

Health First Colorado (HFC/Medicaid) 101





Our Mission:

Improving health care equity, access and outcomes for the people we serve while saving Coloradans money on health care and driving value for Colorado.

Learning Objectives



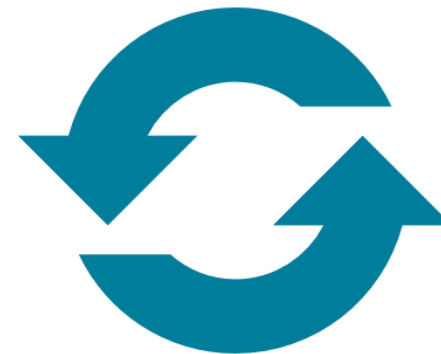
Affordable Care Act
Oversight of Medical
Assistance



Application and
Beyond



General
Eligibility
Requirements



MAGI Programs

The Affordable Care Act (ACA)



Connect for Health Colorado

Public Health
Insurance

Cost Sharing Reduction (CSR)
& Advanced Premium Tax
Credits (APTC) to buy
Private Health Insurance

Private Health
Insurance

Connect for Health Colorado

The Marketplace

The Exchange

C4HCO

Connect for Health Colorado

- Online Marketplace where individuals can:
 - Browse and shop for private health insurance plans
 - Purchase private health insurance
 - Estimate and apply for Advanced Premium Tax Credits (APTC) and Cost-Sharing Reductions (CSR Unqualified)

connectforhealthco.com



Types of Financial Assistance

Advanced Premium Tax Credits:

Used to lower monthly premiums; available for people between 100% and 400% of Federal Poverty Level (FPL))

Cost Sharing Reductions:

Discounts that lower the amount people have to pay out-of-pocket for deductibles, coinsurance, and copayments; available to people between 100% and 250% of FPL

What is Medical Assistance and Who Does it Serve?

- Public Health care programs administered by state and/or federal government
 - People with limited income and resources
 - People with disabilities
 - Citizens
 - Qualified Non-Citizens
 - Unqualified Non-Citizens facing emergency medical situations



Who We Serve

July 2021

1,499,303 Coloradans
received
Health First Colorado

59,099 enrolled in
Child Health Plan *Plus*



Medical Assistance Structure

United States Department of Health
and Human Services

Center for Medicare & Medicaid
Services
(CMS)

Colorado Department of Health Care
Policy & Financing (HCPF)

