OeHI
Office of eHealth Innovation

EHEALTH COMMISSION MEETING

WEB-CONFERENCE ONLY

APRIL 14, 2021

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NOTE:
NEW ZOOM WEBINAR LINK
PASSCODE: 33W1FQ
DIAL IN BY PHONE:
US: +1 253 215 8782
OR: +1 346 248 7799
WEBINAR ID: 838 7864 3457
PASSCODE: 541571

IF YOU ARE EXPERIENCING AUDIO OR PRESENTATION DIFFICULTIES DURING THIS MEETING, PLEASE TEXT ISSUES TO
203-521-5910

APRIL AGENDA

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Title	Start	Duration
Open		
Call to Order • Roll Call and Introductions • Approval of March Minutes • April Agenda and Objectives *Michelle Mills, Chair*	12:00 PM	5 mins
Announcements • OeHI Updates-eHealth Commission Updates: Updated Charter • Decision Items & Action Items *Carrie Paykoc, Director, Office of eHealth Innovation (OeHI)* *eHealth Commission Members*	12:05 PM	15 mins
New Business		
Office of Saving People Money on Health Care Update *Caitlin Westerson, Senior Policy Advisor, OSPMHC* *Isabelle Nathanson, Policy & Operations Coordinator, OSPMHC*	12:20 PM	20 mins
Health IT Roadmap Strategy Session *Facilitated by Carrie Paykoc, Director, OeHI* *Stephanie Breckel, Senior Consultant, Health Tech Solutions* *eHealth Commissioners & Advisors*	12:40 PM	35 mins
Rural Connectivity and COVID-19 Dashboard Overview *Karen Haneke, Senior Project Manager, OeHI* *Michelle Mills, CEO, Colorado Rural Health Center (CRHC)* *Jason Greer, CEO, Colorado Community Managed Care Network (CCMCN)* *Win Vaughan, Vice President, Sales and Consulting Services, Colorado Regional Health Information Organization (CORHIO)*	1:15 PM	35 mins
Public Comment Period	1:50 PM	5 mins
Closing Remarks • Open Discussion • Recap Action Items • May Agenda: Executive Session on Sunshine Laws Training, Roadmap Strategy discussion, COVID-19 analytics cont. • Adjourn Meeting *Michelle Mills, Chair*	1:55 PM	5 mins

ANNOUNCEMENTS

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OeHI and eHealth Commission Updates

- eHealth Commission- May Training & Executive Session
- Updated eHealth Commission Charter and Bylaws
- Office of Civil Rights Notice of Public Comment - HIPAA
- Office of the National Coordinator- LEAP Grant
- eHealth Commission Update
- Decision Items/Action Items
- Other Commissioner Updates?

Note: If you are experiencing audio or presentation difficulties during this meeting, please text 203-521-5910.

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OFFICE OF SAVING PEOPLE MONEY ON HEALTH CARE UPDATE

CAITLIN WESTERSON, SENIOR POLICY ADVISOR OF THE OFFICE OF SAVING PEOPLE MONEY ON HEALTH CARE (OSPMHC)
ISABELLE NATHANSON, POLICY & OPERATIONS COORDINATOR, OSPMHC

eHealth Commission

Office of Saving People Money on Health Care

April 14, 2021

COLORADO
Lt. Gov. Dianne Primavera

OSPMHC Topics

12:20pm Introductions

12:24pm Office of Saving People Money on Health Care Roadmap

12:28pm Financial Toxicity Project

12:32pm Legislative Efforts

12:36pm Questions?

Introductions

The Bold 4: Wildly Important Priorities

The Polis-Primavera vision of reducing the high cost of living in our state, and creating a Colorado where everyone has an opportunity to succeed.

- To ensure successful completion of the Bold 4, Governor Polis has convened 6 cabinet-level working groups.
- Each work group has "Wildly Important Goals" (WIGs) that indicate whether the State is making progress in these areas.
- The Lt. Governor and the Office of Saving People Money on Health Care coordinate the cabinet-level working group focused on health.

