



**CO L O R A D O**

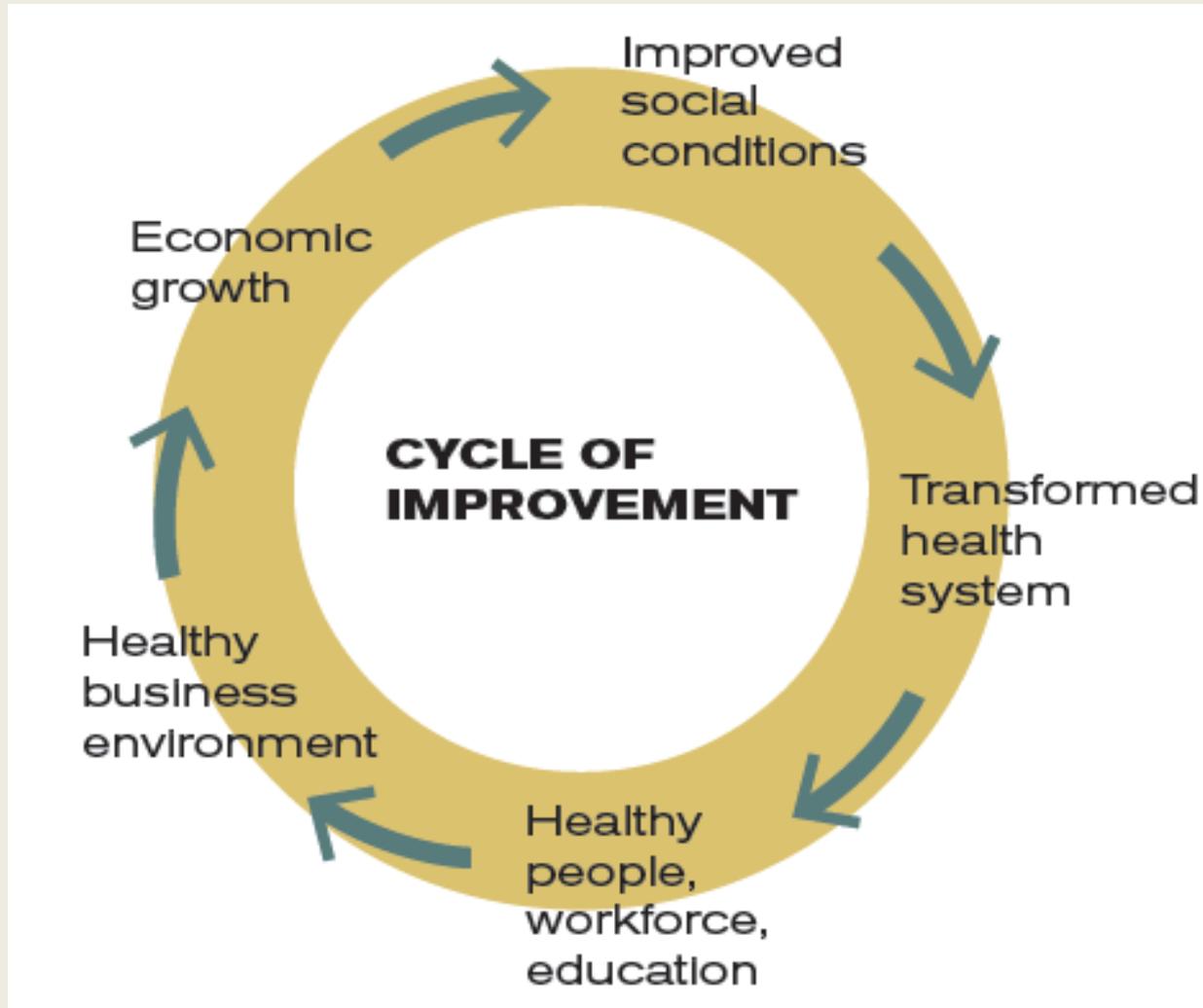
**Department of Public  
Health & Environment**

SMART Act Hearing  
Joint Health Committees

January 6, 2015

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# Our Vision: Colorado is the Healthiest State



# Setting the Stage

Affordable Care Act

Winnable Battles

Medicaid  
Accountable Care  
Collaborative

Integrated Care  
(State Innovation  
Models Funding  
Initiative)

The State of Health

Foundation  
Initiatives &  
Collective Impact

Safe and Clean  
Food, Water, Air

And many more...

