

Colorado Medicaid

Mountains, Plains, Deserts, and Today's Health Landscape

Presented by: Spencer Green, Tribal and County Liaison
CO Department of Health Care Policy & Financing

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Land Acknowledgement

We would like to acknowledge that what is now Colorado includes the lands of the Ute, Arapaho, Cheyenne, Diné/Navajo, Lakota, Apache, Puebloan nations, and many Tribes, and that the sovereign tribal governments of the Ute Mountain Ute and the Southern Ute Indian Tribes still reside in this state.

These tribes are the original stewards of these natural areas. We want to take a moment to honor and respect these original stewards of the environment and their relationship with the land.



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Presentation Outline

- Colorado Medicaid 101
- Special Topics
 - ACC 3.0
 - AI/AN Specific
 - IHS Billing
- How We Can Help
- Contacts and Q&A



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Colorado Medicaid 101



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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.



What We Do

The Department of Health Care Policy & Financing administers Health First Colorado (Colorado's Medicaid program), Child Health Plan *Plus* (CHP+) and other health care programs for Coloradans who qualify.

Who is HCPF?

- HCPF = Colorado Department of Health Care Policy and Financing
- Designated as Colorado's single state Medicaid agency
- Responsible for supervision and oversight of Colorado's public insurance programs
- County governments are responsible for local administration; HCPF supervises local administration



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By the Numbers

- Approx. \$18 billion budget, 750 FTEs
- Covering 1.3 million Coloradans
- Funding is a mix of federal, state, and local share
- 64 counties and 2 federally recognized tribes



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About our Members

- Who qualifies for Medicaid in Colorado?
 - By income
 - Through a [buy-in program](#)

Approximate Monthly Income to Qualify

Family Size	Adults 19-65	Children 0-18	Pregnant People
1	up to \$1,735	up to \$1,853	up to \$2,544
2	up to \$2,345	up to \$2,503	up to \$3,437
3	up to \$2,954	Up to \$3,154	up to \$4,331
4	up to \$3,564	Up to \$3,805	up to \$5,225



[Applying online](#) or speaking to an eligibility specialist are the best ways to determine qualifications.



What is Health First Colorado?

- Free or low-cost public health care coverage for Coloradoans who qualify
- Comprehensive benefits and services
- Care coordination
- More adults and parents who qualify
- Apply at any time



Benefits



Behavioral health



Dental services



Emergency care



Hospitalization



Laboratory services



Maternity care



Newborn care



Outpatient care



Prescription drugs



Preventive & wellness services



Primary care



Rehabilitative services

New Benefits: Lactation and Doulas

- Became available July 1, 2024 (Doulas) and December 1, 2024 (Lactation)



New Benefits: Lactation Support

- Lactation support services include:
 - education
 - counseling
 - assistance for common breastfeeding issues
 - along with skilled, evidence-based care for more complex lactation issues
 - Members can receive lactation support in person or via telehealth, individually or in a group setting
- There are no limits on the amount, duration, or scope of the services



New Benefits: Doulas

- “Doula” means a trained birth companion who provides personal, nonmedical support to pregnant and postpartum persons and their families prior to childbirth, during labor and delivery, and during the postpartum period.
- Service components include: Perinatal support services, including newborn care; labor and birth support; and coordination with community-based services.



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New Benefits: Doulas

- To be eligible for the program, a person must meet the following criteria:
 - Be eligible for Health First Colorado
 - Be pregnant or have given birth within the last 365 days
- This benefit includes three (3) categories of services and is available to all eligible Health First Colorado members.
 - Prenatal support
 - Continuous labor and delivery support
 - Postpartum support

Check out the [Doula Webpage](#) for more information.



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Child Health Plan Plus (CHP+)

- Free or low-cost public health care coverage for children under 18 and pregnant women over 19
- Enrollment fees are based on a sliding scale
- Comprehensive benefits and services
- Apply at any time



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Special Topics



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Accountable Care Collaborative (ACC)

1. Members

Most full-benefit members are enrolled in the ACC and assigned to a RAE.

2. Providers

Physical and behavioral health providers contract with RAEs to provide health care services to members.