The Office of the Lt. Governor

1. Aerospace, Defense & Intelligence
2. Colorado Commission of Indian Affairs
3. Disability Policy & Disability Funding Committee
4. Office of eHealth Innovation & eHealth Commission
5. **Office of Saving People Money on Health Care** & Health Cabinets
6. Operations
7. Serve Colorado & Governor's Commission on Community Service

The Office of Saving People Money on Healthcare (OSPMHC) is the cornerstone of the administration's efforts to **reduce the cost of health care for Coloradans by ensuring coordination and collaboration across our state government.**

Health Cabinet Working Group Wildly Important Goals (WIGs):

2019-2020:

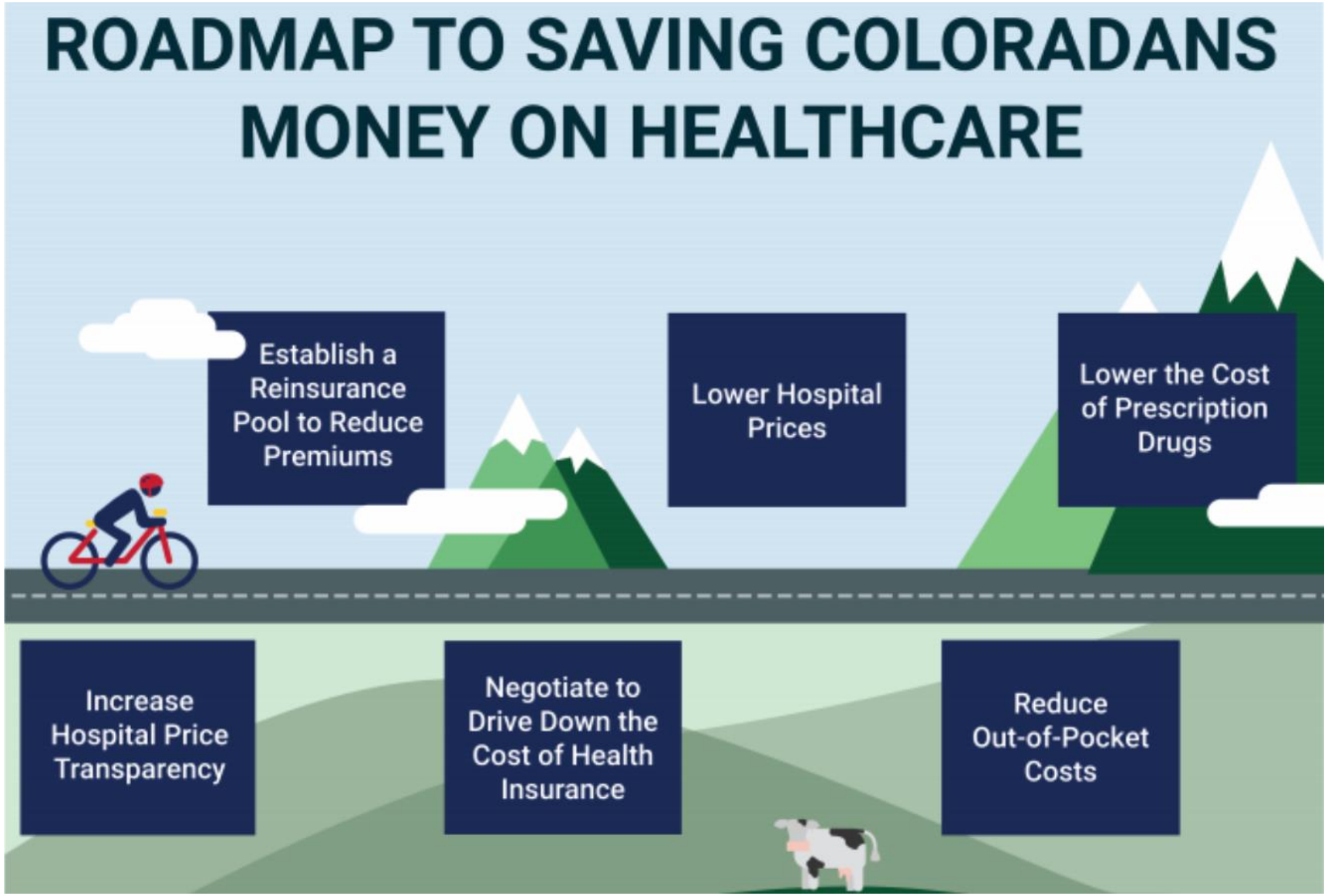
- **Provider Costs:** Increase the number of health care thought leaders, industry influencers, and stakeholders who are aware of, engaged to develop, or supporting the execution of Colorado's Health Care Affordability Roadmap (HCPF).
- **State Employee Insurance Costs:** Utilize an invitation to negotiate to procure services to provide health insurance benefits to State employees with higher value and reduced costs.
- **Public Insurance Costs:** Achieve lower health care costs as reflected by an average reduction in premiums.