HCPF Offices

Executive Director

Office of Community Living

Health Programs
Three Divisions

Cost Control and Quality
Improvement

Medicaid Operations

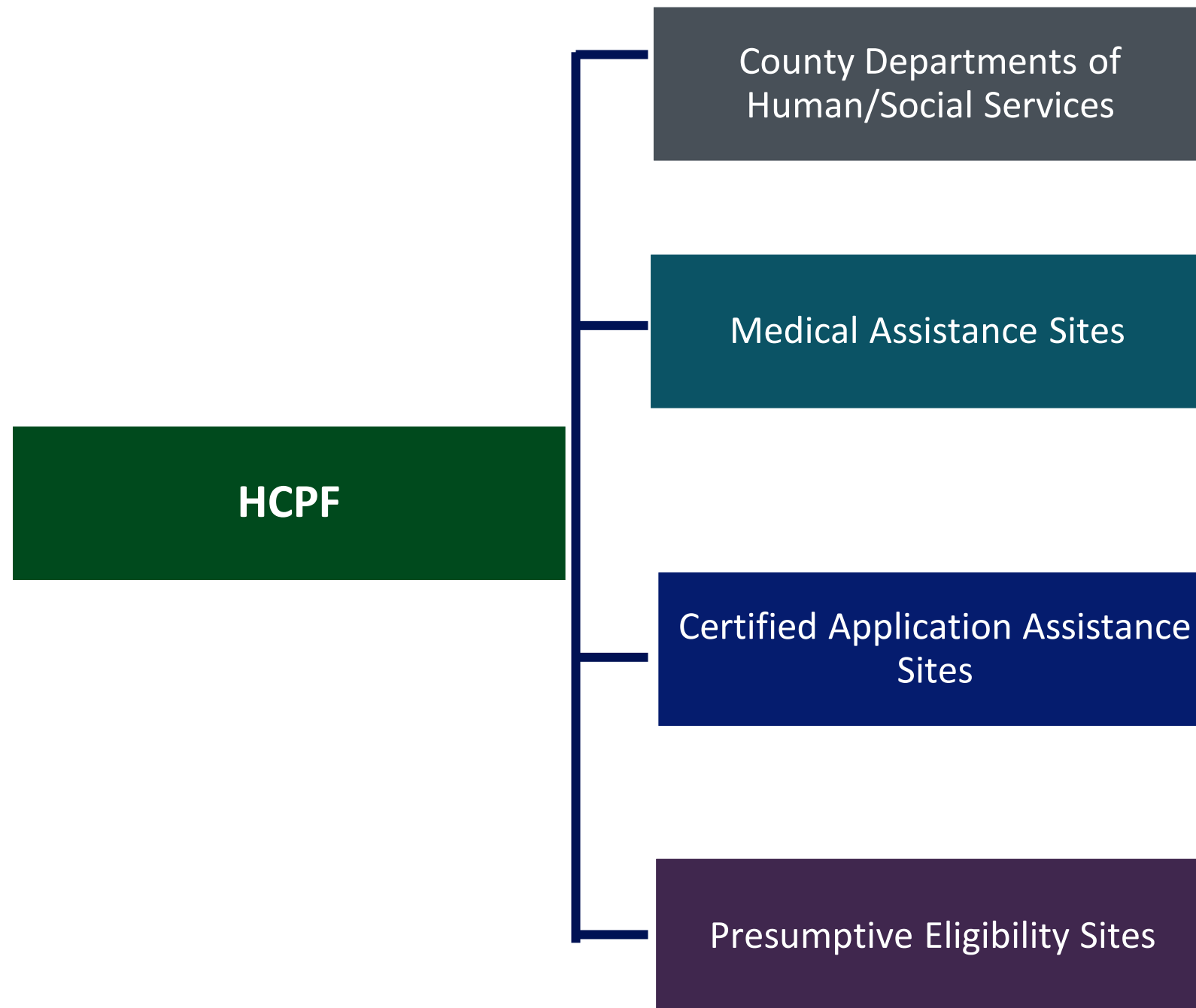
Finance

Pharmacy

Health Information

Policy Communication &
Administration

Colorado Medical Assistance Structure



- ***What are the Medical Assistance Programs***

- **Health First Colorado**

- MAGI
- Non-MAGI

• NON-MAGI

- **Child Health Plan *Plus***
CHP +

What is Health First Colorado?

- Public health insurance
 - No monthly or annual enrollment fee
 - Members pay no or very low co-pay amounts depending on the population
 - For example, children, pregnant women, American Indian/Alaska Natives are examples of populations who do not pay co-pays

<https://www.colorado.gov/pacific/hcpf/colorado-medicaid>



Health First Colorado Benefits



Dental services



Emergency & urgent care



Hospitalization



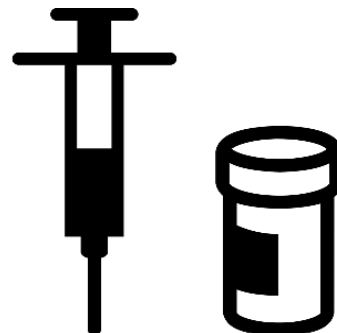
Behavioral health



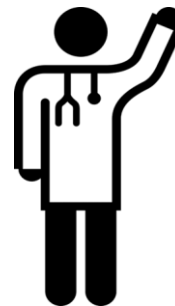
Prescription drugs



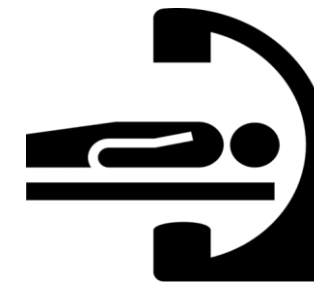
Maternity care
(Prenatal, delivery, postpartum)



Immunizations



Primary care



Laboratory Services



Rehabilitative Services

• ***Benefits Not Covered***

Acupuncture

Cosmetic
Procedures

Chiropractic
Services

Infertility
Treatment

Vaccines for
Travel

Personal
Hygiene
Items

Sports
Equipment

Most Over-
the-Counter
Drugs

Medical
Marijuana

Some
Prescriptions

- ***What are the Medical Assistance Programs***

- **Health First Colorado**

- MAGI
- Non-MAGI

- Non-MAGI

- Child Health Plan *Plus*
CHP +

What is CHP+?

