



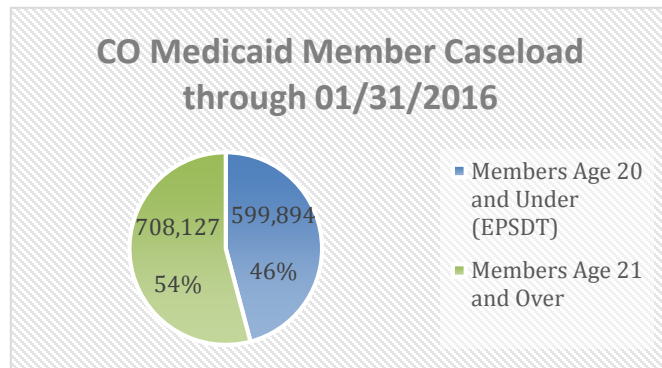
Policy Advisory Committee Update

March 3, 2016

Medicaid and CHP+ Enrollment

Through January 31, 2016, Medicaid enrollment in Colorado reached **1,308,021** individuals and CHP+ enrollment increased to **48,488** individuals. To the right is a visual depiction of youth and adult Medicaid member caseload.

Additional information and county-by-county data can be found [HERE](#).



Eligible County Incentive Program Trainings

Courses that meet the requirements for the County Incentive Program Training Incentive can be accessed from the [Staff Development Center website](#). Below are a few course offerings available:

Web-Based Training:

- 1095-B
- Civil Rights--note: this will soon be a requirement for all new CBMS users
- Medicaid Buy-In
- Address Confidentiality

Instructor-Led Training

- Building or Expanding Foundations for Medical Assistance
- Building or Expanding Foundations for Long-Term Care

Please note additional trainings may count towards the Training Incentive. For further information, contact HCPFCountyRelations@state.co.us.



Legislative Update

The Department has three bills on its legislative agenda this session:

- Elimination of Obsolete Reports
- Reducing Regulation for Non-emergent Medical Transportation Providers
- Medicaid Option for Prescribed Drugs by Mail

Brief descriptions of these bills are below; full bill descriptions are available through the provided hyperlinks.

[HB16-1081](#): Obsolete Reporting Department of Health Care Policy & Financing

This bill repeals certain obsolete reporting requirements of the Department and other providers.

Status: 02/24/2016 Senate Third Reading Passed - Awaiting Action by Governor

[HB16-1097](#): PUC Permit for Medicaid Transportation Providers

The bill creates a new category of non-emergency transportation carriers to serve Medicaid clients.

Status: 02/04/2016 House Committee on Transportation & Energy Refer Unamended to Appropriations

[SB16-027](#): Medicaid Option for Prescribed Drugs by Mail

This bill allows Medicaid members the option to receive prescribed medications used to treat chronic medical conditions through the mail.

Status: Next hearing: 03/08/2016 - Health, Insurance, and Environment - Upon Adjournment Room 0107

1095-B Resources

1095-B Forms Returned to County

Question: Some Medicaid/CHP+ members are mailing their accurate 1095-B form(s) back to the county or eligibility site where the case is assigned. What should eligibility partners do with the forms members mail to us?

Answer: There is no requirement for what counties need to do with 1095-B forms that members mail to them. Some counties have elected to mail the form back to the member. If a county chooses to mail this form back to the member, the Department has developed



an ["Optional Sample Letter for Returning Form 1095-B"](#) available in the [Eligibility Partner's FAQs and Trainings](#) in the 1095-B folder that they can choose to send with the 1095-B form.

New Resources on Federal Tax Document IRS Form 1095-B

The [County Partner Frequently Asked Questions](#) and the [PowerPoint presentation](#) from the Department's 1095-B Question and Answer Webinar have been posted on the [Eligibility Partners FAQs and Training webpage](#).

Provider Revalidation and Enrollment - Update

Wave Seven (7) notices for Provider Revalidation will be mailed to out-of-state Medicaid providers and CHP+ providers on March 1, 2016. Current Medicaid providers who have not already begun the revalidation process should do so now.

Providers must utilize the [Online Provider Enrollment \(OPE\) tool](#) to complete their applications. Provider resources, including trainings, an enrollment reference guide, and several FAQs, are available online on our [Provider Resources page](#). Providers are urged to review these resources **prior to** beginning the revalidation process.