2020-2021:

- **Behavioral Health Task Force:** Execute on BHTF Blueprint recommended activities: 1) passage a bill to establish a Behavioral Health Administration (BHA), 2) completion of a proposal to expand the Safety Net System, 3) analysis of statutory review, 4) identification of new funding sources, and 5) integration of recommendations from the Co-occurring Disability Behavioral Health Workgroup.
- **Prescription Drug Costs:** Implement 5 strategies in order to reduce prescription drug trend costs to employers
- **Large Group Market:** implement 6 strategies including: education, programs, and partnerships to create insurance premium savings

Office of Saving People Money on Health Care Roadmap

Caitlin Westerson



2019:

- Increase Hospital Price Transparency
- Establish a Reinsurance Pool to Reduce Premiums
- Negotiate to Drive Down the Cost of Health Insurance
- Lower Hospital Prices
- Reduce Out-of-Pocket Costs
- Lower the Cost of Prescription Drugs
- Launch a State-Backed Health Insurance Option
- Reward Preventive and Primary Care
- Expand the Health Care Workforce
- Increase Access to Healthy Food
- Improve Vaccination Rates
- Reform the Behavioral Health System
- Support Innovative Health Care Delivery and Reform Models

2020:

- Support a Colorado Insurance Option
- Secure Continued Funding for State Reinsurance Program
- Expand Purchasing Alliances
- Expand Prescription Drug Importation
- Support a Prescription Drug Affordability Board
- Increase Prescription Drug Price Transparency
- Support Primary & Preventive Care
- Increase Access to Healthy Food
- Improve Vaccination Rates
- Implement Behavioral Health Task Force (BHTF) recommendations
- Expand Access to Nursing Providers
- Expand Higher Ed Apprenticeships

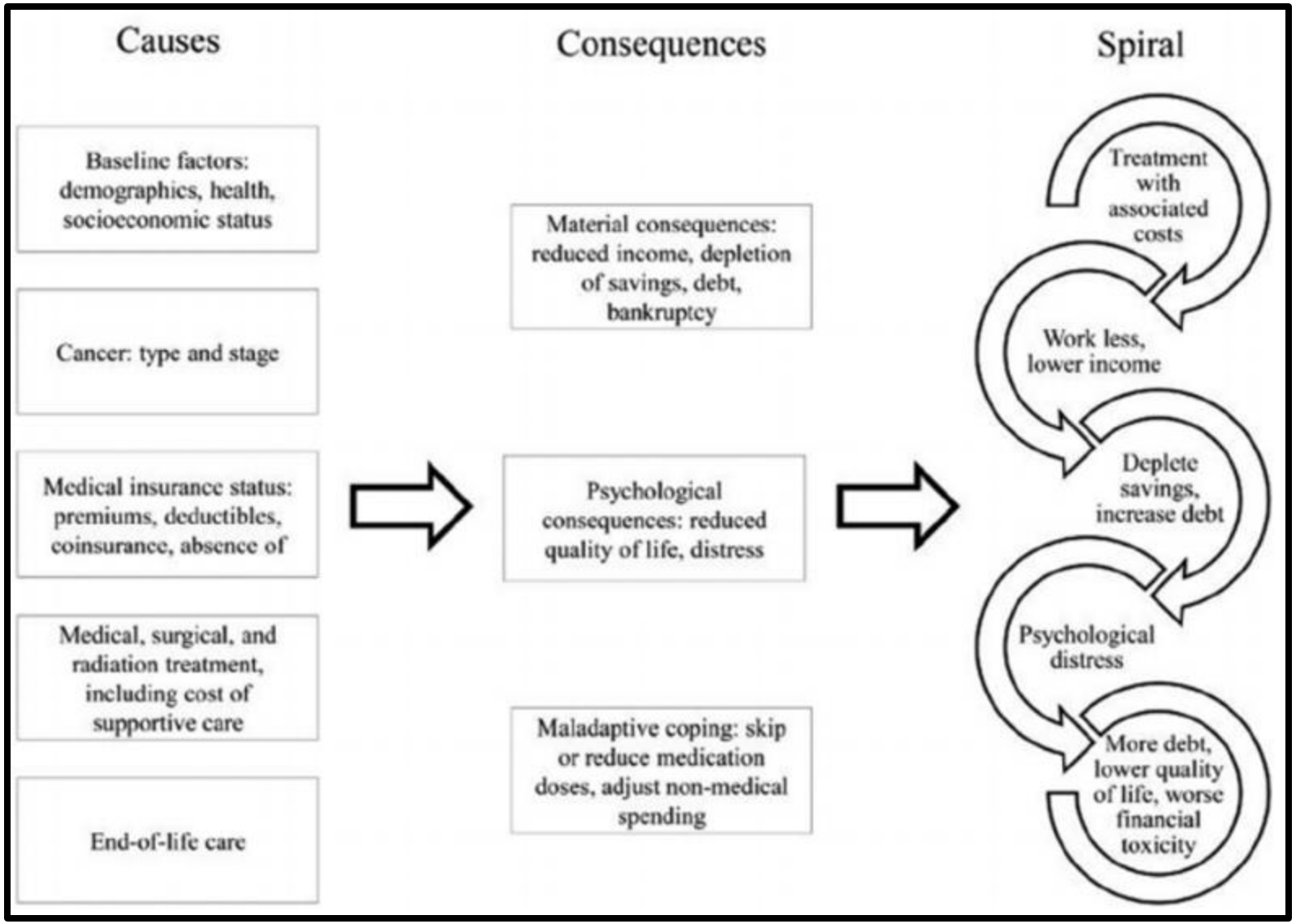
2021:

- Prescription Drug Affordability
- Increasing Access to Affordable Health Insurance
- Behavioral Health System Reform
- And more to come! The roadmap release cadence is changing and will be released later this year.

Financial Toxicity Project

Financial Toxicity

Multidimensional direct & indirect adverse financial consequences of managing health care.



Project Components

Community Engagement:

- Community Roundtables:
  - The High Cost of Prescription Drugs
  - Financial Toxicity for Breast Cancer Patients

Survey:

- How are Coloradan patients, caregivers, advocates, and providers impacted by the direct and indirect cost of health care?
- What gaps exist in current resources that may be available to help mitigate the impact of those costs?

Research:

- Causes and Consequences of Financial Toxicity
- Policy Recommendations

Legislative Efforts

Caitlin Westerson

2021 Regular Session - Bills of Note

- **SB21-123 -** “Expand Canadian Prescription (Rx) Import Program”
- **HB21-1097 -** “Establish Behavioral Health Administration”
- **SB21-175 -** “Prescription Drug Affordability Review Board”
- **HB21-1232 -** “Standardized Health Benefit Plan - Colorado Option”
- **HB21-1198 -** “Health-care Billing Requirements For Indigent Patients”

Questions?

Caitlin Westerson | Senior Health Policy Advisor
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HEALTH IT ROADMAP STRATEGY SESSION

CARRIE PAYKOC, DIRECTOR, OEHI
EHEALTH COMMISSIONERS

STRATEGY DISCUSSION

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- eHealth Commissioners, please open the Jam Board
- Prior to the meeting, please review the prioritization matrix
- To date, the eHealth Commission has approved leveraging existing infrastructure for all Roadmap efforts. And approved the continued investment of Colorado's health information exchanges.
- At the last eHealth Commission Meeting, Commissioners suggested we develop a prioritization matrix to guide future efforts and investments.
- This draft prioritization matrix will be the focus of our strategy conversation. Are we missing anything?

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RURAL CONNECTIVITY PROGRAM AND COVID-19 DASHBOARD OVERVIEW

KAREN HANEKE, SENIOR PROJECT MANAGER, OEHI
MICHELLE MILLS, CEO, COLORADO RURAL HEALTH CENTER (CRHC)
JASON GREER, CEO, COLORADO COMMUNITY MANAGED CARE NETWORK (CCMCN)
WIN VAUGHAN, VICE PRESIDENT, SALES AND CONSULTING SERVICES, CORHIO

COLORADO

Rural Connectivity Project

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Rural Connectivity Project: Matters to ALL Coloradans

