Agenda

• Welcome and Introductions

• Public Reporting Update
  – Recent Public Releases
  – Upcoming Releases

• Regulatory Topics
  – CO APCD 2018 Rule Change
  – CO APCD/HCPF Scholarship Administration

• Committee Business

• Questions, Comments, Suggestions
Public Reporting Update
Recent Public Releases of CO APCD Data
Costs for firearm-related claims climbed approximately 50% between 2012 and 2016.

In 2016, there were over 3,000 claims ($1.6M) related to accidentally firearm injuries.
Services Analyzed

**Inpatient**
- Bronchitis & Asthma, DRG 203
- Cesarean Section, DRG 766
- Cesarean Section, w complicating conditions, DRG 765
- Esophagitis, Gastroenteritis, and Digestive Disorders, DRG 392
- Heart Failure & Shock, DRG 293
- Heart Failure & Shock, w complicating conditions, DRG 292
- Major Joint Replacement/Reattachment, Lower Extremity, DRG 470
- Newborn, DRG 795
- Spinal Fusion, non-cervical, DRG 460
- Stroke (Transient Ischemia Attack), DRG 069
- Vaginal Delivery, DRG 775
- Vaginal Delivery w complicating conditions, DRG 774

**Outpatient**
- Cataract Surgery with Lens, CPT 66984
- Chemo Infusion (1 hr), CPT 96413
- Colonoscopy w Biopsy, CPT 45380
- Colonoscopy w Lesion Removal, CPT 45385
- Dialysis evaluation, CPT 90945
- Knee Arthroscopy/Surgery, CPT 29881
- Major Joint, Bursa Drain, Injection, CPT 20610
- Ultrasound Therapy, CPT 97035
- Upper GI Endoscopy with Biopsy, Single/Multiple, CPT 43239
- Laparoscopy Appendectomy, CPT 44970
Service-Level Results: Variation Significant Across Regions for Specific Services

$26,000 Difference in Median Prices Regionally for Major Joint Replacement (210%-430% Medicare)
Service-Level Results: Variation Significant Across Providers for Specific Services

Median Allowed Cost and Utilization, by Provider
470 Major joint replacement or reattachment of lower extremity w/o MCC, All Region(s), Commercial, 2016

$19,000

$38,000 Difference in Facility Prices (160%-490% Medicare)

$57,000
Statewide Results: Percent of Medicare Fee Schedule Comparison/Trend, Commercial Payers

<table>
<thead>
<tr>
<th>Service Type</th>
<th>2012 Avg % Medicare*</th>
<th>2016 Avg % Medicare*</th>
<th>Percentage Point Increase 2012-2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inpatient Services</td>
<td>250% (Range 210%-300%**)</td>
<td>290% (Range 260%-330%**)</td>
<td>40</td>
</tr>
<tr>
<td>(Top 12 By Volume/Price)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Outpatient Services</td>
<td>440% (Range 210%-1,160%**)</td>
<td>520% (Range 250%-1,150%**)</td>
<td>80</td>
</tr>
<tr>
<td>(Top 10 By Volume/Price)</td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

* Average % Medicare reflects an average of the individual service category averages analyzed for IP and OP.

** Range reflects lowest average % Medicare rate and highest average % Medicare rate across the individual services analyzed.

In 2016, Commercial Payers paid 290% - 520% Medicare rates (IP/OP), and OP rates have increased nearly 80 percentage points.
## Reducing CO Statewide Price Variation:
### IP/OP Annual Potential Savings Scenarios, Commercial Payers, 2016

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Total Current Spend</th>
<th>Median Price (Potential Savings*)</th>
<th>200% Medicare (Potential Savings**)</th>
<th>150% Medicare (Potential Savings**)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Inpatient Services</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Top 12 By Volume/Price)</td>
<td>$284 Million</td>
<td>$36 Million</td>
<td>$86 Million</td>
<td>$136 Million</td>
</tr>
<tr>
<td><strong>Outpatient Services</strong></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>(Top 10 By Volume/Price)</td>
<td>$59 Million</td>
<td>$13 Million</td>
<td>$36 Million</td>
<td>$42 Million</td>
</tr>
<tr>
<td><strong>Total (IP/OP)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(rounded to nearest million)</td>
<td>$343 Million</td>
<td>$49 Million</td>
<td>$122 Million</td>
<td>$178 Million</td>
</tr>
</tbody>
</table>

*Median Price Potential Savings* reflects potential annual statewide savings if all IP/OP payments analyzed that were above the statewide median were paid at the statewide median price. Assumess prices below statewide median remain the same.

