



COLORADO

Department of Health Care
Policy & Financing

HB09-1293 Oversight and Advisory Board Hospital Provider Fee Meeting Notes

225 East 16th Avenue, Conference Room 11 A/B/C

June 23, 2015

1. Call to Order

David Livingston called the meeting to order at 3:08 p.m.

2. Roll Call

There were sufficient members for a quorum.

A. Members Present

David Livingston, Bill Heller, Jeremiah Bartley, Chris Underwood, Dan Enderson, Peg Burnette, John Gardner

B. Members on the Phone

George O'Brien, Mirna Castro, Kathryn Ashenfelter, Ann King

C. Members Excused

Jim Shmerling, Tom Rennell, Dan Enderson

D. Staff Present

Matt Haynes, Jeff Wittreich, Kevin Berg, Cynthia Miley, Dan Pace, Katie Brookler

3. Approval of Minutes

Peg Burnette motioned to approve the minutes of the March 17, 2015 minutes with corrections. Bill Heller seconded the motion. Motion passed

4. Rebrand Presentation

- Change will be made in May of 2016 to follow the open enrollment period
- Program has gone through a big transformation, now major focus on customer service and engaging our members

Our mission is to improve health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources.
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- The hope is that a new look and feel, and a more customer friendly name will better reflect the enhancements of the program
- Goals to achieve in this overhaul are to overcome negative perception, recruit more providers, and inform the public
- The Colorado Health Foundation funded focus groups, tested the name and messaging concept
- Also polled all department staff
- A lot of other states have already rebranded their programs
- New name is Health First Colorado, comes directly from the focus groups
- Will be keeping the tag line "Colorado's Medicaid Program" for at least a year to ease the transition
- Right now through the time leading up to open enrollment we are letting everyone know that this is coming.
- In the next 6-9 months we will be updating communication materials in preparation for the launch in May
- Trying to not officially launch anything until May
- The focus groups did approve a final tag line "Building a Healthier Tomorrow" that will replace "Colorado's Medicaid Program" down the road

5. 2015-16 Provider Fee Model Data Timeline

- Department has contracted with Myers and Stauffer for the data collection for the 15-16 provider fee model
- Providers will not be filling in the UCR tool as they did last year
- Providers will be using an excel document that is available on the Myers and Stauffer website for download
- Providers have until June 30th to complete and return to the department
- Providers can also upload those documents back to the website
- Goal is to have the data aggregated and back to the providers by August
- Anticipate having the data back to the department for use in modeling in early September
- Expect to return to this board with a draft model in October for review
- Vote on model in either November or December
- SPA must be in to CMS by December 31st to have a model that is effective October 1, 2015
- Deliberately designed the template so that the reports will show the provider all the data and all the calculations so that we can avoid the types of errors we had last year
- March 1st 2016 is targeted goal to collect data for next year

6. 2010-11 and 2011-12 DSH Audit

- 2011-12 DSH audit has started



- 2014-15 was the first year that the DSH audits had DSH dollars at stake for DSH payments back in 2010-11
- Sent letters to providers notifying them if they had overpayments and were over their DSH limits as a result of that audit
- Recently sent out communications regarding redistribution
- 2010-11 DSH audit found \$8.3 million in overpayments
- Have to collect money from the providers and it will be redistributed back as it is collected
- Have been working with the providers on payment plans, some providers have paid everything at once
- Will collect the funds that will be redistributed between May 2015 and March 2016
- Collect payments by quarters and then the month following that quarter we will redistribute funds
- Will make the transactions separate from the Hospital Provider Fee
- Everyone will get notification of the amount to be redistributed

7. Fiscal Year End Cash Fund

- Forecasted cash fund balance anticipated to be remaining at the end of the state fiscal year is \$4,750,000
- We are reconciling to the new model so there will be fluctuation of fees coming in because of the new model

8. HQIP Discussion

- The HQIP 30 day all cause readmission measure for the 2014-15 model has been calculated incorrectly by the department
- This is the first year this measure has been actually based on readmission counts
- Not made any changes to hospital supplemental payments at this time
- The 2014-15 Hospital Provider Fee letters sent out in June do not reflect any revisions to HQIP
- Will make changes to HQIP once we have worked with the hospitals on the reconciliation process
- Spent November through March investigating the errors in calculation
- Did not capture all the data in the data pull
- Once we had the new data and ran an analysis there was a .08% difference in the overall admission rate statewide
- Have communicated with the hospitals that there is an issue but have not yet reissued their letter
- After discussing with this board we want to work with hospitals and hospital association on how best to reconcile
- Need to reconcile to the revised amounts
- The total HQIP dollars remain the same



9. Regulatory Efficiency Review

- For this year the Hospital Provider Fee program 8.2000-8.2004 will be reviewed
- Looking for areas that are outdated, inconsistent and overly prescriptive
- Want stakeholder involvement and input
- Accepting all comments and feedback
- At the August meeting of this board we will take time to hear any feedback or comments that any may have
- Will take all feedback into consideration as we conduct internal review
- Willing to communicate the process to this board as we work through it
- Report is due by March 2016
- Purpose is more of a cleanup of the rules and not to make policy or program changes
- Any changes to rule comes subsequent to report
- The process is starting now for us

10. Public Comment

There was no public comment

11. Action Items

John Gardner motioned to accept the proposed meeting schedule as presented with November date addition. Peg Burnette seconded the motion. Motion passed.

12. The meeting was adjourned at 3:58 p.m.

The next scheduled meeting is at 3:00 p.m. on Tuesday, August 25, 2015 at 303 E 17th Avenue, Denver, CO in conference room 11 A/B/C.

Reasonable accommodations will be provided upon request for persons with disabilities. Please notify the Nancy Dolson at 303-866-3698 or nancy.dolson@state.co.us or the 504/ADA Coordinator hcpf504ada@state.co.us at least one week prior to the meeting.

