

HB23-1215

Hospital Facility Fee Steering Committee

Facilitated by:

Government Performance Solutions, Inc. (GPS)

Tuesday, November 14, 2023

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



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?

- Confirm purpose and agenda (5 min)
- Share proposed group norms (5 min)
- Hear insights from the steering committee interviews and learn each steering committee member's perspective (45 min)
- Understand HB23-1215 report requirements and data required to answer them, plus data limitations (35 min)
- Discuss emerging meeting roadmap (15 min)
- Hear public comment (10 min)
- Engage in Q&A and discuss next steps (5 min)

Steering Committee Introductions and Perspectives



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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
6. Kevin Stansbury, Chief Executive Officer, Lincoln Community Hospital
7. Karlee Tebbutt, Regional Director, America's Health Insurance Plans



Steering committee interviews (1 of 2)

GPS had short interviews with each steering committee member.

- There is a shared desire for:
 - an efficient process that makes good use of everyone's time,
 - the final report to be firmly grounded in factual data, aligning with the requirements specified in HB23-1215, and
 - terms and acronyms used to be well explained to facilitate shared comprehension.
- There is a collective concern about:
 - the tight timeline for data analysis,
 - the ability to access the right data for analysis to ensure the final report is fact-based, free of bias, and shares the full range of details important to this topic, and
 - the ability of the facilitator to bridge the gaps between diverse viewpoints.

Steering committee interviews (2 of 2)

The composition of the steering committee has been thoughtfully structured by legislative design, ensuring that its members bring diverse perspectives and experiences related to hospital facility fees. This affords the opportunities for:

- Areas of agreement to serve as a strong foundation for collaborative efforts and decision-making,
- Opposing viewpoints to foster healthy debate and help the committee thoroughly explore the implications of the data, and
- Distinct and unique viewpoints to enrich the discussion.

▶ **Let's recap boundaries and norms,
then learn from each person**

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.”

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](#)
- Remember to follow protocols of [open meeting laws](#)
 - 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

Individual perspectives

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

In 5 minutes, please share:

- Name, role, and whom you represent
- Your unique perspectives on hospital facility fees

How data will inform the report



Report requirements

The **Steering Committee's HB23-1215 Hospital Facility Fee** report will specifically evaluate the following as it relates to facility fees:

- Payer reimbursement and payment policies, provider billing guidelines, and practices.
- Coverage and cost-sharing across payers and payer types and denied claims by payer and provider type.
- Impact on coverage policies for consumers, employers, and the Medicaid program.
- Impact on policies and charges for independent practitioners, including a comparison of professional fee charges and facility fee charges.
- Charges for services rendered by health system affiliated practitioners, including a comparison of professional fee charges and facility fee charges.
- Impact on the Medicaid program and uncompensated and under-compensated care.
- Impact on access to care, health equity, and the health care workforce, and history and legal parameters concerning facility and professional fee billing.



