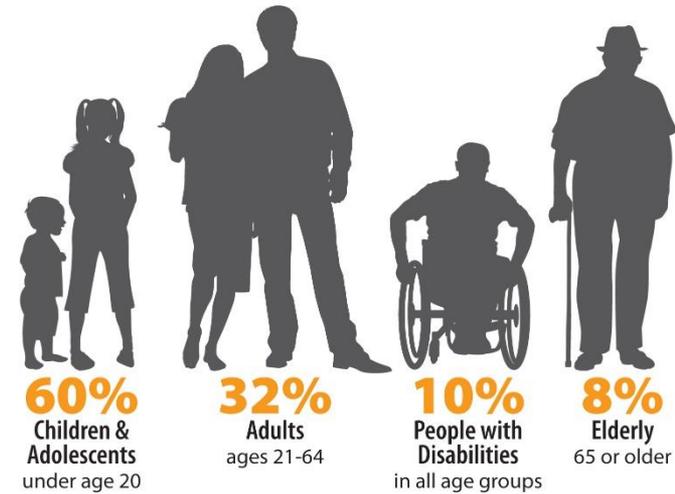
- CHP+ is affordable health insurance for Colorado children 18 and under and pregnant women
- Receives approximately 65% of its funding from the federal government



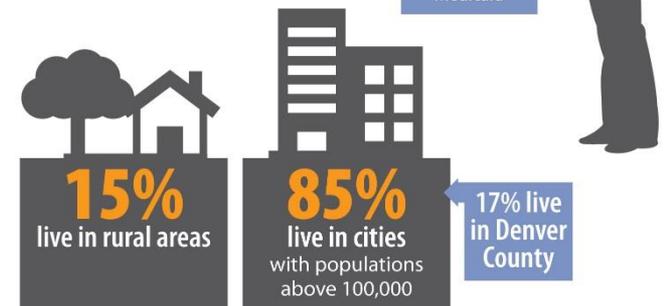
Who We Serve

As of September 2013:

- 744,000 Medicaid clients
- 68,000 children and pregnant women in CHP+
- 56% of Medicaid clients are children age 20 and under

