

# HB23-1215

## Hospital Facility Fee Steering Committee

Facilitated by:

Government Performance Solutions, Inc. (GPS)

Tuesday, January 9, 2024

4:00 – 6:00 p.m.



# Virtual meeting guidelines

Here are some ideas to make virtual collaboration easy on us all:



This meeting is being recorded!



If your computer has a camera, please keep it on. Be careful there is nothing revealing in your background. We suggest using the blur feature or virtual background.



Put your computer microphones (or phone) on mute



Use the chat feature to share ideas and ask questions



Click the Live Transcript icon at the bottom of your screen

# Welcome



# Who's on the steering committee?

1. Isabel Cruz, Policy Director, Colorado Consumer Health Initiative
2. Diane Kruse, Health Care Consumer
3. Dr. Omar Mubarak, Managing Partner, Vascular Institute of the Rockies
4. Dan Rieber, Chief Financial Officer, University of Colorado Hospital Authority
5. Bettina Schneider, Chief Financial Officer, Colorado Department of Health Care Policy and Financing (HCPF)
6. Kevin Stansbury, Chief Executive Officer, Lincoln Community Hospital
7. Karlee Tebbutt, Regional Director, America's Health Insurance Plans



# Why are we here? HB23-1215

- HCPF must form a steering committee to deliver to the state House of Representatives Health and Insurance Committee, the Senate Health and Human Services Committee, or their successor committees a separate, one-time report by October 1, 2024, that details the impact of facilities fees using data from the past 10 years.
- **The Steering Committee is required to develop a report detailing the impact of facility fees**, defined as “any fee a hospital or health system bills for outpatient hospital services that is intended to compensate the hospital or health system for its operational expenses and separate and distinct from a professional fee charged or billed by a health-care provider for professional medical services.”
- The Steering Committee is entitled to receive and request data from the All-Payers Claims Database, hospitals, and health systems, Health Care Policy and Financing (HCPF), Division of Insurance (DOI), commercial payers, and independent providers.

# What will we accomplish today?

- Introduce steering committee members (5 min)
- Confirm shared purpose, boundaries, requirements and our behavioral commitments (20 min)
- Review data requirements, gather feedback on provider survey questions, and align on ways to ensure a high response rate (60 min)
- Discuss options for increasing teamwork during future sessions (20 min)
- Hear public comment (10 min)
- Engage in Q&A and discuss next steps (5 min)



# Recap: Our boundaries

- The steering committee will keep the scope of work confined to HB23-1215's requirements.
- There may be limitations on the data available data for actuarial analysis, so the report will be based on what is available.
- The steering committee shall not share publicly any information submitted to the steering committee as “confidential.”

# Existing group norms

- *Engage in candid, honest dialogue while maintaining an open mind about other's positions*
- *Avoid acronyms and speak up if you require clarification*
- *Stay on topic and within the boundaries established in [HB23-1215](#)*
- Follow [open meeting laws](#) protocols; communication between 2 or more steering committee members requires public notice
- If we need to vote to confirm consensus on the accuracy and completeness of the language/data that explain impact, we will
  - Use roll call vote and ask dissenters to draft their opinion
  - If unable to attend a meeting that a vote is occurring, share your vote and opinion in writing before the meeting
- Have public comment at the end of the meeting, unless voting on impact/decision, then prior to the vote



# Proposal: Shared Behavioral Commitments

GPS proposes the Steering Committee vote to adopt these behavioral commitments, building on the first (3) established in October.

- *Engage in candid, honest dialogue while maintaining an open mind about other's positions*
- *Avoid acronyms and speak up if you require clarification*
- *Stay on topic and within the boundaries established in [HB23-1215](#)*
- Use the raise hand function to signal your desire to speak; allow some grace if there is a topic change
- Be succinct in your engagement to make room for others to ask questions and share their opinions
- Maintain mutual respect, acknowledging that each person has been chosen for a reason and is equally important
- It's okay to disagree, but do so without being disagreeable
- Be on camera by default; notify others if there is a reason you cannot

