**Committee Attendees:** Michelle Anderson, Amie Baca-Oehlert, Kim Bimestefer, Kyle Brown, Rick Curtsinger, Kristi DaMetz, Rick Doucet, Adam Fox, Matt Hardwick (proxy for Senator Ginal), Sarah Hassell, David Keller, Kristi Labarge, Jessica Linart, Philip Lyons, Bethany Pray, Tom Rennell, Miranda Ross, Robert Smith, Ako Quammie (proxy for Deanna Towne), Chris Underwood, Nathan Wilkes

**CIVHC Attendees:** Alice Aguirre, David Dale, Ana English, Sarah Ford, Spencer Fortier, Cari Frank, Greg Gillespie, Amanda Kim, Clare Leather, Paul McCormick, Kristin Paulson, Peter Sheehan, Stephanie Spriggs, Paul Timmerman, Julia Tremaroli, LaDios Muhammad

**Additional Attendees:** Amanda Massey, Eriko Mori

These notes cover only the discussion of the Committee and such information required to put questions in context. Please refer to the presentation and materials for more information.

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| CO APCD Scholarship Program | • Question for Committee discussion: Should there be a Colorado-only or Colorado-first approach when the Sub-Committee is recommending scholarship applications for approval?  
  o There is generally strong support for a Colorado-first approach prioritizing Colorado organizations although other out-of-state entities will be eligible. Applications from organizations outside of Colorado should be closely scrutinized to ensure they meet standards for funding.  
  o The Scholarship Sub-Committee will be responsible to ensure applications go through the appropriate scrutiny for eligibility and HCPF will have final determination of allocation of dollars. | • CIVHC will distribute the draft Scholarship application to Committee members to review to ensure the language appropriately highlights a Colorado-first approach to funding. |

**CO APCD Data Intake, Processing and Analytics**

| CO APCD to Support Legislation ’22 | • CIVHC will be supporting SB21-175, creating Colorado’s Prescription Drug Affordability Review Board (PDAB), by providing data to inform the Board. New fields are being added to Data Submission Guide (DSG) 13 to support collection of the requested data.  
  o What fields have been added to the DSG and when will that data become available?  
  • Several fields must be collected that cannot currently be derived from data currently in the CO APCD. However, that data will not be publicly available and instead reported directly to the Division of Insurance (DOI). That data will be collected for the first time in September 2022. |
High Value Care at End of Life

- The High Value Care at End of Life study is a project intended to evaluate cost and utilization of care at end of life.
  - Recognizing that a significant portion of Medicare spending comes in the final weeks of life, an important point of this study will be to eventually incorporate evaluation of quality of care at end of life. CIVHC is working with gerontologists at the University of Colorado to incorporate a list of “never events,” or services that should never be provided in the final weeks of life. CIVHC will then be able to evaluate percent spending by necessity.
  - CIVHC has received interest in this project from a number of organizations including the Office of Aging, the Office of Saving People Money in Health Care, CDPHE, and national organizations.

Public Reporting

Recent Releases: Annual Report

- The 2020-2021 CO Annual Report is now available. As required by the enabling legislation of the CO APCD, the annual report details the status of the CO APCD and celebrates the success and milestones of the past year.

Recent Releases: Shop For Care Tool

- The Shop for Care tool, updated in December 2021, is CIVHC’s signature price transparency tool, featuring price ranges for 53 imaging and non-imaging services at nearly 100 hospitals and facilities statewide.
  - It is important to note that this tool is an entry point to consumer shopping and includes a disclaimer that the costs in the report are not a direct reflection of what a consumer will pay for a service when accounting for factors such as insurance, provider, etc.
  - Question: is there any evidence of how people are using the Shop for Care tool? Is it being used to find where to go for care?
    - CIVHC has a limited capability to know how the tool is being used, although we do know there are roughly 2,000 users per month. We do know from work with partners that providers are using it, and medical students are being encouraged to use it when considering patient referrals.
    - CIVHC is always looking for ways to improve and enhance the tool with additional supplemental data points.

2022 Meeting Schedule

2pm-4pm
May 3, August 2, November 1