



Department of Health Care Policy and Financing

Hot Topics

Prepared for the Colorado General Assembly

JUNE 2, 2008

VOLUME 3, NUMBER 3

The Mission of the Department of Health Care Policy and Financing is to provide cost-effective, quality health care services to Coloradans.

Health Care Legislative Successes 2008 Session

The 2008 legislative session produced a significant number of improvements to health care for Coloradans, especially the children. Here are just a few of the highlights:

Expand Access and Improve Health Care for Kids

- Extend health insurance to thousands more Colorado kids by expanding eligibility in CHP+ to 225% of the Federal Poverty Level (SB 160, Hagedorn / McGihon)
- Provide a Medical Home to every child in Medicaid and CHP+ (Building Blocks Budget Package)
- Improve the mental health benefit in CHP+ (SB 160, Hagedorn / McGihon)
- Expand support for the Colorado Responds to Children with Special Needs program (HB 1100, Gagliardi / Keller)
- Increasing the accessibility to health insurance (SB 161, Hagedorn/Mcihon)

Strengthen Medicaid and CHP+

- Make it easier for families to access health care services by centralizing enrollment for Medicaid and CHP+ and making fixes to CBMS (Building Blocks Budget Package)
- Increase funding for outreach and enrollment (Budget)
- Increase provider reimbursement rates for primary and oral health care providers (Building Blocks Budget Package)
- Reduce fraud and abuse in Medicaid (HB 1409, Pommer / Johnson)
- Expand family planning services in Medicaid (SB 3, Boyd / Riesberg)

Improve Quality & Efficiency in Health Care

- Standardize Health Plan ID Cards (SB 135, Mitchell / Gagliardi)
- Increase and improve transparency in health insurance (HB 1385, Primavera / Schwartz)
- Invest in health information technology through support of the Colorado Regional Health Information Organization (CORHIO) (Building Blocks Budget Package)

Strengthen Nursing and Patient Safety

- Implement a pilot program to involve direct-care nurses in decision-making processes in hospitals (SB 188, Boyd / Pommer)
- Add nursing-sensitive quality measures to the Colorado Hospital Report Card (SB 196, Boyd and Tochtrop / Pommer)
- Strengthen the authority of Advanced Practice Nurses (HB 1060, Gagliardi / Hagedorn; HB 1061, Roberts / Hagedorn; and HB 1094, Gagliardi/Hagedorn)

"My vision remains the same – that high quality, affordable health care is available to every Coloradan."

Governor Bill Ritter

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HCBS Children with Autism (CWA) Medicaid Waiver

The HCBS-CWA has been enrolling children for just over a year and is now at full capacity with 75 children receiving Behavioral Therapy Services. The waitlist continues to grow at a rapid rate. There are currently 135 children approved for the waitlist with the expected wait time for a child approved today nearly 4 years. The length of the waitlist means it is very important to get children on the waitlist early, or a child will turn 6 years old before receiving services. Currently, the waiver ends on a child's 6th birthday.

The waiver has expanded from 5 to 10 behavioral therapy providers statewide with a change in provider qualifications in December of 2007. The increased number of providers allows for more therapy options Across Colorado. Metro area providers are working with Behavioral Therapists in rural areas to provide treatment for children with limited access to therapy.

For FY 2008-09 the HCBS-CWA hopes to continue to increase the number of available providers and continue to develop the provider certification process with the Department of Public Health and Environment. Also in FY08-09, monitoring and quality control of the program including: providers, case managers, and billing will be a major emphasis.

Centralized Eligibility Task Force

The Department of Health Care Policy and Financing is creating a task force to assess the impact of centralizing eligibility on our partners and to address concerns. The task force will include county commissioners and directors of County Departments of Social/Human Services as well as other community stakeholders. The first task force meeting will be held Thursday, June 5, from 9-11AM in the first floor conference room at 225 E 16th Ave.

Request for Comment on Draft Request for Proposals-- Colorado Medicaid Community Mental Health Services Program

The Colorado Department of Health Care Policy and Financing (the Department) is requesting comments on its draft Request for Proposals (RFP) to administer and operate the Colorado Medicaid Community Mental Health Services Program (Mental Health Program). The Mental Health Program is a capitated managed care program. Bidders selected to operate the Mental Health Program in each of the five service areas throughout the state will become the Behavioral Health Organizations (BHOs) responsible for delivering, providing or arranging for the provision of all medically necessary mental health services for clients enrolled in the Program.

The draft RFP and exhibits will be published on the Department Web site the week of June 9th at: <http://www.chcpf.state.co.us/HCPF/web/draftfrp.asp>. Public comment period will be from the date the draft RFP is posted through July 3, 2008. An e-mail address and a fax number for submitting comments will be posted with the Draft RFP and Exhibits. The list of exhibits published with the draft RFP is incomplete. Additional exhibits, including capitation rates for the Mental Health Program, will be published with the final RFP.

The Department will host a series of public forums to invite stakeholders to ask questions and provide feedback on the Draft RFP. Meeting times and locations are listed below and are posted on the Department's website.

The PECOS One-Stop-Shop Medicare & Medicaid Provider/Supplier Enrollment Project

The PECOS Project is a national enrollment system--a single repository for all Medicare provider/supplier enrollment data. A single provider/supplier enrollment process benefits virtually every stakeholders in the Medicare and Medicaid enrollment process, including the Federal government, beneficiaries, tax payers, and states. It also enhances fraud detection and prevention, reduces costs and increases quality in information systems, and increases efficiency and accuracy in provider enrollment. CMS will build and support a national system bridging Medicare and Medicaid provider/supplier enrollment, including the "Joint Form". Currently, there are 5 Medicare enrollment forms and over 850 Medicaid forms. This process will help streamline the application and enrollment process making it easier for beneficiaries to understand and use. Colorado is one of the states being considered for a pilot program.

For more information on these or other topics, please contact Nicole Storm, Legislative Analyst, at 303-866-3180, Nicole.Storm@state.co.us