

Policy Examiner

Dispatches about the Colorado Commission on Affordable Health Care



End-of-Life Issue Proves to be Difficult

JUNE 8, 2015

The Colorado Commission on Affordable Health Care delved into two very different topics — end-of-life care and the cost of health insurance — at its June 8 meeting.

The panel is charged with recommending ways to lower health care costs, and both topics provoked keen interest among commissioners.

Tina Staley, a licensed clinical social worker who has worked extensively on end-of-life counseling, spoke to commissioners about the often unsatisfying experiences that patients and their families have in the final weeks of life.

Most Americans say they want to die at home, yet the majority spend their last days in a hospital, hospice or nursing facility, all of which are expensive and contrary to many patients' wishes, Staley said.

Commissioner Jeff Cain thanked Staley for broaching the topic.

"It's a really important conversation. It's a hard conversation. People call us the cost commission, but really, we're a cost and quality commission," Cain said, noting that a third of a typical patient's lifetime health spending comes at the end of life.

Milliman to do Rehab Study

The commission has found a contractor to conduct a study of the effects of cost-sharing on patients' use of physical rehabilitation services. The legislature ordered the study through House Bill 1083 this spring, giving commissioners a November 1, 2015, deadline.

Chairman Bill Lindsay said Milliman, a multinational actuarial consulting firm with a Denver office, will conduct the study. Milliman can do the work for the \$25,000 appropriation the legislature provided, and it will be able to meet the deadline, Lindsay said.

Cain pointed to Grand Junction, where Rocky Mountain Health Plans (RMHP) has seen some success at redirecting end-of-life spending from hospitals to hospices.

Steve ErkenBrack, RMHP's president and CEO, sits on the Affordable Care Commission and also served on the 208 Commission, the state's last major health reform group. The 208 Commission "tiptoed up" to the end-of-life debate, but did not do much, he said.

If the Affordable Care Commission is to tackle the issue, commissioners must take great care to keep the conversation centered on patients, so it doesn't appear that highly personal decisions are being driven by the government or insurance companies, ErkenBrack said.

Others have tried to address the topic and found it difficult.

Commissioner Greg D'Argonne, a hospital executive, said the end-of-life conversation is often tough for physicians.

"We've been spinning our wheels on this issue for a number of years and really have struggled to get traction," he said.

Insurance Rates in Flux

The commission also heard from ex-officio member Marguerite Salazar, who is the state insurance commissioner.