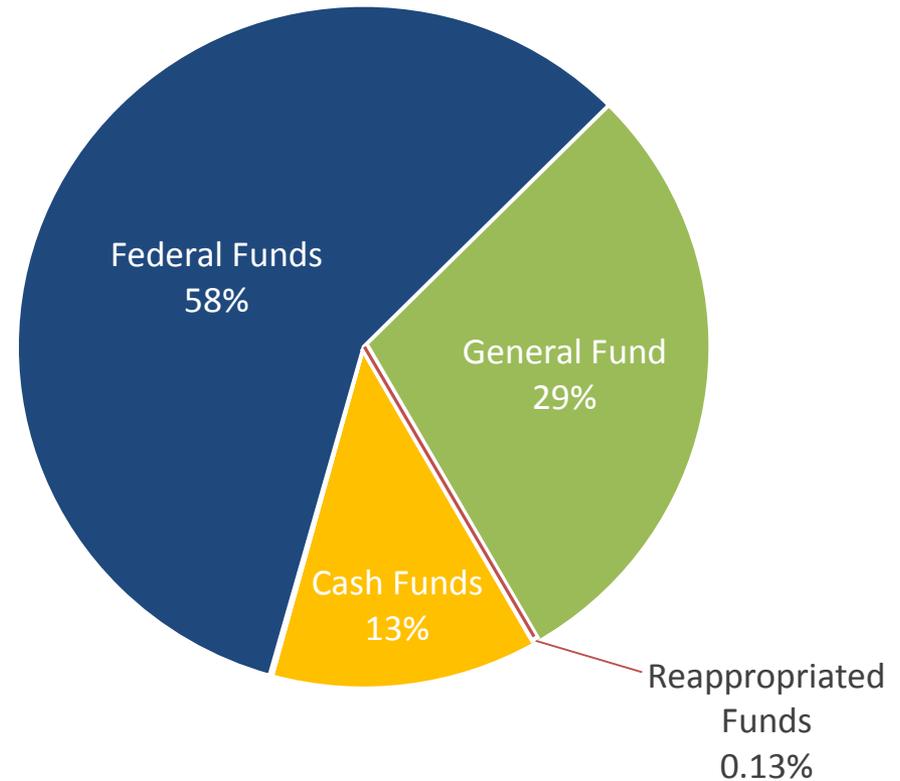


MORE THAN 1/3 of babies in Colorado are born to mothers who are on Medicaid

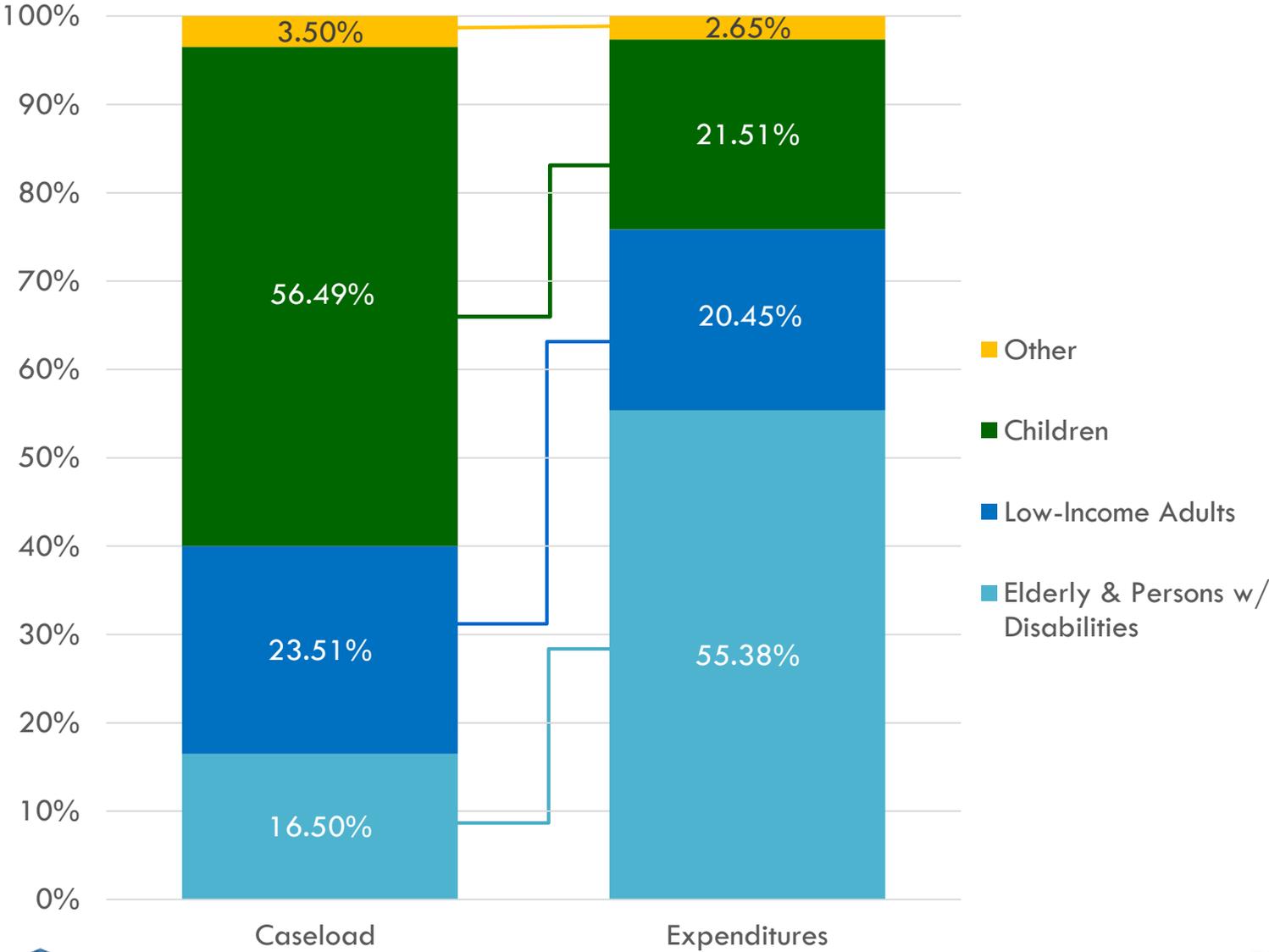


HCPF's FY2014-15 Total Budget Request

- \$7.55B Total Funds
- \$4.39B Federal Funds
- \$1.73B General Fund
- \$9.68M Reappropriated Funds
- No FTE Requested



