Our Mission:

Improving health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources
Presentation Agenda

• Department Overview
• FY2014-15 Budget Overview
• Strategic Plan
• Accountable Care Collaborative & HB13-1196 Update
• Budget Requests
• Legislative Agenda
• Updates
What We Do

The Department of Health Care Policy and Financing (HCPF) is the State agency responsible for the administration of:

- Medicaid
- Child Health Plan *Plus* (CHP+)
- Other health care and long-term services and supports for eligible low-income families, children, older persons, and persons with disabilities
Medicaid & CHP+

Medicaid

- Medicaid is a program that provides health coverage for low-income pregnant women, parents, single adults, children, persons with disabilities, and seniors.
- Receives approximately 50% of its funding from the federal government

Child Health Plan *Plus* (CHP+)

- CHP+ is affordable health insurance for Colorado children 18 and under and pregnant women
- Receives approximately 65% of its funding from the federal government
Who We Serve

As of September 2013:

• 744,000 Medicaid clients
• 68,000 children and pregnant women in CHP+
• 56% of Medicaid clients are children age 20 and under
HCPF’s FY2014-15 Total Budget Request

- $7.55B Total Funds
- $4.39B Federal Funds
- $1.73B General Fund
- $9.68M Reappropriated Funds
- No FTE Requested
FY2012-13 Medicaid Caseload and Expenditures

- **Caseload**
  - Children: 56.49%
  - Low-Income Adults: 23.51%
  - Elderly & Persons w/ Disabilities: 16.50%
  - Other: 3.50%

- **Expenditures**
  - Children: 21.51%
  - Low-Income Adults: 55.38%
  - Elderly & Persons w/ Disabilities: 20.45%
  - Other: 2.65%
**Promoting prevention and wellness**
- SB13-200 (Aguilar/Ferrandino) Medicaid Expansion will increase access to health care for over 160,000 Coloradans
- SB13-242 (Nicholson/Primavera) Adult Dental Benefit in Medicaid

**Expanding Coverage, access and capacity**
- Expanded Substance Use Disorder Benefit
- FY13-14 and FY14-15 Across the board provider rate increase
- Expand access to specialists through telemedicine

**State of Health**

**Improving health system integration and quality**
- FY2014-15 budget request Health Information Technology
- HB13-1068 (Young/Roberts) Allow unannounced on-site inspections for Medicaid Providers
- HB13-1314 (JBC) Transfer of DDD from DHS to HCPF will help realign and simplify waiver system
- Customer Service Technology Improvement

**Enhancing value and strengthening sustainability**
- HB12-1339 (Becker/Lambert) CBMS Allocation for system rebuild and redesign
- HB12-1281 (Gerou & Young/Steadman & Roberts) Payment Reform
- HB12-1054 (Fields/Boyd) Simplification of Procurement Process
- HB13-1068 (Young/Roberts) Unannounced Inspections
- MMIS re-procurement and rebuild
**Department of Health Care Policy & Financing**  
**5-Year Strategy Map**

**Vision:**  
The Coloradans we serve have integrated health care and enjoy physical, mental and social well-being.

**Mission:**  
Improving health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources.

### Goals

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<tr>
<th>I. Improve health outcomes, client experience and lower per capita costs*</th>
<th>II. Sustain effective internal and external relationships</th>
<th>III. Provide exceptional service through technological innovation</th>
<th>IV. Build and sustain a culture where we recruit and retain talented employees</th>
<th>V. Enhance efficiency and effectiveness through process improvement</th>
<th>VI. Ensure sound stewardship of financial resources</th>
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<tbody>
<tr>
<td>(Customer)</td>
<td>(Communications)</td>
<td>(Technology)</td>
<td>(People)</td>
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#### Strategies

- **A. Integrated Delivery System**
- **B. Benefit / Program Design**
- **C. Payment Methodology**
- **D. Eligibility & Enrollment**
- **E. Client Experience & Engagement**
- **A. Internal Communications**
- **B. External Communications**
- **C. Government Affairs**
- **B. Collaboration & File Sharing**
- **A. Health Information Technology (HIT)**
- **B. Employee Engagement**
- **C. Human Resources Transformation**
- **A. Workforce Development**
- **B. LEAN Community**
- **C. Tri-Agency & Interagency Collaboration**
- **A. Strategic Management Process (SMP)**
- **B. Fraud, Waste & Abuse Prevention**
- **C. Grants Management**
- **A. Cost Containment Expertise**
- **D. Revitalization**

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*Adapted from the Institute for Healthcare Improvement’s Triple Aim.*
Accountable Care Collaborative (ACC)

