

The Maze One Year Later



Colorado Covering Kids and Families

An Update on the Progress to Create
a Direct Path to Enrollment for
Colorado's Eligible Children and
Families in Medicaid and CHP+

July 2010

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[Explore the Maze](#)

[Progress/Updates](#)

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[Progress/Updates](#)

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[Explore the Maze](#)

[Progress/Updates](#)

[Get Involved](#)

[Home](#)

In April 2009, Colorado Covering Kids and Families issued a report entitled *The Maze: The Barriers that Keep Colorado's Eligible Children and Families Out of Medicaid and CHP+ and Recommendations to Create a Direct Path to Enrollment*, offering a comprehensive look at the challenges facing eligible children and families in securing and retaining Medicaid or CHP+ coverage. The report identified more than 40 barriers standing between eligible Coloradans and health coverage, and it made more than 20 explicit recommendations to address these barriers.

This update, released a year after the original report, provides a snapshot in time of the progress made on the specific recommendations in *The Maze*. It also notes where more work needs to be done, and offers opportunities for concerned Coloradans to become part of the effort to eliminate the barriers that keep so many of our neighbors uninsured.

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Top Two Successes & Opportunities



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[Progress/Updates](#)

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[Home](#)

Top two successes directly addressing *Maze* recommendations:

- 1) The passage of House Bill 09-1293
 - Effective May 1, Medicaid expanded coverage for parents with children already on Medicaid from 60% to 100% of the federal poverty level.
 - Allows for 12 months continuous eligibility for children on Medicaid, beginning in 2012.

- 2) The Department of Health Care Policy and Financing (HCPF) secured \$43 million in funding to increase access to health care, reduce cost-shifting, and improve the system including an online application and electronic interfaces to meet verification requirements.

Top two opportunities that would benefit families the most:

- 1) Improvements to the Colorado Benefits Management System (CBMS), the computer system that determines eligibility for the state's public assistance programs, supported by policy changes that better coordinate the programs and improve access to health coverage.

- 2) Simplify verification requirements by implementing administrative and electronic verification of citizenship and identity documents.

Explore the Maze

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Progress/Updates

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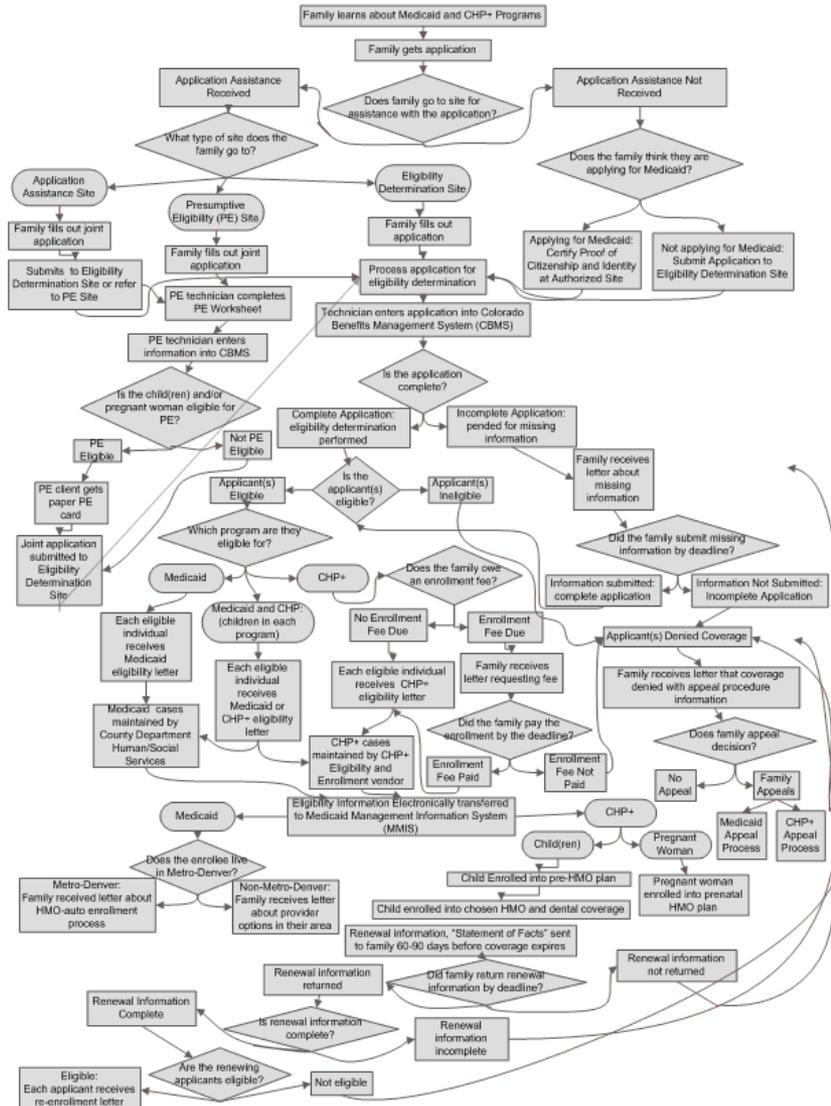
Home

Outreach

Eligibility Determination

Enrollment

Renewal



This illustration, from the original *Maze* report, shows the complicated process that Medicaid and CHP+ applicants must navigate. It is organized into four phases, each with barriers that families must overcome and recommendations to eliminate them.