Existing

# Using surveys to close data gaps



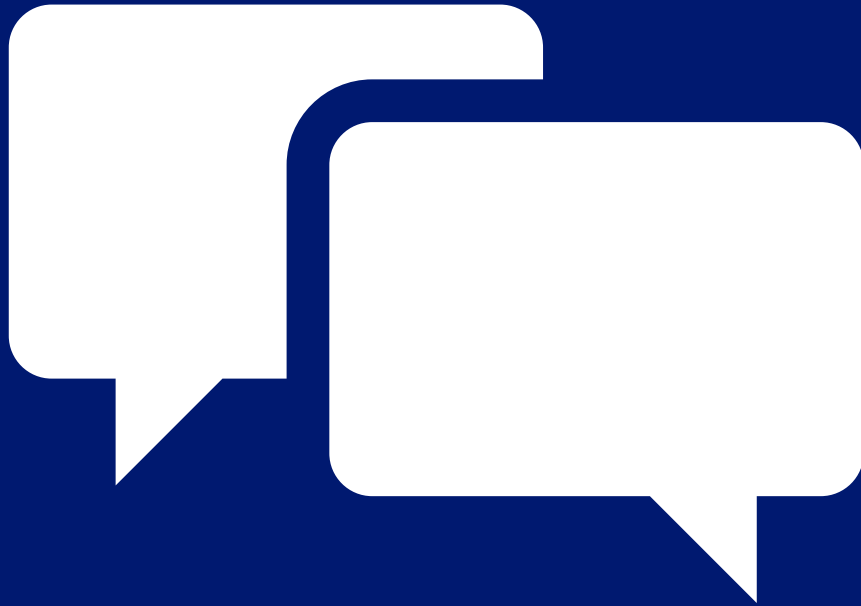
# Provider and Carrier Data Requests (1 of 2)

- In the last three meetings we have discussed data gaps and ways to close them
- A critical tool within the Steering Committee's power is requesting data from hospitals and health systems, independent providers, and health carriers
- HCPF developed a memo to describe a proposed approach for discussion and feedback from the committee, and has also asked the Steering Committee to review feedback gained from email dialogue with CHA (posted to the [Committee's website](#))
- We will review the proposal and then gather feedback on specific questions and ways to maximize response rate

# Provider and Carrier Data Requests (2 of 2)

- Data response rate will be crucial to:
  - Understanding provider specific billing practices (both hospitals and independent providers), and
  - Benchmarking results
- We must align on a distribution method and follow-up routine to drive adequate response rate
- Plan:
  - Encourage payer/provider-based steering committee members and CHA to relay the importance of responding to surveys to peers
  - Use a survey tool that enables easy uploading of data files