The State of Health

COLORADO'S  
COMMITMENT  
TO BECOME THE  
HEALTHIEST STATE

Office of the  
Attorney General  
April 2013

Full report:  
[www.colorado.gov/stateofhealth](http://www.colorado.gov/stateofhealth)

# Our Framework for Progress

## **Promoting Prevention & Wellness**

*helping individuals stay healthy  
or become healthier*

## **Expanding Coverage, Access & Capacity**

*ensuring individuals can access care  
at the right time and the right place*

## **Improving Health System Integration & Quality**

*eliminating barriers to better care and  
improving our ability to work effectively  
within and across systems  
to ensure person-centered care*

## **Enhancing Value & Strengthening Sustainability**

*redesigning financial incentives  
and infrastructure  
to focus on quality and value, not volume*

Full report: [www.colorado.gov/stateofhealth](http://www.colorado.gov/stateofhealth)

# CDPHE's Role in a Changing Landscape

- Ensure that CDPHE's existing programs and services will operate at high levels of efficiency, elegance and effectiveness (including LEAN and customer service).
  - Workforce metrics reflect improved retention, higher levels of competency and higher rates of satisfaction.
  - CDPHE will receive full national accreditation by Spring 2015.
  - Continual rules/regulations review, resulting in logical revision, consolidation or retirement.

# CDPHE's Role in a Changing Landscape

- Ensure that CDPHE and our local public health agency partners will align with health care reform efforts.
- Ensure effective and efficient use of health data and technology.

# CDPHE's Role in a Changing Landscape

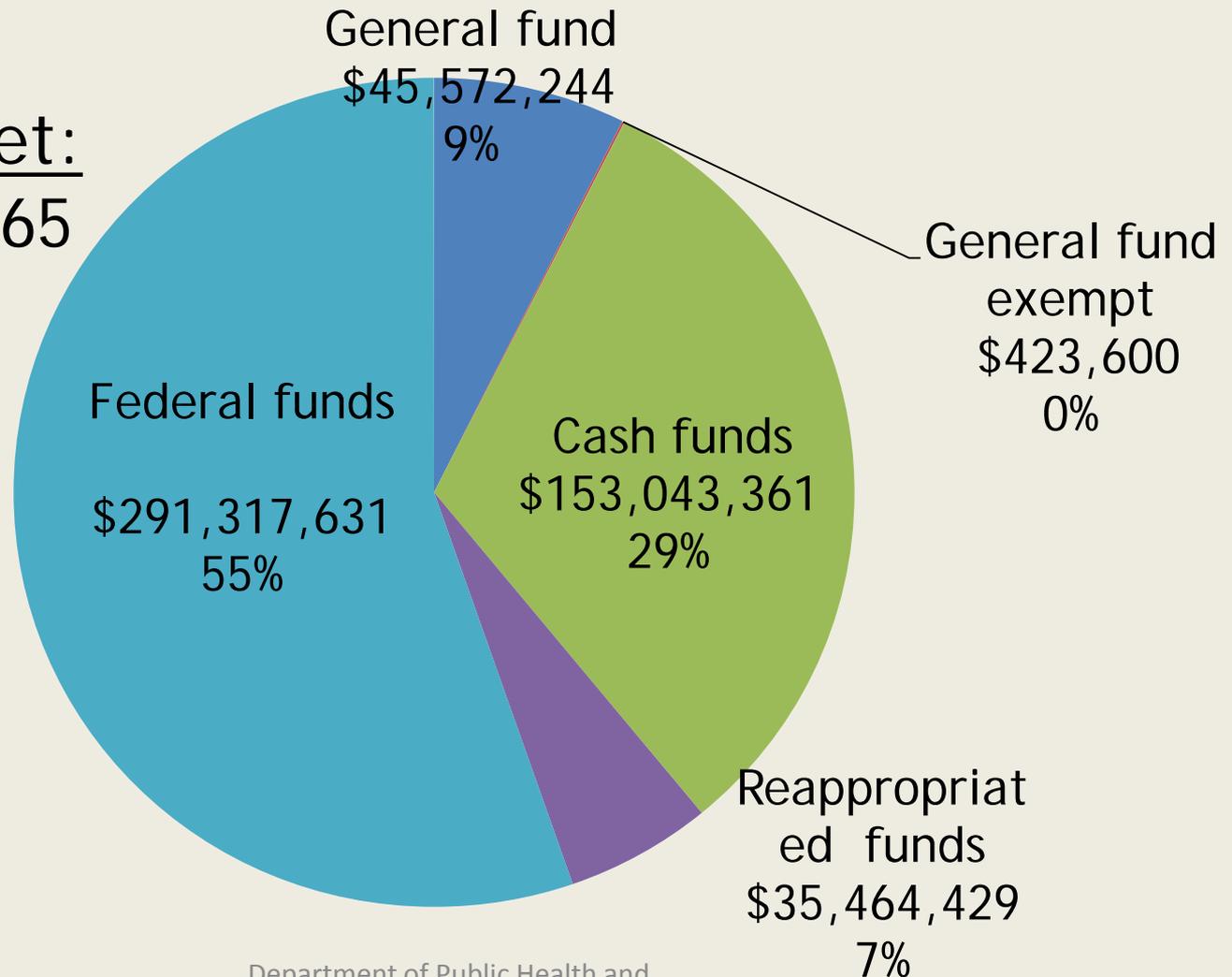
- Ensure the advancement of the Governor's Health Plan (State of Health) while addressing ongoing and emerging public and environmental health issues, utilizing evidence and data including:
  - The impact of oil and gas operations.
  - The implications of legalized and medical marijuana.
  - Winnable Battles.
  - The balance of industry, federal regulation and state and local interests related to health facilities, air, water and solid waste concerns.
  - Flood, wildfire, natural disaster and potential epidemics through state and local partner coordination.
  - Health equity and environmental justice.

