



OeHI

Office of eHealth Innovation

eHealth Commission Meeting

VIRTUAL CONFERENCE

July 9, 2025

July Agenda



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Office of eHealth Innovation

Title	Start	Duration
Call to Order <ul style="list-style-type: none">• Roll Call and Introductions• Approval of June Meeting Minutes• July Agenda and Objectives <i>Kevin Stansbury, Chair</i>	12:00	5 mins
Announcements <ul style="list-style-type: none">• Welcoming Remarks• OeHI Updates-eHealth Commission Updates• Decision Items & Action Items <i>Stephanie Pugliese, Director, Office of eHealth Innovation (OeHI)</i> <i>eHealth Commission Members</i>	12:05	5 mins
Review & Vote to Approve Commission Charter Review & Vote to Approve Roadmap Implementation Plan <i>Stephanie Pugliese, Director, Office of eHealth Innovation (OeHI)</i> <i>eHealth Commission Members</i>	12:10	20 mins
Commission Roundtable <i>eHealth Commission Members</i>	12:35	45 mins
Public Comment Period	12:30	5 mins
Closing Items <ul style="list-style-type: none">• Closing Remarks• Open Discussion• Recap Action Items• Adjourn Public Meeting <i>Kevin Stansbury, Chair</i>	1:20	5 mins

OeHI and eHealth Commission Updates

- eHealth Commission Updates

OeHI eHealth Commission 7/9/25 Meeting

Federal OBBBA Bill Review of Unique Medicaid Provisions

Kim Bimestefer,
HCPF Executive Director

H.R. 1: One Big Beautiful Bill Act (OBBBA)

- **Think about the OeHI Colorado Roadmap**, what the OBBBA might add to it, what you are building now, how projects can be morphed to respond to HCPF and state needs, how you might engage going forward with us and other agencies to add to the OeHI Roadmap. We seek your input, expertise and partnership as we build plans and approaches to implement the OBBBA.
- **Significant Medicaid Impacts to discuss today, as an example**
 - Work Requirements and to some extent, the every 6 months eligibility determination (now every 12 months)
 - Provisions take effect Dec. 31, 2026, largely impacting those covered via Affordable Care Act (ACA) Expansion of Medicaid: 377k low income adults
 - We'll quickly review other provisions so you can start thinking about other areas where you might engage and partner, impacting your Roadmap.
- **We'll talk about rural hospitals as an example, too**

Alignment

We are federally required to implement and abide by federal directives.
We seek your engagement and alignment.



North Star: Mitigate inappropriate coverage losses



Ease paperwork burdens



Prioritize partnership and transparency



Integrate lessons learned

Example: Medicaid Work Requirements

- No later than Dec. 31, 2026, Medicaid Expansion non-exempt adults aged 19-64 must document 80 hours/month of work, job training, education or community service.
 - Industry inputs, capture them, apply them, and automate these insights during the eligibility process??
- Exempt populations include pregnant women, American Indians, parents of a disabled child or a child under 13 years of age, veterans, medically frail, adults who already meet TANF work requirements or are in a SNAP household or individuals entitled to Medicare.
 - Identify these populations and automate the inputs during eligibility process??
- Work requirements is part of each eligibility renewal (every 6 months - using data from prior month). States must use ex-parte (automation) data where possible.
- Risk to Coverage: Grace period and penalty: 30-day cure window after notice; if unmet, application is denied or coverage ends by the close of the next month.

Rural Hospitals Example

From Becker's Hospital Review, 7/9/25: "The One Big Beautiful Bill Act [signed](#) July 4 will change the rural healthcare landscape, and CEOs are finding innovative ways to prepare for changes phased in over the next few years. The bill will phase in over the next several years:"

- ACA special enrollment was limited for most enrollees
- Restricts state-directed payments and provider taxes for hospitals
- Medicaid cuts
- Medicaid work requirements developed by states as early as January 2027
- Increased oversight of the Medicaid provider taxes
- \$50 billion over five years for the Rural Health Transformation program



COLORADO

Department of Health Care
Policy & Financing

Rural Hospitals Example

April 2025: HCPF has asked rural hospitals to leverage SB 23-298 and SB 25-168 to share expenses while focusing on other efficiency plays to protect rural hospital sustainability and care access, including Rural Health Clinics (RHCs).

- Inventory and licensure opportunities
- *Implement all Tool capabilities
 - eConsults, Prescriber Tools, Providers of Distinction, Value Based Payments
- *Operationalize PCMP Accountable Care Organization “ACO-like” option
- Collaboratively hire nurse case managers in complement to ACO-systems
- Collaborate with HCPF on emerging federal action
 - NEW: \$50 billion in the bill earmarked to help rural hospitals nationally
- Work with HCPF on HTP Next Gen



Key Provisions Affecting Immigrant Populations	Colorado and Member Impact
Restricts the populations eligible for federal matching funds to citizens, nationals, or specified immigrant populations, starting Oct. 2026	Increases number of uninsured Coloradans; increases costs for providers
Limits federal match for Emergency Medicaid for individuals who would otherwise be eligible for expansion coverage except for their immigration status to the state's regular match rate, starting Oct. 2026	Reduced provider payments; eliminates the 90% expansion federal match rate or any other enhanced rate