Choose one of the four phases below to begin exploring the maze.



Outreach



Eligibility Determination



Enrollment



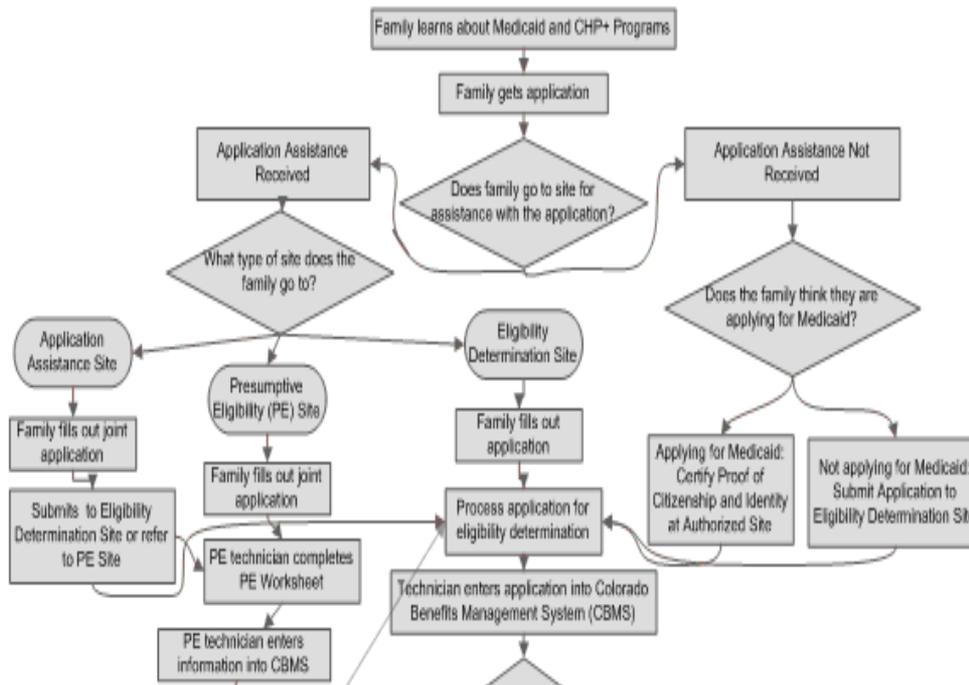
Renewal

Outreach includes activities that inform families about Medicaid and CHP+, help families learn if they may be eligible and apply for benefits, and facilitation with enrollment and reenrollment.

Outreach happens through community-based organizations, human services agencies, providers, schools, childcare programs, and word-of-mouth from other families.

Barriers to Outreach

Progress/Updates



- ▶ Outreach
- ▶ Eligibility Determination
- ▶ Enrollment
- ▶ Renewal

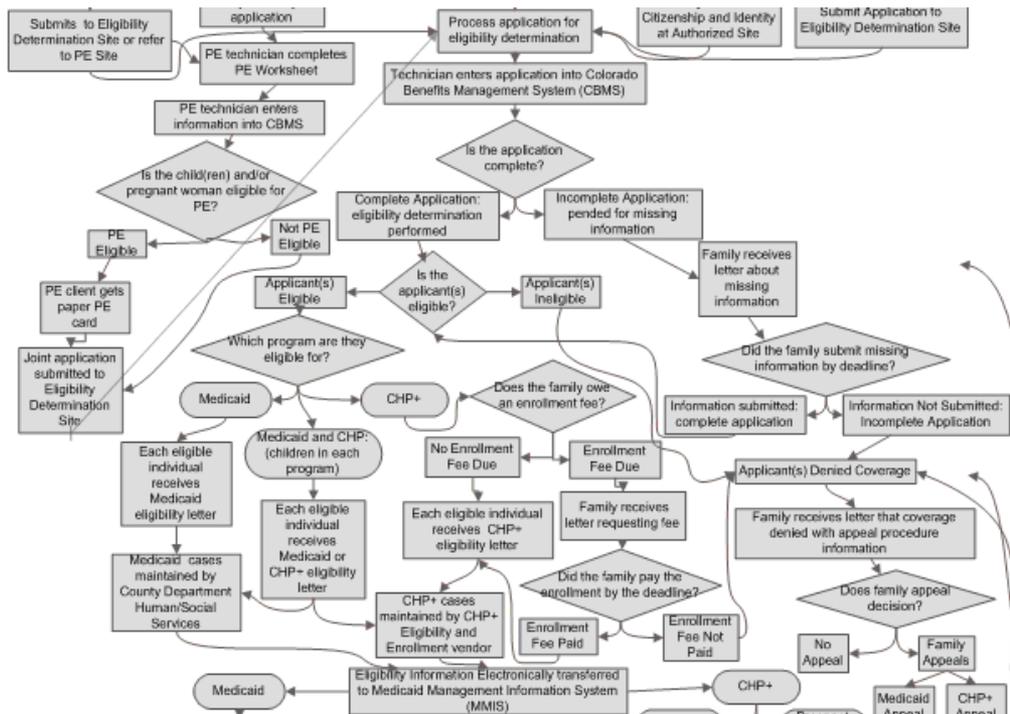
Eligibility Determination

Eligibility determination includes entering the application into the computer system that determines eligibility, follow-up with families for missing information and documentation, the issuing of presumptive eligibility (PE) cards, and determination of eligibility for Medicaid and CHP+.

