# Health Care and Medicaid in Colorado

Kim Bimestefer, Executive Director Adela Flores-Brennan, Medicaid Director Bonnie Silva, Office of Community Living Director Rachel Reiter, Policy and Communications Office Director

February 15, 2023



# Introductions



Kim Bimestefer Dept. of Health Care Policy and Financing Executive Director



Adela Flores-Brennan Medicaid Director Health Policy Office Director



Bonnie Silva Office of Community Living Director



Rachel Reiter Policy and Communications Office Director



# Colorado Department of Health Care Policy and Financing (HCPF)



Health First Colorado (Colorado's Medicaid Program)



Child Health Plan Plus



Buy-In Programs



The Colorado Indigent Care Program



Long-Term Services and Supports



Dental Program

State agency that administers Health First Colorado (Colorado's Medicaid program), Child Health Plan *Plus*, and other health care programs

- Covering 1 in 4 Coloradans
- 43% of the state's children
- 43% of births

**Mission:** Improving health care equity, access and outcomes for the people we serve while saving Coloradans money on health care and driving value for Colorado.



# Health First Colorado Members





Policy & Financing

COLORADO HCPF Annual Report CO.gov/HCPF/2022-report-to-community Department of Health Care

# Health First Colorado (Colorado's Medicaid Program)



Health care provider visits Prevention and wellness services

Dental services



Pharmacy and Durable Medical Equipment



Physical, occupational or speech therapy



Emergency services and transportation



Maternity and newborn care, Family planning







Laboratory services



Long-Term Services and Supports for people with disabilities and older adults



# Health First Colorado Coverage

#### Members can go to any provider of choice, no deductibles

#### Low co-pays:

**\$0** all services for pregnant women through 12 months past delivery and children under 19, including prescriptions

**\$0** behavioral health, dental, ambulance, rides to medical appointments, hospice, home health, emergency care, prevention, family planning services/supplies

\$2 primary care, specialist, vision, urgent care

\$3 brand name or generic prescription or refill

**\$4** outpatient hospital (not admitted)

**Budget request** to eliminate most co-pays would increase provider reimbursements by \$8.7M TF (\$1.7M GF) and reduce provider admin burden



# Child Health Plan Plus (CHP+)

#### 2023 Federal Poverty Levels by Family Size\*

Family of 1	Family of 4
\$38,637	\$79,500

\*Upper Limits Listed

"I work in healthcare and also have 5 kiddos on CHP+! It was a God send for us especially during COVID!"

"The service is extremely good. I would like for others to know about it and take advantage of it." -Members



#### CHP+ Managed Care Organizations (MCOs):

- Colorado Access
- Denver Health Medical Plan
- Kaiser Permanente
- Rocky Mountain HMO



Percentage of Total **Population Enrolled** in **Health First** Colorado and Child **Health Plan** Plus, by County





**COLORADO** Department of Health Care Policy & Financing Source of enrollment data is Medicaid Management Information System (MMIS). Percentages represent people enrolled for one day or more during calendar year 2021. 2021 population data as forecasted by the state demographer. Accessible version here.

#### In Fiscal Year 2021-22, the Department Paid:

Numbers are approximate. Health First Colorado and Child Health Plan *Plus* expenditures only.



Patient Protection and Affordable Care Act (ACA) Medicaid Expansion. Due to rounding, percentages may not total 100%. \*The majority of funding for Expansion Adults is federal dollars, with the state fund source funded by the Healthcare Affordability and Sustainability Fee. \*\*Not all members with disabilities use long-term services and supports.





Payment **Breakdown to Health First** Colorado **Partners** 

This chart refers to medical services cost only, not total Department spending. It is based on claims data by date of service and will differ from data calculated on a cash accounting basis. Due to rounding, percentages may not total 100%.

COLORADO

Policy & Financing

Source: FY 2020-21 data via HCPF Annual Report CO.gov/HCPF/2022-report-to-community Department of Health Care

## Long-Term Services and Supports Programs





### Who Receives Long-Term **Services and Supports?**

9%
Children and
Adolescents
ages 20 and younger



#### **Cross Disability**

- **Physical Disabilities** i.e., Spinal Cord Injury, Parkinson's disease
- Cognitive Disabilities I/DD, Brain Injury, Dementia
- **Mental Health**

85% have a chronic condition (compared to 41% of the rest of the Medicaid)

32% have 5 or more of chronic conditions



and qualifying former

foster care youth

12 FY 2021-22; Data represent percentage of people receiving Medicaid LTSS in various age groups.

Older

**Adults** 

ages 65

or older

#### Some Key Medicaid Partners (HCPF has 400+ contractors)

- **Regional Accountable Entities (RAEs)** help connect members with the health care they need, administer the Medicaid behavioral health benefit, provide care coordination and population health programs, contract with Medicaid primary care and behavioral health providers, connect members to social determinant of health supports, and more.
- Managed Care Organizations (MCOs) provide comprehensive physical health benefits using a full-risk payment model in Denver and in limited counties on the Western Slope. They operate in tandem with the RAE behavioral health benefit. Members in the counties are auto-enrolled into the MCOs, but can "opt-out" into the traditional RAE.
  - Denver Health

OLORA

- Rocky Mountain Prime
- **Case Management Agencies (CMAs)-**II n collaboration with the county, case management agencies determine whether an individual meets eligibility requirements for Medicaid long term care, including assessing their level of care needs. From this determination, case managers then develop individualized service plans for each member outlining the benefits and supports that they are eligible for and in need of.
  - The system currently has three types of case management agencies serving different populations and waivers: Single Entry Point (SEP) Agencies, Community Center Boards (CCBs), and Private Case Management Agencies.





### **American Rescue Plan Act: Home and Community Based Services**





**\$148M** Grants and Pilots 16 projects



**Over 90%** Of funding directly benefits



members, families, providers or workers

System Improvements 29 projects

**Research and Analysis** 17 projects

- The vast majority of HCPF's stimulus  $\bullet$ funds are direct to agency - in particular, ARPA Home and **Community Based Services** (Section 9817) - \$530M
- The Department is executing 64 HCBS programs focused on innovation and long-term transformative change
- Spending has significantly ramped up this fiscal year with 98% of all FTEs onboarded, contracts executed and grant awards being announced



# Exciting Behavioral Health Transformation and Investment

- HCPF is state's largest BH payer
- New HCPF Office: Office of Medicaid and CHP+ BH Initiatives and Coverage
- Collaboration with BHA
- \$550M+ in ARPA stimulus to transform the industry (BH and HCBS)
- 20+ transformative bills
- Adding adult beds, youth residential beds, tribal substance use disorder facility
- Redefining safety net (CMHCs)
- Increasing high-intensity outpatient services
- Funds to increase integrated care
- Community investments and much more!





## Top drivers of rising health care costs necessitate affordability leadership

#### **Hospital Prices**

CO.gov/HCPF/ hospital-reports-hub





Department of Heal

#### **Rx Costs**

CO.gov/HCPF/ publications

Nationally leading hospital reports	CO.gov/HCPF/hospital-reports-hub
CIVHC data	CIVHC.org/affordability-dashboard-2
Affordability toolkit	CO.gov/HCPF/affordability

January 2021



# Dept strategy to advance value based payments (VBPs) - payments for quality outcomes, equity and affordability

#### Target: 50%+ in VBP by 2025 (currently 30%)

- Hospital: Quality through Hospital Quality Incentive Payment Program and Hospital Transformation Program
- Primary Care: moving to capitation in this FY 2023-24 budget
- **Prescription Drugs:** with manufacturers, incent docs to be part of the solution
- Maternity Care: bundled payments
- **Behavioral Health:** ensure safety net accountability
- Nursing Homes: pay-for-performance program to increase quality
- **PACE providers:** in design via ARPA work- home and community based services
- **Providers of Distinction, eConsults:** to drive right care, right place





#### Keep Coloradans Covered: 3 Key Operational Goals

- 1. Member continuity of coverage
- 2. Member experience, smooth transitions
- 3. Minimize impact to eligibility workers and state staff



- Help all stakeholders understand the magnitude of this movement est. >325k
- Avoid gaps in coverage and the *devastating consequences of that*
- Help counties with resources and expertise to answer calls, process changes/apps, etc.
- Recognize the affordability challenges for Coloradans moving from Medicaid to Commercial
- Understand everyone's roles and responsibilities EXECUTE
- Successfully navigate est. >325,000 Coloradans to other affordable coverage



## Estimations for 1.75M on Medicaid

Eligible for Employer plans\_ (thru self or family) 10%

Qualify for Marketplace financial support 7%

- About 80% of Medicaid/CHP+ members will continue to qualify
- About 20%, est. >325k, will need to transition to other affordable coverage

Estimating >325k (20%) may no longer qualify and will therefore be disenrolled beginning in May and over the 12 months that follow

Medicare or Veterans

coverage\_

3%

Remain Eligible for Medicaid/ CHP+ 80%

Note: The Department does not have complete information on continuous coverage members who have not completed their verifications. These estimations are based on historical trends and information available on the continuous coverage population, but this population may not exhibit the same trends as prior populations to the same extent.