3. RAEs

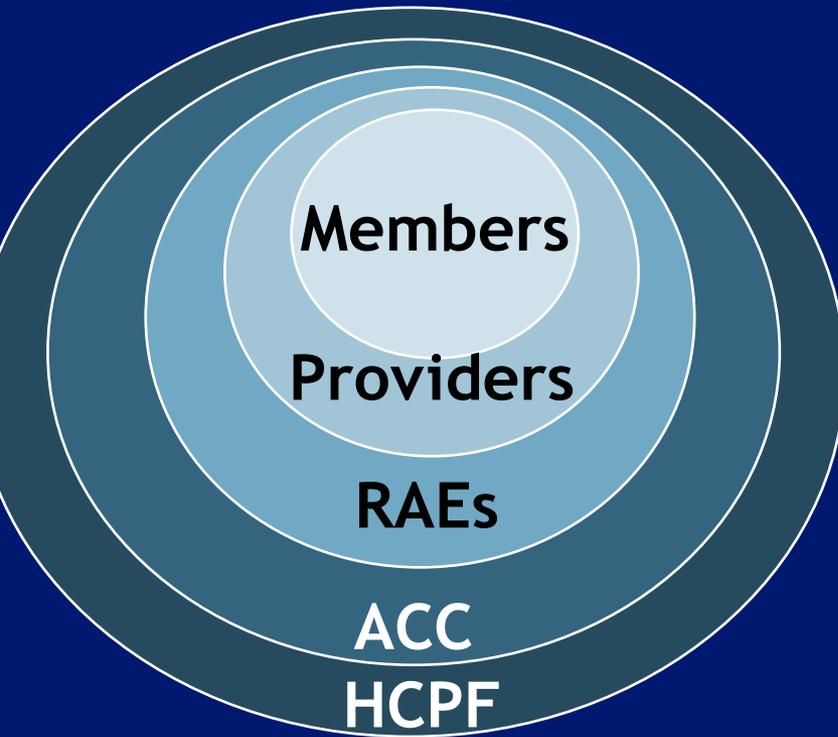
Promote member health by administering the capitated behavioral health benefit, establishing networks of providers and coordinating medical and community-based services in their region.

4. ACC

Managed care delivery system for Health First Colorado that delivers cost-effective, quality health care services to members to improve the health of Coloradans.

5. HCPF

HCPF is the state government agency that runs Colorado's Medicaid program. All work at HCPF (systems, eligibility, payment, benefits, etc.) impacts the ACC.



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Role of the Regional Accountable Entity (RAE)

- Build a network of care providers
- Contract with Primary Care Medical Providers (PCMPs)
- Contract with behavioral health providers and administer the capitated behavioral health benefit
- Provide care coordination, care programs, and case management
- Some RAEs do this themselves, while others contract this out
- Assist with practice transformation (e.g., support PCMP offices integrating behavioral health services into their clinics)
- Respond to local community needs to best support Health First Colorado members



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Regional Accountable Entities (RAEs)

Physical Health
Care

Per member per
month

Behavioral
Health Care

Behavioral Health
Capitation



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Why are the ACC and Phase III Important?

- The ACC is our Medicaid delivery system that uses managed care strategies to maximize the support members receive and reimbursements to providers, while balancing the need for cost savings.
- Phase III builds on the current foundation to modernize our delivery system through:
 - Expanded expectations for RAEs/PCMPs to provide care coordination for members.
 - A streamlined payment model to PCMPs to standardize and improve payment opportunities.
 - Improved accountability measures for the RAEs to increase program transparency.



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Goals for ACC Phase III



1. Improve quality care for members.
2. Close health disparities and promote health equity for members.
3. Improve care access for members.
4. Improve the member and provider experience.
5. Manage costs to protect member coverage, benefits, and provider reimbursements.



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AI/AN Specific Items

- If you qualify for Health First Colorado or CHP+ and you are eligible for services from an Indian health provider or urban Indian organization, or for Contract Health Services (CHS) referral, you **do not have to pay premiums or enrollment fees.**
- If you have ever received services from an Indian Health provider, urban Indian program or through CHS referral, you **do not have to pay other out-of-pocket costs such as copayments, coinsurance or deductibles.**



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AI/AN Specifics cont.

- **Indian trust income is not counted** when determining eligibility for new financial assistance, Health First Colorado or CHP+.
- **Other income derived from Indian lands or from items of cultural or traditional significance is not counted** for Health First Colorado or CHP+.



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Billing IHS Claims

- All billing manuals can be found at: www.colorado.gov/hcpf/billing-manuals
- Choose UB-04 and Indian Health Services
- Always use manual from website as changes are often made and updated here.



The screenshot shows the Colorado Department of Health Care Policy & Financing website. The header includes the Colorado state logo and the HCPF logo. The main navigation bar has links for Home, For Our Members, For Our Providers, For Our Stakeholders, and About Us. The page title is "Billing Manuals" and it asks "Which billing manual should I use based on my provider type?". A list of provider types is shown with radio buttons, and "UB-04" is selected. Below this, a list of billing manuals is displayed, including "Dialysis Billing Manual (6/19)", "Federally Qualified Health Center/Rural Health Center (FQHC/RHC) (11/19)", "Home Health Billing Manual (8/19)", "Hospice Billing Manual (6/19)", "Indian Health Services (IHS) (10/19)", "IP and OP Hospital Billing Manual (01/20)", "Nursing Facility Billing Manual (6/19)", "Private Duty Nursing Billing Manual (6/19)", and "Psychiatric Residential Treatment Facilities (PRTF) Billing Manual (6/19)".