Rural Connectivity: Why this Matters to ALL Coloradans

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Project Aims

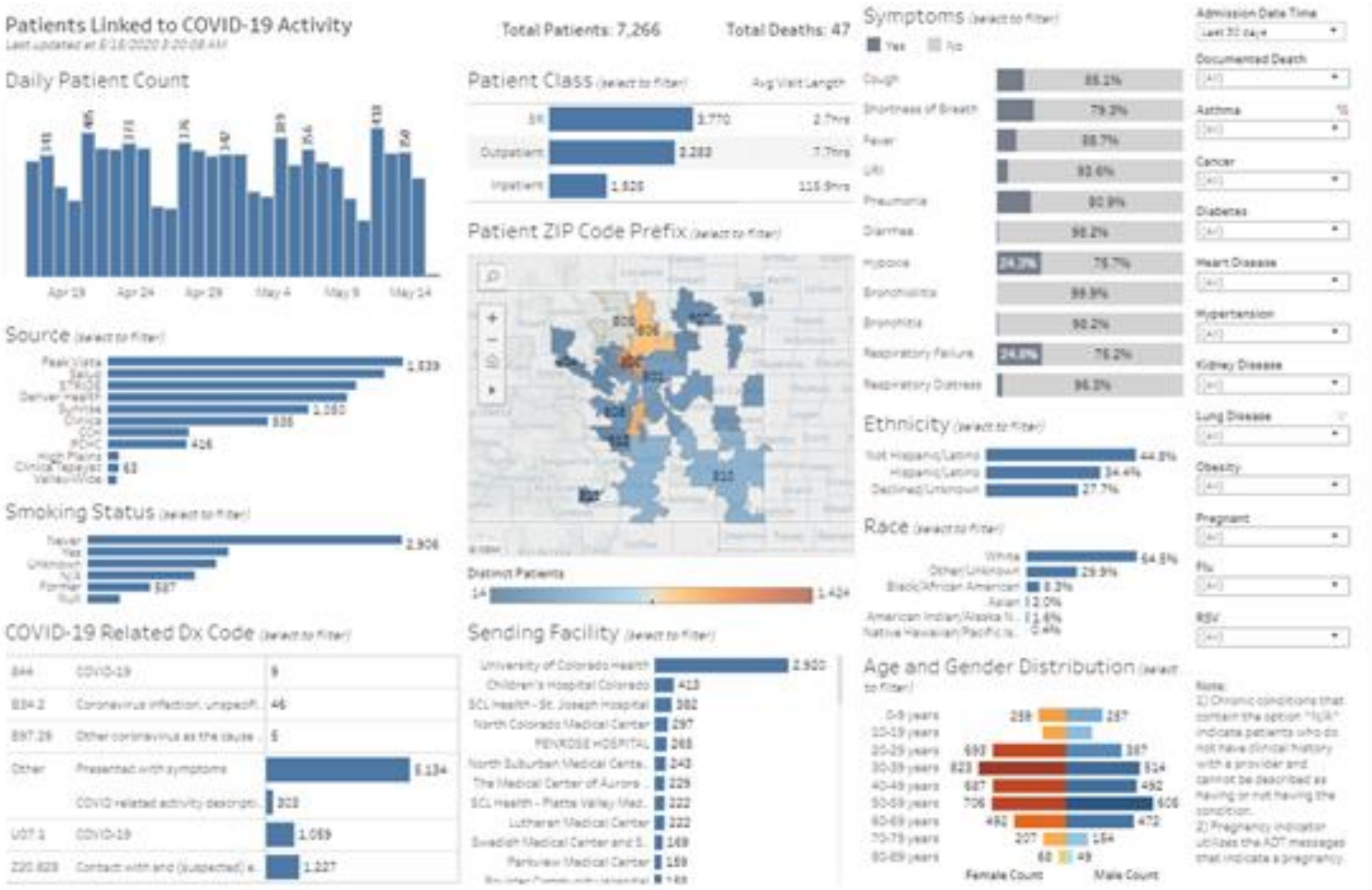
COVID-19 Surveillance Dashboard Expansion

- Provides real-time COVID-19 analytics to providers
- 45 rural clinics/hospitals connected on previous contract
- Expand dashboard access to at least 90% of the 84 organizations in the rural clinics/hospitals = >75 clinics/hospitals

Environmental Scans & Technical Assistance

- Complete environmental scans of all 84 rural clinics/hospitals - provides a picture of the overall state of each practice to use health IT to create efficiencies (improved care delivery and/or quality of care)
- Provide technical assistance to all rural clinics/hospitals as they connect to the COVID-19 dashboard, one of the 2 HIEs, or just need additional assistance

COVID-19 Surveillance Dashboard



- Current or Requested Data:
  - CORHIO
  - QHN
  - CIVHC Claims
  - CDPHE/CIIS
  - Medicaid 834
  - CDPHE Vitals (death registry)

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Jason Greer - Monitoring Community Outcomes

Jason Greer - A Surveillance Dashboard Impact Story

Flint Water Crisis

February 2017: The Michigan Civil Rights Commission issues a report that finds "systemic racism" going back decades is at the core of problems that caused the water crisis in the majority black city of Flint.

