

# *CICP Workgroup*

Session #2

Income Determination and Sliding Fee Scales

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# *Our Mission*

**Improving** health care access and outcomes for the **people** we serve while demonstrating sound stewardship of financial **resources**



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# *Meeting Objectives*

- Clinic Income and Copayment Schedules, presented by CCHN
- Hospital Income Determination
  - Minimum Standards
    - Calculation, Documentation, Family size
  - Strictest Allowable Methodology
- Hospital Copayment Tables
  - Minimum Standards
    - Copayments, Services
  - Strictest Allowable Copayment Schedule



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# CICP vs MAGI vs CRS 25-3-112

Program	Income	Deductions	Assets
CICP	Yes	Yes	Yes
MAGI	Yes	Allowable for taxes	No
CRS 25-3-112	Yes	No	No



# *Income Determination*

- New program will allow spectrum of acceptable practices for income determination.
  - Calculation
  - Documentation
  - Family Size
- Outline for minimum standard and strictest allowable methods



# *Income Calculation*

- Minimum Standard:
  - No deductions from employment/unemployment income
  - No adjustments for liquid resources, liquid assets, or other property or assets
  - Adjustments to seasonal income allowable



# *Income Calculation (cont.)*

- Strictest allowable method:
  - Current calculation methods, adjustments for seasonality allowable
  - Deductions for elderly/child care, child support, medical expenses, etc. as currently allowed
  - Property and non-liquid assets not counted
  - Liquid resources counted at provider's discretion
    - Spend-down opportunity or payment plan



# *Documentation*

- Minimum Standard:
  - A single paystub or letter from employer may be used to verify earned income
  - Self-employed may be asked to fill out a ledger to determine income
  - Unearned income (rent, dividend, etc.) may be self-declared
  - No income (\$0) to be self-declared
  - Tax returns may be used

# *Documentation (cont.)*

- Strictest allowable methodology:
  - Current documentation required for CICP



# *Family Size*

- Minimum Standard:
  - Self-declared, proof of support for non-immediate family members as currently required by CICP
  - Hospital retains the right to ensure



# *Family Size (cont.)*

- Strictest allowable methodology:
  - Household as defined for MAGI (42 CFR 435.603)
    - Follows allowable dependents claimed on taxes



# Questions?



# *Copayment Schedule (SFS)*

- New program will allow spectrum of acceptable practices for setting copayment schedule.
  - Tiers
  - Copayment caps
- Outline for minimum standard and strictest allowable methods
- Discounts vs Dollars?



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# *Copayment Schedule*

- Minimum Standard:
  - At least three tiers covering 0-250% FPL
  - Copayments may not exceed the lowest negotiated rate from a private health plan [25-3-112(3), C.R.S., “Hospital Financial Assistance Programs”]
  - Annual copayment caps are permissible, but not required



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# *Copayment Schedule (cont.)*

- Strictest allowable method:
  - Current tiers of CACP rating scheme
  - Copayments may not exceed the lowest negotiated rate from a private health plan [25-3-112(3), C.R.S., “Hospital Financial Assistance Programs”]
  - Annual copayment caps are permissible, but not required



# *Services*

- Minimum Standard:
  - Emergency/urgent services provided regardless of ability to pay or county of residency
  - Medically necessary
- Strictest allowable method:
  - Limiting non-emergent/non-urgent services to a geographic area
  - Medically necessary



# *Basic Service Copays*

- For hospitals offering more than just emergent/urgent services, copayments must be expressed for:
  - Inpatient hospital services
  - Outpatient hospital services (general/clinic)
  - Outpatient hospital surgery
  - Outpatient hospital/clinic specialty services
    - Oncology, pulmonary, etc., if available
  - Emergency room services
  - Laboratory services
  - Radiology/Imaging, basic
  - Radiology/Imaging, high-level (MRI, CT, PET, etc., if available)
  - Pharmacy services



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# *Optional Service Copays*

- Copayments may be set for:
  - Emergency transportation, if available
  - Physician services, if available