Barriers to Eligibility Determination

Progress/Updates

Eligibility Determination



- ▶ Outreach
- ▶ Eligibility Determination
- ▶ Enrollment
- ▶ Renewal

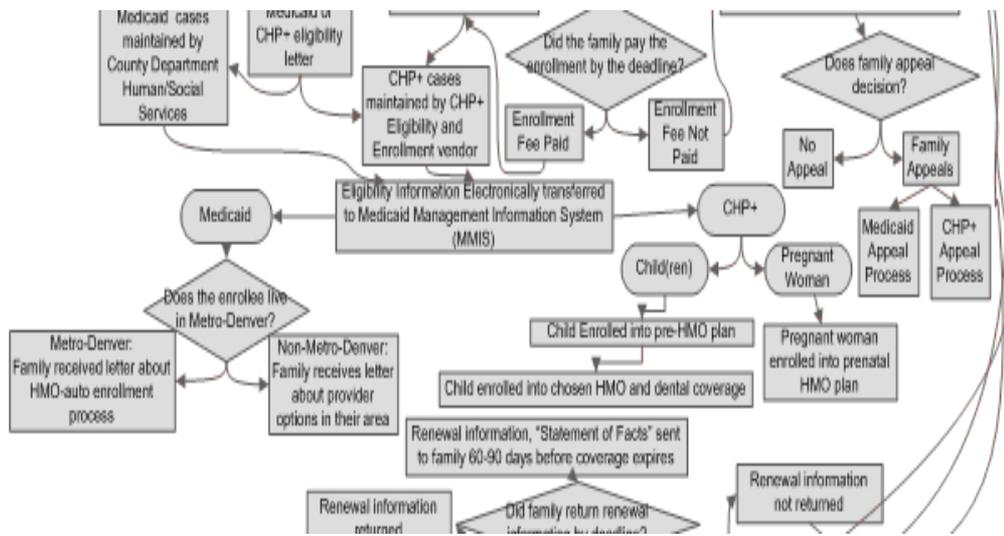
Enrollment

Enrollment activities include the electronic transfer of client information to the database that providers use to verify a patient's eligibility, families enrolled in Medicaid choose a Managed Care Organization (MCO) if one is available in their county, CHP+ kids have a "pre-enrollment period" until they are enrolled into their MCO of choice, and CHP+ pregnant women are enrolled into the State Managed Care Network.

Barriers to Enrollment

Progress/Updates

Enrollment



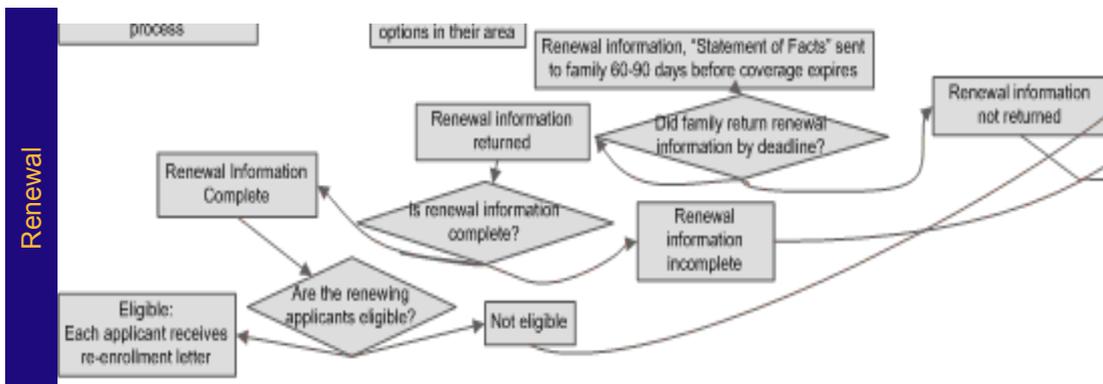
- ▶ Outreach
- ▶ Eligibility Determination
- ▶ Enrollment
- ▶ Renewal

Renewal

Renewal activities include sending a renewal packet to families 60-90 days prior to their annual redetermination date, families completing the renewal packet and sending back with necessary verifications to ensure benefits are continued.

Barriers to Renewal

Progress/Updates



- ▶ Outreach
- ▶ Eligibility Determination
- ▶ Enrollment
- ▶ Renewal

This list of barriers that some families face when trying to enroll and stay enrolled in Medicaid or CHP+ is from reports on Colorado's eligibility system and ongoing documentation of barriers identified by CKF Coalition members and partners.

Outreach

- Outreach hasn't reached some families; families may not think that they are eligible
- Application assistance may be inconsistent and not be available in every community
- Families may be discouraged from applying because of a lack of providers that accept Medicaid and CHP+

Eligibility Determination

- Large caseloads lead to application processing times that exceed the required 45 days
- Incorrect eligibility determination
- Letters with conflicting information sent to families

Enrollment

- The 48-72 hour lag time to transfer data between the computer system that determines eligibility and the database that providers use to verify a patient's eligibility can cause a gap in care
- Difficult to reach an eligibility technician for questions or assistance
- Some CHP+ kids are never enrolled in a managed care organization

Renewal

- Renewal packet is lengthy and confusing
- Eligible kids dropped for unknown reasons

Foundation for Reform



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[Progress/Updates](#)

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[Home](#)

The Maze recommended three foundational reforms to substantially improve Colorado's system:

- Robust data collection
- Comprehensive enrollment assistance and support for sites helping families
- Improvements to Colorado's eligibility process and the computer system that determines eligibility, CBMS

Progress/Updates



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[Progress/Updates](#)

[Get Involved](#)

[Home](#)

The Maze made more than 20 specific recommendations to address the barriers to enrollment and retention in Medicaid and CHP+. The recommendations fit under 9 distinct but related categories. Click the  boxes below to see the specific recommendations under each category, and to see the update on Colorado's progress to implement each recommendation.