- Public health insurance for children and pregnant women only
 - Annual enrollment fees range from \$25-\$105 depending on income, population and number of children enrolled
 - Max out of pocket expenses/co-pays is 5% of gross annual income

<https://www.colorado.gov/pacific/hcpf/child-health-plan-plus>



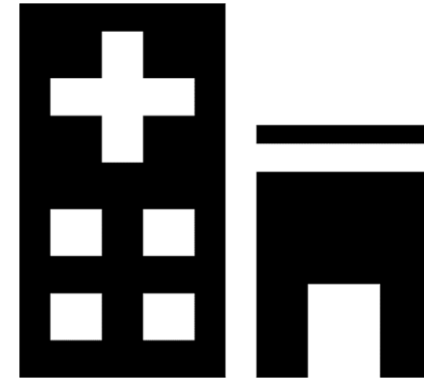
CHP+ Benefits



Dental services
(for children only)



Emergency &
urgent care



Hospital services



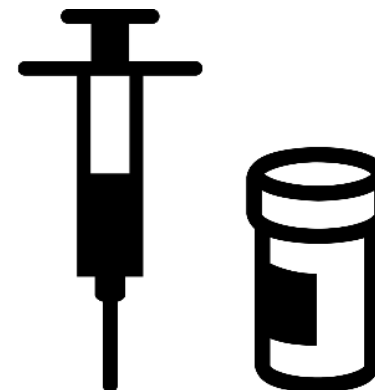
Behavioral health



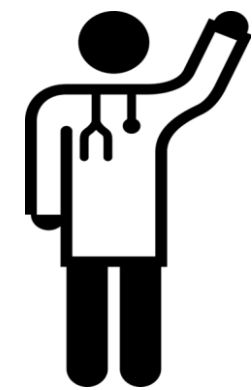
Maternity care
(Prenatal, delivery,
postpartum)



Prescription
drugs



Immunizations



Primary care

• *How are Health First Colorado and CHP+ Different?*

Health First Colorado

- No enrollment fee
- Members can be covered under another insurance policy at same time
- Income limits lower than those for CHP+
- All populations potentially eligible

Child Health Plan *Plus*

- Annual enrollment fee
- Members cannot be covered under another insurance policy at same time
- Income limits higher than those for Health First Colorado
- Only covers children & pregnant women

Application & Beyond



Applying for Assistance

- When individuals are applying for assistance
 - Eligibility should NOT be predetermined
 - Applications should NOT be screened
 - No applications shall be held



Ways to Apply for Health Coverage

Online



Via Program Eligibility
Application Kit (PEAK)

www.Colorado.gov/PEAK
or Connect for Health
Colorado
connectforhealthco.com

Phone



1-800-221-3943

Paper Application



In Person



www.colorado.gov/cdhs/contact-your-county

PEAK Account Services

View Account
Information

View
Correspondence

View/Pay
Monthly Health
First Colorado
Buy-in Premiums

View/Pay Annual
CHP+ Enrollment
Fees

Upload
Documents

Receive
text/email
correspondence
alerts

View needed
verifications

Report case
changes

View/Print
Medical ID Cards

Complete and
submit RRRs

Processing Timeframes

45

Days

Clients who have already
been determined disabled
or do not require a disability
determination

90

Days

Clients who require a
disability determination

*Disability determination can be made by Social Security Administration (SSA) or
the State Disability Contractor*

Eligibility Determination

- **If eligible**
 - ✓ Automatically enrolled in the appropriate Health First Colorado program
- **If denied**
 - ✓ Information will be used to determine eligibility for financial assistance through Connect for Health Colorado

It is possible for some individuals in a household to receive Health First Colorado/CHP+ while others must apply for assistance at Connect for Health Colorado

When Do Services Start?

