



COLORADO

Department of Health Care
Policy & Financing

Medical Services Board

MINUTES OF THE MEETING OF THE MEDICAL SERVICES BOARD

303 East 17th Avenue, 11th Floor Conference Room
Denver, CO April 8, 2016

1. Call to Order

Christy Blakely called the meeting to order at 9:05 a.m.

2. Roll Call

The Board Coordinator called the roll. There were sufficient members for a quorum with ten members participating and one member excused. Ms. LaCombe, Ms. Moorer, and Dr. Young participated by telephone conference call.

A. Members Present

Christy Blakely, Patricia Givens, Bregitta Hughes, Brenda LaCombe, Paul Melinkovich, Amanda Moorer, David Potts, Donna Roberts, Mike Stahl and Mary Trujillo-Young.

B. Members Excused

Jessica Kuhns

C. Staff Present

Gretchen Hammer, Deputy Executive Director/Director, Health Programs Office; Jennifer Weaver, First Assistant Attorney General; Judi Carey, MSB Coordinator; and Dan Hutchinson, Staff Support

3. Announcements

Ms. Blakely announced that the next Medical Services Board Meeting will be held in the 11th floor conference room at 303 East 17th Avenue in Denver on Friday, June 10th at 9:00 a.m.

It is the policy of this Board and the Department to remind everyone in attendance that this facility is private property. The capacity of the meeting room is 80. Please do not block the doors or stand around the edges of the room. Please turn cell phones off while in the meeting room, as they interfere with the recording equipment.



4. Approval of Minutes

Dr. Melinkovich moved for the approval of the March minutes. The motion was seconded by Ms. Roberts. There were no comments and the minutes were approved as submitted, 10:0.

- Zach Lynkiewicz, Legislative Liaison, provided the legislative update.

5. Rules

Dr. Melinkovich made a motion that all emergency rules that are adopted at this meeting include a finding that their immediate adoption is imperatively necessary to comply with State or Federal law or Federal Regulation or for the preservation of public health, safety or welfare and that compliance with CRS § 24-4-103 would be contrary to the public interest. The motion was seconded by Mr. Stahl and approved by a vote of 10:0.

A. EMERGENCY ADOPTION AGENDA

- 1) Document 01 MSB 16-02-22-A

Revision to the Medical Assistance Provider Payment Division Rule Concerning Provider Screening, Section 8.125

Micah Jones, Health Information Office, presented the proposed rule and explained that, due to changes in guidance received from the Centers for Medicare and Medicaid Services (CMS), the March 31st deadline is being removed from the rule. The department is suggesting, at this time, that providers revalidate on a wave schedule set by the department.

Board Discussion

Board discussion and questions included: that there will be no clear deadline identified in the rule for providers to complete revalidation; that the CMS deadline is a requirement for the state, not for providers; that the intent of the department is to continue to reach out to providers and offer to assist them with revalidation; that the department's assistance to providers has been very good; that new rules and requirements, a new payment system, and new vendors have caused some confusion in the provider community; that attempts by the department to provide self-learning tools have not been as successful as hoped; that the provider screening process has been more complex than providers expected; that a new customer service group has been developed to specifically handle provider revalidation issues; that it is too early to tell if the revalidation process will have an effect on providers participating in the Medicaid program; that, at this time, there is no clear data to determine how many clients enrolled providers are seeing; that the work of the Regional Care Collaborative Organizations (RCCO) helps with client access; and questions about whether the department will develop a process to reach out to providers as the 5 year benchmark for reenrollment draws closer.

Public Testimony

There was no public testimony on Document 01.

Mr. Stahl moved for the emergency adoption of Document 01. The motion was seconded by Dr. Melinkovich.

The Board voted for the emergency adoption of Document 01, -10:0.

B. INITIAL APPROVAL AGENDA

1) Document 02 MSB 16-02-22-D

Revision to the Medical Assistance Special Financing Division Rule Concerning Hospital Provider Fee Collection and Disbursement, Section 8.2000, et seq.

Nancy Dolson, Special Financing Division, presented the proposed rule and explained that it updates the hospital provider fee and payment calculation in accordance with the recommendations of the Oversight and Advisory Board (OAB) as well as cleaning up some technical issues that were identified in the Department's regulatory review process.

Dr. Givens stated that she is employed the Centura Health System.

Board Discussion

Board discussion and questions included: a brief history of the Department's quality incentive payment program; an explanation of how the quality incentive payment program works; that the Department will use its tool of payment to guide and incent transformation of the health care system; that Key Performance Indicators (KPI) are determined by hospital subcommittees, the RCCOs, and in contract negotiations; that the Board will consider this rule again next year; that there were no comments during the stakeholder engagement process which is directly related to the amount of work done by the OAB; and that points awarded for discharge are an adjusted amount taking into consideration re-admissions.

Public Testimony

There was no public testimony on Document 02.

Dr. Melinkovich moved for the initial approval of Document 02. The motion was seconded by Ms. Roberts.

The board voted for the initial approval of Document 02, 10:0.

2) Document 03 MSB 16-03-08-A

Revision to the Medical Assistance Special Financing Division Provider Fee Nursing Facility Rule Concerning Rate Effective Date, Section 8.443.13

Matt Haynes, Special Financing Provider Fee Financing Unit, presented the proposed rule and explained that it adds a rate effective date to align with current policy.

