

HB23-1215

Hospital Facility Fee Steering Committee

Facilitated by:
Government Performance Solutions, Inc. (GPS)

Tuesday, June 11, 2024
4:00 – 6:00 p.m.



COLORADO
Department of Health Care
Policy & Financing



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



COLORADO

Department of Health Care
Policy & Financing



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, UHealth
5. Bettina Schneider, Chief Financial Officer, Colorado Department of Health Care Policy and Financing (HCPF)
6. Kevin Stansbury, Chief Executive Officer, Lincoln Health
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?

1. Opening (10 minutes)
2. Review the plan for upcoming meetings and the data scorecard (20 minutes)
3. Discuss the survey and supplementary data methodology and limitations (non-APCD data) (15 minutes)
4. Review the Commercial Market memo (45 minutes)
5. Share a scorecard of which Perspectives Sections have been delivered (10 minutes)
6. Public comment (10 minutes)
7. Next steps (10 minutes)

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 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.”

Procedural norms

- 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 the impact, we will
 - Use roll call vote and ask dissenters to draft their opinion
 - If unable to attend a meeting where 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

Shared behavioral commitments

In January, the group adopted these (8) behavioral commitments:

- 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

Data Scorecard and Upcoming Meetings



Recap

- Prior to last meeting, Optumas and HCPF developed a spreadsheet that highlights:
 - Requirement
 - Planned analysis
 - Data availability
 - **Green**—data available and the analysis is understood
 - **Yellow**—With Steering Committee support, the data is available and analysis is possible
 - **Red**—There are barriers to data access and/or analysis that may not be surmountable
- We have updated the spreadsheet based on recent progress and the Steering Committee’s request to map topic against future meetings

Upcoming Meeting Dates and Topics

June 11	July 9	July 16
<ul style="list-style-type: none"> Commercial Market methodology APCD facility fee data (visits, in-network v. out, allowed and denied, etc) Survey and supplemental data methodology 	<ul style="list-style-type: none"> Hospital and health system data including total revenue & facility fees (visits, top codes, gross revenue, off campus affiliates, etc) Comparison of professional and facility fees (independent and affiliated providers) - methodology Impact on CHASE 	<ul style="list-style-type: none"> Comparison of professional and facility fees (independent and affiliated providers) - results Impact of facility fees & payer coverage policies Independent provider survey data on charges and policies Impact to Access to Care, Health Equity Facility Fee Legal Review

Note: Reference to specific requirements in the legislation available in the scorecard

 **Report first draft by Aug 1**

Recap: Non-APCD Data

- Non-APCD data necessary to answer several requirements
- Survey, Supplementary Datasets & Responses
 - Hospitals, Health Systems, Colorado Hospital Association
 - Commercial Payers
 - Independent Health-Care Providers
 - Employers
 - Consumers



Follow-up Actions and Status

- Thank you!
- Expect virtual collaboration, review, and feedback
- Finalizing
 - Projects, Committee requests
 - Methodology write-up (shared via email later in June)

A. All Payers Claims Database

B. Surveys & Supplemental Data

In addition to the APCD, the report's research and analysis have been supplemented with survey data from hospitals, health systems, and independent practitioners, supplementary datasets from the Colorado Hospital Association, and responses from employer and commercial payer representatives.

Consideration was made before making additional requests for information to adhere to 25.5-4-216(9), which directs the Steering Committee to exhaust existing data sources before making additional requests and minimize the number of requests.

The following section satisfies 25.5-4-216(9)'s direction to "include a description of which entities were contacted for information and the purpose of each request".