OBBBA Medicaid Eligibility High Level Implementation Date Timelines

Rural health transformation program will provide \$50B in grants for 5 years, 2026-2030

● Initial CMS Guidance Expected - no later than 180 days after enactment

	2026			2027			2028			2029		
	Jan	Oct	Dec	Jan	Oct	Dec	Jan	Oct	Dec	Jan	Oct	Dec
Retro Coverage Reductions												
“Qualified Alien” Changes												
6 month verifications												
Work Requirements												
Provider Fee .5% Reductions						FFY 2028 (5.5% begins Oct 2027, 5% Oct 2028, 4.5% Oct 2029, 4% Oct 2030, 3.5% Oct 2031)						

HCPF 2025 Stakeholder Webinar

August 12 • 9-11 a.m.

Register today!

We will discuss the OBBBA federal threats to Medicaid, state budget challenges, Medicaid cost trend drivers, and priorities for fiscal year 2025-2026. Click [here](#) to register.

Key OBBBA Medicaid Provisions

Key Provisions Affecting Expansion Adults	Colorado and Member Impact
Work requirements for most able-bodied Expansion adults, starting Dec. 31, 2026	Affecting up to 377,019 members. Increases administrative burden
Cost sharing for expansion adults earning >100% of the federal poverty level, starting Oct. 2028	Affecting 59,976 members
Increased frequency of eligibility redeterminations for expansion adults (from annually to semi-annually), starting Jan.1, 2027	Affecting 377,019 members; potential for more members to lose coverage. Increases administrative burden.
Reduced provider fees by 0.5% annually starting in 2028 until it reaches 3.5% in 2032	Funds coverage for 427,000 expansion Coloradans; each 0.5% reduction results in est. \$115M less provider fees collected and >\$180M loss of federal matching

Key Provisions Affecting Providers	Colorado and Member Impact
<p>Reduced provider fees by 0.5% annually starting in 2028 until it reaches 3.5% in 2032 <i>(also on previous slide)</i></p>	<p>Funds coverage for 427,000 expansion Coloradans; each 0.5% reduction results in est. \$115M less provider fees collected and >\$180M loss of federal matching funds</p>
<p>Reduced mandatory retroactive coverage period from 3 months to 1 month prior to the month of application for Expansion adults, 2 months for all others, starting Jan. 2027</p>	<p>Increase unpaid claims for providers; higher out of pocket costs for members for healthcare services received during months they would have been eligible under current rules</p>
<p>Creates the Rural health transformation program that will provide \$50 billion in grants over 5 years, 2026-2030</p>	<p>Grants to be used for technology, workforce, and financial stabilization of rural providers</p>
<p>Limit State Directed Payments to Medicare published rate</p>	<p>Reduces ability to draw down additional federal funds</p>

HCPF Federal Resources

HCPF resources and website for [Understanding the Impact of Potential Federal Funding Cuts to Medicaid](#)

- [Statement](#) in response to the passage of H.R. 1, the One Big Beautiful Bill Act
- Member [Video message from Exec Dir Bimestefer](#) explaining potential impacts of federal cuts (before the OBBBA was passed)
- [CO Medicaid Insights and Potential Federal Medicaid Reduction Impact Estimates](#)
- [Hospital Provider Fee fact sheet](#)
- [Long Term Services and Supports fact sheet](#)
- [Medicaid Coverage and Funding by Congressional District Fact Sheets](#)
- [Work Requirements Fact Sheet](#)
- [County Medicaid Fact Sheets](#)
- [Medical Assistance Coverage fact sheet](#)



Questions and Discussion



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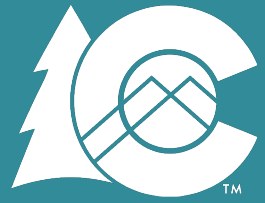
Office of eHealth Innovation

Review & Vote to Approve Commission Charter

*Stephanie Pugliese,
Director, Office of eHealth Innovation*



[Link to final copy here](#)



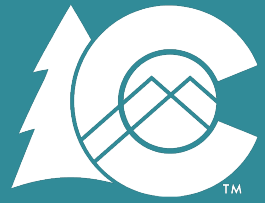
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Review & Vote to Approve Roadmap Implementation Plan

*Stephanie Pugliese,
Director, Office of eHealth Innovation*

- [Link to final copy here](#)
- Updated based on June eHealth Commission Meeting Input

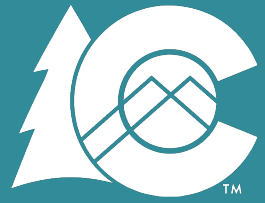


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Commission Roundtable

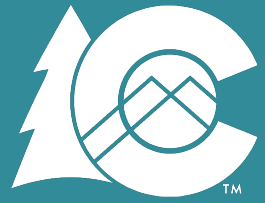
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Public Comment Period



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Closing Remarks