



COLORADO
Department of Health Care
Policy & Financing

1570 Grant Street
Denver, CO 80203

NOTICE OF PROPOSED RULES

The Executive Director of the Colorado Department of Health Care Policy and Financing will hold a public meeting on Wednesday, April 15, 2020, beginning at 8:00 a.m., in the first floor conference room at 303 East 17th Avenue, Denver, CO 80203. Reasonable accommodations will be provided upon request for persons with disabilities. Please notify the Rules Administrator at 303- 866-4416 or chris.sykes@state.co.us or the 504/ADA Coordinator hcpf504ada@state.co.us at least one week prior to the meeting.

A copy of the full text of these proposed rule changes is available for review from the Rules Administration Office, 1570 Grant Street, Denver, Colorado 80203, tel. (303) 866-4416, fax (303) 866-4411. Written comments may be submitted to the Rules Administration Office on or before close of business the Thursday prior to the meeting. Additionally, the full text of all proposed changes will be available approximately one week prior to the meeting on the internet at the [Executive Director Administrative Rules Hearing Schedule page](#).

ED 20-01-13-A, Revision to the Executive Director of the Department of Health Care Policy and Financing Rule Concerning All-Payers Claims Database. 10 CCR 2505-5

Executive Director. As the Colorado All Payer Claims Database (CO APCD) Administrator, CIVHC began conversations with the submitters regarding the rule change in the fall of 2019. The goals of the proposed updates to the data submissions guide are outlined below:

- Improve the quality and completeness of the submitted alternative payment model (APM) data to overcome current obstacles for reporting progress toward adoption of APMs and investment in primary care in Colorado.
- Improve the quality and completeness of submitted data about manufacturer drug rebates and other compensation conferred to payers. And, obtain data regarding the contractual arrangement between the payer and its pharmacy benefit manager, including the percentage of rebates and other compensation that are passed through from the pharmacy benefit manager to the payer.

The statutory authority for this rule change is contained in 25.5-1-108, C.R.S. (2019).

Our mission is to improve health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources.
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