Ken Sikkema, co-chair of the Governor's Flint Water Advisory Task Force, explained: There was this question that everybody was asking, and that was; "Hey, if this had happened in an upscale, white community, like (frankly) where I live, would this have happened?" I mean everybody on the street was asking that question, and by asking the same question, everybody had the same answer. The answer was "no, it probably wouldn't have."

Greeley COVID-19 outbreak

NEWS > CORONAVIRUS

JBS meatpacking plant has top COVID-19 infection total in Colorado with 287 cases, 7 deaths

The massive beef slaughterhouse was shuttered April 10 for two weeks for cleaning and testing after at least two deaths and several positive cases among workers. Employees, community groups, and the union all raised concerns about the decision to reopen the facility in the wake of the outbreak. However, the plant's 6,000 employees returned to work on April 24, with a large segment of workers untested.

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Colorado Community Managed Care Network

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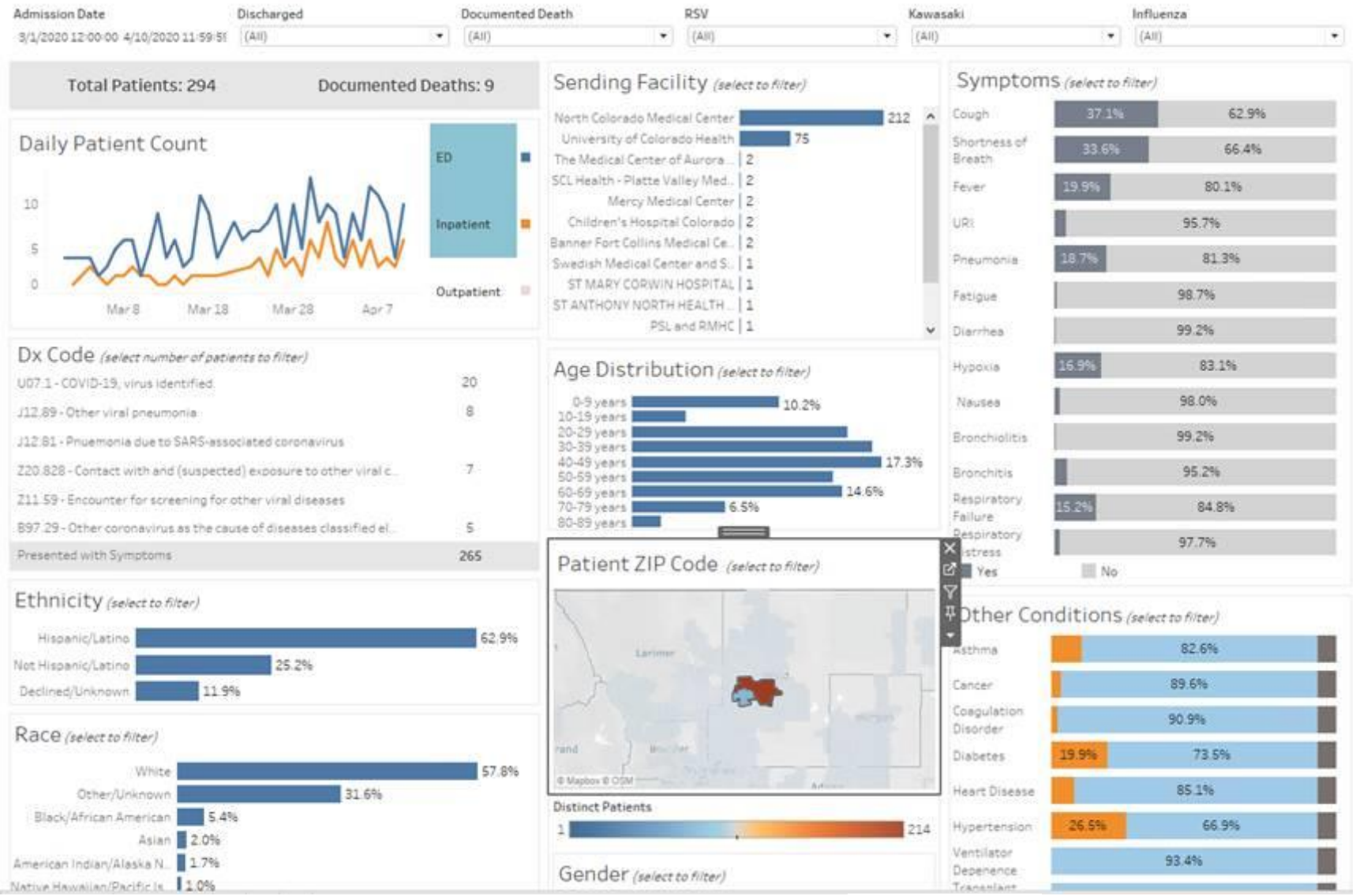
Weld County Outbreak 2020 (March 1 - April 10)