- Benefits start as soon as a member is determined eligible for Health First Colorado
 - May take a few days after enrollment for a health care provider to confirm in their system
 - It is important to call a provider before you go to the office to make sure they are able to see you

Retroactive Coverage

- **Retroactive**
 - ✓ Coverage provided up to 3 months prior to the month of application
 - ✓ Can be requested at any time
 - ✓ Client does not have to be eligible in the month of application to be eligible
 - ✓ Eligibility determination must be made for each Retroactive MA coverage month

Correspondence



Correspondence

- Correspondence
 - Members can receive their correspondence by mail and/or
 - They can elect to receive their correspondence electronically in their PEAK account
 - If a member wants notices via text or email, they can log on to PEAK to change their correspondence preference
 - When a notice is generated, they will receive an email and/or text advising them to log on to their PEAK account to view their secure notice



Correspondence

- Verification Checklist (VCL)
 - If information the applicant reported on their application cannot be verified through an interface, the client will receive a request for more information via their preferred correspondence method
 - The VCL will inform the client of what they need to provide and when
 - The client may be allowed a Reasonable Opportunity Period (ROP) to provide verification of citizenship or non-citizen status



Correspondence

- Notice of Action (NOA)
 - Individuals will receive a NOA when an eligibility decision is made on their application
 - May also be sent if a change is made to their case and eligibility is affected
 - Displays information related to approvals, denials, and/or changes. It contains, appeal information and information about how and when to report changes



Correspondence

- Health First Colorado ID Card
 - Will be used at doctors' offices and pharmacies
 - If the applicant has had coverage in the past their, the system will not generate another card
 - Members can contact the county office the member contact center to request a new card. They may also print a new card via the PEAK account



Correspondence

- Redetermination, Re-assessment and Recertification (RRR) Packet
 - The member will receive an RRR packet 60 days prior to their RRR due date
 - The system will automatically check if updated verifications are needed, and send out a Verification Checklist with their RRR packet"
 - Many cases will Auto Re-Enroll annually
 - If the member has no changes to report or no verification to provide no action is necessary

Providers



Medical Assistance Providers

- Medical Assistance providers are regular:
 - Doctors
 - Dentists
 - Pharmacies
 - Specialists
 - Durable Medical Equipment Providers

... who provide services at a special rate

Medical Assistance Providers

[www.colorado.gov/hcpf/
find-doctor](http://www.colorado.gov/hcpf/find-doctor)

General Eligibility Requirements



Self-Attestation

- Self-Attestation is a client's statement or declaration of information
 - Information that is provided through Self-Attestation is verified through a third-party verification system known as an interface
 - The Affordable Care Act (ACA) allows for almost all factors of eligibility to be verified through self-attestation

Self-Attestation

The following factors of eligibility can be verified through client statement :

Social Security Number (SSN)

Residency

Age

Date of birth

Household size

Income

Pregnancy



Social Security Number

Each person for whom Medical Assistance is being requested shall furnish a Social Security Number (SSN), unless they meet the following exceptions:

- Emergency MA
- Needy Newborns
- Presumptive Eligibility (PE)
- Not eligible to receive an SSN
- Only eligible to receive an SSN for valid non-work reason
- Refuses due to religious objection
- Non applicant listed on application
- **If a person meets one of the exceptions, they must not be required to provide an SSN**



Residency

Client must be a Colorado resident
Can be self attested

An individual can also retain their CO residency for the purposes of MA if they are temporarily out of state but intend to return

Residency

- The client cannot be an inmate of a public institution, with the following exceptions:
 - Incarcerated individuals or inmates at correctional facilities who are admitted to a hospital for more than 24 hours
 - Medical institution
- If residency becomes questionable, the eligibility site must reach out to the member to clarify residency

Citizenship and Immigration Status

- If Citizenship cannot be verified through an interface, the client will be required to provide documents with this information, such as:
 - Birth Certificate
 - Report of Birth Abroad
 - Passport

- Immigration Status will be verified by the:
 - The Verify Lawful Presence (VLP) interface
 - Systematic Alien Verification of Entitlements (SAVE) interface with the Dept of Homeland Security
 - If immigration status cannot be verified automatically, a VCL will be generated to request additional proof

