



**BOARD OF DIRECTORS
SPECIAL MEETING
April 16, 2015**

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

MINUTES

BOARD MEMBERS PRESENT: Bernard J. Birnbaum, MD, President
Michael D. Liggett, Esq., Secretary
Tracy L. Nelson, Ph.D., Treasurer
Steven J. Thorson, MD, Liaison to PVHS Board

BOARD MEMBERS ABSENT: Tess Heffernan, M.Ed., Vice President

STAFF PRESENT: Carol Plock, Executive Director
Bruce Cooper, M.D., Medical Director
Charles Futoran, CDC Public Health Associate
Lorraine Haywood, Finance Director
Dan Sapienza, Policy Coordinator
Chris Sheafor, Support Services Director
Karen Spink, Assistant Director
Nancy Stirling, Assistant to Executive Director

CALL TO ORDER; APPROVAL OF AGENDA

President Bernard Birnbaum called the meeting to order at 5:54 p.m. No changes were requested for the meeting agenda.

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

DISCUSSION AND ACTIONS

Legislation

Mr. Dan Sapienza, Policy Coordinator, distributed an updated Legislative Matrix document to the Board and staff. The following bills were discussed:

- ***HB15-1305: Unlawful Manufacture of Marijuana Concentrate*** – A policy brief was provided in the meeting packet. This bill would prohibit the manufacture of marijuana concentrate in private homes. The process of extracting the concentrate from marijuana leaves includes the use of highly hazardous substances and has caused injuries to people and destruction of homes. This bill does not make the concentrate itself illegal. The City of Fort

Collins has already banned marijuana concentrate manufacture in private homes. This bill has strong support and is likely to pass.

- ***SB15-214: Interim Committee on School Safety and Youth Mental Health*** – The bill would set up a Committee to: study issues relating to school safety, study methods for identifying students in crisis, develop standardized criteria for school personnel to use in assessing the potential threats; and make bill recommendations. The Committee would consist of 14 individuals (8 of which would be voting members), including 8 legislators, 1 school counselor, 1 School Resource Center Representative, 2 Parents, 1 Superintendent, and 1 Juvenile Advocate. The Board and staff noted the lack of representation on the Committee from behavior health professionals. There was also some concern about the bill’s approach – that its strong focus on safety might miss the need for ongoing mental health – and that it is important to expand the concept of what causes violence. There was a concern that if safety is connected only with mental health, it could create more stigma which might lead to people being less likely to seek care. Dr. Birnbaum offered the following motion:

MOTION: **The Health District supports the idea of a committee looking at safety in schools and issues around mental health in schools, but is concerned that the bill does not appear to adequately address either safety or mental health issues. The Board recommends that the Committee include more behavioral health (both mental health and substance use disorder) professionals. The Board also recommends that the Committee look closely at each issue separately, as well as considering their interaction, since safety issues can be caused by issues other than mental health, and addressing mental health issues often requires more than a threat assessment – including ongoing attention and treatment.**

Motion/Seconded/Carried Unanimously

- ***HB15-1298: Warn Pregnant Women about Marijuana Risks*** – This bill would require that the Department of Revenue create rules requiring that licensed medical marijuana centers and licensed retail marijuana stores display signage warning women about potential risks if they use marijuana when pregnant, and also prohibiting knowingly advertising marijuana to pregnant women. A recent CDPHE review of existing literature concluded that there is “moderate evidence that maternal use of marijuana during pregnancy is associated with negative effects on exposed offspring, including decreased academic ability, cognitive function, and attention.” The evidence listed included decreased growth, attention problems, decreased IQ scores, reduced cognitive function, and decreased academic ability, and noted that (except for decreased growth) the effects may not appear until adolescence. It was noted that if a baby is positive for THC, there is a requirement that it will be reported to Child Protective Services. The general feeling was that a sign would be more effective in deterring marijuana use by pregnant women if it included the specific risks.

