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Colorado Department of Health Care Policy and Financing
Legislative Implementation 2008-2012

Total HCPF Related Bills: 121
Implemented or Implementing: 116
Not Implemented: 5
Implementation Rate: 96%

Summary of Legislation Not Implemented:

Legislation	Legislation Summary	Barriers to Implementation	FTE
SB 08-006 Suspend Medicaid for Confined Persons (Boyd/Solano)	Confined persons will continue to be eligible for Medicaid benefits, if Medicaid benefits were being received immediately prior to designation as a confined person, provided availability of Federal funds	CMS requires that clients who became incarcerated have their eligibility re-determined. Once incarcerated, the client would become a household of one - making them ineligible for Medicaid as Medicaid does not traditionally cover single adults. Until the recent Adults without Dependent Children (AwDC) expansion created by HB 09-1293, there was no category for single adults. Currently, there is a cap on the amount of clients covered under the AwDC at 10,000 clients. There are currently 6,000 eligible adults on the waitlist for the program. The Department plans to implement this legislation once the full ACA expansion occurs and the waitlist is eliminated.	0
SB 10-061Medicaid Hospice Room and Board Charges (Tochtrop, Williams/Soper, Reisberg)	Nursing facilities are to be paid directly for inpatient services provided to a Medicaid recipient who elects to receive hospice care; reimburse inpatient hospice facilities for room and board.	The Department has not received approval for this change by the Centers for Medicare and Medicaid Services (CMS). The Department has worked with stakeholders to get CMS approval. If CMS approves this funding change, the Department will fully implement this legislation otherwise there would be no federal match for these services.	0
HB 09-1103 Presumptive Eligibility Long-Term Care (Riesberg/Newell)	Persons in need of long-term care who declare all of the information necessary to determine eligibility under the Medicaid program shall be presumptively eligible for benefits.	The bill authorized HCPF to seek federal approval to allow people who are in need of long-term care to be presumptively eligible for Medicaid. The bill directed the Department to seek federal approval from CMS, which was denied. Without federal match we were not able to implement the legislation.	0
SB12-128 Alternative Care Facility Reimbursement Pilot (Roberts/ Summers)	This bill allows HCPF to create an enhanced reimbursement program in which an alternative care facility (ACF) will receive a temporary increase in the Medicaid per diem reimbursement rate for a client discharged from a nursing facility. Legislation required that any such program be budget-neutral or result in cost savings.	The Department intended to implement SB 12-128 through the Community Choice Transitions (CCT) program. CMS requirements for ACF's to be eligible for enhanced payments under CCT preclude many if not most ACF's in the state from participating. As required by the legislation, any enhanced payment has to be cost neutral. We understand the intent of this legislation and are working with stakeholders in developing a long term solution to ACF utilization and reimbursement.	0

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SB11-177 Pregnancy and Dropout Prevention	The bill extends the repeal date for the teen pregnancy and dropout prevention program (program) by 5 years to September 1, 2016, and requires the department of regulatory agencies to review the program prior to its repeal.	The Department is awaiting a determination by CMS on whether non-licensed providers trained in the curriculum and supervised by a licensed physician or dentist can provide services.	1