



COLORADO

Department of Health Care
Policy & Financing

Department of Health Care Policy and Financing
1570 Grant Street
Denver, CO 80203

AGENCY LETTER

AGENCY LETTER NUMBER: HCPF 15-001

SUPRECEDES NUMBER:

DATE: 2/23/2015

DIVISION OR OFFICE: HEALTH INFORMATION OFFICE

SUBJECT AREA: MEDICAID AND CHILD HEALTH PLAN *PLUS* (CHP+)

SUBJECT: MEDICAID AND CHP+ PROGRAM 2015 FEDERAL POVERTY LEVEL GUIDELINES

TYPE: I-INFORMATION

APPROVED BY: CHRIS UNDERWOOD

*HCPF Agency Letters can be accessed online: www.colorado.gov/hcpf
>> Partners & Researchers >>County and Medical Assistance Site >>Agency Letters*

Purpose:

The purpose of this agency letter is to notify County Departments of Social/Human Services and Medical Assistance (MA) Site staff of the income guidelines for the Modified Adjusted Gross Income (MAGI) Medicaid program and the Child Health Plan *Plus* (CHP+) program effective April 1, 2015.

Background:

The income limits for the MAGI Medicaid and CHP+ programs are based on Federal Poverty Level (FPL) guidelines that are updated annually. The income guidelines are used to determine eligibility for the MAGI Medicaid program and the CHP+ program and are subject to change annually as the FPL is adjusted.

Information:

Colorado Benefits Management System (CBMS) has been updated to reflect the new income guidelines for Medicaid and CHP+ according to the attached charts.

Effective Date:

April 1, 2015

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



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Attachment: 2015 CHP+ FPL Income Guidelines

Attachment: 2015 MAGI Medicaid FPL Income Guidelines