MOTION: To SUPPORT the bill, and recommend expanding it to have retailers provide handouts close to the signs, with language standardized by the state health department, that lists more specific information about the research on the risks of marijuana use by pregnant women.
Motion/Seconded/Carried Unanimously

- **HB15-1309: Protective Restorations by Dental Hygienists** – This bill would allow dental hygienists to provide interim therapeutic restoration (ITR) with diagnosis and order of a dentist under direct or indirect dentist supervision. This legislation would not affect the Health District’s current dental clinic practice as there are dentists on staff who can perform permanent restorations. It does promote “teledentistry”, a new way to provide dental care similar to “telemedicine” (which received attention in a bill previously passed this legislative session), by allowing one dentist to support up to 5 dental hygienists throughout the state. A concern was expressed that some people might get the temporary filling and not follow-up later with a dentist for a permanent filling.

There are two bills related to Tax Increment Financing (TIF), SB15-135 and HB15-1348:

- **SB15-135: Public Bodies and Urban Renewal** – This bill concerns tax increment financing and makes changes to the “Urban Renewal Law”, increasing the number of allowable commissioners on an urban renewal authority from 11 to 13, and specifying that one commissioner on the authority may, if the county so chooses, be appointed by the board of county commissioners. Cities are in support and Counties are in opposition. The bill has been laid over several times and appears to not be going anywhere.
- **HB15-1348: Urban Redevelopment Fairness Act** – This bill concerns tax increment financing as well, and makes broader changes than SB15-135; it has a long summary in the updated matrix document. Last year’s bill, HB14-1375, included 1 county representative on the URA board, pro rata rebate of all funds remaining in US fund, and stated that property tax increment revenue percentage must not exceed sales tax increment revenue percentage. After passing the House and Senate, the bill was ultimately vetoed by the Governor for “going too far” and being “too burdensome.”

This year’s bill has a lot of sponsors and is different from last year’s bill in the following ways: it creates a URA Board of up to 13 members that would include 1 county representative and 1 Special District Representative; it would require that any Impact Report that is sent to the County be sent to the Board of County Commissioners (BOCC) and to the governing body of all taxing entities impacted and that the report be developed in consultation with BOCC and taxing entities; it requires the return of all relevant funds remaining after indebtedness has been paid off; it requires that any plan that allocates the taxes of any public body other than the municipality must be negotiated with all taxing entities impacted; and states that if a plan is not agreed to within 120 days, then property tax increment revenue percentage must not exceed sales tax increment revenues allocated to the URA.

Opponents of this bill include Cities, the Colorado Municipal League, and URAs. Supporters include Counties (including Larimer) and the Special District Association. The bill passed

the House Finance Committee and is on its way to the House floor. The bill raises the question of whether the Health District (as a taxing entity) would need to have a representative available to negotiate every TIF agreement; it is unclear at this time. A key impact for municipalities, however, is that instead of being able to negotiate plans only with developers, they would have 120 days to have the County and impacted tax entities agree on the plan. The Board was in agreement that if an entity is going to be impacted with a reduction in revenue, they need to have a seat at the table.

MOTION: to STRONGLY SUPPORT HB15-1348.
Motion/Seconded/Carried Unanimously

- **SB15-259: Out of Network Health Provider Charges** – This bill would require a health care provider who provides out-of-network covered services at an in-network facility or emergency services to submit a claim to the patient’s insurance and not balance bill the patient. The insurance company would then be required to pay that out-of-network provider at the in-network rate or negotiate payment if a provider submits demand with proof of disclosure. The patient would pay normal in-network charges. Supporters for this bill include insurance companies and CCHI and CCMU. Opponents are many, including the Colorado Medical Society and various other medical groups. Currently, insurance companies are paying out-of-network charges to out-of-network providers, with charges being passed on to patients as higher premiums. It’s a complicated issue, and the Board took no position on the bill.
- **SB15-263: Colorado Marijuana Control Commission** – This bill would create a new Marijuana Control Commission under the State’s Department of Revenue which would promulgate rules relating to retail and medical marijuana. It would bring together compliance, licensing, and regulation of business activities under a single authority, similar to the Gaming Control Commission or Racing Commission. The Board wondered whether it would also replace CDPHE’s regulation role (over food safety and edibles); staff did not know the answer at this time. If a Commission is developed that does have responsibility for food safety and edibles, the Board would encourage that a health professional be included on the Commission.

MOTION: If this Commission will make decisions that could impact health (advertising, food safety, etc.), then the Health District Board would strongly recommend the inclusion of a health or public health professional on the Commission.
Motion/Seconded/Carried Unanimously

- **SB15-256: CO Health Insurance Exchange Oversight Committee** – This bill renames the “Legislative Health Benefit Exchange Implementation Review Committee” to “Colorado Health Insurance Exchange Oversight Committee.” Additionally, it would allow the Committee to meet unlimited times during a session, and up to 10 times in interim.
- **SB15-228: Medicaid Provider Rate Review** – This bill comes from the Joint Budget Committee and establishes a process to review Medical Provider rates every 5 years by a 24-member Advisory Committee. This is essentially a compromise between the Department of Healthcare Policy and Finance (HCPF) and their desire for a more structured rate review process (and staff to do so) and the JBC’s desire for more stakeholder input in the process.

- **HB15-1083: Patient Contribution for Rehabilitation Services** – This bill limits copayments for PT, OT, and chiropractic services to 50% of negotiated rate. It is being opposed by insurance companies and supported by PT, OT, and chiropractors.
- **HB15-1301: Tobacco Credit for Out of State Tobacco Sales** – This bill allows a distributor to claim a credit for taxes paid on tobacco products shipped to out of state consumers.
- **SB15-247: Tobacco Settlement Funded Drug Assistance Program** – This bill is already on its way to the Governor for signature. SB15-247 would require that 3.5% of tobacco settlement dollars go to the AIDS drug assistance program, as well as increases the scope of the program to include preventive services, screening, general medical and pharmaceutical costs (for HIV/AIDS, viral hepatitis, other STIs).

Other Updates

- **Colorado Cares** – Colorado Cares is expected to be introduced soon to the House Concurrent Resolution Committee. Representatives Ginal and Aguilar are sponsors to this constitutional amendment. The amendment would require a 10% payroll tax (6.67% from the employer, plus 3.31% from the employee) that would go to Colorado Cares for workers comp, auto accidents, as well as all medical care. The amendment would require a 2/3 vote in each chamber to pass, which is considered unlikely.
- **SB15-234: 2015-2016 Budget (Long Bill)**
 - **Medicaid:** The proposed budget includes an option for an applicant to annualize their income for Medicaid eligibility determination, upon request, beginning in 2017. It also includes modest Medicaid Provider rates increases.
 - **Immunization Issues:** Included in the proposed budget is \$1.2 million to improve the Colorado Immunization Registry. Yesterday, the Colorado Board of Health also issued rules regarding non-medical exemptions to begin July 2016, which require that parents submit forms at each age where vaccinations are due (pre-K), and submit exemption forms annually when the child is in school K-12. The CDPHE website will include a voluntary module which includes information on vaccines and school and daycare immunization rates. The Health District had previously supported both of these measures.
- **HB15-1087: Alcohol and Substance Abuse Medical Detox Centers Pilot Program** – There had been some questions as to how this might impact hospital and ED use. One example of an impact came from North Range Behavior Health, which currently has a social detox center. Their model is that when an individual comes in, they must obtain a medical clearance before they can go to social detox. Currently, ambulances may drop off patients at the ED where they sit waiting to obtain medical clearance. Other times, ambulances take individuals directly to the North Range social detox where they are then transferred to an ER for the medical clearance and then returned to detox. This bill would establish Medical Detox facilities that would allow the facility itself to medically clear individuals and handle less acute cases, reducing the burdensome requirements of transfers to and from EDs. The fiscal note, however, was \$6 million, and there did not appear to be projections of the extent to which this expenditure might save on other expenditures.