FY2012-13 Medicaid Caseload and Expenditures



Promoting prevention and wellness

- SB13-200 (Aguilar/Ferrandino) Medicaid Expansion will increase access to health care for over 160,000 Coloradans
- SB13-242 (Nicholson/Primavera) Adult Dental Benefit in Medicaid

Expanding Coverage, access and capacity

- Expanded Substance Use Disorder Benefit
- FY13-14 and FY14-15 Across the board provider rate increase
- Expand access to specialists through telemedicine

State of Health

Improving health system integration and quality

- FY2014-15 budget request Health Information Technology
- HB13-1068 (Young/Roberts) Allow unannounced on-site inspections for Medicaid Providers
- HB13-1314 (JBC) Transfer of DDD from DHS to HCPF will help realign and simplify waiver system
- Customer Service Technology Improvement

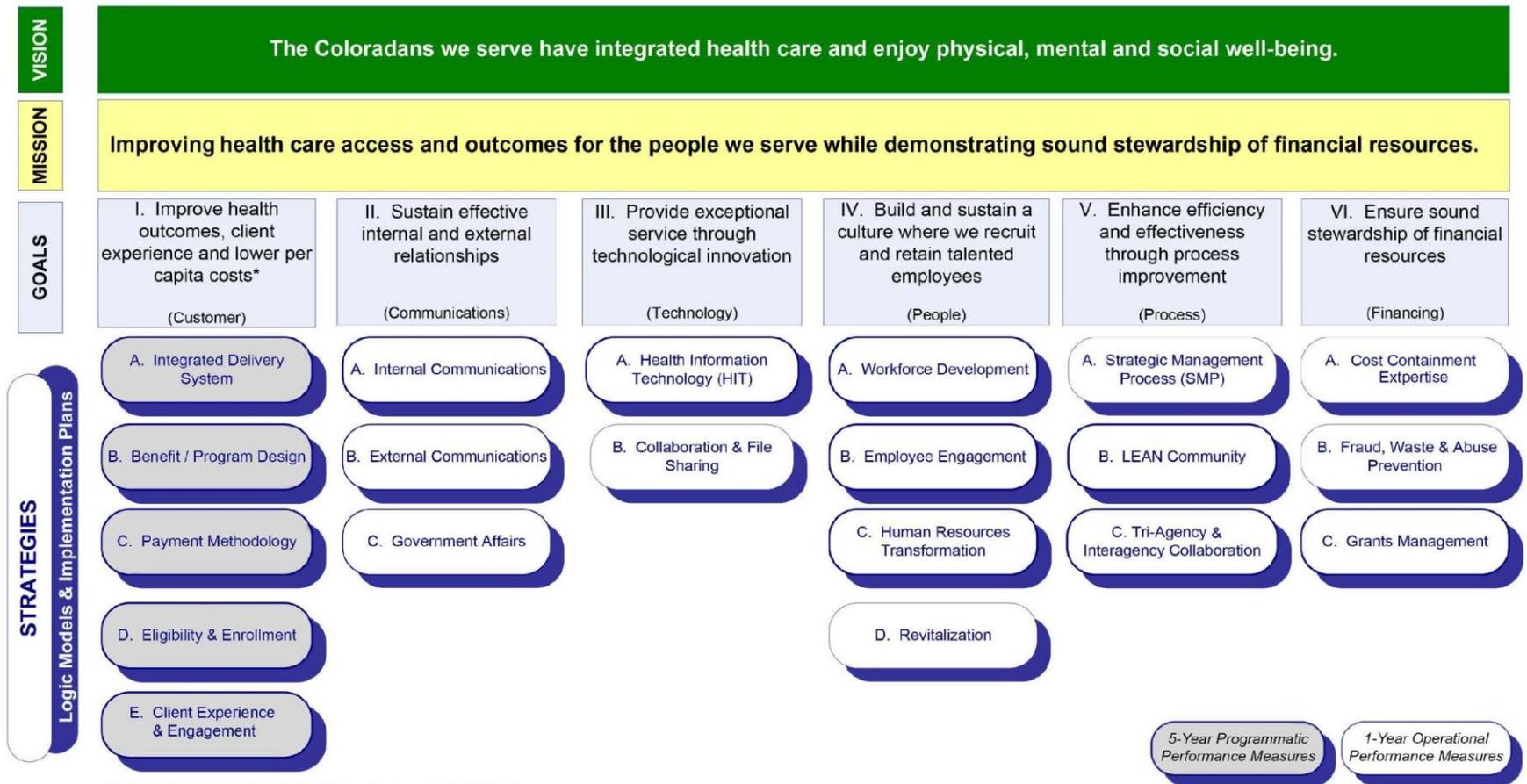
Enhancing value and strengthening sustainability

