



Things We Can Do Now
<ul style="list-style-type: none"> Identify high risk populations by zip code and county to prepare for future surges (using CDC definition of high-risk conditions, age groups, etc.) – In Progress
<ul style="list-style-type: none"> Estimate potential cost impact of moratorium on elective services based on historical data for the same time period – In Progress
<ul style="list-style-type: none"> Evaluate historic use of telemedicine services to benchmark adoption pre and post COVID-19 and inform efforts to increase telehealth access for underserved areas and those most at-risk – In Progress
<ul style="list-style-type: none"> Evaluate COVID-19- like respiratory claims from fall 2019 compared to prior years to estimate actual number of Coloradans who may have already had the disease or been exposed
Things We Can Do in Near Term (2-6 months)
<ul style="list-style-type: none"> Identify churn in health care coverage
<ul style="list-style-type: none"> Evaluate use of telemedicine (including e-consults if possible) by specialty and patient demographics during and post outbreak
<ul style="list-style-type: none"> Understand impact of moratorium on elective services in terms of reduction in utilization and impact on specific provider types in terms of loss of revenue and access to care (rural hospitals, primary care, Community Health Centers, etc.)
<ul style="list-style-type: none"> Analyze mental health/behavioral health services during/post COVID-19 by evaluating prescription medication fills, telemedicine visits with mental health providers, and substance use disorder and behavioral health-related claims
<ul style="list-style-type: none"> Assess impact of changes in member liability by health insurance payer
<ul style="list-style-type: none"> Determine changes in eligibility for Colorado’s re-insurance program (individuals with over \$30k in annual health care spending)
<ul style="list-style-type: none"> Evaluate potential impact of resource scarcity (e.g. drugs being diverted from people with chronic conditions, etc.)
Things We Can Do in 6+ Months (requires significant data runout)
<ul style="list-style-type: none"> In-depth analysis of mortality and reasons for death in Colorado (would require mortality data), to understand deaths related to COVID-19, potential undercounting of these deaths and deaths from other causes where the patient could not receive timely treatment (e.g., AMI)
<ul style="list-style-type: none"> Financial impact to long-term care and/or home health with changes in residency
<ul style="list-style-type: none"> Evaluate how moratorium on elective services impacted outcomes for patients with chronic diseases or other conditions requiring regular care, and whether patients did seek care immediately or if “fear” may have played a role in accessing care post-pandemic; include analysis of pediatric care (e.g. well-child visits) as separate category

<ul style="list-style-type: none">• Determine if there was a backlog of primary care after bans were lifted
<ul style="list-style-type: none">• Analysis of impact of health care disparities on COVID-19 incidence and mortality in terms of race/ethnicity and social determinants of health
<ul style="list-style-type: none">• Determine potential impact on insurance premiums (e.g. assessing claims in which the patient portion of the cost is waived)
<ul style="list-style-type: none">• Evaluate long-term use of telemedicine/e-consults and potential savings by specialty categories with increased use
<ul style="list-style-type: none">• Provide a public dataset that could be available to enable general research on COVID-19
<ul style="list-style-type: none">• Determine if transmission rates were higher in multi-generational households (may require data from additional sources)