

Legislative Council Staff

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Final Fiscal Note

Drafting Number: LLS 24-0802 Date: July 9, 2024 **Prime Sponsors:** Rep. Holtorf; Amabile **Bill Status:** Signed into Law Kristine McLaughlin | 303-866-4776 Sen. Michaelson Jenet Fiscal Analyst: kristine.mclaughlin@coleg.gov **Bill Topic:** OPERATION OF DENVER HEALTH & HOSPITAL AUTHORITY **Summary of** ☐ State Revenue ☐ State Transfer ☐ Local Government **Fiscal Impact:** ☐ TABOR Refund The bill places requirements on the Department of Health Care Policy and Financing's contract with Denver Health. The bill decreases state expenditures, and may decrease revenue and expenditures for Denver Health, on an ongoing basis. **Appropriation** No appropriation is required. **Summary: Fiscal Note** The final fiscal note reflects the enacted bill. Status:

Summary of Legislation

The bill places requirements on the Department of Health Care Policy and Financing's (HCPF) contract with Denver Health and Hospital Authority (Denver Health) for physical health services:

- requiring HCPF to continue contracting with Denver Health until June 30, 2032, as long as Denver Health meets HCPF's criteria;
- prohibiting Denver Health from reimbursing contracted Medicaid providers more than the Medicaid fee-for-service rates, not including any quality incentive payments; and
- authorizing HCPF to continually distribute funds appropriated for payment to Denver Health.

Background

HCPF directly contracts with Denver Health Medical Plan (Denver Health), which is a health insurance company operating as a Medicaid managed care organization (MCO) providing healthcare to Medicaid members who live in Denver, Jefferson, Arapahoe, and Adams counties.

As an MCO, Denver Health receives set monthly payments from HCPF, also known as a capitation rate, for each person enrolled in the plan to receive physical and behavioral health services through the providers that Denver Health contracts with. The monthly capitation rate is based on actuarial analysis and negotiations with Denver Health.

State Expenditures

State expenditures will likely decrease as a result of the prohibition against Denver Health paying physical health providers more than the Medicaid fee-for-service rates, excepting incentive payments. Denver Health will be required to renegotiate with its relevant providers and HCPF will adjust its monthly payments to Denver Health accordingly. The extent of any potential decrease will depend on the results of the negotiations, as well as any resulting increase in the use of incentive payments. It is assumed that any impacts will be addressed through the annual budget process once contract negotiations are finalized and the impact on rates/payments is known.

Statutory Public Entity

Denver Health and Hospital Authority is a statutorily created safety net provider. Similar to the state, restricting Denver Health to charging no more than the Medicaid fee-for-service rates for physical health services will likely decrease costs incurred and paid through its managed care organization. To the extent that this reduces the capitated rate paid by HCPF, revenue to Denver Health will also decrease.

Effective Date

This bill was signed into law by the Governor and took effect on April 4, 2024.

State and Local Government Contacts

Health Care Policy and Financing

The revenue and expenditure impacts in this fiscal note represent changes from current law under the bill for each fiscal year. For additional information about fiscal notes, please visit the <u>General Assembly website</u>.