

Health District
OF NORTHERN LARIMER COUNTY
BOARD OF DIRECTORS
SPECIAL MEETING
April 13, 2021

Health District Office Building
120 Bristlecone Drive, Fort Collins
Remote Meeting

MINUTES

BOARD MEMBERS PRESENT: Michael D. Liggett, Esq., Board President
Joseph Prows, MD MPH, Board Treasurer
Celeste Kling, J.D., Board Secretary & Liaison to UCH-North/PVH
Molly Gutilla, MS DrPH, Board Vice President
Johanna Ulloa Giron

Staff Present:

Carol Plock, Executive Director
Chris Sheafor, Support Services Director
James Stewart, Medical Director
Karen Spink, Assistant Director
Dana Turner, Dental Director
Richard Cox, Communications Director
Kristen Cochran-Ward, MH/SU Director
Lorraine Haywood, Finance Director

Staff Present:

Brian Ferrans, CIT Director
Alyson Williams, Policy Coordinator
MJ Jorgensen, Project Implementation Coord
Lin Wilder, Special Projects Director
Laura Mai, Assistant Finance Director
Anita Benavidez, Executive Assistant

CALL TO ORDER; WELCOME TO NEW MEMBER, INTRODUCTIONS & APPROVAL OF AGENDA

Director Michael Liggett called the meeting to order at 4:00 p.m.

MOTION: To approve the agenda as presented.
Moved/Seconded/Carried Unanimously

The staff and Board members welcomed Johanna to the Board and each introduced themselves. Johanna shared that she is originally from Bogatá, Colombia but has been in the US for over 30 years. She has a Master's Degree in both Psychology and Social Work and values the importance of community and equity.

PUBLIC COMMENT

None

DISCUSSION & ACTIONS

Policy

Brief overview on Policy Process and Positions

Policy Coordinator Alyson Williams reviewed the process in which the Board takes a position on any given legislation. The Policy team determines prioritization of bills/issue, and which high priority bills require in-depth analysis or briefs. Prioritization is identified at three levels: Priority 1 are generally those bills with the potential to significantly impact the health of the community or Health District operations;

priority 2 bills have potential impact but less significant; and priority 3 bills are of interest. Analyses or briefs are presented to the Board, and the Board may or may not choose to take a position on the bill. If the Board elects to take a position, it may fall into the following categories: Strongly Support, Support, Oppose, Strongly Oppose, Neutral. For positions other than neutral, policy staff communicates the Board position to relevant policymakers and legislators; for ‘strong’ positions, staff may send to more legislators or take more action, such as testifying.

So far, legislators have been in session for 60 days, with 546 bills introduced, 82 bills killed or lost, 35 signed, and the Board has taken a position on 14 issues thus far. The general assembly may go through June 15, but the hope is to be done by Memorial Day.

State Legislative Proposals

State Budget:

SB21-205: 2021-22 Long Appropriations Bill (the Budget) will be heard in the House tomorrow. The total state budget is \$34.1B, an 11% increase from the prior year, \$13.1B of which is the General Fund. It places \$1.7B into reserves – the largest amount for a couple of decades, and earmarks \$800M for recovery from COVID & its economic distress. \$21M in new funding is slated for public health funding, both state and local.

Thus far 28 amendments have been offered with nine passing in the Senate. Budget issues of special interest to the Health District including continuation of the Senior Dental Program, and restoration of the Adult Dental Medical benefits cap to \$1,500/year. Programs included in the Colorado stimulus funds: (1) Small Business grants and sales tax relief; (2) Infrastructure “shovel-ready” projects including clean energy, main street revitalization and state park access; (3) Workforce including educator licensure, SNAP employment & training, training for re-entry from incarceration, etc.; (4) Rural dollars for wildlife, water plan, and rural economic development, drought response, local agriculture, etc.; and (5) Family support including school tutoring, mental health screenings in school, funding for the mental health hotline, etc.

SB21-199: Remove Barriers to Certain Public Opportunities

This bill removes the requirement to verify lawful presence for state or local public benefits. It repeals the prohibition for state agencies or political subdivision from entering into or renewing a public contract with a contractor who knowingly employs or contracts persons who are undocumented. It also repeals current law requiring state agencies and local governments to use secure and verifiable documents when providing services or issuing official documents. Action on the bill was laid-over to include amendments. It will likely have no impact on Federal regulations for immigration law.

MOTION: To strongly support SB21-199: Remove Barriers to Certain Public Opportunities
Moved/Seconded/Carried Unanimously

HB21-1150: Create the Colorado Office of New Americans.

This bill creates the Colorado Office of New Americans (ONA). The ONA serves as the point of contact for immigrant-serving state agencies, private sector organizations, and the public about immigrant issues in Colorado. As its main priority, the ONA is required to implement a statewide strategy to facilitate economic stability and promote successful economic, social, linguistic, and cultural integration by

investing in the success of immigrants in Colorado. Financing is primarily driven through gifts and grants but the bill has been set aside for appropriation. Board members expressed their desire for financing to be included in the Long Bill. There was significant discussion about use of the words “linguistic and cultural integration” and the need to ensure that “integration” does not become assimilation, resulting in the loss of an individual’s heritage.

MOTION: To support HB21-1150: Create the Colorado Office of New Americans, while encouraging clarification around “linguistic and cultural integration,” in order that it not become a mechanism that would cause the loss of an individual’s heritage.

Moved/Seconded/Carried Unanimously

HB21-1232: Standardized Health Benefit Plan Colorado Option.