COLORADO

epartment of Health Care Sources: HHS, Urban Institute, Health Affairs, U.S. Census Bureau, Colorado Health Institute

### Longer, Uneven Recovery Impacts Medicaid, CHP+





COLORADO

# HCPF Emerging Legislative Agenda and Budget

Respectfully request the General Assembly consider legislation on the following:

- Nursing Facility Sustainability and Transformation 2022 Nursing Facility Reimbursement Recommendations. Ensures the nursing facility industry transforms (sustainability, meeting needs of our older adults and people with disabilities)
- **Public Health Emergency Unwind Alignment** would ensure the necessary state authority to continue to access federal funding related to COVID-19 response and recovery activities for the 14-month period after the continuous coverage requirement ends
- Removal of Co-Payments in Medicaid companion bill to R-7 budget request
- HB 23-1040: Prader Willi Syndrome Technical Changes
- Medicaid Provider Rate Review Advisory Committee (MPRRAC) Technical Changes
- Other Affordability focused initiatives in process

#### Budget summary: <u>CO.gov/HCPF/legislator-resource-center</u>



Department of Health Care Policy & Financing Further details: <u>CO.gov/HCPF/legislator-resource-center</u>

## We serve Coloradans



youtu.be/GokavwkrD1g







#### Health Cabinet Policy Summit March 15, 7:30 - 10:00 AM

#### **FREE virtual event**

- Hospital and prescription drug affordability
- Rural hospital opportunities
- Value based payments
- Partnering to Keep Coloradans Covered after the end of the public health emergency

**Registration:** https://hcpf.colorado.gov/affordability



# Thank you!

#### Contacts:

Jo Donlin, Legislative Liaison jo.donlin@state.co.us 720-610-7795

Iris Hentze, Senior Legislative Analyst <u>iris.hentze@state.co.us</u> 720-692-4288

#### **Legislator Resource Center**

The Department submits multiple reports and responds to legislative requests for information. This resource center includes links to reports, fact sheets, and overviews of the budget process.

#### **Overviews and Fact Sheets**

- HCPF 2023 Legislative Agenda Overview December 2022
- FY 2023-2024 Budget Agenda Summary November 2022
- <u>2022 Legislative Session Wrap-Up</u> June 2022
- Health First Colorado Budget Basics November 2020
- Learning from COVID-19: Telemedicine Background & Policy Considerations May 2020
- HCPF 2019-2020 Annual Report
- <u>Accountable Care Collaborative (ACC) Introduction</u> January 2020
- <u>Child Health Plan Plus Overview</u>
- <u>The Accountable Care Collaborative</u>
- Medicaid Buy-In Program For Working Adults With Disabilities Overview
- Medicaid Buy-In Program For Children With Disabilities Overview
- Long-term Services and Supports Overview
- Medicaid Expansion under the Affordable Care Act
- Medicaid Caseload Reports
- <u>County by County Fact Sheets</u>
- Additional Department fact sheets and reports can be accessed on the Department Publications page.

#### **JBC and Budget Presentations**

- 2023-2024 JBC Main, Behavioral Health, and OCL/IDD Hearing Documents December 2022
- <u>R06 and R14 JTC Budget Request Response Documents</u> February 2022
- 2022 JTC Hearing Presentation Slides on R06 and R14 February 2022
- 2022-2023 JBC Main, Behavioral Health, and OCL/IDD Hearing Documents December 2021
- <u>American Rescue Plan Act Spending Plan Presented to the JBC</u> September 2021

Members of the Colorado General Assembly and their aides can <u>sign up for our</u> <u>Legislative Newsletter</u>.

#### Legislator Newsletters

- June 2022
- <u>March 2021</u>
- February 2021
- <u>January 2021</u>



CO.gov/HCPF/legislator-resource-center

## Health Care Payer Shifts

- Mix of public, private, uninsured
- Private insurance, dominant form of coverage, is provided primarily by employers
- Public programs:
  - Medicare 65+ federal program
  - Medicaid low income and people with disabilities - state and federal program (Health First Colorado = Medicaid)
  - Children Health Insurance Program state and federal program (CHP+ in CO
- COVID impact will be seen with current, in process survey



#### Source: Colorado Health Access Survey



2019 CO Health Insurance Status

#### Accountable Care Collaborative

## Regional Accountable Entities (RAEs)

Every member of Health First Colorado has a primary care provider and belongs to a regional organization that helps connect them with the health care they need.



