



**BOARD OF DIRECTORS
MEETING
January 25, 2011**

**Health District Office Building
120 Bristlecone Drive, Fort Collins**

MINUTES

BOARD MEMBERS PRESENT: Celeste Holder Kling, President
Bernard J. Birnbaum, MD, Vice President
Timothy S. O'Neill, Secretary
Steven J. Thorson, MD, Treasurer
Joe D. Hendrickson, Liaison to PVHS Board

STAFF PRESENT: Carol Plock, Executive Director, HD
Richard Cox, Communications Director
Lorraine Haywood, Finance Director
Sue Hewitt, Evaluation Coordinator
John Newman, Medical Services Director
Chris Sheafor, Support Services Director
Nancy Stirling, Assistant to Executive Director, HD
Lin Wilder, Community Impact/Health Promotion Director
Kristan Williams, Health Promotion Coordinator

CALL TO ORDER; APPROVAL OF AGENDA

President Celeste Kling called the meeting order at 6:03 p.m. Dr. Thorson asked to add an item to the meeting agenda concerning physicians' certification of patients to the medical marijuana registry.

MOTION: To approve the agenda as amended.
Motion/Seconded/Carried Unanimously

BOARD DISCUSSION & POTENTIAL DECISIONS

Policy: Health Care Reform – Health Insurance Exchanges

Ms. Carol Plock presented to the Board information shared with her by Policy Analyst, Carrie Cortiglio, who was very ill and could not make it to the meeting this evening.

Ms. Cortiglio created an outline of the key points covered in a presentation given by Ms. Lorez Meinhold, who was initially appointed last May by previous Governor Ritter as Director of National Reform Implementation for Colorado and is continuing that role under the new administration. The presentation included an overview of the intent of a health insurance exchange, and a summary of the perceptions gathered from 10 stakeholder meetings held around the state on the topic of what a successful exchange would look like. The following are generally

considered to be a few of the key elements of a successful exchange: an organized market place for health insurance, offering meaningful choice, ensuring maximize participation, not duplicating the functions of insurance, etc. In the state meetings throughout the state, there were several areas of consensus, including that it should be: 1) a state-based exchange and not federal; 2) a quasi-governmental authority (outside of government but accountable to government); and 3) governed by a diverse and knowledgeable board. There are at least a couple of issues, such as whether the individual market and small group market should be merged or continue to be separate, and what the definition of a small business should be (keep small businesses at 50 and fewer employees, or go up to 100 and fewer) – both better answered after some economic modeling is completed.

Staff was interested in learning from the Board their concerns in the areas of authority, role, and governance of a health insurance exchange. The Board discussed and supported the following ideals in regard to a health insurance exchange board:

Size of Board: The Health District Board supports a smaller board, for example, 7 to 9 members. The Board agrees that a smaller board is best at getting things accomplished and that interests not represented on the board could still provide input via other channels.

Board Membership/Objectives: The Board was supportive of using the Federal Reserve Board as a model (which was also suggested in the report staff submitted to the Blue Ribbon 208 Commission). Members would be appointed to 10 ½ year terms with new members coming in every 1 ½ years in order to maintain expertise on the board. Members should also not be beholden to any specific interest groups in order to avoid conflicts of interest and not be subject to the political climate. It was, however, suggested that the expertise represented on the board include a physician, or other person with health care experience.

Insurance Industry Representative on the Board: Since the exchange will be regulating the health insurance industry, the Board felt that having them represented on the board could be a conflict, and that there were other venues through which to gather their input. They suggested including someone with significant health industry experience who is not currently actively employed by the industry.

Role and structure of the Exchange: One of the issues that will eventually have to be dealt with is the role of the exchange, although that will not be decided in the initial legislation. Utah and Massachusetts have different approaches. The Utah model is mostly a place to gather information about the marketplace, while the Massachusetts model does that but also developed minimum standards for plans and negotiates pricing. The other issue is how to structure the Exchange (within or outside of government). The Board favored the quasi-governmental structure, which keeps the process accountable but would have the ability to move faster than government can sometimes move.

Budget: The Board agreed with the recommendation given in the report to the 208 Commission that in order for the health insurance exchange board to be most successful in obtaining its objectives, sufficient funds must be ensured to support activities/responsibilities of the board (i.e., research, studies, analyses, modeling, etc.) and that the budget should be separate from political control and not dependent upon the general fund.

Staff will draft a position statement based on the Board's comments to be shared with policymakers.

At this point of the meeting, the Board suggested shortening the meeting to allow those who were interested in hearing/watching the President's State of the Union address to do so.

Physician Certification of Medical Marijuana for Patients

Dr. Thorson distributed copies of a document published by COPIC titled "The Colorado Medical Marijuana Registry: Practical Guidance for Physicians." COPIC collaborated with the State Board of Medicine and the Colorado Medical Society to come up with guidance for physicians on certifying patients to the medical marijuana registry, consideration when managing patients who are certified on the Medical Marijuana Registry, etc. He also noted that there is legislation coming forward soon that would make several changes to the bill that was passed last year concerning medical marijuana, some that may soften restrictions. Staff will provide information and analysis as language surfaces. Should action by the board need to be taken prior to the next meeting, the Board reiterated that Board President Celeste Kling is authorized to take a position on behalf of the Board.

UPDATES & REPORTS

Status of Key Projects:

- Oral Health: Care for those who require it under general anesthesia - Plans are underway for the general anesthesia program to begin seeing patients who require their dental care under general anesthesia in February. So far, staff have raised \$21,000 of the \$23,000 in donations and grants needed for purchasing supplies and equipment for the program. Appreciation was given to staff and Board members for contributing to the fundraising effort.
- Health Matters - Staff is currently in the process of interviewing candidates for the Health Matters Project Coordinator.
- Medicaid Accountable Care Collaborative Pilot - Ms. Plock and consultant, Michael Felix, are working with key representatives of the primary care groups who provide most of the care to local Medicaid recipients. The state pilot focuses on developing effective community-based care coordination services, with the outcome of both increasing health and controlling costs, and the local focus will be on targeted care coordination.
- Growing the Community Dual Disorders Treatment (CDDT) Program - Postponed until next meeting.

Quarterly Program Summary Reports for Fourth Quarter 2010

Postponed until next meeting.

Other Executive Director Reports

Postponed until next meeting.

PVHS Liaison Report

Postponed until next meeting.

CONSENT AGENDA

- Approval of ~~July 21~~ and December 14, 2010 Board Meeting Minutes
- Approval of November Financial Statements
- Approval of Resolution 2011-1 to Establish Meeting Days, Times and Locations for Board of Director Meetings

- Approval of Resolution 2011-2 to Establish a Designated Public Place for Posting of Meeting Notices

Mr. Hendrickson asked to remove the July 21 meeting minutes from the Consent Agenda as he was not present at that meeting.

MOTION: To approve the consent agenda as amended.
Motion/Seconded/Carried Unanimously

- Approval of the July 21, 2010 Board Meeting Minutes.

MOTION: To approve the July 21, 2010 Board Meeting Minutes as presented.
Motion/Seconded/Carried (Abstained: Joe Hendrickson)

ANNOUNCEMENTS

- February 11, 7:00 am – Board of Directors Special Meeting
- March 1, 5:30 pm – Board of Directors Regular Meeting (in place of February 22 meeting date)

ADJOURN

MOTION: To adjourn the meeting.
Moved/Seconded/Carried Unanimously

The meeting was adjourned at 7:02 p.m.

Respectfully submitted:

Nancy L. Stirling, Assistant Secretary

Celeste Holder Kling, President

Bernard J. Birnbaum, MD, Vice President

Timothy S. O'Neill, Secretary

Steven J. Thorson, MD, Treasurer

Joe D. Hendrickson, PVHS Board Liaison