# *Questions?*

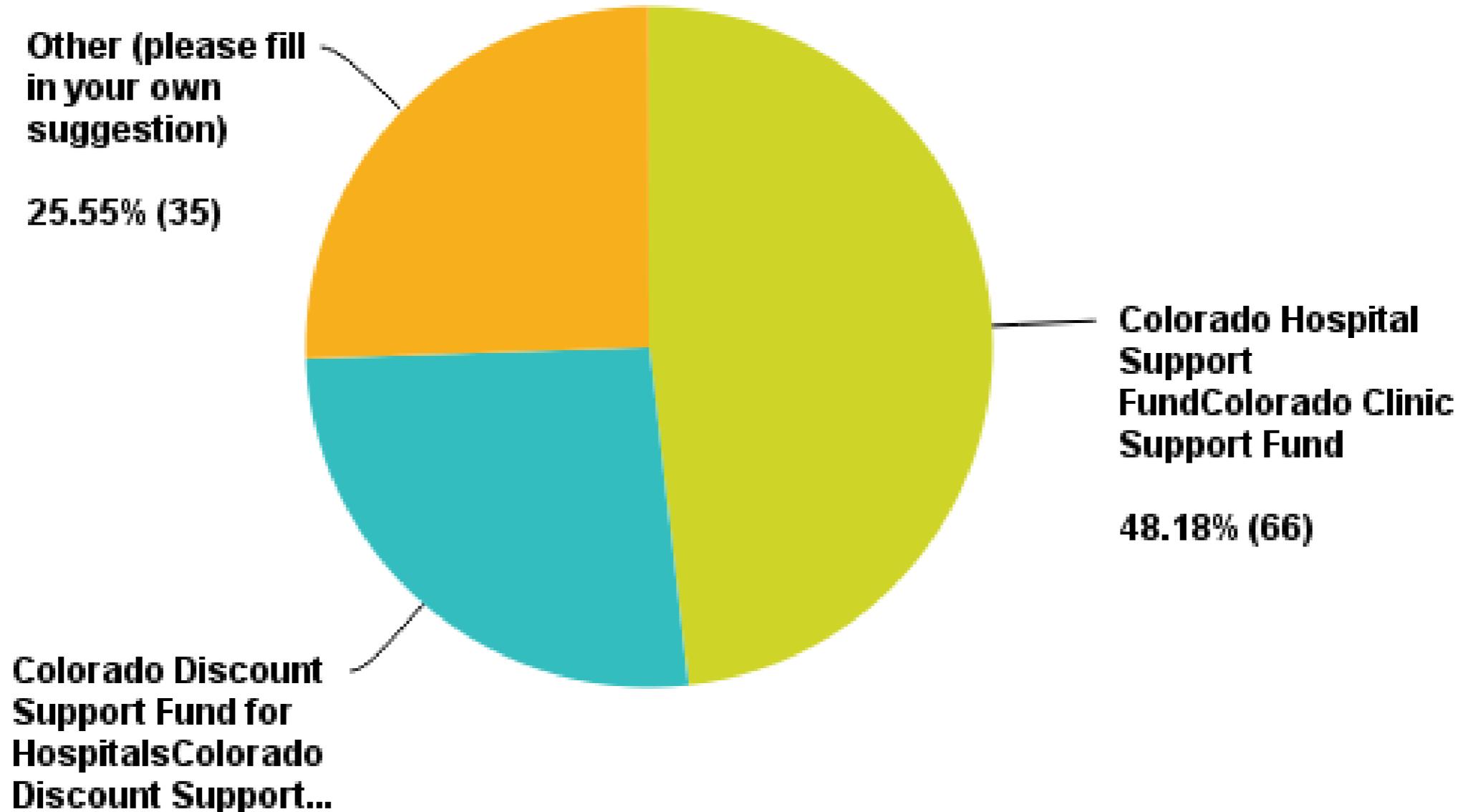


# *New Program Name Survey*

- Department supplied two options:
  - Colorado Hospital Support Fund / Colorado Clinic Support Fund
  - Colorado Discount Support Fund for Hospitals / Colorado Discount Support Fund for Clinics
- Option to suggest another name



# Results (as of 9/23)



# Word Cloud

Colorado Hospital Think Care Program

Colorado Medical Colorado Health CICP

Discount Fund



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# *Next Meeting*

- October 11, 2016, 9-11am
- On the Agenda:
  - Patient appeals and Collection policies
  - Collaboration with other providers
- Other items?



# Questions?



# *Contact Information*

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*Thank You!*



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