Department of Health Care Policy & Financing

COLORADO

Source: <u>CO.gov/HCPF/accphase2</u>

# **Case Management Regions - SEPs**



#     SEP Name     Counties Served       1     ACMI     Boulder, Broomfield, Cle Creek, Gilpin       2     Starpoint     Alamosa, Saguache       3     Bent County     Bent, Kiowa       4     Starpoint     Custer, Fremont       Rocky Mountain Human     Adams, Arapahoe, Denver Douglas, Elbert       6     Rocky Mountain Health Plans     Conejos, Costilla	
1       ACMI       Creek, Gilpin         2       Starpoint       Alamosa, Saguache         3       Bent County       Bent, Kiowa         4       Starpoint       Custer, Fremont         Rocky Mountain Human       Adams, Arapahoe, Denver         5       Services       Douglas, Elbert	
3     Bent County     Bent, Kiowa       4     Starpoint     Custer, Fremont       5     Rocky Mountain Human Services     Adams, Arapahoe, Denve Douglas, Elbert	er,
4     Starpoint     Custer, Fremont       Rocky Mountain Human     Adams, Arapahoe, Denver       5     Services	er,
Services         Adams, Arapahoe, Denvi	er,
5 Services Douglas, Elbert	er,
6 Rocky Mountain Health Plans Conejos, Costilla	
7 Chaffee County Chaffee, Lake	
8 Delta County Delta, Gunnison, Hinsda	le
9 Jefferson County Jefferson	
10 Kit Carson County Cheyenne, Kit Carson, Li	ncoln
11 Larimer County Larimer	
12 Las Animas County Huerfano, Las Animas	
13 Rocky Mountain Health Plans Mesa	
14 Montezuma County Dolores, Montezuma	
15 Montrose County Montrose, Ouray, San M	iguel
16 Northeastern Colorado AAA Logan, Morgan, Philips, Sedgwick, Washington,	Yuma
Eagle, Garfield, Grand, Jackson, Moffat, Pitkin, J Northwest OLTC (Garfield) Blanco, Routt, Summit	Rio
18 Otero County Crowley, Otero	
19 Prowers County Baca, Prowers	
20 Pueblo County Pueblo	
21 Rocky Mountain Health Plans Mineral, Rio Grande	
Community Connections,	luon
22 Inc. Archuleta, La Plata, San The Resource Exchange	Juan
23 (TRE) El Paso, Teller, Park	
24 Weld County AAA Weld	

January 2022



Department of Health Care

# Case Management Regions - CCBs



#	CCB Name	Counties Served
1	Blue Peaks Developmental Services	Alamosa, Conejos, Costilla, Mineral, Rio Grande, Saguache
2	Colorado Bluesky Enterprises	Pueblo
3	Community Connections, Inc.	Archuleta, Dolores, La Plata, Montezuma, San Juan
4	Community Options, Inc.	Delta, Gunnison, Hinsdale, Montrose, Ouray, San Miguel
5	Developmental Disabilities Resource Center	Clear Creek, Gilpin, Jefferson, Summit
6	Developmental Pathways	Arapahoe, Douglas
7	Eastern Colorado Services	Cheyenne, Elbert, Kit Carson, Lincoln, Logan, Morgan, Philips, Sedgwick, Washington, Yuma
8	Envision	Weld
9	Foothills Gateway	Larimer
10	Horizons Specialized Services	
11	Imagine!	Boulder
12	Inspiration Field	Bent, Crowley, Otero
13	Mesa Developmental Services (Strive)	Mesa
14	Mountain Valley Developmental Services	Eagle, Garfield, Lake, Pitkin
15	North Metro Community Services, Inc.	Adams
16	Rocky Mountain Human Services	Denver
17	Southeastern Developmental Services	Baca, Bent, Kiowa, Prowers
18	Southern Colorado Developmental Disabilities Services	Huerfano, Las Animas
19	Starpoint	Chaffee, Custer, Fremont
20	The Resource Exchange (TRE)	El Paso, Teller, Park



Department of Health Care Policy & Financing

COLORADO

#### Long-Term Services and Supports Programs Enrollment





**COLORADO** Department of Health Care Policy & Financing
SOURCE: FY 2021-22; based on claims in MMIS. \* There is a waiting list for the HCBS-DD waiver. \*\*The Medicaid Buy-In enables working adults to access Medicaid waivers; average caseload for FY 2021-22 was 15,424