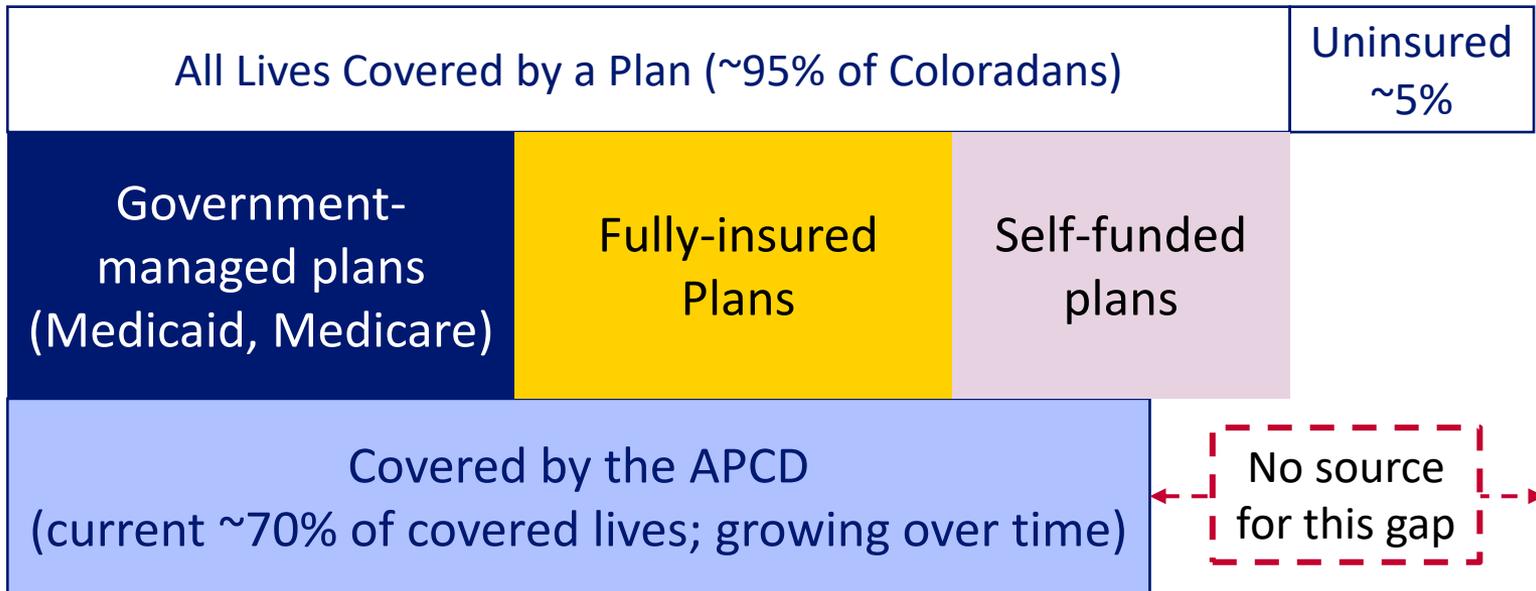
A few definitions

Before we dig into data sources, let's observe our ground rule about not using lingo without defining terms:

- APCD—The All Payers Claims Database—this data base stores claim information on all medical, dental, and pharmacy services that occur in Colorado
- CIVHC—Colorado Center for Improving Value in Health Care—the designated administrator of the APCD; *pronounced “Civic”*
- IQVIA—Contract research organization that offers physician survey data indicates ownership of health care-providing entities; *pronounced “Eye-Q-Vee-Uh”*

Data sources

Gathering data on 100% of claims is very challenging. Here's how the sources line up:



Data availability (1 of 4)

- IQVIA Historical OneKey data has recently been secured for years 2017-22
- Optumas will receive the necessary APCD data from CIVHC in January for the years 2017-22
 - Optumas has existing data sets that will allow them to set up the analysis, but no analysis will be available to the Steering Committee until March or April

There are (5) known data challenges that will require Steering Committee direction to address

Data availability (2 of 4)

At this point, we see (5) Gaps:

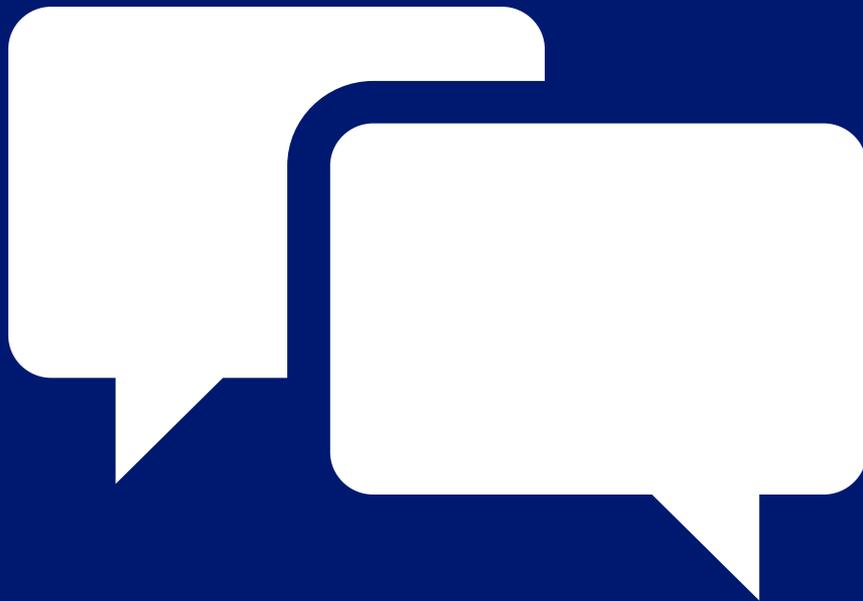
1. CIVHC informed HCPF/Optumas the APCD does not have a flag or indicator to identify Facility Fees within the data
 - *Alternatives must be sought, and additional validation will be necessary to deliver accurate, detailed analysis*
2. Denied claims are required by the bill and the APCD does not have this information
 - *Steering committee guidance is needed*

