

Client Application for Clinics

2018-19

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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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Objectives

- Worksheets
- Examples



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Client Information Tab

- Information on this tab pulls through to every other worksheet
- Fill in as much information as possible for all household members
 - NOTE: Members counted in household size only do NOT need an ineligibility code



Residency Code

- Five options:
 - Colorado Resident & US Citizen
 - Colorado Resident & lawfully present
 - Migrant farm worker & US Citizen
 - Migrant farm worker & lawfully present
 - Counted in household size only



Dependency Code

- Six codes that align with Department's definition of household size:
 - 1 - Self/Applicant
 - 2 - Spouse/Civil Union Partner
 - 3 - Minor
 - 4 - Senior
 - 5 - Adult Student
 - 6 - Other
- Any household member with dependency code 6 must have support documented or attested to



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Ineligibility Code

- Only household members who wish to receive services under CACP need an ineligibility code
 - Household members who are eligible/enrolled for Health First Colorado or CHP+ should NOT have an ineligibility code
 - Household members being counted in household size only do NOT need an ineligibility code
- Best practice is to answer questions in order until an ineligibility code populates
 - Once a code appears, no more questions need to be answered



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Ineligibility Code A

<u>Screening for Health First CO/CHP+ Ineligibility</u>		<u>Health First CO/CHP+ Ineligibility Code</u>
Has the applicant received a Health First CO denial letter?	Yes	A
Has the applicant received a CHP+ denial letter?	Yes	

- First two questions in section
- If either of them are answered “Yes”, code A appears

Ineligibility Code B

Is the applicant a US citizen?	No
Has the applicant been lawfully present for less than 5 years?	Yes
Does the applicant have refugee status?	No

B

- Third, fourth, and fifth questions in section
- If the applicant is not a US citizen, has been lawfully present in the US for less than five years, AND is not a refugee, code B appears (unless code A is already there)



Ineligibility Code C

Have Transitional Medical Benefits been discontinued?

Yes

C

- Sixth question in section
- If the applicant had transitional medical benefits that have been discontinued, code C appears (unless either code A or B is already there)



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Ineligibility Code D

Does the applicant's household income exceed the Health First CO limit?

Yes

Is the applicant a child?

No

Is the applicant pregnant?

No

Is the applicant disabled?

No

D

- Seventh, eighth, ninth, and tenth questions in section
- If the applicant's household income exceeds the Health First Colorado limit, and the applicant is not a child, is not pregnant, AND is not disabled, code D appears (unless code A, B, or C is already there)



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Ineligibility Code E

Is the applicant a child?	Yes	E
Is the applicant pregnant?	Yes	
Is the applicant disabled?		
Does the applicant have primary insurance?	Yes	

- Eighth, ninth, and eleventh questions in section
- If the applicant has primary insurance AND the applicant is either a child OR pregnant (or both), then code E appears (unless code A, B, C, or D is already there)

Ineligibility Code F

Other (provide brief explanation): (brief explanation) F

- Twelfth (last) question in section
- If there is another reason that you are aware of that you know would result in a Health First Colorado and/or CHP+ denial for the applicant, you can enter it on this line to get code F (unless code A, B, C, D, or E is already there)
- Be sure to copy this reason to the notes section of the CICP Application tab



Lawful Presence

- All household members 18 and older must sign the affidavit and provide one document proving their lawful presence
- Lawful presence does NOT need to be proven for minors
- If an applicant provides a document not listed in the grey box, the “Other” box should be checked and the document type listed on the line provided



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Documentation Type

FOR INTERNAL USE ONLY

Please mark the box that indicates which document was verified for lawful presence and keep a photocopy of the document presented in the applicant's file.

- A current, valid Colorado driver's license or a Colorado identification card, issued pursuant to article 2 of title 42, C.R.S., unless the applicant holds a license or card that states, "Not Valid for Federal Identification, Voting, or Public Benefit Purposes", or
- Any out-of-state driver's license or state issued identification if that state requires that the Applicant prove lawful presence prior to issuance of the license or identification card, or
- A United States military card or a military dependent's identification card, or
- A United States Coast Guard Merchant Mariner card, or
- A Native American tribal document, or

- Other documentation pulled from SAVE or found on a Federal list of acceptable documentation for establishing lawful presence (see 1 CCR 204-30 sections 2.1.4 and 2.1.6)

Name of document accepted (include document number):

Date verified in SAVE (if applicable): _____

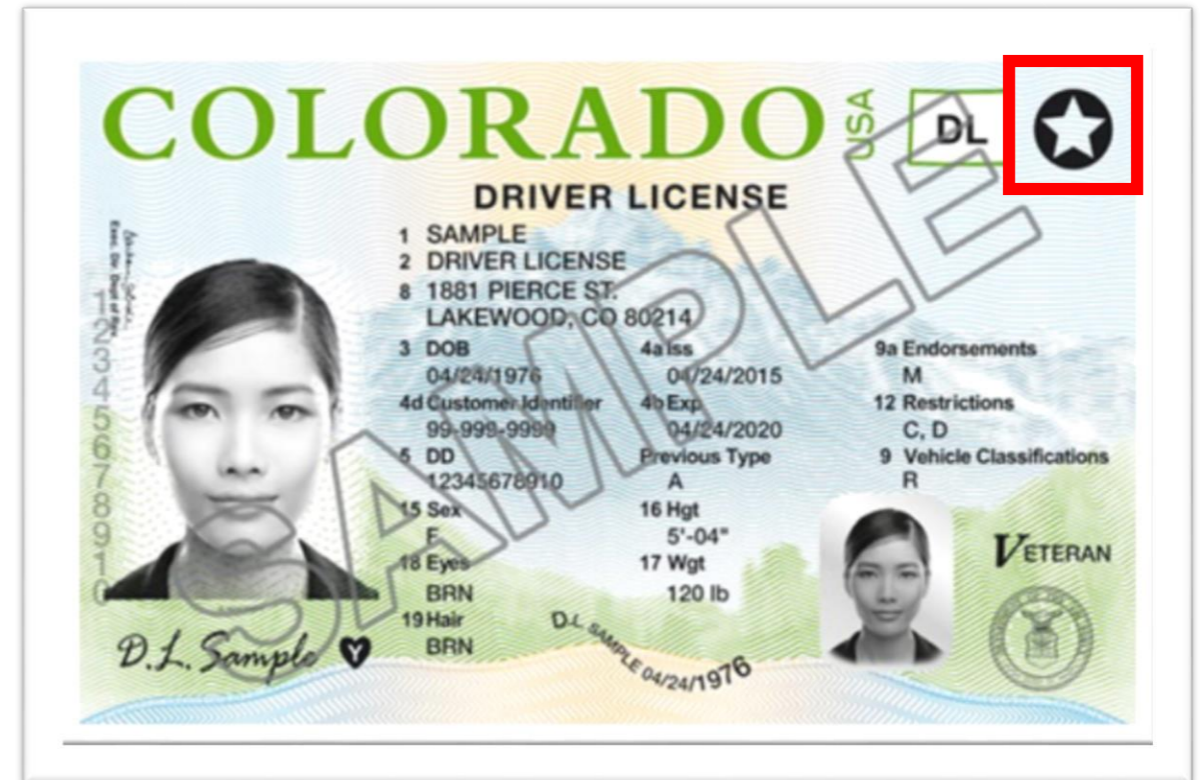
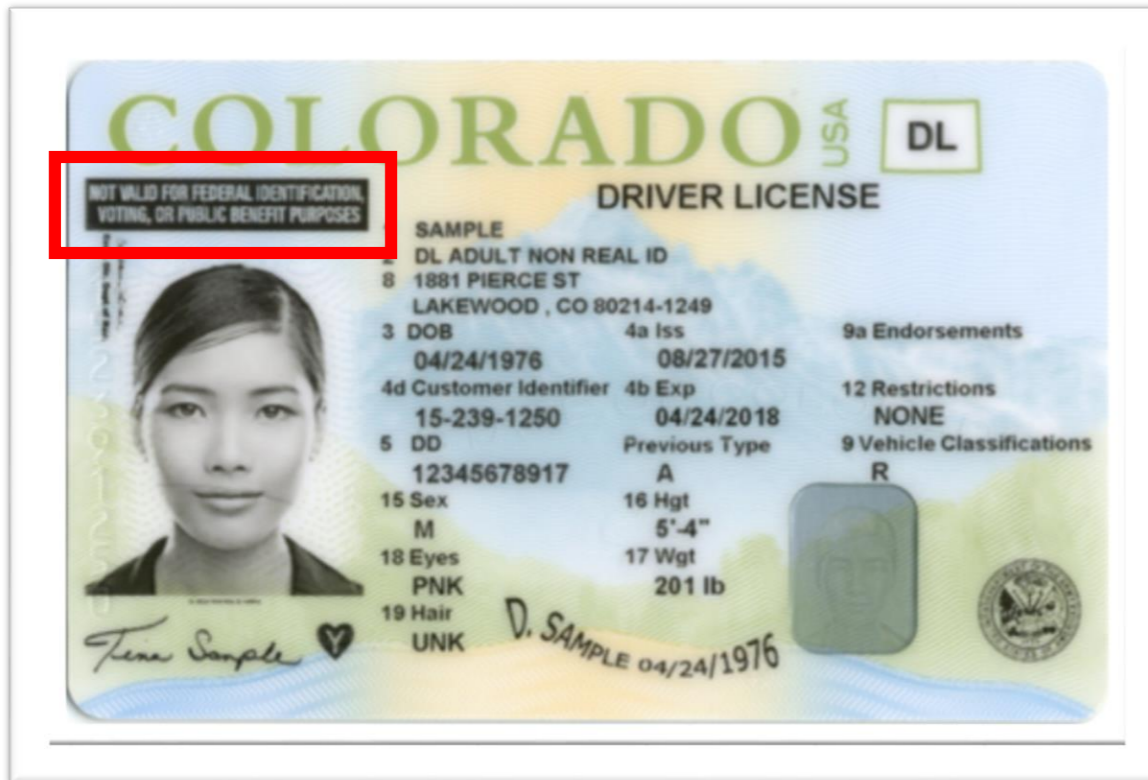