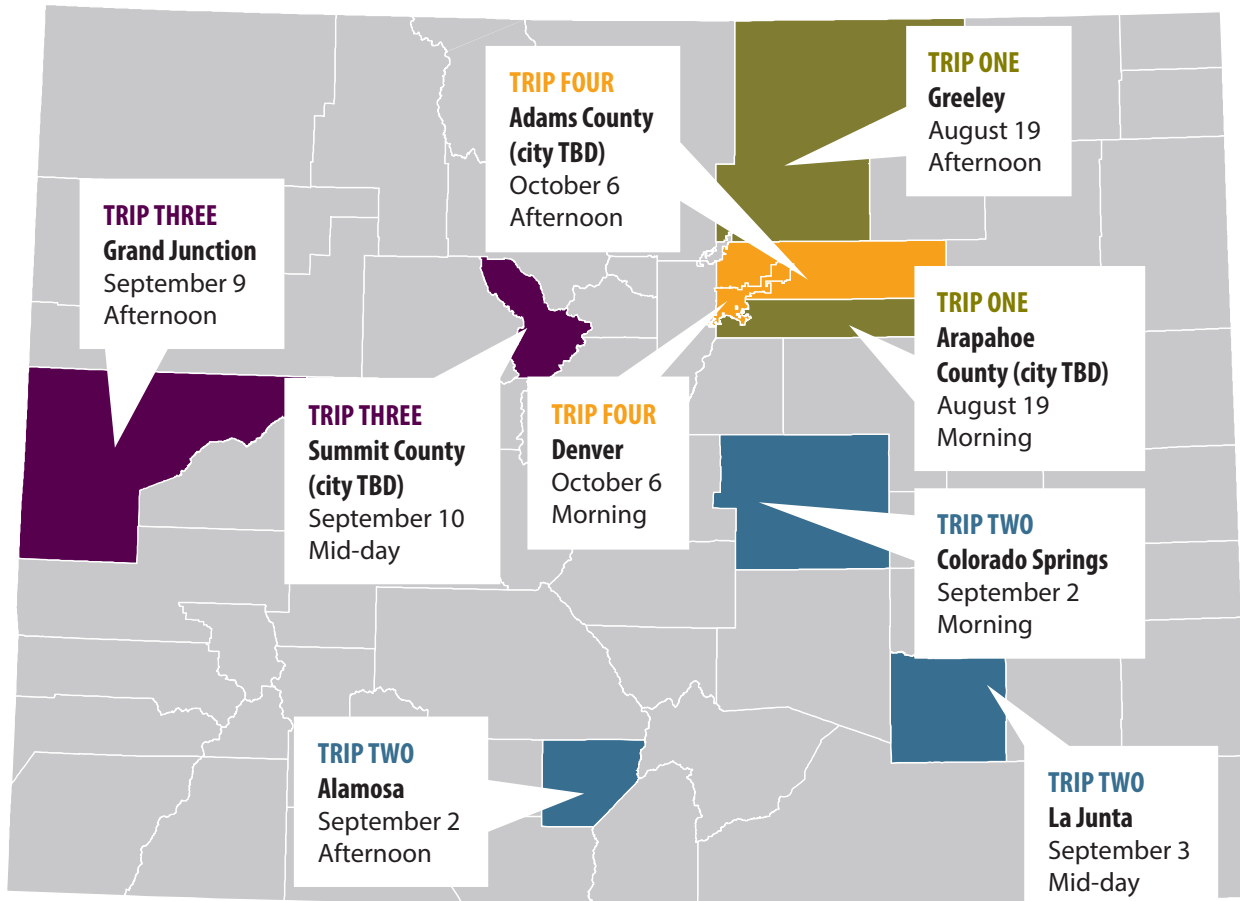
Salazar's Division of Insurance weathered criticism when its data revealed that residents of mountain resort counties were paying the highest premium prices in the country two years ago. The state changed the rating areas last year, which helped bring down costs in the most expensive regions.

Insurance prices are still in flux across Colorado, she said.

Rate requests for next year will be posted on the Division of Insurance website on June 15. But Salazar cautioned that her division has not approved those rates yet, and many of them are likely to change in the next 90 days.

Road Trip! Proposed Travel Schedule for Public Hearings in All Seven Congressional Districts

Schedule is not finalized. Locations to be determined.



"I think (the market) will stabilize in the next few years, as plans get to know their customers better," Salazar said. "We're still early in this game. That's why I think we're seeing more fluctuation."

Research Agenda Taking Shape

Conversations at the June meeting on health care costs were the commission's most detailed to date.

Separately from the discussion at the full commission, the five-member research committee has been meeting twice a month to explore various topics. Commissioner Jay Want gave a presentation on transparency in health costs at the June 8 research committee meeting, just before the full commission met.

The research committee's agenda will keep its members busy for the next year. It includes costs related to workforce issues, social determinants of health, regulatory burdens, administration, technology and more. The committee will study each topic for a month.

The research committee is charged with vetting data and analysis for the full commission, but so far it has not sent much research to the full group. Some commissioners who don't serve on the research committee expressed interest in hearing what their colleagues have been learning. Want suggested brief presentations every month to keep the full commission apprised of the research committee's progress.

Lead Author: Joe Hanel, senior communications expert



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303 E. 17th Ave., Suite 930, Denver, CO 80203 • 303.831.4200 • coloradohealthinstitute.org