



COLORADO DEPARTMENT OF HEALTH CARE POLICY AND FINANCING

A Fact Sheet

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BRI-1 Prevention and Benefits for Enhanced Value

Request: The Department requests an increase of \$118,359, with a reduction of \$11,201 General Fund in FY 2010-11, and an increase of \$117,276 with a reduction of \$15,077 General Fund in FY 2011-12, in order to 1) consolidate utilization review contracts as the first step towards development of a comprehensive evidence guided utilization review program; 2) an expanded set of dental procedures to be performed by dental hygienists; and, 3) improved non-emergency medical transportation policies.

Summary of Request FY 2010-11	Total Funds	General Fund	Cash Funds	Federal Funds
Total Request	\$118,359	(\$11,201)	(\$1,672)	\$131,232

Summary of Request FY 2011-12	Total Funds	General Fund	Cash Funds	Federal Funds
Total Request	\$117,276	(\$15,077)	(\$2,251)	\$134,604

Highlights: Through the Prevention and Benefits for Enhanced Value request, the Department would generate service efficiencies while improving the quality of service for clients through a series of initiatives focused on enhancing quality and health outcomes: 1) Consolidation of Current Utilization Review Functions; 2) Expanded Procedures for Dental Hygienists; 3) Non-Emergency Medical Transportation Policies Reform.

1. The Department is seeking to take a first step in transitioning to evidence guided utilization review. The Department's movement towards evidence guided utilization review reform builds upon the proven efforts of other states, Medicare, and advanced commercial plans. The approach focuses on four core strategies:
 - Stabilize medical costs by adopting best practices in medical review as developed by other states that have successfully contained growth in medical spending.
 - Enhance access to information to enable rapid cost-containment interventions based on utilization trends, cost modeling, event notification, provider profiling, and client health status.
 - Engage providers through streamlined and automated medical review, profiling, education, and incentives.
 - Empower clients to access preventive care services and to limit high-cost services in a responsible way.

The first step in this transition is to consolidate current acute care utilization reviews. Utilization review can better be handled by a single contractor, and simultaneously produce a savings to the State's General Fund by achieving a greater federal matching percentage (FMAP) by contracting to a single Quality Improvement Organization (QIO).

2. The Department is seeking funding to expand the list of available procedures that can be performed by dental hygienists. Currently Colorado Medicaid allows unsupervised/independent dental hygienists to bill nine procedure codes. SB 09-129 now allows unsupervised/independent hygienists in Colorado to perform an additional seventeen diagnostic, preventive and periodontal procedures related to:
 - Dental hygiene assessment;
 - Dental hygiene diagnosis;
 - Dental hygiene treatment planning for dental hygiene services;
 - Identifying dental abnormalities for immediate referral to a dentist (study casts, radiographic and x-ray survey); and
 - Administering fluoride, fluoride varnish, antimicrobial solutions, and antimicrobial agents.
3. This request would expand non-emergency medical transportation (NEMT) services to include client transportation to durable medical equipment (DME) providers for scheduled repairs. The Centers for Medicare and Medicaid Services (CMS) informed the Department, through a series of emails in July 2009, that providing this service is necessary in order to remain in compliance with federal regulations

For more information about this Department and its programs, please call Ginny Brown at 303-866-3972 or Nicole Storm at 303-866-3180.

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