First Regular Session Sixty-ninth General Assembly STATE OF COLORADO

PREAMENDED

This Unofficial Version Includes Committee Amendments Not Yet Adopted on Second Reading

LLS NO. 13-0748.01 Brita Darling x2241

HOUSE BILL 13-1196

HOUSE SPONSORSHIP

Stephens,

(None),

SENATE SPONSORSHIP

House Committees Public Health Care & Human Services Appropriations

Senate Committees

A BILL FOR AN ACT

101 CONCERNING REPORTING RELATING TO THE MEDICAID COORDINATED

102 CARE SYSTEM.

Bill Summary

(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at http://www.leg.state.co.us/billsummaries.)

The bill requires the state department of health care policy and financing (state department) to report to the health care committees of the general assembly, biannually, regarding specific efforts within the regional care collaborative organizations (RCCOs), including primary care medical providers, the statewide data and analytics contractor, and others who provide medical care within the region, to identify and implement best practices relating to cost-containment and reducing avoidable, duplicative, variable, and inappropriate use of health care resources, and to combat client or provider fraud. The report will also include an analysis of recurring incidences of inappropriate use of health care resources and practices to prevent these incidences that may be implemented across the system.

The report will also provide information regarding technology being employed by each RCCO, including the use of electronic medical records, and information concerning any statutes or policies that prevent a RCCO from realizing efficiencies and reducing waste within the system.

The reporting requirement repeals after a specified period of time.

1	Be it enacted by the General Assembly of the State of Colorado:
2	SECTION 1. In Colorado Revised Statutes, add 25.5-5-417 as
3	follows:
4	25.5-5-417. Reducing unnecessary duplicative services in the
5	accountable care collaborative program - repeal. $(1)(a)$ The GENERAL
6	ASSEMBLY FINDS AND DECLARES THAT:
7	(I) THE STATE DEPARTMENT HAS CREATED A MEDICAID
8	COORDINATED CARE SYSTEM KNOWN AND REFERRED TO IN THIS SECTION
9	AS THE "ACCOUNTABLE CARE COLLABORATIVE" TO IMPROVE CLIENT
10	HEALTH AND REDUCE COSTS IN THE MEDICAID PROGRAM;
11	(II) ONE OF THE PRIMARY GOALS OF THE ACCOUNTABLE CARE
12	COLLABORATIVE IS TO REDUCE COSTS TO THE MEDICAID PROGRAM
13	THROUGH COORDINATION BETWEEN THE PRIMARY CARE MEDICAL
14	PROVIDERS, THE REGIONAL CARE COLLABORATIVE ORGANIZATIONS, AND
15	THE STATEWIDE DATA AND ANALYTICS CONTRACTOR;
16	(III) ADDITIONALLY, THE ACCOUNTABLE CARE COLLABORATIVE IS
17	ALSO EVALUATING THE PAYMENT SYSTEM USED FOR THE MEDICAID
18	PROGRAM TO IMPROVE CLIENT HEALTH OUTCOMES THROUGH MORE

1 EFFECTIVE PAYMENT SYSTEMS;

2 (IV) THE STATE DEPARTMENT HAS ENTERED INTO CONTRACTS
3 WITH REGIONAL ORGANIZATIONS FOR THE ACCOUNTABLE CARE
4 COLLABORATIVE;

5 (V) THESE REGIONAL CARE COLLABORATIVE ORGANIZATIONS, 6 REFERRED TO IN THIS SECTION AS "RCCOS", RECEIVE A PER-MEMBER, 7 PER-MONTH PAYMENT TO PERFORM A NUMBER OF FUNCTIONS THAT 8 INCLUDE BUT ARE NOT LIMITED TO SUPPORTING COMMUNITY-BASED CARE 9 COORDINATION, BEING ACCOUNTABLE FOR HEALTH AND COST OUTCOMES, 10 AND ENSURING CARE COORDINATION FOR ALL CLIENTS; AND

(VI) DESPITE CARE COORDINATION AND ACCOUNTABILITY
EFFORTS, THERE REMAINS WITHIN THE MEDICAID SYSTEM WASTE AND
DUPLICATION OF SERVICES THAT ARE INCREASING STATE MEDICAID COSTS
AND PREVENTING MAXIMUM EFFICIENCY IN THE MEDICAID SYSTEM.

(b) THEREFORE, THE GENERAL ASSEMBLY DECLARES THAT, IN AN
EFFORT TO BRING GREATER TRANSPARENCY TO COST-CONTAINMENT
EFFORTS BY THE ACCOUNTABLE CARE COLLABORATIVE, THE STATE
DEPARTMENT SHALL REPORT ANNUALLY TO THE GENERAL ASSEMBLY
CONCERNING EFFORTS TO REDUCE WASTE AND DUPLICATION WITHIN THE
ACCOUNTABLE CARE COLLABORATIVE.

(2) AS PART OF THE ANNUAL REPORT REQUIRED PURSUANT TO
PART 2 OF ARTICLE 7 OF TITLE 2, C.R.S., THE STATE DEPARTMENT SHALL
PROVIDE INFORMATION CONCERNING THE FOLLOWING:

(a) THE SPECIFIC EFFORTS WITHIN THE ACCOUNTABLE CARE
(b) COLLABORATIVE, INCLUDING A SUMMARY OF TECHNOLOGY-BASED
(c) EFFORTS, TO IDENTIFY AND IMPLEMENT BEST PRACTICES RELATING TO
(c) COST CONTAINMENT, AND REDUCING AVOIDABLE, DUPLICATIVE,

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1 VARIABLE, AND INAPPROPRIATE USE OF HEALTH CARE RESOURCES, AND 2 THE OUTCOME OF THOSE EFFORTS, INCLUDING COST SAVINGS IF KNOWN; 3 (b) ANY STATUTES OR POLICIES OR PROCEDURES THAT PREVENT 4 THE RCCOS FROM REALIZING EFFICIENCIES AND REDUCING WASTE WITHIN 5 THE MEDICAID SYSTEM; AND 6 ANY OTHER EFFORTS BY THE RCCOS OR THE STATE (c) 7 DEPARTMENT TO ENSURE THAT THOSE WHO PROVIDE CARE FOR MEDICAID 8 CLIENTS ARE AWARE OF AND ACTIVELY PARTICIPATE IN REDUCING WASTE 9 WITHIN THE MEDICAID SYSTEM. 10 (3) THE STATE DEPARTMENT SHALL INDICATE ON ITS REPORT THE 11 COUNTIES BEING SERVED BY EACH RCCO. 12 (4) This section is repealed, effective July 15, 2018. 13 SECTION 2. Act subject to petition - effective date. This act 14 takes effect at 12:01 a.m. on the day following the expiration of the 15 ninety-day period after final adjournment of the general assembly (August 16 7, 2013, if adjournment sine die is on May 8, 2013); except that, if a 17 referendum petition is filed pursuant to section 1 (3) of article V of the 18 state constitution against this act or an item, section, or part of this act 19 within such period, then the act, item, section, or part will not take effect 20 unless approved by the people at the general election to be held in 21 November 2014 and, in such case, will take effect on the date of the 22 official declaration of the vote thereon by the governor.