

Stakeholder Comment Summary

ED 13-03-19-A

Revision to the Executive Director of the Department of Health Care Policy and Financing Rule Concerning All-Payers Claims Database,.10 CCR 2505-5 Section 1.200.1

**THE FOLLOWING INDIVIDUALS AND/OR ENTITIES WERE CONTACTED, INFORMED THAT THIS
RULE MAKING WAS PROPOSED, INVITED TO DISCUSS THE PROPOSED RULE WITH STAFF
AND/OR TO OFFER COMMENTS:**

CIVHC as APCD Administrator sent notice of the passage of House Bill 1015 which allowed the APCD to collect small group claims data. On March 12, 2013 CIVHC informed Colorado Association of Health Plans of passage of the Bill and the start of the Rule Change to delete the exclusion of small group plans. Stakeholders were notified as follows:

- March 18, 2013 CIVHC sent notice to all submitters that House Bill 1015 had passed
- March 26, 2013 Data submitters were invited to a webinar to review the changes in submissions guidelines and the addition of the small group plans.
- April 8, 2013 CIVHC sent notice to the submitters that the paperwork for the Rule change had been filed and that a Public Rule Review Meeting would be held April 22.
- April 17 and 18, 2013 CIVHC hosted two webinars. Representatives from 18 data submitters attended the webinars. Participants were presented the information on the Rule change and given the opportunity to discuss the Rule.
- On April 18, 2013 CIVHC sent the submitters a reminder of the Public Rule Review Meeting to be held April 22, 2013.

The following chart displays companies' participation in the review and discussion process:

Data Submitter	Webinar Attendee	One on One Meeting with CIVHC	Submitted Comments to APCD
Aetna	√		
American Enterprise	√		
Assurant	√		
Cigna	√		
Colorado Access	√		
Colorado Association of Health Plans			
ColoradoChoice			
CVS/Caremark	√		
Denver Health	√		
HealthMarkets	√		
Humana	√		
Kaiser Permanent	√		
Optum/United	√		

Physicians Mutual	√		
Rocky Mountain Health Plan	√		
State Farm	√		
US Health Group	√		
United	√		
Wellcare	√		
Wellpoint	√		

COMMENTS WERE RECEIVED FROM STAKEHOLDERS ON THE PROPOSED RULE:

YES

NO

IF YES, PLEASE SUMMARIZE AND/OR ATTACH THE FEEDBACK YOU RECEIVED.

Title of Rule: Revision to the Executive Director of the Department of Health Care Policy and Financing Rule Concerning All-Payers Claims Database,10 CCR 2505-5, Section 1.200.2B

Rule Number: ED 13-03-19A

Division / Contact / Phone: Joel Dalzell 303.866.3618 / Tracey Campbell 720.242.7683

STATEMENT OF BASIS AND PURPOSE

1. Summary of the basis and purpose for the rule or rule change. (State what the rule says or does and explain why the rule or rule change is necessary).

10 CCR 2505-5 contains the rules for the administration of the All-Payers Claims Database. Section 1200.2 B "Medical claims data and pharmacy files shall exclude small group plans as defined in C.R.S. 10-16-102(42)" With the signing of House Bill 1015, the All-Payers Claims Database can accept Small Group data. Under this amendment 1200.2 B will be deleted from the rule 1.200 All-Payers Claims Database 10 CCR 2505-5.

2. An emergency rule-making is imperatively necessary

to comply with state or federal law or federal regulation and/or

for the preservation of public health, safety and welfare.

Explain:

3. Federal authority for the Rule, if any:

4. State Authority for the Rule:

25.5-1-108, C.R.S. (2012);
25.5-1-204,C.R.S(2010) and 12.5-1-205, C.R.S. The authority for this amendment is created by the repeal of C.R.S. 10-16-104 (5)(d) (I)

Final Adoption **05/07/2013**

Proposed Effective Date **06/30/2013**

DOCUMENT #01

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REGULATORY ANALYSIS

1. Describe the classes of persons who will be affected by the proposed rule, including classes that will bear the costs of the proposed rule and classes that will benefit from the proposed rule.

This amendment affects the small group health plans that are required to submit data to the All-Payers Claims Database ("APCD"). The revisions will benefit all Colorado residents through improved information about health care cost and utilization.

2. To the extent practicable, describe the probable quantitative and qualitative impact of the proposed rule, economic or otherwise, upon affected classes of persons.