Citizenship and Immigration Status (con't)

Citizenship and identity documents may be submitted as originals, certified copies, photocopies, facsimiles, scans or other copies

Non-Citizens and Qualified Non-Citizens

- There is a wide variety of eligible non-citizen statuses, and many do not need to meet the 5-year bar, such as:
 - Refugees
 - Asylees
 - Victims of trafficking
- Lawfully present children and pregnant women are not subject to the 5-year bar
- Eligible non-citizen status is verified as part of the application process, an individual should not be pre-screened based on their immigration status

Evidence of Citizenship & Identity

- Originals are no longer required for citizenship and identity documents –
 - Scans
 - Faxes
 - Photocopies
 - And other copies are now acceptable
- Eligibility sites must provide a reasonable amount of assistance to clients who need citizenship documents

Identity

- Identity must be verified
 - Self-Attestations are verified through an interface
- If identity cannot be verified through an interface, the client will be required to provide documents with this information, such as:
 - Driver's licenses, ID cards issued by the Federal, State, or local government
 - Other forms of acceptable identity verification

Reasonable Opportunity Period (ROP)

Eligibility sites must provide a Reasonable Opportunity Period (ROP) for clients to provide their citizenship and/or immigration status

- 90 days for all MA programs
- CBMS will automatically set the ROP dates

Quiz

- True or False
- If an individual is leaving Colorado temporarily and plans to return, they must close their case prior to leaving
- True
- False

The Programs



• *Modified Adjusted Gross Income (MAGI) and Non-MAGI at a Glance*

MAGI

- 64 and younger
- Not eligible for Medicare (MAGI Adult only)
- Low Income:
 - Children
 - Adults
 - Pregnant women
 - Parents or Caretakers of children under age 19

Non-MAGI

- Non-MAGI
 - Low Income individuals who meet any of the following:
 - Age 65+
 - Blind
 - Determined disabled by Social Security Administration (SSA) or the State Disability vendor Arbor Review Group (ARG)

MAGI Children

- Up to 142% of the Federal Poverty Level (FPL)
- Covers children under the age of 19
- Continuous Coverage for 12 months from the date of application
 - Coverage continues regardless of changes in income and household size



MAGI Adult

- Up to 133% of FPL
- Covers adults age 19 through the end of the month that they turn 65
 - May or may not have a dependent child in the home
 - Can not be enrolled in Medicare



Transitional MA

- Clients in the MAGI Parent/Caretaker Relative or MAGI Children category
- Would lose eligibility for MA due to earned income
- Must have been receiving MAGI Parent/Caretaker for 3 of the past 6 months
- Granted for 12 months
 - Beginning the first month of ineligibility

Four month Extended

- Become ineligible for MA due solely or partially to the receipt of support income
 - Support income may be maintenance or alimony
 - If they started receiving alimony after January 1, 2019 it will not be counted
- Must have been receiving MAGI Parent/Caretaker Relative or MAGI Children MA in 3 of the 6 months preceding the month in which the family became ineligible

MAGI Pregnant

- Up to 195% of FPL
- Covers pregnant women age 19 and over
 - Coverage extends for 60 days past the birth of the child(ren)



Former Foster Care Medical Assistance

- Health First Colorado is available to youth who were receiving foster care services when they turned 18 years old
- CBMS generates correspondence that informs them that they are eligible for Health First Colorado until they turn 26 years old

Child Health Plan Plus (CHP+)

- CHP+ is low-cost health insurance for Colorado's uninsured children and pregnant women
- CHP+ uses MAGI methodology to determine household composition and income



CHP+ Children

- Between 143% and 260% of FPL
- Covers children under the age of 19
- Annual Enrollment fee applies between 157% and 260% of FPL
- Can receive up to 12 months of continuous coverage from the date they were determined eligible

CHP+ Prenatal

- Between 143% and 260% of FPL
- Covers pregnant women age 19 and over
 - Coverage extends for 60 days past the birth of the child(ren)
 - From the 60th day, coverage extends further to last day of that month
 - No enrollment fee for pregnant woman and her household

Questions?





Thank You!