-  Simplify Application by Leveraging Technology
-  Simplify Medicaid and CHP+ Eligibility Policies
-  Simplify Verification Requirements
-  Align Income Deductions for Medicaid and CHP+
-  Assure Timely Enrollment in CHP+ MCO of Choice
-  Provide PE Coverage Until Final Eligibility Determination
-  Simplify Renewals
-  Fund Enrollment Assistance
-  Educate Parents About Benefits, Resources and Accessing Care

Simplify Application by Leveraging Technology



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[Progress/Updates](#)

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[Home](#)

The Maze recommended simplifying the application by leveraging technology. We made 2 specific recommendations under this category:

- ▶ Authorize Electronic Signatures
- ▶ Fund Eligibility Modernization

Authorize Electronic Signatures



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[Home](#)

Background: Electronic signatures streamline the application process for families and reduce the number of applications that are pending because the family did not sign the application. Electronic signatures eliminate one cause of incomplete applications.

Why this matters to kids and families: Applications that are pending approval due to a missing signature cause families to delay accessing needed care or be unnecessarily denied.

Progress Update

The Department of Health Care Policy and Financing, in conjunction with the Department of Human Services and the Governor's Office of Information Technology, is developing a comprehensive tool that will allow clients to apply for Family Medicaid and CHP+ online. The application will allow electronic signatures. This tool, called Colorado PEAK (Program Eligibility and Application Kit), is available at www.colorado.gov/benefits. The online application will be launched in Fall 2010 and will also allow clients to report changes to their case. Currently, applicants can screen for potential eligibility for Family Medicaid and CHP+ and clients can check the status of their existing benefits on Colorado PEAK.

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Fund Eligibility Modernization



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[Progress/Updates](#)

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[Home](#)

Background: The Department of Health Care Policy and Financing (HCPF) is overhauling Colorado's current eligibility and enrollment process through eligibility modernization and major modifications to Colorado's Computerized Benefits Management System (CBMS), the computer system that determines eligibility for Medicaid, CHP+ and several other public benefits programs.

Why this matters to kids and families: If Colorado is to enroll the estimated 115,000 children who are eligible for but not enrolled in Medicaid and CHP+, a functional eligibility determination system is critical.

Progress Update

In September 2009, the Department of Health Care Policy and Financing (HCPF) received a federal grant to support health care expansion efforts linked to the implementation of House Bill 09-1293 and eligibility modernization. This grant, called the Colorado Comprehensive Health Access Modernization Program (CO-CHAMP), funds strategies to make the eligibility and enrollment process more efficient and cost effective by creating interfaces with other state and federal databases to electronically verify required client documentation.

Other improvements to CBMS include the Intelligent Data Entry (IDE) project, which will streamline the entry of client information into CBMS. Phase I of IDE is scheduled to be implemented in late summer 2010. This is funded by state and federal sources.

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Simplify Medicaid and CHP+ Eligibility Policies



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The Maze recommended simplifying Medicaid and CHP+ eligibility policies. We made 3 specific recommendations under this category:

- ▶ Provide 12-month continuous eligibility for Medicaid and CHP+
- ▶ Remove stair-step in Medicaid eligibility
- ▶ Expand Parent Coverage to 133% of the federal poverty level

Provide 12-month Continuous Eligibility for Children on Medicaid and CHP+



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[Progress/Updates](#)

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[Home](#)

Background: Federal law requires that states conduct eligibility reviews for enrolled children at least every 12 months. Under continuous eligibility, a child stays enrolled for up to a full year, during which time a family is not required to submit renewal forms or report changes in circumstances. Currently, Colorado's CHP+ program provides 12-month continuous *enrollment* for children, which means the child will remain enrolled in the program as long as they are eligible, but they will switch between programs if there is a change in income.

Why this matters to kids and families: Continuous eligibility allows a family to stay enrolled and not lose coverage unnecessarily or bounce back and forth between programs. The result is healthier kids who can more easily access needed care, limiting the cycling of children who roll on and off of Medicaid and CHP+.

Progress Update

In April 2009, Governor Bill Ritter signed into law the Colorado Health Care Affordability Act, House Bill 09-1293, which will expand health coverage to over 100,000 Coloradans and will provide 12-month continuous eligibility to children on Medicaid. The 12-month continuous eligibility provision of the bill is slated to be implemented in Spring 2012.

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Remove Stair-Step in Medicaid Eligibility



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Background: Colorado children up to age 6 and pregnant women are eligible for Medicaid up to 133% of the federal poverty level (FPL). Children age 6-19 are eligible for Medicaid up to 100% FPL.

Why this matters to kids and families: This “stair step” of eligibility means that children in the same family can be enrolled in different programs, with different benefits and with different providers.

New recommendation: Remove the stair-step in Medicaid eligibility earlier than 2014.