Although the Centers for Medicare and Medicaid (CMS) has extended its deadline for states to complete provider revalidation, it is critical that Colorado providers **complete revalidation and/or enrollment now**. By completing the revalidation and enrollment process as soon as possible through the [Online Provider Enrollment \(OPE\) tool](#), providers will not experience a delay in payment. The Department is launching its new enrollment and claims management system, the Colorado interChange, on November 1, 2016. Starting on that date, claims and encounters submitted by providers who have not enrolled and/or revalidated **will be denied**. For more information, contact Provider.Questions@state.co.us.

Questions regarding provider revalidation and enrollment should be addressed to Provider.Questions@state.co.us. Please be patient, as response time may take up to 10-14 days, and please visit our [Provider Resources page](#), which is continuously updated to assist providers.

ACC Phase II Update: Procurement Timeline & Behavioral Health Services Reimbursement

The Department is committed to creating a high-performing, cost-effective Medicaid system that delivers quality services and improves the health of Coloradans. The next iteration (Phase II) of the [Accountable Care Collaborative \(ACC\)](#) seeks to leverage the [proven successes](#) of Colorado Medicaid's programs to enhance the Medicaid client and provider experience. [Learn more about ACC Phase II](#).



Procurement Timeline

In response to feedback from the community and evolving guidance from the Centers for Medicare & Medicaid Services (CMS), the Department has decided to adjust the procurement timeline for Phase II of the ACC and begin the next phase on July 1, 2018.

The Department weighed numerous internal and external factors when considering the revision of the procurement timeline. From the outset, the Department was aware that the original proposed timeline was aggressive given the time required to support a transparent procurement process, identify and receive the appropriate federal authority to implement the program, and incorporate stakeholder feedback.

The Department is committed to continuing delivery system innovation as we work towards Phase II. Over the next two years, the Department will work with our providers and the current Regional Care Collaborative Organizations (RCCOs) and Behavioral Health Organization (BHOs) to innovate and transform our delivery system. The Department is confident these ongoing innovations and the revised procurement timeline will help better meet the needs of our community.

For additional information about the ACC Phase II procurement timeline, visit Colorado.gov/HCPF/ACCPhase2 and read our [February ACC Phase II Update](#).

Behavioral Health Services Reimbursement

The Department has revised its proposal for reimbursing behavioral health services as outlined in the [ACC Phase II Concept Paper](#). A modified capitation payment methodology will be retained for core behavioral health services. The capitation will be directed to the Regional Accountable Entities who will be responsible for managing the health needs of Medicaid enrollees in their region. The capitation will differ from the current capitation administered by the BHOs in order to better support whole person accountability.

For more information about this proposal change, check out our [ACC Phase II Program Decision: Reimbursement for Behavioral Health Services fact sheet](#).

Opportunities for Engagement & Staying Informed

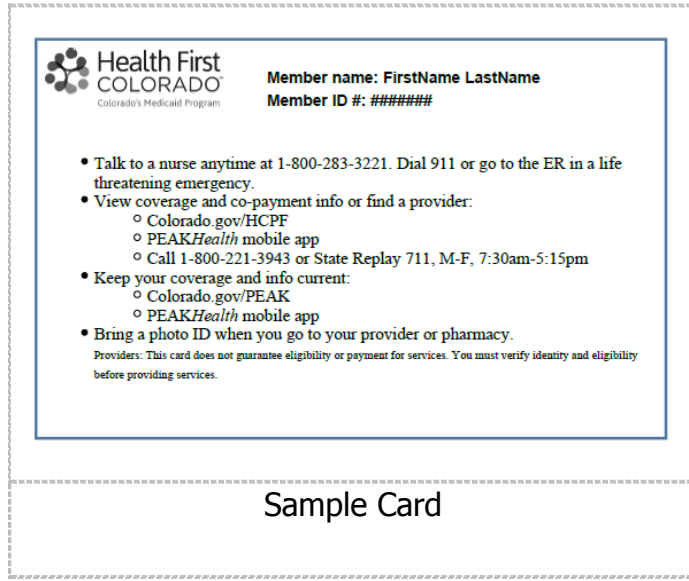
The ACC Phase II Team will continue to utilize the currently scheduled [ACC Program Improvement and Advisory Committee \(PIAC\)](#) and Subcommittees to solicit feedback. These meetings are open to the public and have a call in option for participation. Notes will be available online following the meetings.