Many of the small group market health plans are associated with large and individual market plans that are already submitting data to the APCD. These entities may need to make adjustments to the files they are currently submitting to capture small group subscribers. At least one small group health plan is a new data submitter. The APCD will provide support and assistance throughout the data testing and start up process.

3. Discuss the probable costs to the Department and to any other agency of the implementation and enforcement of the proposed rule and any anticipated effect on state revenues.

HCPF designated the Center for Improving Value in Health Care, a private nonprofit organization, as the APCD Administrator. No state funds were appropriated for this project. The Department does not expect to incur additional costs. This project does not affect state revenues.

4. Compare the probable costs and benefits of the proposed rule to the probable costs and benefits of inaction.

With the addition of small group data, the APCD will expand its capacity to support reporting and analysis about health care cost and utilization for all Coloradans. Robust data ensures that reports are credible and representative of Colorado's health care environment.

5. Determine whether there are less costly methods or less intrusive methods for achieving the purpose of the proposed rule.

The purpose of the APCD is to provide analytical tools for policy makers, health care professionals, health plan carriers, and consumers. The submission of small group will provide the APCD a more robust picture of healthcare in Colorado.

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6. Describe any alternative methods for achieving the purpose for the proposed rule that were seriously considered by the Department and the reasons why they were rejected in favor of the proposed rule.

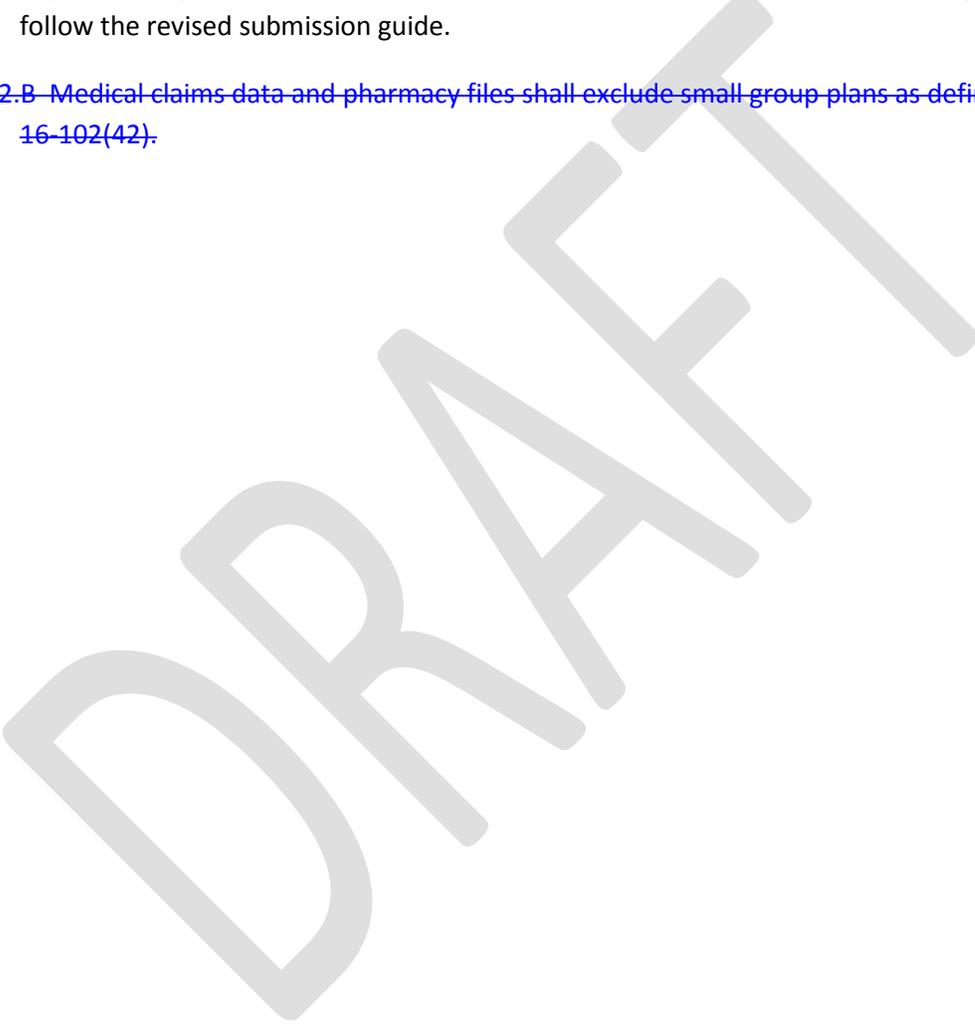
Alternative data collection models create a greater burden on data submitters and the APCD without increasing the quality and accuracy of the data.