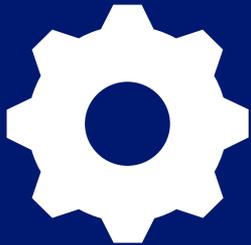
UB-04

UB-04 is the standard institutional claim form used by Medicare and Health First Colorado Programs

1. IM BILLING PROVIDER 444 E CLAIREMONT ANYTOWN WI 55555-1234 1.444.444.4444	2. MEMBER, IMA 110811	3. ON FILE	4. STATEMENT COVERED PERIOD FROM 111511 THROUGH 113011	5. FEE-TAX NO. 01-2345678	6. LEVEL OF BILL 213
10 BIRTHDATE 11 11 110811	11 SEX 1	12 DATE 1	13 HHS 1	14 TYPE 1	15 DRG 30
16 OCCURRENCE CODE 02	17 OCCURRENCE DATE 110811	18 OCCURRENCE CODE 01	19 OCCURRENCE DATE 110811	20 OCCURRENCE CODE 75	21 OCCURRENCE DATE 112011
22 REV CD 0192	43 DESCRIPTION	44 HCPCS / RATE / NPPS CODE	46 SERV DATE	48 SERV UNITS	47 TOTAL CHARGES
0185				10.00	XXXX XX
				6.00	XXX XX
50 PRKR NAME T19 MEDICAID	51 HEALTH PLAN ID	52 PRIOR PAYMENTS	53 EST AMOUNT DUE	56 NPI 0111111110	57 OTHER PRR ID
58 INSURED'S NAME SAME	59 PBL 1234567890	60 INSURED'S UNQID	61 GROUP NAME	62 INSURANCE GROUP NO.	
63 TREATMENT AUTHORIZATION CODES	64 DOCUMENT CONTROL NUMBER	65 EMPLOYER NAME			
66 ADMIT DK 4281	67 A 4	68 B 1	69 C 1	70 D 1	71 E 1
72 ATTENDING NPI 0222222220	73 OPERATING NPI	74 OTHER NPI	75 OTHER NPI	76 OTHER NPI	77 OTHER NPI
78 REMARKS B3 123456789X					



Claims Process - Common Terms



Adjustment

Correcting paid claims that are still within timely filing



Re-Bill

Re-bill previously denied claim



Suspend

Claim must be manually reviewed before adjudication



Void

"Cancelling" a "paid" claim

Common Denial Reasons

Denied:

Claim processed & denied by claims processing system. Some denied claims may be resubmitted for payment after corrections have been made. Denied claims may not be adjusted but may be resubmitted.

Timely Filing:

Claim was submitted more than 365 days ago without a reference to a previous ICN

Duplicate Claim:

A subsequent claim was submitted after a claim for the same service has already been paid

Bill Medicare or Other Insurance:

Health First Colorado is always the “Payer of Last Resort” Provider should bill all other appropriate carriers first. Primary information must be reported on the claim form.



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Provider Services Call Center (OptumInsight)

1-833-468-0362

The Provider Services Call Center hours:

8:00 a.m. - 5:00 p.m. MT Monday - Friday



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How We Can Help



Monitoring Federal Changes

The Department is closely monitoring how federal legislation, budget decisions, and Centers for Medicare and Medicaid Services (CMS) guidance will impact the administration of Health First Colorado. Up-to-date information can be found on [HCPF's website](#).

HCPF is also working with other state agencies to identify impacts to Tribal members.



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What Can HCPF Help With?

Government Relations	Member Eligibility	Receiving Care	Policy, Benefits and Billing	Care Coordination
Colorado Commission of Indian Affairs (CCIA)/Lt. Governor's Office - health care issues	Member eligibility - applying for services and working with your county for Medicaid eligibility	HCPF/CMS Waivers, State Plans and changes to the way care is delivered in Medicaid.	Coordination, development, and management of benefits	Coordination with the RAE (Rocky) for any ACC related issues.
HCPF Annual Formal Tribal Consultation	Annual redetermination issues	Coordination with other agencies in regards to gaps in providers.	Interpretation of IHS Benefits Manual	Connecting with regional providers for improved care and closing gap of information sharing.
Health & Wellness Committee	Understanding the impact of Medicaid eligibility rules & rule changes	Identifying obstacles in patient care and troubleshooting solutions	Coordination with IHS/tribal facilities and Medicaid	Recommend ways to improve care coordination and strengthen and diversify provider network
U.S. HHS/CMS Federal Tribal Consultation			Billing, reimbursement, and claims follow up.	
Cultural competency and sensitivities			Provider enrollment and revalidation.	



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Formal Tribal Consultation

- Typically conducted every year with Ute Mountain Ute and Southern Ute Tribes
- Government-to-Government Approach
 - Executive Director and cabinet-level staff attend
 - Not prescriptive
- Action Log and Follow-Up
- Very willing to meet with other Tribes and representatives



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Partnerships with State Agencies

HCPF maintains strong connections and works closely with other state agencies, including:

- Colorado Commission on Indian Affairs
 - CO Dept. of Public Health and Environment
 - CO Dept. of Human Services
 - Behavioral Health Agency
 - CO Dept. of Early Childhood
- ...and many others!



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HCPF's Tribal Team

If you are unsure about who to speak to, where to start, or want to bring our attention to an issue, you can always reach out directly to us!





Questions?



Contact Info

Spencer Green

Tribal and County Liaison

spencer.green@state.co.us

Joshua Montoya

Division Director, Partner Relations
and Administration

joshua.montoya@state.co.us



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Thank you!