# CDPHE Budget by Funding Sources

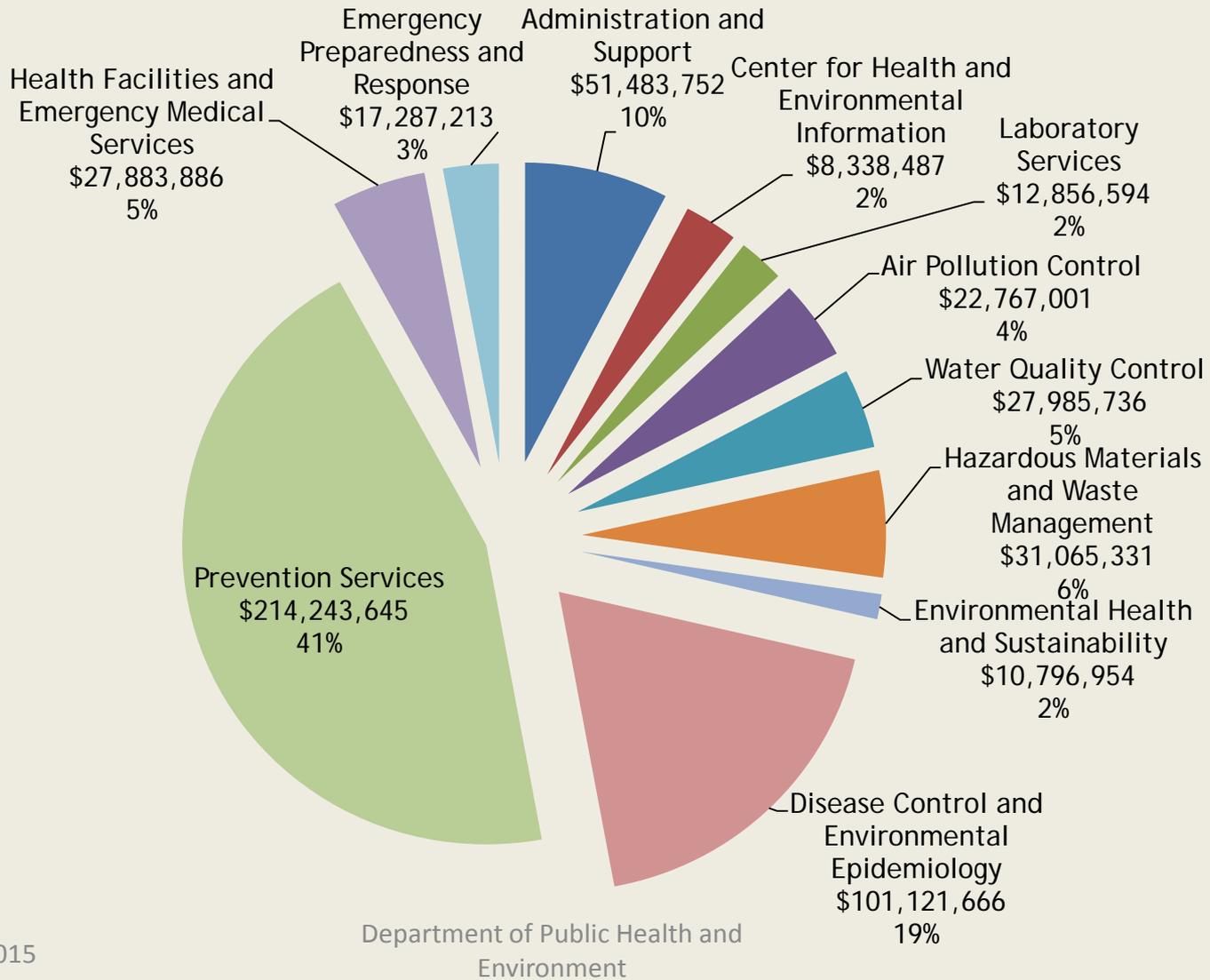
FY2014-15

Total budget:

\$525,821,265



# CDPHE Budget by Division



January 6, 2015

Department of Public Health and Environment

# *Top 4 Challenges:* Agency Alignment Under Affordable Care Act

- Cross department initiatives -SIM, HIT, Workforce.
- Public and private insurance inclusion of population health.
- Regulatory vs. population health vs. health care services roles and functions among four agencies.

## *Top 4 Challenges:*

# Ebola Preparedness/Decreased Emergency Preparedness Funding

- Local, state and federal partners.
- Prepared to respond - preparation \$ but not response \$.
- Facts Not Fear.
- General fund for state mandated activity.

# *Top 4 Challenges:* Air Quality

- Air Pollutant Emissions and Dispersion Study.
- Two Year Fugitives Inventory and Compliance Project (infrared cameras).
- Front Range Air Pollution and Photochemistry Experiment (FRAPPE).
- Oil and Gas Rules.

# *Top 4 Challenges:* Marijuana

- Medical efficacy research.
- Health Impact Monitoring.
- Youth impact and education.
- Product safety.
- Caregivers.

# FY 2015-16 Decision Items: Health Programs

- \$5M to reduce unintended pregnancy rates (general fund).
- \$1.7M for primary care services in underserved regions (general fund).
- \$379K & 3.0 FTE to increase immunization rates (general fund).
- \$249K & 3.0 FTE for assisted living facilities oversight (cash fund).

# FY 2015-16 Decision Items: Environmental Programs

- \$989K & 11.0 FTE for oil and gas air inspections & permit processing (cash funds).
- \$530K & 2.0 FTE for food safety (cash funds).
- \$261K for solid waste study (cash funds).

# 2015 Public Health Legislative Priorities

- EMS Provider Interstate Compact.
- Health Facility Drug Donation.
- Long Acting Reversible Contraceptives.
- Marijuana:
  - M.D. Enterprise Relationship
  - Caregiver Registry
  - Edible Product Safety
  - Patient Dispensary Registration

# 2015 Environmental Legislative Priorities

- Radiation Control Act.