- **HB15-1194: Authorize General Fund Dollars for LARC Services** – The funding for this bill to continue to provide LARC (long-acting reproductive contraceptive) services is included in the state’s budget, however the amendment for an additional \$5 million funding was removed in conference committee. There is a large coalition of organizations around the state advocating for this. This bill is expected to pass out of the House but may be unlikely to pass the Senate.
- **HB15-1232: Emergency Use of Epinephrine Auto-injectors** – This bill passed the Senate HHS Committee today and chances for passing look good.
- **HB15-1257: Eliminate Penalty to Increase Compliance in Cigarette Sales** -- This bill, which would remove the penalty if local municipalities decide to tax cigarettes, is not looking likely; a proposed amendment was that local government could not tax sale of cigarettes.
- **SB15-137: PACE Program Flexibility for Business Entity** – The House has proposed amendments regarding the transfer from non-profit to for-profit. The Senate approved the amendments and the bill is on its way to the Governor for signature.
- **SB15-197: Advanced Practice Nurse Prescriptive Authority** – This bill is also on its way to the Governor with Senate Amendments. The amendments would require 3 years of clinical nursing experience before being given provisional prescriptive authority.
- Others
 - **SB15-053 – Dispense Supply of Emergency Drugs for Overdose Victims** – This bill was signed into law and is effective immediately.
 - **HB15-1264 – Homeless Bill of Rights** is not moving.
 - **SB15-015 – Mental Health Parity for Autism Spectrum Disorder** has been sent to the Governor for signature.
 - **HB15-1214 – Abuse-Deterrent Opioid Drugs** – Bill was amended and referred out of the Senate.
 - **HB15-1075 – Naturopathic Doctors Treating children** has been signed into law.

Local Issue: West Nile Virus – The city and county are working on a plan to fold the issue of mosquito mitigation into the Weed District (to become a Pest District), which is currently funded by a 0.142 mills property tax. The current annual revenue of the weed district is approximately \$480,000. With costs per application of pesticide to spray the whole town for mosquitoes (should that ever be recommended) between \$80,000 and \$90,000, the Weed District’s current revenue would not be sufficient. Other funding options are being evaluated.

ANNOUNCEMENTS

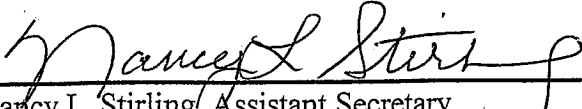
- April 28, 5:30 pm – Board of Directors Regular Meeting

ADJOURN


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

The meeting was adjourned at 7:36 p.m.


Respectfully submitted:



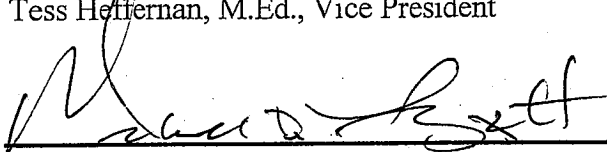
Nancy L. Stirling, Assistant Secretary



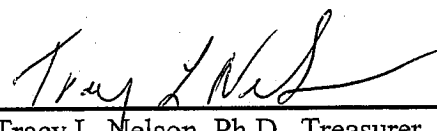
Bernard J. Birnbaum, M.D., President

[Absent from 4/16/15 meeting] 

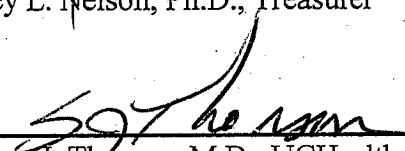
Tess Heffernan, M.Ed., Vice President



Michael D. Liggett, Esq., Secretary



Tracy L. Nelson, Ph.D., Treasurer



Steven J. Thorson, M.D., UCHHealth-North (PVHS) Board Liaison