REAL ID Act

- Colorado is compliant under the REAL ID Act, which means that lawful presence is checked before a driver's license or ID card is issued
- Lawful presence is indicated by a star in the upper right hand corner of the license/ID
 - New green CO IDs have a black circle with a star in the middle, older blue CO IDs have a gold star
- Other compliant states can be found on DHS' website, and **MUST** be checked any time an out of state ID is present (link on affidavit)



New CO Green IDs



- Image on left is NOT acceptable for proving lawful presence
- Image on right IS acceptable for proving lawful presence

SAVE

- Only used for non-US citizen applicants
- NOT required for applicants with Colorado IDs that have the star on them
- Any document that an applicant provides that can be verified in SAVE is acceptable
- “Further verification needed” implies that the document provided is not enough to establish lawful presence
 - May need to fill out a G-845 form to initiate a manual verification



Questions?



Worksheet 1 - Earned and Unearned Income

- Only actual monthly/annual income should be included - NO liquid resources should be included
- There are no longer unearned income categories broken out on this worksheet since providers are deciding which types of unearned income to count at their facilities



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Worksheet 1 - Employment Income

- Year-to-Date and Average Pay methodologies built into worksheet
- Space to enter monthly income for each household member
- Income from a working minor (under the age of 18) or an adult student living with their parents is exempt



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Monthly Income Calculator

Year-to-Date Methodology	
Cumulative Year-to-Date Earnings	
Pay Period Type	
Number of Paychecks Received Year-to-Date	
Number of Annual Pay Periods	0
Gross Monthly Income	\$0.00

Average Pay Methodology	
Pay Period Type	
Pay Stubs	Gross Earnings
	1
	2
	3
	4
	5
Paystub TOTAL	\$0.00
Number of Paystubs	0
Monthly Income	\$0.00

- YTD
 - Enter in gross year to date earnings
 - Choose pay period type: Weekly, Bi-Weekly, or Semi-Monthly
 - Enter in number of paychecks received year to date
- Average Pay Method
 - Choose pay period type: Weekly, Bi-Weekly, or Semi-Monthly
 - Enter in gross pay stub amounts in available slots



Pay Period Differences

Year-to-Date Methodology	
Cumulative Year-to-Date Earnings	\$5,000.00
Pay Period Type	Weekly
Number of Paychecks Received Year-to-Date	4
Number of Annual Pay Periods	52
Gross Monthly Income	\$5,416.67

