Proposed Rule Changes

- **Emergency Mental Health** - The CICP regulations have been corrected to state that those services are considered additional discounted health care services that are available under the CICP.

- Establishing Lawful Presence and Identity- Clarifies that documents establish lawful presence also establish identity.

- **Inpatient Hospital copayment**- CICP regulations have been updated to clarify when a provider would charge the inpatient copayment resolves overcharging or undercharging the CICP client.

- **Emergency Transportation**- CICP regulations have been updated to reflect copayment which will be consistently charged by CICP Providers that discount emergency transportation.

- Sleep Studies are very expensive to the providers that offer the service at a discount. Setting a higher copayment and keeping the study accessible to the CICP client resolves affordability issues. **Stakeholders are still discussing this policy.**

- Copayment Cap is very complex and difficult for the CICP Provider and Client to track. If a client is seeing multiple CICP Providers, determining the point in time as to when the cap is reached is often cumbersome to both the provider and client. Most CICP Clients will not be affected by the limitation of the cap, however it is purposed that those clients that find paying a copayment is a hardship, can submit a management exception to have some copayments waived due to their circumstance. **Stakeholders are still discussing this policy.**

- Clients on a waitlist for Medicaid enrollment can be eligible for CICP.

- **Denotes changes already made to 2011-12 CICP Provider manual due to correction or clarification of reference material.**

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