**We need the committee's input, feedback, and formal guidance on HCPF recommendations**

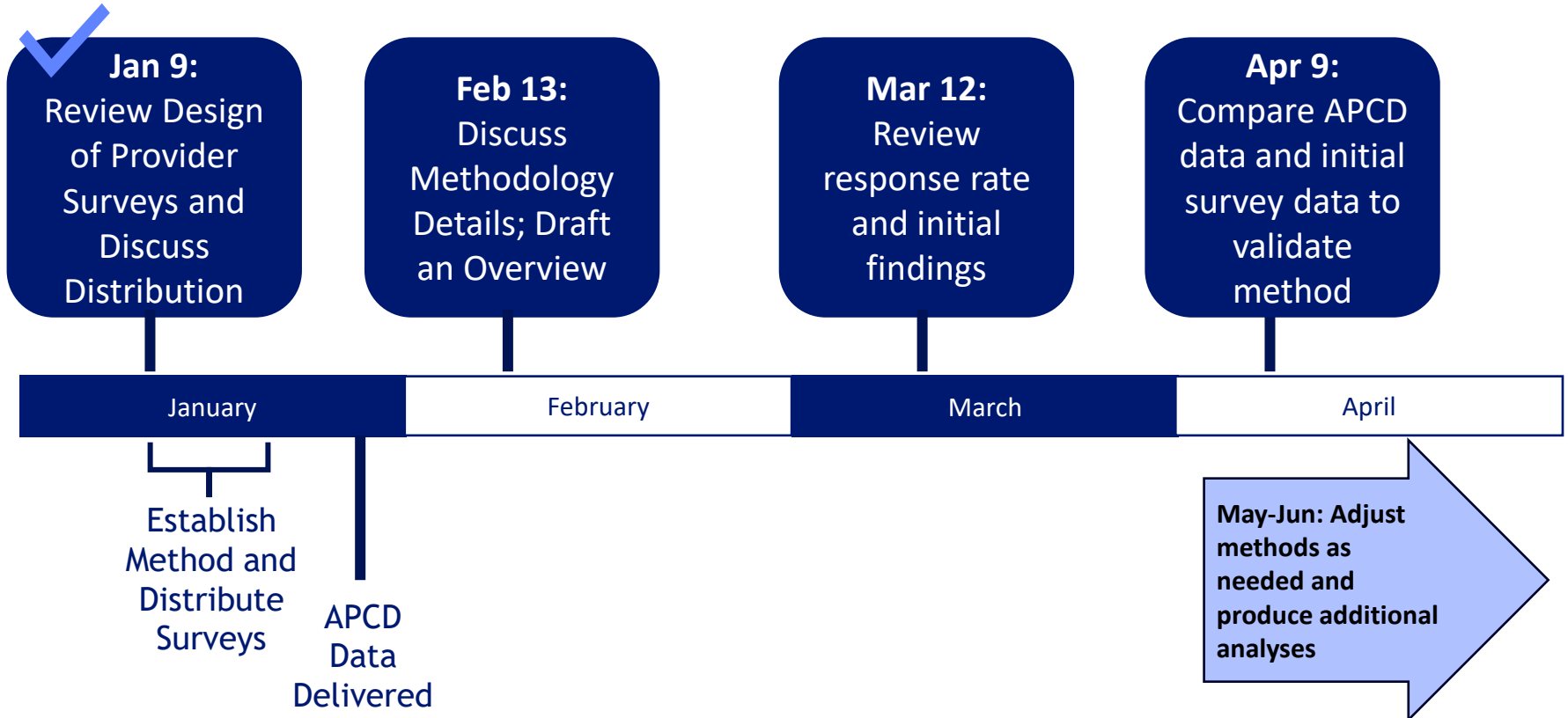


# Steering Committee Discussion: Emerging Meeting Roadmap



# Upcoming meetings

We are continually refining our meeting roadmap. Here is what is emerging, subject to discussion:



# Options for future meetings

- Two hours monthly may not be enough to address the requirements of the bill and the breadth of this topic, and this method of meeting isn't conducive to teamwork
- GPS has identified two options:
  - Hold small group meetings *in addition to current meetings* on key report sections (e.g., task assigned by the Bill, general education on facility fees, etc.); all meetings noticed appropriately and using collaboration tools
  - **Replace** currently-scheduled meetings with in-person, half-day working sessions aimed at producing usable exhibits for the final report

Let's discuss Steering Committee ideas & preferences



# Public Comment

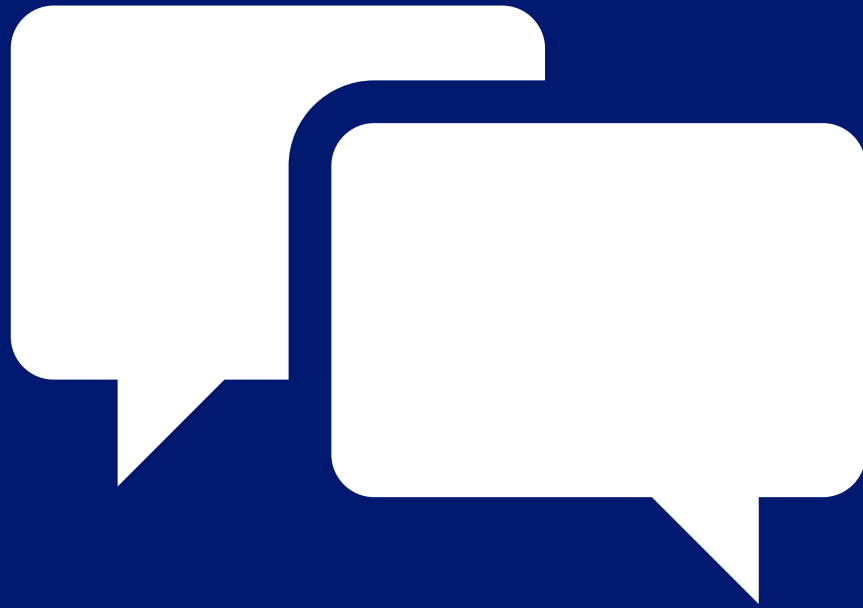
Reactions  then click Raise Hand 

Please...