Board Discussion

Board discussion and questions included that the process is detrimental to facilities because audits are performed outside the timely filing requirements.

Public Testimony

There was no public testimony on Document 03.

Mr. Potts moved for the final permanent adoption of Document 03. The motion was seconded by Dr. Givens.

The board voted for the final permanent adoption of Document 03, 10:0.

3) Document 04 MSB 16-02-22-B

Revision to the Medical Assistance Eligibility Rule Concerning the Use of Annualized Income at Sections 8.100.1 and 8.100.4

Geoffrey Oliver and Shawn Bodiker, Eligibility Policy Section, presented the proposed rule and explained that it allows for the use of annualized income for MAGI Medicaid and CHP+ eligibility determinations for individuals who are self-employed, commission-based, and/or seasonally employed.

Board Discussion

Board discussion and questions included: an explanation of the necessity of all eligibility requirements being met in order for an individual to be determined eligible; and that the same process being used to verify monthly income will be used for this process;

Public Testimony

Bethany Pray, Colorado Center on Law Policy

Public testimony included: that department staff did a good job including stakeholders in this process; that it is preferred that there be a change in the definition of Seasonal Employment; that the phrase "usually less than six months" be stricken from the rule; that staff would take this suggestion back to the department for consideration; and that staff would discuss with department leadership how to provide an analysis on churn.

Mr. Stahl moved for the initial approval of Document 04. The motion was seconded by Dr. Melinkovich.

The Board voted for the initial approval of Document 04, 10:0.

4) Document 05 MSB 16-02-22-C

Revision to the Medical Assistance Eligibility Rules Concerning Section 214 of the Children's Health Insurance Program Reauthorization act of 2009 (CHIPRA) at section § 8.100.3.G, § 8.100.3.K and § 8.100.4.G

Ana Bordallo, Geoffrey Oliver and Shawn Bodiker, Eligibility Policy Section, presented the proposed rule and explained that it removes the five year

waiting period for all children and pregnant women residing lawfully in the US.

Board Discussion

Board discussion and questions included that this is the final revision and will eliminate the wait period for all pregnant women and children.

Public Testimony

Bethany Pray, Colorado Center on Law and Policy

Public testimony included: that there is support for this rule; that there is an incorrect citation that will be corrected; a reference to a 7 year wait period for some immigrants that is not up for consideration today, and that the department is working with CMS and the Attorney General's Office and hope to have a rule on this in the near future.

Dr. Melinkovich made a motion to correct the citation referenced on page 3, line 45 to 8.100.3.G.1.g. The motion was seconded by Dr. Young and approved, 10:0.

Ms. Roberts moved for the initial approval of Document 05. The motion was seconded by Mr. Potts

The Board voted for the initial approval of Document 05, 10:0.

5) Document 06 MSB 16-02-25-A

Revision to the Medical Assistance Home and Community Based Services Rule Concerning Supported Living Program, Section 8.515.85

Mr. Stahl stated that he works for an organization that provides supported living services.

Diane Byrne, HCBS Benefits Adult Waiver Unit, presented the proposed rule and explained that, at the request of the Department of Public Health and Environment (CDPHE) and the Department of Fire Prevention and Control (DFPC), it provides a "grandfather" clause for providers with older facilities that allows the time and a process for them to come into compliance.

Board Discussion

Board discussion and questions included: that the Department, in conjunction with CDPHE and DFPC, will be the decision maker for exceptions; that the time constraints for "grandfathered" facilities to come into compliance will vary; that there are currently five facilities who provide this service and one more is in the process of certification; and that the program serves between 150 and 170 clients with about 90 residing in the "grandfathered" facilities.

Public Testimony

There was no public testimony on Document 06.

Mr. Potts moved for the initial approval of Document 06. The motion was seconded by Ms. Hughes.

The Board voted for the initial approval of Document 06, 10:0.

C. Consent Agenda Motion

Dr. Melinkovich moved to place Documents 02, 03, 05, and 06 on the Final Permanent Adoption by Consent agenda. The motion was seconded by Mr. Stahl and approved, 10:0.

D. Closing Motion

Dr. Givens moved to close the rules portion of the agenda. The motion was seconded by Dr. Melinkovich and approved, 10:0.

6. Open Comments

Caitlin Brady, Colorado Cross Disability Coalition

7. Department Updates

- Department Annual Report - Written
- Legislative Update –Zach Lynkiewicz, Legislative Liaison
- COMMIT Project Update – Parrish Steinbrecher, Provider Payment Division
- Member Handbook Update – Antoinette Taranto, Chief Client Officer
- Department Updates/Questions – Gretchen Hammer, Medicaid Director, Deputy Executive Director

8. The meeting was adjourned at 12:05 p.m.

The next scheduled meeting of the Medical Services Board is at 9:00 a.m. on Friday, May 13, 2016 in the 11th floor conference room at 303 East 17th Avenue, Denver, CO.

Reasonable accommodations will be provided upon request for persons with disabilities. Please notify the Board Coordinator at 303-866-4416 or judith.carey@state.co.us or the 504/ADA Coordinator hcpf504ada@state.co.us at least one week prior to the meeting.