Progress Update

On March 23, 2010, President Obama signed the federal health care reform bill, the Patient Protection and Affordable Care Act, into law. In 2014, this bill will expand Medicaid to 133% FPL to all children and adults under age 65, which will eliminate stair-step eligibility in Colorado and nationwide. Colorado can choose to remove the stair-step before 2014.

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Expand Parent Coverage to 133% FPL



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[Home](#)

Background: In 2006, parent coverage in Medicaid was expanded to 60% of the federal poverty level (FPL), or \$13,234 per year for a family of four in 2010.

Why this matters to kids and families: Studies show that when parents have health coverage, their children are more likely to have coverage and get the care they need. Parent coverage is a successful way to reach uninsured children and improve access to care.

New recommendation: Expand parent coverage to 133% FPL before 2014.

Progress Update

In April 2009, Governor Bill Ritter signed into law the Colorado Health Care Affordability Act, House Bill 09-1293, which will expand health coverage to over 100,000 Coloradans. Effective May 1, 2010, this bill expanded Medicaid eligibility for parents with dependent children on Medicaid from 60% FPL to 100% FPL, or \$22,050 per year for a family of four in 2010.

On March 23, 2010, President Obama signed the federal health care reform bill, the Patient Protection and Affordable Care Act, into law. In 2014, this bill will expand Medicaid to all children and adults under age 65 to 133% FPL, or \$29,327 per year for a family of four.

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Simplify Verification Requirements



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[Home](#)

The Maze recommended simplifying verification requirements. We made 4 specific recommendations under this category:

- ▶ Expand reasonable opportunity period for providing proof of citizenship and identity for Medicaid applicants
- ▶ Administrative verification of citizenship and identity
- ▶ Add affidavit for children under 16 for identity to joint application
- ▶ Fund the cost of obtaining copies of out-of-state birth certificates

Expand Reasonable Opportunity Period to Provide Proof of Citizenship and Identity



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[Progress/Updates](#)

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[Home](#)

Background: Applicants for Medicaid and CHP+ must submit documents proving their citizenship and identity. If applicants are unable to submit their documents at the time of application, Colorado offers a 14 calendar day “reasonable opportunity period” to comply. Applicants may request an extension under the “good faith effort” rule, but many families are not aware of the option and counties do not uniformly offer or utilize the “good faith effort” rule.

Why this matters to kids and families: Eligible citizen children, pregnant women and parents are denied benefits due to the burdensome citizenship and identity documentation requirements.

Progress Update

In February 2009, President Obama signed the Children’s Health Insurance Program Reauthorization Act (CHIPRA). A CHIPRA provision related to the reasonable opportunity period was clarified by guidance from the Centers for Medicare and Medicaid Services. This guidance says that states have the flexibility to define what constitutes a reasonable opportunity period, but may not apply a standard to citizens and nationals that is more restrictive than such standards applied to immigrants. Colorado has an opportunity to extend the reasonable opportunity period to help more families comply.

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Administrative Verification of Citizenship and Identity



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[Progress/Updates](#)

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[Home](#)

Background: Applicants for Medicaid and CHP+ must submit documents to prove their citizenship and identity. All citizenship and identity documents must either be originals or copies that are certified by an approved agency.

Why this matters to kids and families: Providing verification of citizenship and identity can be burdensome and costly to families, resulting in denial or termination of benefits for eligible citizen children, pregnant women and parents.

Progress Update

In September 2009, the Department of Health Care Policy and Financing (HCPF) received a federal grant to support health care expansion efforts and streamline the eligibility and enrollment process. This grant, called the Colorado Comprehensive Health Access Modernization Program (CO-CHAMP), will fund the creation of interfaces with state and federal databases to electronically verify required client documentation. HCPF is building interfaces with the Social Security Administration, the Department of Motor Vehicles and Vital Statistics to verify the citizenship and identity of an applicant. These interfaces are scheduled to be implemented in 2011.

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Add Affidavit for Children Under 16 to the Joint Application



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[Progress/Updates](#)

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[Home](#)

Background: Currently, an affidavit can be signed by a parent or guardian to prove the identity of a child under the age of 16 who is applying for Medicaid or CHP+. This affidavit can only be used with a child that has no other acceptable identity documents available. The affidavit is a separate form that families must fill out and submit with their application.

Why this matters to kids and families: Providing documentation to prove the identity of children can be a burdensome barrier that results in eligible children not being enrolled into Medicaid and CHP+. Providing an affidavit on the application reduces this burden.

Progress Update

The Department of Health Care Policy and Financing has finalized a revised application that will allow applicants to apply for all medical programs. This application will include an affidavit that allows the parent or guardian's signature affirming the child's name and date of birth to be sufficient proof of identity for children under the age of 16. Eventually, the joint application (used currently to apply for Family Medicaid and CHP+) will be phased out and replaced by the Medical Application for Assistance, which will allow applicants to apply for all medical programs. There are no current plans to add the affidavit to the online application prior to the scheduled Fall 2010 launch.

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Fund the Cost of Obtaining Copies of Out-of-State Birth Certificates



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[Progress/Updates](#)

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Background: Applicants for Medicaid and CHP+ must submit documents to prove their citizenship and identity. All citizenship and identity documents must either be originals or copies that are certified by an approved agency.

Why this matters to kids and families: The processes of applying for Medicaid and CHP+ can be made all the more complicated, lengthy and expensive when the family needs a birth certificate from out of state, which may result in an improper denial or delay in accessing needed care.