We encourage all interested parties to [sign up for the ACC Phase II Stakeholder Updates list](#). The Department will use this list and our site, Colorado.gov/HCPF/ACCPhase2, as the primary vehicles to announce feedback opportunities and Phase II developments.



New Look to Medicaid Cards Coming in March

Starting May 2016, Medicaid will be called "Health First Colorado." The new name and logo, shown to the right, will better represent Colorado's fresh approach to public health care coverage. Over the past few years, program enhancements have included new benefits, expanded eligibility to cover a greater number of Coloradans, member access to care via mobile device and more. The Department looks forward to sharing more information about Health First Colorado with you in the coming months.



Sample Card

Beginning as early as March 20, 2016, **cards printed from Colorado.gov/PEAK** will have the Health First Colorado name and logo. In June 2016, all **hard copy cards** sent to newly enrolled members will reflect the Health First Colorado name and logo.

Current cards are still valid; clients do not need to request new cards.

As a reminder, clients are only required by the Department to furnish their **photo ID** at appointments; Health First Colorado cards are not required to receive services. Providers should verify

a client's identity and eligibility at each appointment.

Department Awarded \$3 Million Grant

The Department and the Colorado State Innovation Model (SIM) Office are partnering with The Colorado Health Foundation to advance the integration of behavioral health care in primary care practices across the state.

The Colorado Health Foundation has awarded the Department a \$3 million grant, which will be distributed via a competitive mini-grant process to SIM-participating primary care practices that serve Medicaid and Medicare clients.

The memo detailing the grant award criteria is now available [on our website](#).

Our mission is to improve health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources.
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2015 Website Analytics

[Colorado.gov/hcpf](http://colorado.gov/hcpf) Analytics

- There were more than 1.9 million total visits to the HCPF site in 2015 and 7.3 million pages viewed.
- The [Find a Doctor](#) page was the most-visited page on the site.
- The [Medicaid Income Chart](#) was the most-downloaded document.
- More than half a million documents (primarily PDFs) were downloaded overall.



For additional metrics, see the [colorado.gov/hcpf Report](http://colorado.gov/hcpf).

[Colorado.gov/health](http://colorado.gov/health) Analytics

- The colorado.gov/health site had more than 150,000 unique visitors in 2015, which was 2% higher than 2014.
- More than 300,000 total pages were viewed.
- 37% of visitors were using phones and tablets compared to 28% in 2014.



For additional metrics, see the [colorado.gov/health Report](http://colorado.gov/health)

Medicare-Medicaid Dually Eligible Ombudsman

Clients who receive both Medicare and Medicaid benefits are considered “dually eligible”. It’s not always easy for these clients to understand which program covers their services or who they should contact. Many people on both Medicare and Medicaid experience more barriers to receiving appropriate, individualized care.

In an effort to reduce these barriers, the Department and CMS have funded the [Accountable Care Collaborative: Medicare-Medicaid Program](#) (ACC: MMP) which strives to improve care coordination for dually eligible individuals. The program is administered locally through the seven Regional Care Collaborative Organizations (RCCOs). Colorado is one of 13 states in the nation participating in this program.

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Colorado has chosen [Disability Law Colorado](#) to implement an Advocacy Program for dually eligible individuals who are enrolled in the ACC: MMP. The new Medicare-Medicaid Advocate, Julie Bansch-Wickert, will assist enrollees who have concerns regarding delivery of their health care or possible violations of rights or benefits. If clients receive full Medicare (Parts A, B and D and have no private insurance) AND full Medicaid benefits and have questions or need to speak with someone about their benefits, please refer them to:

Disability Law Colorado
455 Sherman, Suite 130
Denver, Colorado 80203
Main line: (303) 722-0300
Fax: (303) 722-0720
Toll free: (800) 288-1376
www.disabilitylawco.org
Email dlcmail@disabilitylawco.org

Department Contact:

Crestina Martinez
303-866-5362
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HCPF on Social Media:

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