

Welcome



COLORADO

Department of Health Care
Policy & Financing

Meeting Agenda

Topic	Time
Welcome and purpose of today's meeting	5 min
Overview of HB 21-1198 (Hospital Discounted Care)	20 min
Share DRAFT documents and policies related to HB 21-1198 and gather stakeholder feedback, suggestions	50 min
Share next steps in the project	5 min

For more information about HB 21-1198 Hospital Discounted Care visit:

- Website: <https://hcpf.colorado.gov/hospital-discounted-care>
- Email: HCPF_HospDiscountCare@state.co.us

HB21-1198: Hospital Discounted Care

- Applies to all acute general and critical access hospitals, all free-standing emergency rooms, and all health care providers working within those settings
- Requires providers to limit charges to low-income patients and sets limits on payment plans
- Sets rules around when patients can be sent to collections
- Program begins on June 1, 2022

Today's Presentation

- Bill Overview
- Policy Development Team
- Next Steps, including Stakeholder Meetings
- Questions

What the Bill States

Patients who Qualify

- Patients with household income at or below 250% of the federal poverty level
- Providers are required to screen patients for all appropriate public health care options (Health First Colorado, Emergency Medicaid, CHP+, Medicare) and other discount programs (CICP, Hospital Discounted Care, etc.)
- Patients do not need to be lawfully present nor Colorado residents to be eligible for Hospital Discounted Care

Screening and Application

- Providers will be required to screen all uninsured patients for public health care coverage and discount program eligibility
 - Patients have the ability to opt out of screening and will need to sign the decline screening form
- Insured patients must be screened if they request a screening
- Providers are required to use the uniform application that is being developed by the Department

Limits on Charges

- Charges limited to the higher of the Medicare or Medicaid rate
 - These will be set by the Department for each provider and health care professional
- Rates will be published on the Department's website similar to how other rates are currently available

Payment Plans

- Patients eligible for the Hospital Discounted Care program must be offered payment plans for their medical bills
- Payment plans are capped
 - 4% of the monthly household income for facility charges
 - 2% of the monthly household income for each health care professional that bills separately from the facility

Payment Plans (cont.)

- Payment plans can be a maximum of 36 months long
- Patient's bills are considered paid in full once they have made the equivalent of 36 payments

Collections

- Prior to selling patient debt to a collection agency or debt buyer, or before pursuing any extraordinary collection action:
 - Providers must screen patients for eligibility for public health care coverage and discount programs;
 - Discounted care must be provided to the patient under the Hospital Discounted Care program rules;
 - Patients must be provided a plain language explanation of their bill and be notified of potential collections actions; and
 - Providers must bill any third party payer that is responsible for providing health care coverage to the patient whether in- or out-of-network.

Patient Rights

- Patient rights under the Hospital Discounted Care program are being drafted
- Providers are required to post these patient rights in patient waiting areas, on the hospital's website, on the patient's billing statement, and make the information available verbally prior to the patient being discharged from the hospital in their primary language



Questions?