1 | **1.200.2 Reporting Requirements**

2 | 1.200.2.A Payers shall submit complete and accurate eligibility data files, medical and pharmacy claims
3 | data files and provider files to the APCD pursuant to the submission guide. The administrator
4 | may amend the submission guide and shall provide notice of the revisions to payers. Any
5 | revision to the submission guide will be effective only when incorporated into this rule and
6 | issued in compliance with the requirements of C.R.S. § 24-4-103(12.5). Reports submitted 120
7 | days following the effective date of the revision of this rule and the submission guide shall
8 | follow the revised submission guide.

9 | ~~1.200.2.B Medical claims data and pharmacy files shall exclude small group plans as defined in C.R.S. 10-
10 | 16-102(42).~~

11 |
12 |



NOTE: This bill has been prepared for the signatures of the appropriate legislative officers and the Governor. To determine whether the Governor has signed the bill or taken other action on it, please consult the legislative status sheet, the legislative history, or the Session Laws.



HOUSE BILL 13-1016

BY REPRESENTATIVE(S) Gardner, Conti, Fields, Gerou, Ginal, Hamner, Kagan, Labuda, Landgraf, Lawrence, Lebsock, Lee, McLachlan, Mitsch Bush, Moreno, Murray, Pabon, Pettersen, Priola, Scott, Stephens, Williams, Wright, Saine;
also SENATOR(S) Jahn, King, Roberts.

CONCERNING THE DISTRIBUTION TO BENEFICIARIES OF AMOUNTS IN PAY-ON-DEATH (POD) FINANCIAL INSTITUTION ACCOUNTS PURSUANT TO WRITTEN DESIGNATION IN THE RECORDS OF THE FINANCIAL INSTITUTION.

Be it enacted by the General Assembly of the State of Colorado:

SECTION 1. In Colorado Revised Statutes, 15-15-212, **amend** (2) (b) as follows:

15-15-212. Rights at death. (2) In an account with a POD designation:

(b) (I) On death of the sole party or the last survivor of two or more parties, sums on deposit belong to the surviving beneficiary or beneficiaries. If two or more beneficiaries survive, sums on deposit belong to them IN SUCH PROPORTIONS AS SPECIFIED IN THE POD DESIGNATION OR, IF THE POD

Capital letters indicate new material added to existing statutes; dashes through words indicate deletions from existing statutes and such material not part of act.

DESIGNATION DOES NOT SPECIFY DIFFERENT PROPORTIONS, in equal and undivided shares; and there is no right of survivorship in the event of death of a beneficiary thereafter.

(II) IF THERE ARE TWO OR MORE BENEFICIARIES, AND IF ANY BENEFICIARY FAILS TO SURVIVE THE SOLE PARTY OR THE LAST SURVIVOR OF TWO OR MORE PARTIES, SUMS ON DEPOSIT BELONG TO THE SURVIVING BENEFICIARIES IN PROPORTION TO THEIR RESPECTIVE INTERESTS AS BENEFICIARIES UNDER SUBPARAGRAPH (I) OF THIS PARAGRAPH (b).

(III) If no beneficiary survives, sums on deposit belong to the estate of the last surviving party.

(IV) NEITHER THE PROVISIONS OF SECTION 15-11-706 NOR THE PROVISIONS OF ANY OTHER ANTI-LAPSE STATUTE APPLY TO THE DISPOSITION OF AN ACCOUNT WITH A POD DESIGNATION.

SECTION 2. Effective date - applicability. This act takes effect upon passage and applies to all accounts with a pay-on-death (POD) designation, whether created before or on or after the applicable effective date of this act.

SECTION 3. Safety clause. The general assembly hereby finds,

determines, and declares that this act is necessary for the immediate preservation of the public peace, health, and safety.

Mark Ferrandino
SPEAKER OF THE HOUSE
OF REPRESENTATIVES

John P. Morse
PRESIDENT OF
THE SENATE

Marilyn Eddins
CHIEF CLERK OF THE HOUSE
OF REPRESENTATIVES

Cindi L. Markwell
SECRETARY OF
THE SENATE

APPROVED _____

John W. Hickenlooper
GOVERNOR OF THE STATE OF COLORADO