Progress Update

In September 2009, the Department of Health Care Policy and Financing (HCPF) received a federal grant to support health care expansion efforts and streamline the eligibility and enrollment process. This grant, called the Colorado Comprehensive Health Access Modernization Program (CO-CHAMP), will fund the creation of interfaces with state and federal databases to electronically verify required client documentation. HCPF is building an electronic interface with the Social Security Administration which will alleviate this barrier because a positive match will satisfy the requirement for both citizenship and identity. This interface is scheduled to be implemented in 2011.

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Align Income Deductions for Medicaid and CHP+



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[Progress/Updates](#)

[Get Involved](#)

[Home](#)

Background: Medicaid and CHP+ have different allowable expenses that can be deducted from income for purposes of determining eligibility. In addition, the amount that can be deducted for each expense is different for the two programs.

Why this matters to kids and families: Different rules for the programs can cause confusion for families.

New Recommendation: Gather and analyze data and recommend next steps about how federal health care reform's use of the modified adjusted gross income and standard income deduction will impact Colorado kids and families.

Progress Update

On March 23, 2010, President Obama signed the federal health care reform bill, the Patient Protection and Affordable Care Act, into law. In 2014, this bill directs all states to use the same measure of income, the modified adjusted gross income and a standard 5% disregard, to determine eligibility for Medicaid and CHP+.

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Assure Timely Enrollment in CHP+ MCO of Choice



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[Progress/Updates](#)

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[Home](#)

Background: All CHP+ applicants must choose a Managed Care Organization (MCO). However, it can take up to 6 weeks for a child to get enrolled in their MCO of choice – this is called the pre-MCO period. During this period, children are enrolled in the State Managed Care Network (Network).

Why this matters to kids and families: During this pre-MCO period, families cannot access all CHP+ benefits, specifically dental services. In addition, if a child's provider does not participate in both the Network and the chosen MCO, continuity of care can be impacted. Lastly, some kids remain in the pre-MCO period indefinitely even when a MCO selection is made due to an unreliable interface between the MCOs and the Medicaid Management Information System.

Progress Update

No progress has been made on this recommendation. The Department of Health Care Policy and Financing has expressed interest in organizing a small work group consisting of CHP+ staff, Health Maintenance Organizations, and advocates to pursue this issue.

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Provide PE Coverage Until Final Eligibility Determination



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[Progress/Updates](#)

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[Home](#)

Background: Federal law requires that applications are processed within 45 days and allows states to provide children with additional presumptive eligibility (PE) spans if eligibility is still being determined. In some cases, PE coverage expires before eligibility is determined, resulting in a coverage gap.

Why this matters to kids and families: If eligibility is not determined within a PE span, kids and pregnant women will lose coverage and often, access to care.

Progress Update

Covering Kids and Families and the Department of Health Care Policy and Financing met to discuss this recommendation and brainstorm other solutions that would achieve the same goal to eliminate gaps in coverage for eligible kids and families. No more action has been taken to date on this recommendation.

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Simplify Renewals



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[Progress/Updates](#)

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[Home](#)

Background: Colorado's complicated renewal process is a significant cause of loss of coverage.

Why this matters to kids and families: Loss and gaps in coverage can lead to delayed care. Simplifying the renewal process will ensure that eligible kids and families can access appropriate care without having to reapply and wait for redetermination.

Progress Update

Colorado has taken steps to simplify renewals over the past year. In 2009, the Colorado state legislature passed House Bill 09-1020, which directed the Department of Health Care Policy and Financing to seek funding to implement phone and online renewals. On July 9, 2010, the Medical Services Board adopted two rules to allow eligibility sites to process renewals over the phone or online if they choose. The new scope of work for the Eligibility and Enrollment Services for Medical Assistance Programs vendor includes the creation of a centralized call center to process redeterminations. Phase III of the Program Eligibility Application Kit (PEAK) will include online redetermination functionality.

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Fund Enrollment Assistance



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[Progress/Updates](#)

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[Home](#)

The Maze recommended funding enrollment assistance. We made 4 specific recommendations under this category:

- ▶ Fund Presumptive Eligibility Determination
- ▶ Provide Training and Technical Assistance to PE and Application Assistance Sites
- ▶ Ensure Adequate Number and Distribution of Sites
- ▶ Leverage Federal Matching Funds for Enrollment Assistance

Fund PE Determination



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[Progress/Updates](#)

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[Home](#)

Background: Most sites that provide application assistance, including Presumptive Eligibility (PE), are not reimbursed for the service.

Why this matters to kids and families: Incentives could increase the number and capacity of sites to expand their ability to do outreach and to provide assistance to families

New Recommendation: Reimburse PE, Certified Application Assistance, and Medical Assistance sites for the service they provide to families.

Progress Update

In September 2009, the Department of Health Care Policy and Financing received a federal grant to support health care expansion efforts and streamline the eligibility and enrollment process. This grant, called the Colorado Comprehensive Health Access Modernization Program (CO-CHAMP), included funding to grant to community-based organizations to outreach to and enroll House Bill 09-1293 expansion populations through the Maximizing Outreach, Retention, and Enrollment (MORE) grant program. The application to apply for the first round of MORE grants was posted July 12, 2010. Certified application assistance and PE sites are eligible to receive MORE grants. In addition, CO-CHAMP included a request to reimburse sites \$50 for each completed application for House Bill 09-1293 expansion populations. This specific grant activity was not funded due to grant stipulations related to incentive payments. No other steps have been taken to seek a permanent and direct reimbursement for sites providing assistance, including PE.

