First Regular Session Sixty-ninth General Assembly STATE OF COLORADO

ENGROSSED

This Version Includes All Amendments Adopted on Second Reading in the House of Introduction

LLS NO. 13-0748.01 Brita Darling x2241

HOUSE BILL 13-1196

HOUSE SPONSORSHIP

Stephens,

SENATE SPONSORSHIP

Newell,

House Committees

Senate Committees

Public Health Care & Human Services Appropriations

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 AS THE "ACCOUNTABLE CARE COLLABORATIVE" TO IMPROVE CLIENT 9 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

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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
11	(VI) DESPITE CARE COORDINATION AND ACCOUNTABILITY
12	EFFORTS, THERE REMAINS WITHIN THE MEDICAID SYSTEM WASTE AND
13	DUPLICATION OF SERVICES THAT ARE INCREASING STATE MEDICAID COSTS
14	AND PREVENTING MAXIMUM EFFICIENCY IN THE MEDICAID SYSTEM.
15	(b) THEREFORE, THE GENERAL ASSEMBLY DECLARES THAT, IN AN
16	EFFORT TO BRING GREATER TRANSPARENCY TO COST-CONTAINMENT
17	EFFORTS BY THE ACCOUNTABLE CARE COLLABORATIVE, THE STATE
18	DEPARTMENT SHALL REPORT ANNUALLY TO THE GENERAL ASSEMBLY
19	CONCERNING EFFORTS TO REDUCE WASTE AND DUPLICATION WITHIN THE
20	ACCOUNTABLE CARE COLLABORATIVE.
21	(2) As part of the annual report required pursuant to
22	PART 2 OF ARTICLE 7 OF TITLE 2, C.R.S., THE STATE DEPARTMENT SHALL
23	PROVIDE INFORMATION CONCERNING THE FOLLOWING:
24	(a) THE SPECIFIC EFFORTS WITHIN THE ACCOUNTABLE CARE
25	COLLABORATIVE, INCLUDING A SUMMARY OF TECHNOLOGY-BASED
26	EFFORTS, TO IDENTIFY AND IMPLEMENT BEST PRACTICES RELATING TO
27	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	(c) Any other efforts by the RCCOs or the state
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.

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