



MEETING MINUTES

Rural Provider Access and Affordability Advisory Committee Department of Health Care Policy & Financing

Via [Zoom](#), passcode 279779

October 7, 2022, 1:00 P.M.

1. Call to Order and Introductions

Michelle Mills, Chair, 1:00 pm

Members present: Nancy Dolson (HCPF), Michelle Mills, Angela Koch, Steve Holloway, Jeanie Gentry, Kelea Nardini, Zachary Weiderspon

Members excused: Beth Saxton, Stephanie Pugliese

HCPF staff present: Shay Lyon, Angela Ukoha, Emily Holcomb, Tyler Samora, Hannah Hall

2. Approve Minutes from September 23, 2022 Meeting

Committee Members, 1:02 pm

Kelea Nardini motions to approve, Jeanie Gentry seconds.

No discussion.

Unanimous aye.

3. Continue Review and Discussion of Grant Criteria

Committee Members, 1:03pm

Strength of proposal components to be discussed.

Review of slides (slide deck handout) with criteria agreed upon and suggested so far.

Evaluation of impact to access and affordability: It will be mostly

qualitative metrics.

Policymaker intent: ERTF Policy Proposal outlines intent for SB 22-200 to address rural health care disparities. Areas of focus include access to special care, improving cost efficiency of care, better outcomes, build infrastructure and technology, etc.

Statement of need proposed questions: what problem will the proposal attempt to solve? What is the specific community need to be met and how?

Sustainability: how does this proposal support the community long term? When funds are exhausted, what is the sustainability plan to maintain changes made through the program?

Drop down menus may help to simplify the proposal process suggested. Suggested that it should be kept broad, 3-4 categories, filtered by priorities. Drop down lists are a starting point. Will keep topics narrow and make reviewing the proposals simpler for the Committee.

Suggestion that structure of these questions should be more specific to set the applicants up for success by asking for focused information. Questions should require specific information to be provided

Projected timeline suggested in the proposal to set expectations for deliverables.

Action item: Committee to brainstorm specific questions in each category for grant application to gather relevant, useful information.

Suggested additional categories: timeline; if the funds will supplement existing projects within the facility

Budget/Costs: HCPF recommends that a budget should be required but sophistication of the budget will not be measured. The Department may be consulted to work with applicants to support budgeting. Maximum amount of award to be decided to assist applicants in forming a budget for their proposals.

Suggestions for maximum amount of award: \$500,000 to be distributed between 20 hospitals of \$9.6 million total pot. Commented that this may not be enough for most projects, but may be enough to aid in planned, partially funded projects. Another suggested cap of award \$640,000 could be spread between 15 applicants. Higher caps suggested for facilities that

can show partnership between other facilities on projects to improve access and affordability.

Suggested that Committee has the authority to award full or partial awards to projects, depending on the strength of proposal.

Suggested that awards be extended to facilities to reimburse services that have gone not reimbursed, i.e. behavioral health, services provided to homeless population.

4. Public comment

1:48pm

Dr. Sami Diab: (from chat) “Please consider specificity for access to cancer care (as discussed on the last call). Education and training of staff and public is missing. The other specific suggestion is encouraging access to clinical trials.”

Steve Sanchez: would like to see behavioral health included in criteria and several yearlong timeline in order to implement effective programs.

No more comments given.

5. Additional Committee Discussion, Possible Action

1:55 pm

Maximum award amount again suggested to be \$650,000.

Overall criteria scoring system for facility/age of plant, case mix, financial health, and impact on access and affordability of care to be reviewed. Agreement on criteria reached by Committee. Handouts from previous meeting referenced as examples of metrics.

Criteria framework to be specified and finalized next meeting.

Allow additional information to be included in proposal outside of pre-selected categories.

Suggested that the Committee avoids creating their own metrics for financial health and use information already collected by trust-worthy third party.

Committee action: finalize financial health criteria and maximum award amount capped at \$650,000 per entity.

Jeanie Gentry motions for both actions. Angela Koch seconds both motions.

Unanimous ayes. None opposed.

6. Next Steps and Adjourn

2:14pm

For next meeting, bring suggestions for scoring/weighting criteria and specific questions for proposal sections.

Timeline for expenditures from Nancy Dolson to be presented next meeting.

2:16pm, Zach Weiderspon motions to adjourn. All in agreement.

7. Next meeting

October 21, 2022, 1:00 P.M. via Zoom

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Reasonable accommodations will be provided upon request. Auxiliary aids and services for individuals with disabilities and language services for individuals whose first language is not English may be provided upon request. Please notify Nancy.Dolson@state.co.us or the [504/ADA Coordinator](#) or hcpf504ada@state.co.us at least one week prior to the meeting to make arrangements.