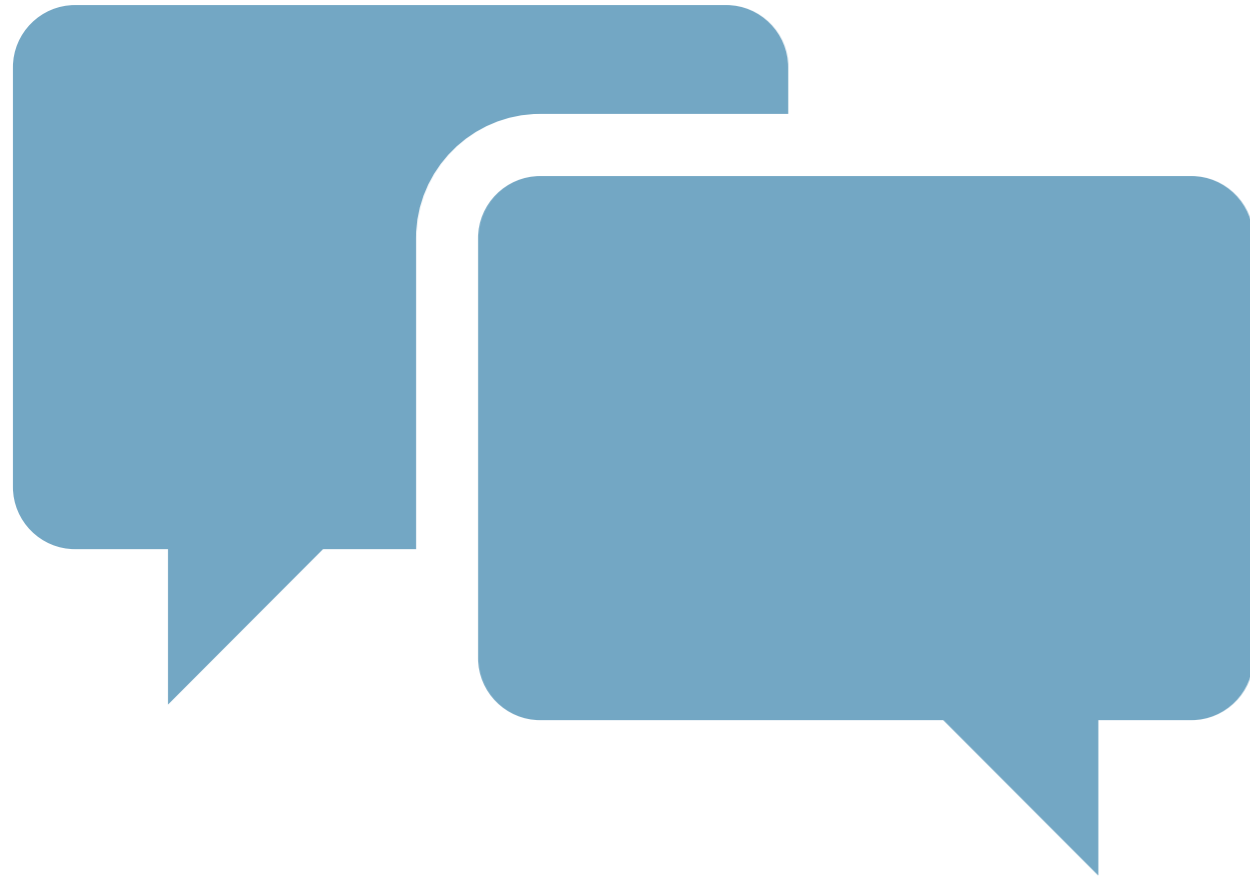
Policy Development Team

Policy Development Team (PDT)

- Department has put together a team of stakeholders to assist in the development of policies, forms, and rules for the Hospital Discounted Care program
- Organizations represented include:
 - Colorado Hospital Association (CHA)
 - Colorado Rural Health Center (CRHC)
 - Colorado Consumer Health Initiative (CCHI)
 - Colorado Center on Law and Policy (CCLP)
 - Colorado Medical Society (CMS)
 - CU Medicine Physicians

Deliverables

- The PDT is in the process of drafting:
 - Rules
 - Uniform screening policy
 - Uniform application
 - Patient rights
 - Decline screening form
 - Complaint process
 - Appeals process



Draft Documents for Review & Discussion

Background of Documents Shared Today

- The two documents we are sharing today, are required by HB 21-1198 to be shared by all hospitals and this is a second draft that was edited based upon Medicaid Member feedback and PDT edits.
 - Original drafts were translated into Spanish but there was not enough time translate the edited version
- Hospitals may put the content of these documents into electronic or other formats, but the content of the final, Department approved documents, must remain unchanged.
- The patient's rights document is required to be at a 6th grade reading level, per HB 21-1198.
- Today, we are gathering your feedback regarding the readability, usability of these two documents.

Discussion/Feedback (1 of 2)

Patient's rights

Discussion Questions

Viewing the patient's rights documents as patient, guardian, advocate or provider:

1. What do you think is the most important information in the Patients' Rights document?
2. Based on what's in the document, would a patient know why the hospital is giving this document to them?
3. Based on what's in the document, is it clear who a patient should go to with questions?
4. Are there any words or terms you didn't understand, or that you think a patient might not understand?
5. What other questions do you have about the document?

Discussion/Feedback (2 of 2)

[Form to opt out of screening](#)

Discussion Questions

Viewing the patient's rights documents as patient, guardian, advocate or provider:

1. Feedback on the layout of the form?
2. What would make it easier to complete this form?
3. How effective are the descriptions of the Public Health Insurance Coverage and Financial Help Options listed on page 2?
4. Is there any important information missing on this form that would help you make a decision?
5. Are there any words or terms you didn't understand?
6. What would you do if you needed help completing this form?

Next Steps



- Upcoming stakeholder meeting to be announced
- Rules to Medical Services Board tentatively scheduled for March

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