Colorado Medicaid Managed Care
Passive Enrollment Process

Passive enrollment encourages client participation in a Medicaid Managed Care Plan (Plan) and promotes the use of a medical home.

What is passive enrollment?

- Passive enrollment is the process that enrolls Denver County Medicaid clients who fail to choose a managed care plan into Denver Health Medicaid Choice. This new passive enrollment process became effective March 1, 2007.

Who is subject to passive enrollment?

- Denver County Medicaid clients
  Those not included in this process:
  - Foster care children
  - Clients who have both Medicare and Medicaid
  - Other Medicaid clients who do not qualify for full Medicaid benefits

How does passive enrollment work?

- Denver County Medicaid clients are mailed a letter asking them to choose Denver Health Medicaid Choice, the Primary Care Physician Program, or the Medicaid Fee-For-Service Plan as their managed care Plan
- Clients choose a Plan by calling HealthColorado at 303-839-2120 (Denver metro area) or toll free at 1-888-367-6557
- If the client does not choose a Plan, they will automatically be enrolled with Denver Health Medicaid Choice

Can a client change their Managed Care Plan?

- Clients can change their Plan during the first 90 days of enrollment for any reason
- After 90 days, a client can only change their Plan for certain reasons
- Clients can change Plans for any reason during open enrollment

CONTACTS:

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February 2008