Year-to-Date Methodology	
Cumulative Year-to-Date Earnings	\$5,000.00
Pay Period Type	Bi-weekly
Number of Paychecks Received Year-to-Date	4
Number of Annual Pay Periods	26
Gross Monthly Income	\$2,708.33

Year-to-Date Methodology	
Cumulative Year-to-Date Earnings	\$5,000.00
Pay Period Type	Semi-monthly
Number of Paychecks Received Year-to-Date	4
Number of Annual Pay Periods	24
Gross Monthly Income	\$2,500.00

- Make sure you're using the correct pay period type
 - Weekly = \$65,000.04
 - Bi-Weekly = \$32,499.96
 - Semi-Monthly = \$30,000

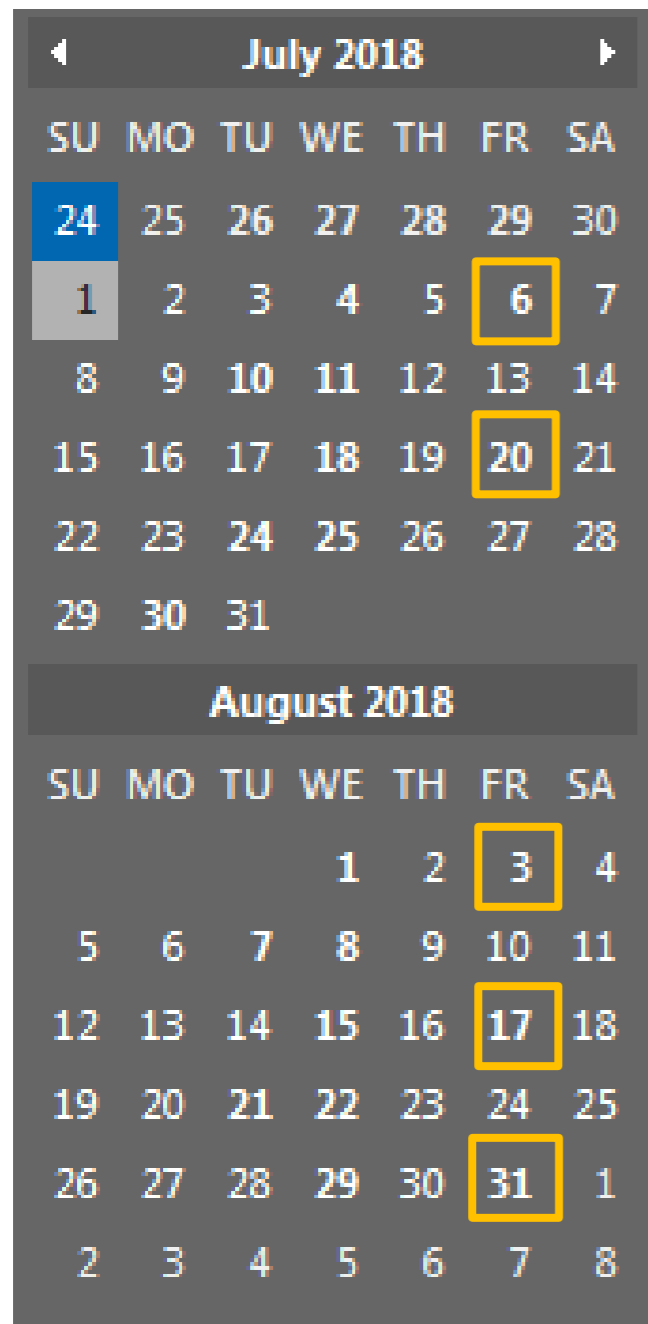


Weekly Pay Periods

July 2018						
SU	MO	TU	WE	TH	FR	SA
24	25	26	27	28	29	30
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				
August 2018						
SU	MO	TU	WE	TH	FR	SA
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	1
2	3	4	5	6	7	8

- Can be any day of the week, same day every week
- May fluctuate for holidays

Bi-Weekly Pay Periods



- Can be any day of the week, same day every other week
- May fluctuate for holidays

Semi-Monthly Pay Periods

July 2018						
SU	MO	TU	WE	TH	FR	SA
24	25	26	27	28	29	30
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

August 2018						
SU	MO	TU	WE	TH	FR	SA
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	1
2	3	4	5	6	7	8