Findings

- In early March, Greeley appeared as a hot spot for ED visits and hospitalizations for flu-like symptoms
- 63% were Hispanic\Latino
- 26% had hypertension, 20% had diabetes, 17% had asthma, and 15% had heart disease

Outreach

- Alerted primary care for same day follow up to provide education, medical provider contact information and assess needs for food, housing, and safety

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Colorado Community Managed Care Network

COLORADO Lt. Gov. Dianne Primavera

Colorado Rural Health Center (CRHC) Outreach

Addresses immediate needs

- Outreach to the rural clinics/hospitals not currently connected to the HIEs to assist in connectivity
- Conducting data-driven process mapping events to streamline processes that lead to improved health outcome - Example: blood pressure data collection
- Conducting rapid cycle improvements for both hospitals and clinics - aligning with the Hospital Transformation Program (HTP)
- Providing on-demand technical assistance

Gathers data to to address ongoing/future needs

- Environmental scans will provide detailed data for each clinic on:
  - Telehealth infrastructure
  - Broadband connectivity
  - HIE connectivity
  - Financial health

Michelle Mills - The CRHC Perspective

Rural Connectivity – initial foundational work

- Access to Care -
  - Rural Coloradans are 20% of Colorado's population.
  - 20% of rural Coloradans are 65+.
  - Rural Coloradans have higher rates of chronic disease and higher rates of public insurance.
  - Rural Coloradans tend to be older, sicker and poorer.
- HIE Connectivity
- Telehealth and Broadband
- Analytics
- Financials
- Technical Assistance
- Environmental Scanning
- Future

Win Vaughan - CORHIO Critical Access Hospital Connections

Connected	In Progress	Outreach
Estes Park Medical Center	Lincoln Community Hospital	Southeast Colorado Hospital
Pikes Peak Regional Hospital	Kit Carson County Memorial Hospital	Heart of the Rockies Regional Medical Center
St. Thomas More Hospital	Southwest Health System	Melissa Memorial Hospital
East Morgan County Hospital		Wray Community Health District
Conejos County Hospital		Keefe Memorial Health Service District
San Luis Valley Health		Middle Park Health (Kremmling Memorial)
Mt. San Rafael Hospital		Weisbrod Memorial County Hospital (Kiowa)
Pagosa Springs Medical Center		Saint Vincent General Hospital
Prowers Medical Center		Colorado Plains Medical Center
Rio Grande Hospital		Arkansas Valley Regional Medical Center
Spanish Peaks Regional Health Center		Haxton Hospital District
Sterling Regional Medical Center		Sedgewick County Health Center
		Yuma District Hospital

OeHI Rural Connectivity Timeline & Next Steps

COMPLETED	IN PROGRESS	FUTURE PROJECTS
COVID-19 Surveillance Dashboard 45 providers initially connected	COVID-19 Surveillance Dashboard expansion to rural providers not initially connected Environmental Scan to assess: • Financial readiness to engage in health IT • Broadband status and readiness • HIE connectivity readiness • Telehealth readiness Begin connecting rural providers to the HIEs Technical assistance	Connect additional rural providers to the HIEs Analytics Technical assistance Ongoing sustainability assessments to ensure lasting positive impact

Questions?

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PUBLIC COMMENT PERIOD

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CLOSING REMARKS