



## MINUTES OF THE RULE HEARING OF

### The Executive Director of Health Care Policy and Financing

The Capitol Center  
225 East 16<sup>th</sup> Avenue, 6<sup>th</sup> Floor Conference Room  
May 7, 2013

*The mission of the Department of Health Care Policy and Financing is to improve access to cost-effective, quality health care services for Coloradans.*

**Staff Present:** Sue Birch, Executive Director; Chris Underwood, Finance Office Deputy Director; Jennifer Weaver, First Assistant Attorney General; Judi Carey, Rules Coordinator; and Dana Bish, Staff Support

1. Call to Order: Executive Director Birch called the meeting to order at 2:00 p.m.
2. Director Birch announced that it is the policy of the Department to remind everyone in attendance that this facility is private property. The capacity of the meeting room is 38. Please do not block the doors or stand around the edges of the room. Please be respectful of others on the floor and do not congregate in the hall outside the meeting room. Please turn cell phones off while in the meeting room as they interfere with the recording equipment.
3. Introduction of Rules:

**Document 01 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 1.200.2.B**

Director Birch stated that ED 13-03-19-A was up for consideration at this meeting and invited the presenters to the table.

Joel Dalzell, Health Data Strategy Section, Department of Health Care Policy and Financing; and Tracey Campbell, Director, All Payer Claims Database, CIVHC, presented the proposed rule.

Ms. Campbell explained that the former statute excluded small group plans from the requirement to submit data for the APCD. House Bill 1015 amended this provision and eliminated this exclusion. The legislation passed on bipartisan support and was signed by the Governor. This revision aligns regulation with statute and allows CIVHC to accept small group claims.

**Executive Director Discussion**

Executive Director discussion and questions included: the Colorado Association of Health Plans is aware of this change and has been very involved in the process; Colorado Choice

is a new plan and CIVHC is working closely with them to ensure they are prepared to submit their data; the newly formed Co-op and Colorado Choice are two different entities; as the Co-op brings on new members in 2014, CIVHC will begin discussions about their data submission; CIVHC has done their due diligence in this process and it completes the picture of an important segment of the health care market; the more data that is available the closer we are to the goal of measuring the quality and value of health care in Colorado; it is expected that all plans that meet the statutory requirement of 1000 members or more will be submitting data by the end of 2013; CIVHC has, with assistance from the Department , applied for a state agency request to receive Medicare data and anticipate these submissions will begin in September; CIVHC has also been doing stakeholder outreach to the self insured to make them aware of the value added to receiving their data; the feedback from self funded employer clients has been positive; and the Attorney General's Office has reviewed and approved this rule.

Director Birch adopted the rule as written and clarified it strikes the small group plan exclusion and by so doing requires small group plans to file data.

4. Director Birch adjourned the meeting at 2:10 p.m.