- Days of the week will change
- Can be 1st & 15th, 15th & last day, 6th & 21st, etc. (usually 15 days apart)
- May fluctuate due to holidays or weekends (as shown)
 - Some companies pay on Fridays for paydays that fall on weekends, some pay on Mondays

Worksheet 2 - Self-Employment

- Amount of the business property expenses (rent/mortgage, utilities, etc.) that can be counted for a business run out of the house is based on a calculated percentage
 - Percentage of square footage of the home used for the business and the percentage of hours per week that space is used for the business
 - Lines up with how business taxes take business space into account

Self-Employment

- If the applicant pays themselves as they do any other employee, use their pay stub(s) and complete Worksheet 1 as you would for any other applicant
- Providers are allowed to use the previous year's taxes, and do not need to collect any other documentation
 - Taxes may also be used in conjunction with other documentation if the applicant's business income fluctuates month to month or season to season



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Square Footage and Hours

Does the applicant operate their business from their home?

Yes

Square footage of applicant's home:

Square footage used for applicant's home business:

Hours per week applicant works out of their home:

- Formula takes business area square footage divided by the total area multiplied by the business hours divided by the total number of hours in a week ($24 \times 7 = 168$).
- $$\left(\frac{\text{Business square footage}}{\text{Total house square footage}} \right) \times \left(\frac{\text{Business hours per week}}{168 \text{ hours}} \right)$$

Home Business Example

- Example 1: 2000 sqft house, 500 sqft used for business. Business area is used 60 hours of the week for business purposes. Mortgage is \$1,500 per month.

$$\left(\frac{500 \text{ square feet}}{2000 \text{ square feet}}\right) \times \left(\frac{60 \text{ hours}}{168 \text{ hours}}\right) = .25 \times .357 = .089$$

- Mortgage attributed to business = \$1,500 x .089 = \$133.50
- Example 2: 2000 sqft house, 500 sqft used for business. Business area is used exclusively for the business, no other household activities take place in the business area. Mortgage is \$1,500 per month.

$$\left(\frac{500 \text{ square feet}}{2000 \text{ square feet}}\right) \times \left(\frac{168 \text{ hours}}{168 \text{ hours}}\right) = .25 \times 1 = .25$$

- Mortgage attributed to business = \$1,500 x .25 = \$375.00

Questions?



Worksheet 3 - Deductions

- Providers are allowed to decide which deductions best fit their community
 - Deductions to be included for applicants in 2018-19 were declared on the annual provider application
- Predefined categories of deductions are no longer included to ensure that providers are only counting the deductions specified on annual provider application



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Deductions

- Type, amount, and frequency of each deduction
- Frequency choices:
 - One Time
 - Monthly
 - Quarterly
 - Annually
- Ability to combine multiple deductions under one type, i.e. all pharmacy copays

Annual Copay Cap

- Providers have option to set applicant's copay cap at a lesser percentage than previous years (10%)
 - MUST be at least 1%, can be up to 10% (CANNOT exceed 10%, must be an integer percentage)
- DO NOT adjust the copay percentage differently for different applicants
 - Copay cap percentage should be uniform for all applicants at your facility/facilities



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CICP Card

- The only household members allowed to be listed on the card are those who are not eligible for Health First Colorado or CHP+ who want to receive services under CICP.
- Rates are expressed as one, two, or three digit numbers (i.e. 0, 96, 147, 221, etc.)
- SSNs on the card should only show the last four digits



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Questions?



Contact Reminders

- It is the providers' responsibility to notify the Department of changes in staff listed on the annual provider application as the changes occur.
 - Information on the person leaving, when they will be leaving, and the contact information of the person taking their place should be emailed to CICPCorrespondence@state.co.us.



General Reminders

- The PDF version of the manual is SEARCHABLE!
 - Open the manual, hit Ctrl + F to open search bar
 - Type in key word(s) to find everywhere the word(s) appear in the document
 - Helps find answers to your questions much faster than waiting on a response from the email inbox
- Taryn Graf and Cynthia Miley are the only two people monitoring the CICP email box. Emails will be answered as soon as possible, but please be patient. Please do not copy Taryn or Cynthia on the emails sent to the CICP inbox.

Contact Information

Taryn Graf
CICP Administrator
CICPCorrespondence@state.co.us



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Thank You!



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