**150% and 200% Medicare Potential Savings** reflects potential annual statewide savings if all IP/OP payments analyzed were normalized to either 150% or 200% Medicare payments.

### Potential Annual Statewide Cost Savings: $49-$178 Million
$178 Million Annual Savings Could Pay For:

• A 6.4% or $3300 raise for every CO teacher

• Tuition at CU Boulder for 12,000 students

• Affordable housing units for 890 families in need

• 20% of CO’s annual road repair budget shortfall
# Consumer Shopping Tool: Imaging

## Shop for Health Care Services

<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Distance (Miles)</th>
<th>Price Estimate</th>
<th>Quality</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Average Price</td>
<td>Price Range</td>
</tr>
<tr>
<td>Valley View Hospital</td>
<td>121.2</td>
<td>$2,140</td>
<td>$1,820–$2,170</td>
</tr>
<tr>
<td>Childrens Hospital Colorado Anschutz Medical Campus</td>
<td>13.7</td>
<td>$1,420</td>
<td>$900–$1,560</td>
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<tr>
<td>SCL Health St Marys Medical Center</td>
<td>191.8</td>
<td>$1,140</td>
<td>$1,060–$1,200</td>
</tr>
<tr>
<td>Community Hospital Medical Imaging</td>
<td>194.2</td>
<td>$1,000</td>
<td>$940–$1,150</td>
</tr>
<tr>
<td>UCH Health Yampa Valley Medical Center</td>
<td>102.2</td>
<td>$950</td>
<td>$180–$980</td>
</tr>
<tr>
<td>Montrose Memorial Hospital</td>
<td>174.9</td>
<td>$840</td>
<td>$840–$980</td>
</tr>
<tr>
<td>Banner Health North Colorado Medical Center</td>
<td>47.0</td>
<td>$770</td>
<td>$640–$780</td>
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<tr>
<td>Banner Health Mckee Medical Center</td>
<td>42.3</td>
<td>$770</td>
<td>$750–$790</td>
</tr>
<tr>
<td>Banner Fort Collins Medical Center</td>
<td>54.0</td>
<td>$750</td>
<td>$750–$750</td>
</tr>
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</table>
## Consumer Shopping Tool: Imaging

### Shop for Health Care Services

**Select Service:**
- 70450 - CT scan of head or brain
- 70551 - MRI scan of brain
- 70553 - MRI scan of brain, with and without contrast
- 72148 - MRI scan of lower spinal canal
- 72197 - MRI scan of pelvis, with and without contrast
- 73221 - MRI scan of arm joint
- 73721 - MRI scan of leg joint
- 74177 - CT scan of abdomen and pelvis, with contrast
- 74178 - CT scan of abdomen and pelvis, with and without contrast
- 76642 - Ultrasound of single breast
- 76700 - Ultrasound of abdomen (complete)
- 77080 - Bone density test of spine or hips using dedicated X-ray machine
- 78452 - Heart vessel study using drugs or exercise, multiple studies

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**Prices:**
- Valley View Hospital: $1,140 (Green) - $1,060–$1,200 (Yellow)
- Childrens Hospital Colorado Anschutz Medical Campus: $1,000 (Green) - $940–$1,150 (Green-Yellow)
- SCL Health St Marys Medical Center: $950 (Green) - $180–$980 (Red-Green)
There is an **$8,000 difference** in imaging prices for some procedures between the lowest and highest priced facility.
Future Services Available Through Shopping Tool

Surgical & Preventive (episodes):
- Knee Arthroscopy
- Cataract Surgery
- Colonoscopy
- Breast Biopsy
- Gall Bladder Surgery
- Upper GI Endoscopy
- Tonsillectomy
- Knee replacement
- Hip replacement
- Vaginal birth
- C-Section

Additional Imaging Services, TBD

Physician Office Services, TBD
Population Level Future Updates

New Payer: Medicare Fee for Service, More Years: 2012-2018

Cost of Care:
- Illness Burden Scores

Utilization:
- Professional Visits
- Potentially Preventable ER

Quality:
- Child Developmental Screening
- Appropriate treatment for children with Upper Respiratory Infection
- Diabetes Care Eye Exam

Condition Prevalence:
- Generalized Anxiety Disorder
- Teen Pregnancy Rates
- Asthma Exacerbations

*NEW Category: Patient Safety:
- C-Section Rate
- Imaging for Low Back Pain

*NEW Category: Access to Care:
- Child/Adolescent Access to Primary Care
- Adult Access to Preventive Care
Upcoming Releases of CO APCD Data