- Water Quality Fee Structure (per SB 14-134).

# Implementation of previous legislation

- 25-1.5-111(4), C.R.S. - Recommendations from the Suicide Prevention Commission
  - Priority: expanding efforts to provide effective follow-up care after discharge from a suicide-related emergency department visit.
  - Planning a pilot program to test the Colorado Crisis System hotline as a tool to bridge the gap between emergency department discharge and follow-up care.
    - Pilot to be implemented in rural and urban locations; currently identifying funding sources and hospitals willing to participate.
  - Creating a Training and Development workgroup focused on determining key training gaps in suicide prevention efforts statewide, and how to use current training programs to fill these gaps.

# Implementation of previous legislation

## HB 14-1360: Home Care Sunset

- Community Center Boards/Program Approved Service Agency:
  - Fees on hold while licensing is reviewed.
  - Work group established with representatives from Service Agencies, Community Center Boards, Healthcare Policy Financing and a consumer representative.
  - Completed survey of all Supported Living Services Waiver/Children's Extensive Support Services Waiver service providers on gaps/conflicts between waiver and licensing rules. Workgroup is currently reviewing provider poll results to determine where guidance and/or rule revision is needed.

# Electronic Death Certificate Program

- HB 12-1041 Established an electronic death certificate program instead of paper based system of the 1900's.
- CDPHE is required to report back to the legislature in the 2015 session on implementation.
- Currently undergoing user acceptance testing. Next step, pilot testing with selected partners.
- Training for funeral homes, physicians, coroners and local public health personnel during winter/spring to include regional trainings supplemented by web based training.
- Target is April 1, 2015.
- Roll out during late spring/summer time frame.

# Questions?