



Legislative Council Staff

Research Note

Version: Final

Date: 7/14/2016

Bill Number

House Bill 16-1081

Sponsors

*Representatives Ransom &
Esgar
Senators Lundberg & Newell*

Short Title

*Obsolete Reporting Department
of Health Care Policy &
Financing*

Research Analyst

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Status

This research note reflects the final version of the bill which becomes effective August 10, 2016, assuming no referendum petition is filed.

Summary

This bill repeals eight reports the Department of Health Care Policy and Financing (HCPF) is required to submit to the General Assembly. The report topics are:

- strategies to improve health outcomes;
- National Correct Coding Initiative;
- managed quality care;
- pharmacy utilization plan;
- Children's Basic Health Plan (CHP+) contractors;
- comprehensive medical plan;
- medical premiums under the Medicaid Buy-in Program; and
- CHP+ annual savings.

Background

The HCPF oversees and operates Colorado's Medicaid, CHP+, and other public health care

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programs for Coloradans who qualify.

The report concerning strategies to improve health outcomes was originally established in 2007, as part of a bill intended to improve health care for children. According to HCPF, the Centers for Medicare and Medicaid Services requires HCPF to submit pediatric health care quality performance measures, which was not the case when this report was established. This report is inconsistent with federal reporting requirements and administratively burdensome.

The report on the National Correct Coding Initiative was established in 2010. According to HCPF, this report is no longer relevant because providers can rebill the claim with accurate coding to receive proper reimbursement.

The report on managed quality care was established in 1997. According to HCPF, the report is outdated and the department annually submits the Colorado Health Plan Report Card which compares the various plans available to clients.

The report on the pharmacy utilization plan was established in 2003. According to HCPF, the information required by this report is duplicative of other reporting requirements and is no longer relevant.

The report on CHP+ contractors was established in 2001. According to HCPF, the information required is also reported in the CHP+ Annual Report, making this report duplicative and unnecessary.

The report on the comprehensive medical plan dates back to at least 1991. However, HCPF reports no known date when the report was last submitted and that there is no record of a comprehensive medical plan.

The report on medical premiums under the Medicaid Buy-in Program was established in 2008. This was a one time report that was due on January 1, 2010. According to HCPF, legislation was passed in 2009 providing state funding for the Medicaid Buy-in Program, which eliminated the need for HCPF to conduct an actuarial study as required by the report.

The report on CHP+ annual savings was established in 2006. According to HCPF, the annual budget outlines the anticipated cost savings in the current and subsequent fiscal years for all medical assistance programs, including CHP+, making this report obsolete.

House Action

House Health, Insurance, and Environment Committee (February 2, 2016). At the hearing, representatives from the Department of Health Care Policy and Financing testified on the bill. The committee referred the bill to the House Committee of the Whole with no amendments.

House second reading (February 8, 2016). The House passed the bill on second reading with no amendments.

House third reading (February 9, 2016). The House passed the bill on third reading with no amendments.

Senate Action

Senate Health and Human Services Committee (February 18, 2016). The committee

referred the bill to the Senate Committee of the Whole with no amendments.

Senate second reading (February 23, 2016). The Senate passed the bill on second reading with no amendments.

Senate third reading (February 24, 2016). The Senate passed the bill on third reading with no amendments.

Relevant Research

The following are links to the available reports that are repealed by the bill:

- Strategies to improve health outcomes report: <http://bit.ly/29iowoV>;
- National Correct Coding Initiative report: <http://bit.ly/29mLDEC>;
- Managed quality care report: <http://bit.ly/29leRyo>;
- Pharmacy utilization plan report: <http://bit.ly/29rgcqD>; and
- CHP+ annual savings report: <http://bit.ly/29mNfP0>.