• Spot Analyses and White Papers
  • Prescription Drug Cost Trends
  • Opioid Prescriptions: Volume and Trends
  • Reference Based Pricing White Paper
  • Project Angel Heart Results White Paper

• Events
  • Project Angel Heart Webinar 9.18
  • Dollars and Sense: Using Data to Lower Health Care Costs and Increase Transparency 11.13
Agenda

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• Public Reporting Update
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• Regulatory Topics
  – CO APCD 2018 Rule Change
  – CO APCD/HCPF Scholarship Administration

• Committee Business

• Questions, Comments, Suggestions
Regulatory Topics
Proposed Changes to CO APCD Rule include:
- Alternative Payment Models
- Prescription Drug Rebate Information

CIVHC Received Responses from:
- Delta Dental
- Aetna
- AHIP/CAHP

CIVHC Received Letters of Support from:
- CO APCD Advisory Committee
- Chronic Care Collaborative Colorado
- Colorado Academy of Family Physicians
- A Coalition of Consumer Advocacy Organizations
CO APCD Rule Change Progress

• Comments received from AHIP/CAHP, PCMA, Aetna, CVS
  – Responses prepared; reviewed by CIVHC legal, General Atty, HCPF, DOI
  – Co-signed by Kim Bimestefer & Michael Conway (AHIP/CAHP, PCMA)

• Support
  – Letters (CAAC, CAFP, CCC, others)
  – Speakers at hearing

• Package submitted July 25th
• Anticipated hearing – Sep/Oct
CO APCD Scholarship Administration

• HCPF provides up to $500,000 in annual grant funding to defray the costs of non-profits & govt. entity access to the APCD for research

• HB 1327 calls for a few changes to the scholarship application and review process
  • CO APCD Advisory Committee (CAAC) - new role to play in reviewing and recommending scholarship applications amounts for approval, as well as collaborating with HCPF on a grant application form
  • HCPF then reviews and makes a final determination of scholarship applications and amounts approved
  • HCPF has agreed to temporarily continue working under prior system until new process is agreed to and finalized
HCPF/CO APCD Scholarship Application

Request Date
Date Submitted to HCPF
Project #

<table>
<thead>
<tr>
<th>Approved by HCPF</th>
<th>Disapproved by HCPF</th>
</tr>
</thead>
<tbody>
<tr>
<td>_______</td>
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</table>

Reason for Disapproval: _______

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<tr>
<td>Project Title:</td>
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<tr>
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<tr>
<td>Organization Requesting Data:</td>
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<td>Contact Person:</td>
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<tr>
<td>Title:</td>
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<tr>
<td>E-mail:</td>
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<tr>
<td>Phone Number:</td>
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<tr>
<td>Person Responsible for the Project (if different than above):</td>
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<td>Title:</td>
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<tr>
<td>E-mail:</td>
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<td>Phone Number:</td>
</tr>
</tbody>
</table>

Scholarship Eligibility:
- [ ] Non-profit, less than $5M (include recent 990),
- [ ] Research organization, less than $5M (include budget document)
- [ ] State agency

Data Release Review Committee: [list date approved]

Project Purpose: [from application]

**Research Questions to be addressed [from Application]**

Type of Data Requested: [custom, limited data set, etc.]

Total: $
Scholarship Request: $
Data Requestor Portion: $

Attachments Included:
- [ ] Application
- [ ] Supplemental Application
- [ ] Financial Document (i.e. 990, Budget, etc.)
- [ ] Data Release Fee (DRF)
CO APCD Scholarship Administration

Proposed Process:

• Creation of a CO APCD Scholarship Grant Subcommittee
• The Subcommittee will be emailed grant applications biweekly by CIVHC’s Account Manager or designee
• Members of the Subcommittee will have 5 business days to review applications and provide guidance on approval or non-approval
• The Subcommittee also has responsibility for recommending a grant approval amount.
• HCPF and CIVHC have established a framework for reviewing grants and recommending amounts
• Once approved, CIVHC’s Account Manager will forward the application and related documents to HCPF for final review and consideration
Discussion
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Committee Business

• Scholarship
  – Adoption of Application & any changes
  – Adoption of grant application review process & any recommended changes

• November Meeting
  – Review Annual Report
  – Reschedule to Late October

• Meetings During Legislative Session
  – Typically Quarterly
  – Scheduled February/May
Questions, Comments, Suggestions