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FINAL FISCAL NOTE

Drafting Number: LLS 18-1105
Prime Sponsors: Rep. Young, Sen. Moreno

Date: September 24, 2018
Bill Status: Signed into Law
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Bill Topic: ALL-PAYER HEALTH CLAIMS DATABASE

- Summary of Fiscal Impact: State Revenue, State Expenditure, State Transfer, TABOR Refund, Local Government, Statutory Public Entity

This bill allows General Fund moneys to be used to support the All-Payer Health Claims Database and creates a grant program to support organizations using its data. This will increase state expenditures on an ongoing basis.

Appropriation Summary: For FY 2018-19, the bill requires and includes an appropriation of \$2,640,790 to the Department of Health Care Policy and Financing.

Fiscal Note Status: This fiscal note reflects the enacted bill. The bill was recommended by the Joint Budget Committee and is part of its FY 2018-19 budget package.

Table 1
State Fiscal Impacts Under HB 18-1327

Table with 3 columns: Category, FY 2018-19, FY 2019-20. Rows include Revenue, Expenditures (General Fund, Federal Funds, Centrally Appropriated, Total), Total FTE, Transfers, and TABOR Refund.

Summary of Legislation

This bill allows General Fund moneys to be appropriated to the Department of Health Care Policy and Financing (HCPF) to pay the costs of the All-Payer Health Claims Database (APCD). It also creates a grant program to support nonprofit and government organizations, other than HCPF, that conduct research using the data in the APCD. Currently, the APCD is supported by private grant funding that is set to expire.

State Expenditures

Beginning in FY 2018-19, this bill increases state expenditures in HCPF by \$2.7 million per year. These costs are summarized in Table 2 and discussed below.

**Table 2
Expenditures Under HB 18-1327**

	FY 2018-19	FY 2019-20
Health Care Policy and Financing		
Personal Services	\$85,232	\$92,981
Operating Expenses and Capital Outlay Costs	\$5,558	\$950
Medicaid Share of APCD Costs	\$2,050,000	\$2,050,000
Research Grants	\$500,000	\$500,000
Centrally Appropriated Costs*	\$14,348	\$15,786
FTE – Personal Services	0.9 FTE	1.0 FTE
Total Cost	\$2,655,138	\$2,659,717
Total FTE	0.9 FTE	1.0 FTE

* Centrally appropriated costs are not included in the bill's appropriation.

Staffing and administration. HCPF will require 1.0 FTE to support the APCD and grant program. Personal services, operating, and capital outlay expenses for this staff are shown in Table 2 above. Costs in the first year are prorated to reflect the General Fund payday shift.

Medicaid share of APCD costs. HCPF will have costs of \$2.1 million per year to contribute to the operations of the APCD. This will cover approximately 40 percent of the APCD's \$5.0 million budget for FY 2018-19.

Grant program. For FY 2018-19 and future years, it is expected that HCPF will award \$500,000 in grants per year. The APCD Advisory Committee in HCPF will also have additional workload to review grant applications.

Centrally appropriated costs. Pursuant to a Joint Budget Committee policy, certain costs associated with this bill are addressed through the annual budget process and centrally appropriated in the Long Bill or supplemental appropriations bills, rather than in this bill. These costs, which include employee insurance and supplemental employee retirement payments, are estimated to be \$14,348 in FY 2018-19 and \$15,786 in FY 2019-20.

Effective Date

The bill was signed into law by the Governor and took effect on April 23, 2018.

State Appropriations

For FY 2018-19, the bill requires and includes an appropriation of \$2,640,790 to HCPF and an allocation of 0.9 FTE. Of this amount, \$1,570,395 is General Fund and \$1,070,395 is federal funds.

State and Local Government Contacts

Health Care Policy and Financing Information Technology