Data availability (3 of 4)

3. In section 25.5-4-216(6)(e) the bill requires that the report address “The impact of facility fees and payer coverage policies on the Colorado Healthcare Affordability and Sustainability Enterprise (CHASE) created in section 25.5-4-402.4, The Medicaid expansion, uncompensated care, and undercompensated care”
 - ***We need steering committee guidance on the potential impact(s) on CHASE?***
4. In section 25.5-4-216(6)(f) the bill calls for the report to address “The impact on access to care including specialty care, primary care, and behavioral health care, integrated care system, health equity, and the health care workforce”
 - ***We need steering committee discussion on how to measure this impact. Does this change how money flows?***

Data availability (4 of 4)

5. Provider surveys will be developed by HCPF and distributed to hospitals - results will be predicated on response rate from hospitals. This will be used to validate results from APCD/IQVIA datasets, and will also be sole source data for provider billing guidelines as required under section 25.5-4-216(5).
 - *Discuss potential for limited responses, and incentivizing responses from providers*



Steering Committee Discussion: Emerging Meeting Roadmap

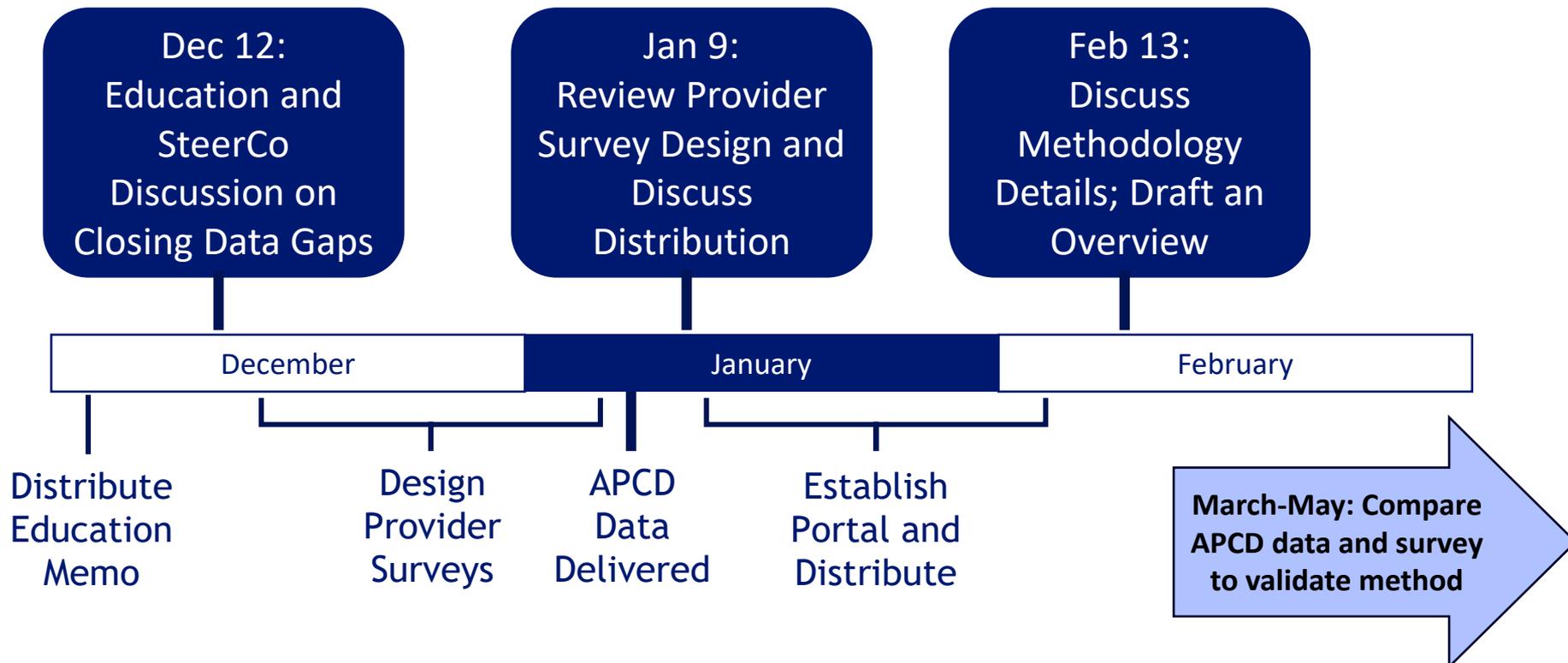


Priorities

- Develop a shared understanding of facility fees and how these work (e.g., terminology, codes and billing mechanism, etc)
- Continue to define gaps in what data is available and design data requests or accommodation methodologies to close them

Upcoming meetings

GPS is working with the Department and Optumas to align on a meeting roadmap. Here is what is emerging, subject to discussion:



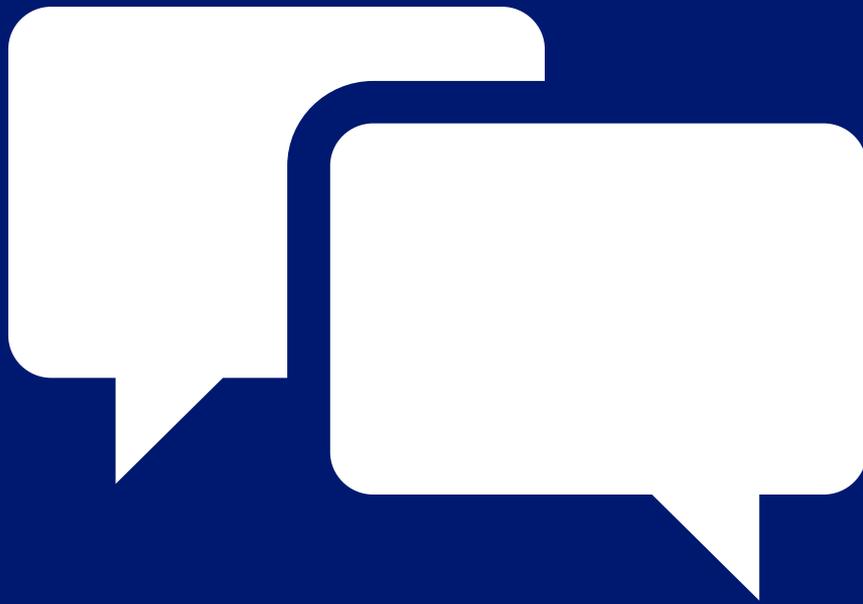
Public Comment

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 comment in 5 minutes or less.
 - This allows others time to speak.

Thank you!



Steering Committee Questions?



Next steps/Actions

- Next meeting is Tuesday, December 12, 2023, from 4:00 - 6:00 p.m. - please register
 - HCPF will post an agenda and registration link on its [website](#)
 - Topics covered will include:
 - Learning about key terminology
 - Laying out the data requirements and data sources → continued discussion on closing gaps
 - Having the actuary answer high-level questions



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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

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

Department & 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.](#)