- HB12-1339 (Becker/Lambert) CBMS Allocation for system rebuild and redesign
- HB12-1281 (Gerou & Young/Steadman & Roberts) Payment Reform
- HB12-1054 (Fields/Boyd) Simplification of Procurement Process
- HB13-1068 (Young/Roberts) Unannounced Inspections
- MMIS re-procurement and rebuild





Department of Health Care Policy & Financing 5-Year Strategy Map

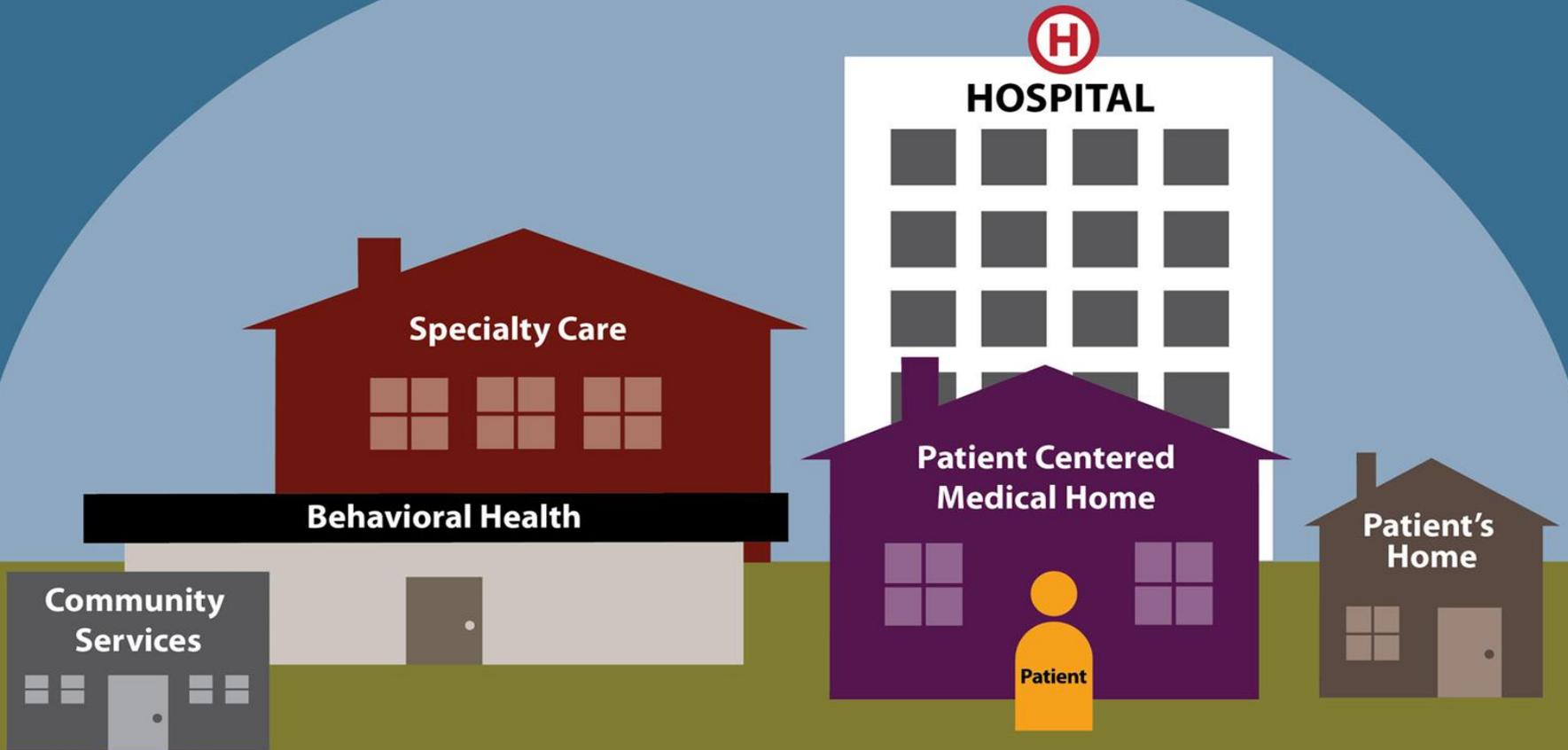


**Adapted from the Institute for Healthcare Improvement's Triple Aim.*



Accountable Care Collaborative (ACC)

Care Coordination



Data and Analytics

Accountable Care Collaborative

2013 Goals

Enrollment
200,000

Shared savings
Implementation

Medicare-Medicaid
Enrollees Implementation
with CMS approval

HB12-1281
Implementation

2013 Results

By June 2013, enrollment at 352,236

Implementing shared savings. \$1.1M given to Providers and RCCOs for meeting performance metrics

Submitted implementation plan in May 2013. Working with CMS on implementation

Rocky Mountain Health Plans pilot project selected in competitive process. Pilot will begin in 2014



ACC Annual Report Highlights



**Hospital
Readmissions**



**High Cost
Imaging**



**ER
Visits**

FY2012-13 Net Savings: \$6 Million

HB13-1196 (Stephens/Newell) Report Waste Prevention in ACC

Efforts in place to reduce avoidable, duplicative, variable and inappropriate health care resources

- Technology
- Key Performance Indicators
- Care Coordination



Budget Requests and Legislative Agenda



Health Information Technology

- Health information about Medicaid clients is fragmented
- Electronic health records will improve care by allowing providers to make better-informed decisions
- The Department would coordinate with OIT to build interface with CO's existing health information technology network
- Unique opportunity to build innovative health information resource with minimal state funds



\$1.05M General Fund
\$4.69M Federal Funds