Care Coordination

Data and Analytics
Accountable Care Collaborative

2013 Goals

- Enrollment 200,000
- Shared savings Implementation
- Medicare-Medicaid Enrollees Implementation with CMS approval
- HB12-1281 Implementation

2013 Results

- By June 2013, enrollment at 352,236
- Implementing shared savings. $1.1M given to Providers and RCCOs for meeting performance metrics
- Submitted implementation plan in May 2013. Working with CMS on implementation
- Rocky Mountain Health Plans pilot project selected in competitive process. Pilot will begin in 2014
ACC Annual Report Highlights

FY2012-13 Net Savings: $6 Million
HB13-1196 (Stephens/Newell) Report Waste Prevention in ACC

Efforts in place to reduce avoidable, duplicative, variable and inappropriate health care resources

• Technology
• Key Performance Indicators
• Care Coordination
Budget Requests and Legislative Agenda
Health Information Technology

• Health information about Medicaid clients is fragmented

• Electronic health records will improve care by allowing providers to make better-informed decisions

• The Department would coordinate with OIT to build interface with CO’s existing health information technology network

• Unique opportunity to build innovative health information resource with minimal state funds

$1.05M General Fund  
$4.69M Federal Funds
Improving Access to Services for Persons with Intellectual and Developmental Disabilities

Eliminate the Supported Living Services Waiting List
$15M General Fund - $30M Total Funds

• 1,526 people on the waiting list for the HCBS-SLS waiver
• Request would cover 1,526 enrollments and increase the services plan limits by 20%

Additional Spots to Reduce the Developmental Disabilities Waiting List
$1.4M General Fund - $2.8M Total Funds

• Additional spots need funding to cover youth transitioning from child programs and emergency placements
• Request funds 186 slots of the 2,011 on the waiting list for the HCBS-DD waiver

Restore Funding for Family Support Services
$3.4M General Fund - $3.4M Total Funds

• 5,945 individuals with disabilities are on the waiting list for FSS
• Request would restore funding to FY2009-10 levels
Strategically Increasing Provider Rates

- Adequate and appropriate reimbursement ensure client access to health care
- Request builds on last year’s provider rate increases
- 1% across the board increase to eligible providers
- Targeted .5% rate increase would allow the Department to incentivize outcomes instead of over-utilization

$20.07M General Fund
$36.77M Federal Funds
2014 Legislative Agenda

• Alignment of Medicaid Eligibility Categories with Federal Law

• Clarification of Nursing Facility Rate Adjustments

• Continue DHS/HCPF Transfer Authority
Updates
PEAK/Expansion Update

- The Colorado Program Eligibility and Application Kit (PEAK) website allows Coloradans to apply for public assistance benefits electronically.
- The website is jointly managed by OIT, HCPF, and DHS.
- Since October 1st:
  - PEAK website receives an average of 3,303 hits per day.
  - Approximately 28,827 new applications created online through PEAK.
  - We have identified 34,168 individuals (20%) of the 160,000 individuals that will be eligible for Medicaid expansion starting January 1, 2014.
HB12-1281: Payment Reform Update

- HB12-1281 (Rep. Gerou, Rep. Young & Sen. Steadman, Sen. Roberts) allowed the Department to look at various payment models to improve the value of services while reducing costs

- In July, the Department selected a global payment pilot project with Rocky Mountain Health Plans (RCCO 1 – Western Slope)

- The RMHP proposal was selected because it is innovative and provides the opportunity to pay for care using a global payment that is comprehensive and integrates physical health, behavioral health and substance abuse services

- Over the next year, the Department will work with RMHP to implement the proposed payment reform pilot program that will begin on or before July 1, 2014
Update on DDD Transfer to HCPF

- HB13-1314 (JBC) authorized the transfer of the Division for Developmental Disabilities to HCPF from DHS

- The official administrative transfer will take place on March 1, 2014

- In July, the JBC approved funding to move the DDD staff (34 FTE) from the Ft. Logan campus to co-locate with HCPF long-term services and support staff

- HCPF and DHS have developed multiple work groups to ensure a smooth transition
Community Living Advisory Group

- Created through Executive Order summer 2012
- Charged with recommending changes to the long-term services and supports system to help meet the growing needs of people with disabilities and aging adults
- Members represent a diverse group of stakeholders
- Recommendations expected by September 2014
Enrolled Providers FY2009 - FY2013

- Primary Care Providers
- Total Providers
State Innovation Models (SIM) Grant

- The SIM Initiative supports the development and testing of state-based models for payment and health care delivery system transformation.

- HCPF received a $2 million grant to create a State Health Innovation Plan.

- The plan will describe Colorado’s overall strategy to achieve better health, better patient experiences and lower costs.

- HCPF will submit its plan in November 2013.

Source: Centers for Medicare & Medicaid Services
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Questions?