1. Survey

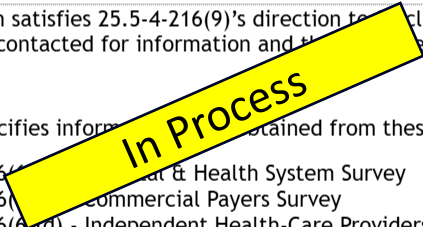
The legislation specifies information to be obtained from these specific groups:

- 25.5-4-216(9)(a) - Hospital & Health System Survey
- 25.5-4-216(9)(b) - Commercial Payers Survey
- 25.5-4-216(9)(d) - Independent Health-Care Providers Not Affiliated with or Owned by a Hospital or Health System Survey

HCPF used online survey software to facilitate the surveys.

The statute provides specificity, but some ambiguity needed clarification before surveys were launched. HCPF consulted the Steering Committee during the Jan. 9, 2024 meeting for steerage in the data collection questions.

The resulting surveys are available at:



Commercial Market Memo



Methodology Recap

- Aligned with definition in bill to capture hospital outpatient department (HOPD) billing associated with hospital operational expenses
 - Consider HOPD portion of visit (UB-04 claim form) as the facility fee portion
 - Separate from the professional fee portion of visit (HCFA-1500 claim form)
 - Consistent with statute definition, and provider survey submissions
 - Including all hospitals (PPS and Critical Access Hospitals) and off-campus HOPD clinics
 - Excluding emergency room department claims

Memo Overview

- Similar to the Medicare market, Optumas produced a memo with initial findings on facility fee identification in the APCD data for the Commercial market
- The memo includes emerging insights and questions for steering committee discussion
- We will drive the discussion from the memo rather than slides



June 4, 2024

Subject: Colorado HB1215 – Commercial Facility Fee Identification Methodology Report

Commercial Facility Fee Identification Methodology - DRAFT

Overview

CBIZ Optumas (Optumas) was contracted by the Colorado Department of Health Care Policy and Financing (HCPF) to explore the policies, practices, and costs to Colorado health payers of facility fees as outlined in HB23-1215. Optumas was tasked with identifying outpatient facility fees within the Colorado All Payer Claims Database (APCD) provided by the Center for Improving Value in Healthcare (CIVHC) for 2017 through 2022. The APCD contains claims data from Medicare, Medicaid, and Commercial payers within the State of Colorado. The purpose of this memo is to detail the methodology used to identify hospital outpatient department (HOPD) facility fees within the Commercial claims portion of the APCD.

Steering Committee Review

This memo is being provided to the Steering Committee, as designated under HB23-1215, for review and consideration as an input to the final report as required by HB23-1215. As the Steering Committee reviews, we respectfully request consideration of the following questions related to the methodology and analysis:

- Have we sufficiently identified the appropriate methodology for identifying Commercial facility fees?
- What are your key observations from each of the required analytics?
- What additional caveats need to be captured as critical notes based upon this methodology?
- Is there any additional information or explanation that would assist in understanding the methodology and analytic results?



Next Steps

- Begin reviewing comparison analytics requested from bill
- Share methodology details on July 9

Scorecard of Perspectives Section



Perspectives Section

Perspective	Owner(s)	Status
Consumers	Diane, Isabel	
Hospitals and Health Systems	Dan, Kevin	
Independent Providers	Dr. Mubarak	
Payers	Karlee, Bettina	

Based on Steering Committee submissions, GPS to add Red/Yellow/Green before the meeting on 6/11



Public Comment

Public comment

Please...

1. Indicate you wish to offer public comment:
 - Speak to the facilitator if in person
 - Use the “raise your hand” icon if online
 - Hit *9 to raise your hand if you are on the phone.
2. Wait to speak until the facilitator calls your name.
3. Make your comments within the request time limit to allow other time to speak.
4. Written comments are also welcome at hcpf_facilityfee@state.co.us

Thank you!

Next Steps



Next steps

- Steering Committee members finalize Perspectives sections
- Next Steering Committee is on July 9, 2024, from 4:00 - 6:00 PM
- There will be a second July meeting on July 16 from 4:00 - 6:00 PM
- The analysis and facilitation team (HCPF, Optumas, GPS) will create a first draft of the full report by August 1

Thank you!