Improving Access to Services for Persons with Intellectual and Developmental Disabilities

Eliminate the Supported Living Services Waiting List

\$15M General Fund - \$30M Total Funds

- 1,526 people on the waiting list for the HCBS-SLS waiver
- Request would cover 1,526 enrollments and increase the services plan limits by 20%

Additional Spots to Reduce the Developmental Disabilities Waiting List

\$1.4M General Fund - \$2.8M Total Funds

- Additional spots need funding to cover youth transitioning from child programs and emergency placements
- Request funds 186 slots of the 2,011 on the waiting list for the HCBS-DD waiver

Restore Funding for Family Support Services

\$3.4M General Fund - \$3.4M Total Funds

- 5,945 individuals with disabilities are on the waiting list for FSS
- Request would restore funding to FY2009-10 levels



Strategically Increasing Provider Rates

- Adequate and appropriate reimbursement ensure client access to health care
- Request builds on last year's provider rate increases
- 1% across the board increase to eligible providers
- Targeted .5% rate increase would allow the Department to incentivize outcomes instead of over-utilization



\$20.07M General Fund
\$36.77M Federal Funds



2014 Legislative Agenda

- Alignment of Medicaid Eligibility Categories with Federal Law
- Clarification of Nursing Facility Rate Adjustments
- Continue DHS/HCPF Transfer Authority



Updates



PEAK/Expansion Update

- The Colorado Program Eligibility and Application Kit (PEAK) website allows Coloradans to apply for public assistance benefits electronically
- The website is jointly managed by OIT, HCPF, and DHS
- Since October 1st:
 - PEAK website receives an average of 3,303 hits per day
 - Approximately 28,827 new applications created online through PEAK
 - We have identified 34,168 individuals (20%) of the 160,000 individuals that will be eligible for Medicaid expansion starting January 1, 2014