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Provide Training and Technical Assistance to Presumptive Eligibility and Application Assistance Sites



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[Progress/Updates](#)

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[Home](#)

Background: Colorado has a strong network of community-based organizations (CBOs) that provide assistance to applicants. In order to ensure timely enrollment of eligible kids and families, CBOs need consistent training and technical assistance from the Department of Health Care Policy and Financing (HCPF).

Why this matters to kids and families: Consistent training translates into every family receiving the same assistance and information to ensure they are enrolled successfully.

Progress Update

In 2009 and 2010, HCPF hosted 14 regional conferences for community partners to learn about Medicaid and CHP+ rules and take the certified application assistance site (CAAS) training. In addition, HCPF is currently revamping the steps organizations must take to become a CAAS or presumptive eligibility (PE) site to make the training and certification process more rigorous and consistent. HCPF has also created specific outreach, Medicaid eligibility, CHP+, and PE e-mail inboxes to track questions and provide technical assistance to community organizations. The Colorado Trust funded development of a tool to track effectiveness of outreach and enrollment provided by CBOs.

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Ensure Adequate Number and Distribution of Sites



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[Explore the Maze](#)

[Progress/Updates](#)

[Get Involved](#)

[Home](#)

Background: Community-based organizations are trusted resources that provide families enrollment assistance. Because Colorado is a vast state with a mix of urban and rural areas, not all communities have application assistance sites.

Why this matters to kids and families: In an effort to make the application process smoother for families, each community should have an organization that can assist families.

Progress Update

As of April 2010, Colorado has 308 sites that provide some type of application assistance, including verifying documents and signing kids and pregnant women up for presumptive eligibility (PE). These 308 sites are located in 47 of Colorado's 64 counties. In the past year, there has been an increase of approximately 100 new certified application assistance sites (CAAS) and 15 new PE sites.

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Leverage Federal Matching Funds for Enrollment Assistance



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[Progress/Updates](#)

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[Home](#)

Background: States can claim federal matching funds to pay sites for the enrollment assistance services they provide to individuals and families.

Why this matters to kids and families: Additional dollars could defray the costs for community-based organizations that already provide assistance and encourage others to start to help families access services.

Progress Update

A new initiative from the Department of Health Care Policy and Financing offers Colorado schools an opportunity to receive federal funds for the Medicaid outreach and enrollment activities many schools already provide. Medicaid Administrative Claiming allows schools to request reimbursement activities such as assisting with an application, explaining Medicaid benefits, or collecting information to complete a health referral.

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Educate Parents About Benefits, Resources, and Accessing Care



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[Progress/Updates](#)

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[Home](#)

Background: Medicaid includes a benefit that assists families with navigating the health care system; CHP+ does not have a similar benefit. All CHP+ Managed Care Organizations offer varying benefits – parents must choose the plan and primary care provider that best meets the needs of their child.

Why this matters to kids and families: Finding a provider that accepts Medicaid or CHP+ can be challenging and families may need help understanding how to use their benefits.

Progress Update

On July 1, 2010, The Department of Health Care Policy and Financing launched a new state outreach plan, *Healthy Communities*. The purpose of *Healthy Communities* is to combine outreach and enrollment with education and assistance to families to help them learn about both programs and how to use their benefits.

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Conclusion



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[Explore the Maze](#)

[Progress/Updates](#)

[Get Involved](#)

[Home](#)

Progress over the past year included:

- Additional funding secured
- Legislation passed
- Planned improvements and steps forward on several recommendations

More work remains:

- Successful and timely implementation of planned state initiatives and passed legislation
- Data collection to inform and guide system and policy changes and future recommendations
- Continued improvements to the Colorado Benefits Management System (CBMS)
- Passage of House Bill 09-1293 and national health care reform increase urgency to improve Colorado's system now

Once fully implemented, many of these recommendations will make Colorado's infrastructure and system efficient and cost-effective to better serve kids and families by removing unnecessary paperwork burdens for applicants, clients, and eligibility technicians. These changes are essential to manage rising caseloads now and in the future.

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[Explore the Maze](#)

[Progress/Updates](#)

[Get Involved](#)

[Home](#)

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2. [Help Families Directly](#): Become a Presumptive Eligibility, Certified Application Assistance, or Medical Assistance Site
3. [Funding Opportunities](#): For schools, providers, or community organizations
4. [211 Covering All Children Advisory Committee](#)
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[Progress/Updates](#)

[Get Involved](#)

[Home](#)

Thank your legislators, Governor Ritter, and the Department of Health Care Policy and Financing for this past year's progress

Template Letters:

- [Governor](#)
- [Legislators](#)
- [The Department of Health Care Policy and Financing](#)

How to Become a PE, CAAS, or MA Site



[Explore the Maze](#)

[Progress/Updates](#)

[Get Involved](#)

[Home](#)

Is your organization interested in providing direct assistance to help families apply for and enroll into Medicaid and CHP+? Become a Presumptive Eligibility (PE), Certified Application Assistance (CAA), or Medical Assistance (MA) site!

What does a CAA, PE, and MA site do?

CAA site: Assist families with completing the application for Medicaid and CHP+ and verifies citizenship and identity documents. Coming soon: CAA sites will be trained to assist applicants with the new application for all medical programs.