1. Use the “raise your hand” icon.
2. Use \*9 to raise your hand if you are on the phone.
3. Wait to speak until the facilitator calls your name.
4. Make your comments within the request time limit.
  - This allows others time to speak.
5. Written comments are also welcome at [hcpf\\_facilityfee@state.co.us](mailto:hcpf_facilityfee@state.co.us)

**Thank you!**





# Steering Committee Questions?



# Next steps/Actions

- Pending Steering Committee agreement, our next meeting is scheduled for Tuesday, February 13, 2024, from 4:00 - 6:00 p.m.
  - HCPF will post an agenda and registration link on its [website](#); please register
- Topics covered will include:
  - Continued discussion of definitions
  - Preparation of the overview portion of the final report, including the task assigned, general education on facility fees, and the glossary of terms (subject to usage in the report)



[Government Performance Solutions, Inc.](#)

Your Partner for:

---

**Strategic  
Planning**

**Stakeholder  
Engagement**

**Operational  
Excellence**

**Organizational  
Effectiveness**



# Thank you!



# Who are your facilitators?



- Greg & Kate work for Colorado-based Government Performance Solutions, Inc. (GPS)
- GPS partners with public and social sector organizations to navigate change by:
  - Using deep listening & a collaborative approach,
  - Engaging agency staff, their partners, & and the community to co-create solutions that drive sustainable transformations.



Learn more about GPS at [governmentperformance.us](https://governmentperformance.us)

# Who are your actuaries?



- CBIZ Optumas (Optumas) is Colorado's actuary of record since 2012
- Set actuarially sound capitated rates for all managed care programs:
  - Physical health (DHMC and PRIME), behavioral health (RAEs), CHP+ (HMO & Dental), and PACE
- Provided actuarial analytics and development for alternate payment models for the State:
  - APM 2, Maternity Bundled Payment, Hospital Transformation Program
- Conducted rate review and access to care studies

# Who are your actuaries?



- Currently lead the vertical integration analysis for HCPF
  - Studies the effect of hospital systems acquiring independent physician practices
- Optumas will provide the actuarial analysis for the HB23-1215 project
  - Study the financial impact of facility fees on Colorado payers

# What are the roles and responsibilities?

## Steering Committee:

- Read all required materials to prepare for meetings
- Participate actively in all steering committee meetings
- Understand implication and evaluate options, recognizing constraints and limitations of data
- Debate proposals to consensus

## GPS Facilitators:

- Provide a structured approach
- Ensure meetings are productive with balanced participation
- Act as a liaison between the steering committee and actuarial vendor

## HCPF & Actuarial Vendor:

- Conduct research
- Perform analysis based on available data
- Share analysis in a user-friendly format
- Answer questions as timely as feasible



# Reminder: Open Meetings Law

Statutorily defined as:

- A gathering of 2 or more members
- Discussing public business or taking formal action
- Communicating in-person, by phone, electronically (e.g., email, text, instant message), or other means (e.g., chat, Google documents, etc.)

[Open-meeting-requirements-of-the-colorado-sunshine-law.pdf](#)

[FAQ on § 24-6-402\(2\)\(a\), C.R.S.](#)



# Develop a shared understanding



# Develop a shared understanding

- Last meeting, we agreed that moving forward on this task requires a shared understanding of complicated situation.
- GPS circulated a request to steering committee members to identify key educational needs and resources—key terms, concepts, and trends. [Here's a link to the living document](#) which includes links gleaned from internet searches based on suggestions.
- Steering Committee members offered many suggestions and today we will discuss:
  - Key terms
  - Billing 101
  - How prices are set
- Continued education will be critical to building our fact base and creating exhibits that can become part of the report (e.g., definitions, description of the situation, etc).

# Key Terms

- HCPF has assembled draft definition utilizing several sources and attempting to remove biased language
- The glossary can be found at this: [Proposed Common Terminology for 1215 Committee v12-21.docx](#)
- Let's discuss what definitions you found most interesting, which ones you want to edit, and what you think is missing
- The draft, once edited, can become an exhibit in the Steering Committee's report

# Explanation of Facility Fees Outline

For outpatient health-care services,

- "Description of the way in which health-care providers may be paid or reimbursed...with or without facility fees"
  - Broken down by payer and location
    - Payer
      - Location 1, Location 2, Location 3
      - Prices are set very differently by different payers
  - "any legal and historical reasons split billing between professional and facility fees"

With or without Facility Fee by Payer	Medicare	Commercial	Medicaid
On-campus locations	With	With	
Off-campus locations by health-care providers affiliated with or owned by a hospital or health system	With	With	
Locations by independent health-care providers not affiliated with or owned by a hospital system	Without	Without	Without