HB12-1281: Payment Reform Update

- HB12-1281 (Rep. Gerou, Rep. Young & Sen. Steadman, Sen. Roberts) allowed the Department to look at various payment models to improve the value of services while reducing costs
- In July, the Department selected a global payment pilot project with Rocky Mountain Health Plans (RCCO 1 – Western Slope)
- The RMHP proposal was selected because it is innovative and provides the opportunity to pay for care using a global payment that is comprehensive and integrates physical health, behavioral health and substance abuse services
- Over the next year, the Department will work with RMHP to implement the proposed payment reform pilot program that will begin on or before July 1, 2014



Update on DDD Transfer to HCPF

- HB13-1314 (JBC) authorized the transfer of the Division for Developmental Disabilities to HCPF from DHS
- The official administrative transfer will take place on March 1, 2014
- In July, the JBC approved funding to move the DDD staff (34 FTE) from the Ft. Logan campus to co-locate with HCPF long-term services and support staff
- HCPF and DHS have developed multiple work groups to ensure a smooth transition



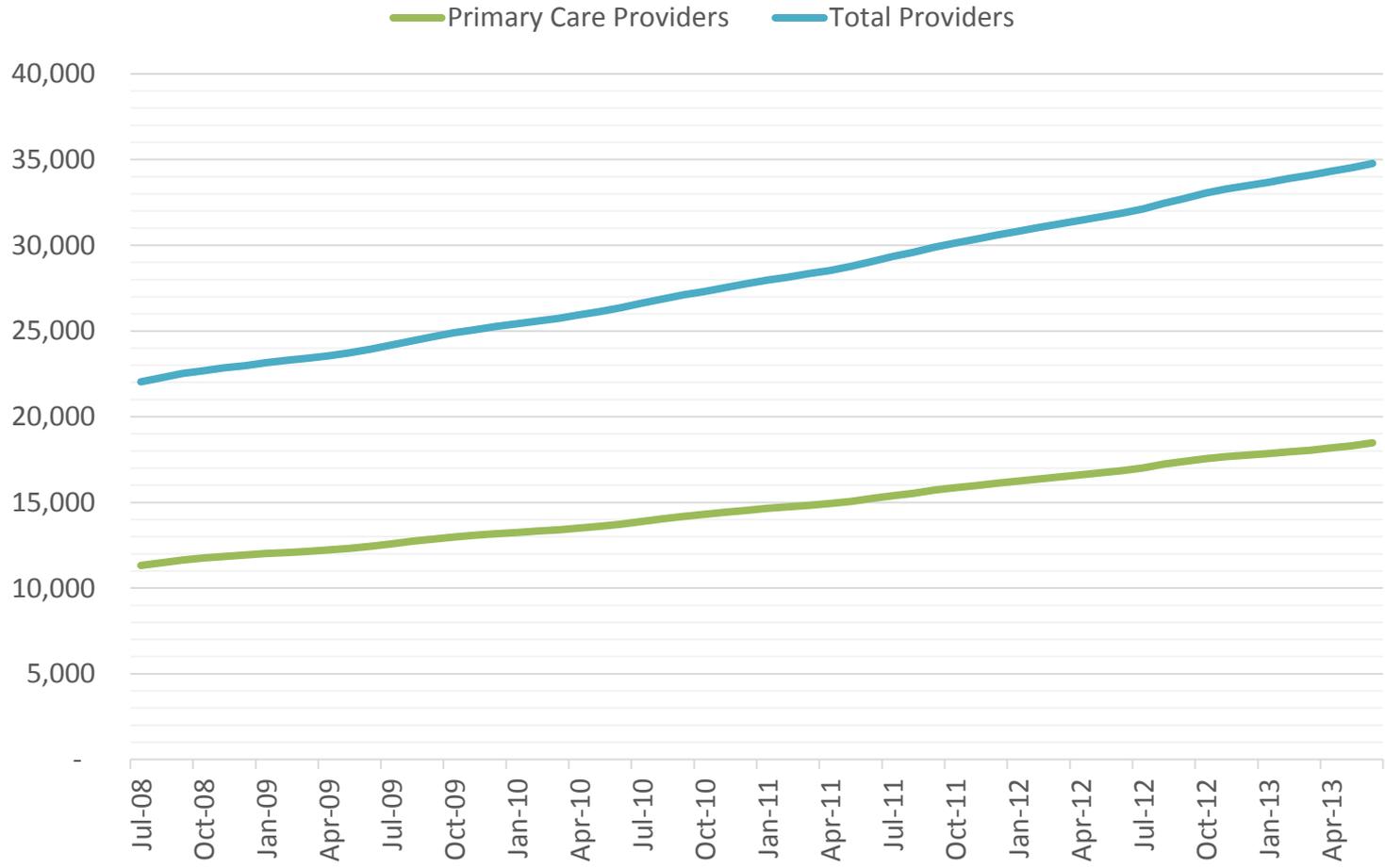
Community Living Advisory Group

- Created through Executive Order summer 2012
- Charged with recommending changes to the long-term services and supports system to help meet the growing needs of people with disabilities and aging adults
- Members represent a diverse group of stakeholders
- General Assembly represented by former Sen. Betty Boyd (Chair), Sen. Aguilar, Sen. Kefalas, Rep. Levy, Rep. Gerou
- Recommendations expected by September 2014



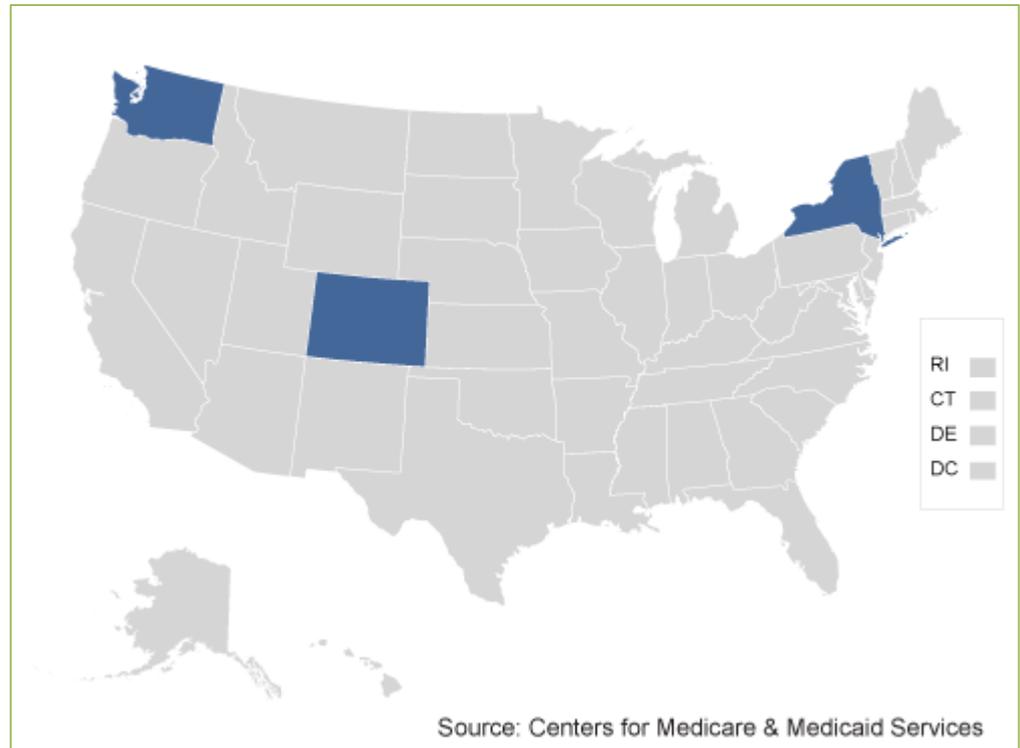
Provider Network

Enrolled Providers FY2009 - FY2013



State Innovation Models (SIM) Grant

- The SIM Initiative supports the development and testing of state-based models for payment and health care delivery system transformation
- HCPF received a \$2 million grant to create a State Health Innovation Plan
- The plan will describe Colorado's overall strategy to achieve better health, better patient experiences and lower costs
- HCPF will submit its plan in November 2013



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Questions?