PE site: Provide PE cards that allow qualified children and pregnant women temporary health care coverage while their application is being processed.

MA site: Accepts and *processes* applications for Medical Assistance Programs.

For more information about requirements and how to get started, please visit [HCPF's website](#).

Or contact Tonya Bruno at tonya.bruno@state.co.us or 303-866-2362.

Funding Opportunities



[Explore the Maze](#)

[Progress/Updates](#)

[Get Involved](#)

[Home](#)

For Schools:

Medicaid Administrative Claiming (MAC) – MAC allows schools to request reimbursement for the outreach and enrollment activities staff provide to students. For more information about MAC, check out this [fact sheet](#) or contact [Brittney Petersen](#).

School-based Outreach Grant Opportunity – Two-year grants to create partnerships between school districts and county departments of human/social services or other state-designated medical assistance sites. To apply, please use the Colorado Health Foundation's (TCHF) [online grant application](#). Grant proposals are due quarterly. Please contact [Amy Latham](#) with questions.

For Providers:

Out-Stationing Grant Opportunity – Two-year grants to create partnerships between safety net organizations and county departments of human/social services or other state-designated medical assistance sites to out-station enrollment technicians at clinic sites. To apply, please use TCHF's [online grant application](#). Grant proposals are due quarterly. Please contact [Amy Latham](#) with questions.

For Community Organizations, Providers, or Schools:

Maximizing Outreach Retention and Enrollment (MORE) grants –The purpose of the MORE grants are to support to the outreach efforts of community-based organizations to House Bill 09-1293 expansion populations. Click [here](#) for more information, or contact [Cindi Terra](#).

Round 2 of Children's Health Insurance Reauthorization Act (CHIPRA) Outreach and Enrollment grants – Funding for outreach, enrollment, and retention activities that target eligible but not enrolled kids. \$40 million (Round 1) was awarded in Fall 2009. A second round of grants under CHIPRA are expected to become available in late 2010. Stay tuned to www.cms.gov for updates.

211 Covering All Children Advisory Committee



[Explore the Maze](#)

[Progress/Updates](#)

[Get Involved](#)

[Home](#)

Senate Bill 07-211 Covering All Children Advisory Committee

The mission of this Committee is to develop and advocate for the implementation of a plan that will cover any child who cannot afford, obtain, or access health coverage. The goals are to improve outreach, enrollment and retention in Medicaid and CHP+ and to ensure sustainability of the mission to cover all children.

The Committee meets on a quarterly basis. Advocacy groups, stakeholders, and the public are invited to attend meetings and work together on solutions to reduce barriers to Medicaid and CHP+.

For more information about the Committee, including meeting dates, agendas, and background information, please visit the [211 Advisory Committee web page](#) or contact [Stacey Moody](#) or [Brenda LaCombe](#).

All Kids Covered Initiative



[Explore the Maze](#)

[Progress/Updates](#)

[Get Involved](#)

[Home](#)

All Kids Covered Initiative

The Initiative's mission is to ensure that all children have affordable, quality, comprehensive health care by:

- Enrolling all Colorado children currently eligible for Medicaid and CHP+.
- Expanding and simplifying coverage for children in families that currently earn too much to qualify for public programs but can't afford the high cost of private health insurance.
- Creating routes to affordable, quality coverage for children in families that purchase insurance privately.

Initiative meetings are held the first Friday of each month from 10:30-12:15 at the Colorado Children's Campaign. Conference calling is available.

For more information, visit the [All Kids Covered web site](#) or contact [Gretchen Hammer](#).

Covering Kids and Families



[Explore the Maze](#)

[Progress/Updates](#)

[Get Involved](#)

[Home](#)

Covering Kids and Families

Colorado Covering Kids and Families (CKF) is a statewide project that works to ensure that all children and families eligible for Medicaid and the Child Health Plan *Plus* (CHP+) are enrolled in the programs. Together with our Coalition members and Partners, CKF works to:

- Simplify enrollment and re-enrollment processes
- Improve coordination between existing public health insurance programs, like CHP+ and Medicaid
- Create sustainable improvements in public health insurance programs and health care for children and families.

CKF coordinates two work groups and holds quarterly coalition meetings. Check out our [meeting calendar](#) for remaining 2010 meetings.

For more information and to schedule a *Maze Update* presentation, visit the [Covering Kids and Families Web site](#) or contact [Kristen Pieper](#).

Acknowledgements



Colorado Covering Kids and Families

[Explore the Maze](#)

[Progress/Updates](#)

[Get Involved](#)

[Home](#)

Covering Kids and Families (CKF) would like to acknowledge several individuals and groups that made this update possible:

- All Kids Covered Initiative
- CKF Coalition
- CKF Advisory Committee
- Colorado Community Health Network staff
- The Department of Health Care Policy and Financing
- Ed Walz, Spitfire Strategies
- Foundations that provide support to CKF
- Georgetown Center for Children and Families

Future *Maze* Updates



Colorado Covering Kids and Families

[Explore the Maze](#)

[Progress/Updates](#)

[Get Involved](#)

[Home](#)

Look for Covering Kids and Families to release an annual *Maze* update on the progress made on these recommendations!

For more information and questions about the recommendations or Covering Kids and Families project, please contact Brittney at brittney@cchn.org or Christy at christy@cchn.org