The Colorado Health Insurance Option was a two-phased approach aimed at addressing the affordability of health insurance in Colorado. Phase One included the creation of a standardized insurance plan by the Division of Insurance (DOI) for carriers to offer in areas where they currently offer plans in both the individual and small group markets. It encouraged insurance carriers to work with other groups of the health care industry (i.e. hospitals, prescription drug manufacturers, providers) to reduce their insurance premiums by 6% each year over three years. Originally, if the cost reduction targets are not met, Phase Two would be triggered, and the State of Colorado would offer the standardized plan on individual and small group markets through the newly established Colorado Option Authority, a quasi-governmental entity.

In a major ‘strike-below’ amendment, the language that looks has the DOI create a Standardized Plan, and requires that carriers offer it, reducing premium rates by 6% over the next three years. Insurance carriers would have to work with hospitals and providers to cut costs. If carriers can’t get adequate networks, there is a provision that allows the Commissioner to compel participation. While the board was conceptually in favor of a standardized plan and reduction in costs, they were concerned about what and who it might impact, and potential unintended consequences.

MOTION: To take a Neutral/Monitoring position on HB21-1232: Standardized Health Benefit Plan Colorado Option

Moved/Seconded/Carried Unanimously

Update on SB21-085: Actuarial Review Health Insurance Mandate Legislation.

Concerning actuarial reviews of proposed legislation that may impose a new health benefit mandate on health benefit plans. In a prior review of the bill, the board recommended several amendments. Some have been made, including exclusion of public programs, doing actuarial reviews if a benefit is being cut/reduced (not just added), and a greater focus on health equity. Another amendment that the board supported was not amended: a mandate that results in a premium impact of less than 1% would be deemed negligible and not performed. There was significant discussion; the board appreciates the intent of the bill but is concerned that the budget would not result in comprehensive analyses, and it would be very difficult to provide timely and meaningful data.

MOTION: To take a position of mild opposition on SB21-085: Actuarial Review Health Insurance Mandate Legislation.

Moved/Seconded/Carried Unanimously

HB21-1198: Health Care Billing Requirements for Indigent Patients.

The bill requires hospitals to screen uninsured patients for health coverage options and potential financial assistance for which they may be eligible. Each hospital must use a uniform application developed by the Department of Health Care Policy and Financing (HCPF) when screening a patient. It also limits the amount that low-income patients pay for certain health services by tying what they owe to an established rate while also limiting the size of payments charged on a monthly basis. In addition, it prohibits hospitals from sending a patient to collections unless they have screened the patient for coverage and assistance, offered a fair payment plan, and provided information regarding patient rights. Amendments that are anticipated to be added include what rate to be used when Medicare doesn't have a rate to use, and the removal of providing a payment plan that doesn't exceed 5% of income for patients who are non-qualifying. Other potential amendments include its application to only hospitals and free standing emergency department; incorporating provider protections in the case of patients deliberately misreporting their income, and removing the provision regarding cancellation of debt after 36 months.

MOTION: To support HB21-1198: Health Care Billing Requirements for Indigent Patients, with the amendments listed above.

Moved/Seconded/Carried Unanimously

DISCUSSION

Brief Status Update, COVID and the Health District

COVID and the Health District

Executive Director Carol Plock provided an update on COVID-19 in Larimer County. The 7-day case rate has more than doubled over the past three weeks, with a positivity rate of 7.5% and hospitalizations on the rise. If it continues we could move back to Orange on the COVID dial. Larimer County has seen an increase in cases of the UK variant with 130 cases. Both the UK and California variants are spreading. We are seeing rising cases and higher positivity among children less than 10 and those 11-17 years of age. Larimer County remains a region of concern in the state and in an elevated state of case growth.

On the vaccine front, Larimer County has administered more than 233,000 doses, with 90,000 being fully vaccinated. Thirty percent of residents have gotten at least one dose. Larimer County's goal is to have 65% of those ages 16+ vaccinated with at least one dose by May 6. FEMA set up a mass vaccination site at The Ranch. They will be open Monday through Saturday, 10:00 am – 6:00 pm. A complication is the FDA/CDC/CDPHE recommendation to pause the J&J vaccines, as they review six cases of reported blood clots (out of 7M doses).

There are a number of equity clinics planned for this week. Our team had a successful pop-up clinic in Red Feather Lakes, vaccinating 161 very grateful residents. They also did a two-day pop-up clinic at the Cultural Enrichment Center, vaccinating just a bit under 200. The Health District team is poised to work with congregate shelters, beginning tomorrow, with two clinics at the Murphy Center, one at the Blue Spruce shelter, and one at Catholic Charities. Then on Sunday, they will run a clinic at Holy Family church, where there has been great response from the congregation. A mass vaccination site is scheduled at the Holiday Twin drive-in on April 25.

Regarding the Isolation, Recovery, and Quarantine (IRQ) site, three weeks passed without a guest but we now have two guests, one from county corrections and the other from the Blue Spruce shelter.

PUBLIC COMMENT (2nd opportunity)

None

ANNOUNCEMENTS

- April 27, 4:00 pm – Board of Directors Regular Meeting
- May 11, 4:00 pm – Board of Directors Special Meeting (Policy)
- May 25, 4:00 pm – Board of Directors Regular Meeting

ADJOURN

MOTION: To Adjourn the Meeting
Moved/Seconded/Carried Unanimously

The meeting was adjourned at 5:37 p.m.

Respectfully submitted: