

THIS PAGE NOT FOR PUBLICATION

Title of Rule: Revision to the Eligibility Rule Concerning CHP+ Redeterminations §140.1.B.

Rule Number: MSB 11-08-16-A

Division / Contact / Phone: Medicaid & CHP+ Managed Care and Contracts Division / Christine Martinez / 34

SECRETARY OF STATE

RULES ACTION SUMMARY AND FILING INSTRUCTIONS

SUMMARY OF ACTION ON RULE(S)

1. Department / Agency Name: Health Care Policy and Financing / Medical Services Board
2. Title of Rule: MSB 11-08-16-A, Revision to the Eligibility Rule Concerning CHP+ Redeterminations §140.1.B.
3. This action is an adoption of: an amendment
4. Rule sections affected in this action (if existing rule, also give Code of Regulations number and page numbers affected):
Sections(s) 140.1.B, Colorado Department of Health Care Policy and Financing, Medical Assistance (10 CCR 2505-3).
5. Does this action involve any temporary or emergency rule(s)? No
If yes, state effective date:
Is rule to be made permanent? (If yes, please attach notice of hearing). Yes

PUBLICATION INSTRUCTIONS*

Please delete text identified and add new text provided at §140.1.B. All other text is for clarification purposes only. These changes are effective 11/30//2011.

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STATEMENT OF BASIS AND PURPOSE

1. Summary of the basis and purpose for the rule or rule change. (State what the rule says or does and explain why the rule or rule change is necessary).

The CHP+ redetermination form will now direct CHP+ clients to review their current information and direct them to take no action if there are no household changes to current information. This rule assists in streamlining the eligibility process and reduces administrative burden to eligibility sites and clients.

2. An emergency rule-making is imperatively necessary

☐ to comply with state or federal law or federal regulation and/or

☐ for the preservation of public health, safety and welfare.

Explain:

3. Federal authority for the Rule, if any:

42 CFR Part 457.320(e)(2)

4. State Authority for the Rule:

25.5-8-109, C.R.S. (2011)

Initial Review

Proposed Effective Date

11/30/2011

Final Adoption

Emergency Adoption

10/14/2011

DOCUMENT #05

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REGULATORY ANALYSIS

1. Describe the classes of persons who will be affected by the proposed rule, including classes that will bear the costs of the proposed rule and classes that will benefit from the proposed rule.

CHP+ clients who need to perform a yearly redetermination for continued eligibility.

2. To the extent practicable, describe the probable quantitative and qualitative impact of the proposed rule, economic or otherwise, upon affected classes of persons.

The proposed rule will ease the administrative burden of paper redeterminations for eligibility sites and clients. The redetermination form will now direct CHP+ clients to review their current information and direct them to take no action if there are no household changes to current information. This rule assists in streamlining the eligibility process and reduces administrative burden to eligibility sites and clients.

3. Discuss the probable costs to the Department and to any other agency of the implementation and enforcement of the proposed rule and any anticipated effect on state revenues.

Costs for associated CBMS changes are \$216,090.

4. Compare the probable costs and benefits of the proposed rule to the probable costs and benefits of inaction.

Inaction is not advisable as automatic reenrollment was stipulated in the current CBMS settlement orders. Inaction would cause the Department to be out of compliance with these court orders.

5. Determine whether there are less costly methods or less intrusive methods for achieving the purpose of the proposed rule.

There are no less costly methods. Implementing this policy through a CBMS change will reduce administrative costs associated with eligibility site workload.

6. Describe any alternative methods for achieving the purpose for the proposed rule that were seriously considered by the Department and the reasons why they were rejected in favor of the proposed rule.

None were considered.

140. REDETERMINATION

140.1 Eligibility shall be redetermined when twelve (12) months have passed since the last eligibility determination.

- A. A redetermination form is not required to be sent to the client if all current eligibility requirements can be verified by reviewing information from another assistance program, verification system, and/or CBMS. When applicable, the eligibility site shall redetermine eligibility based solely on information already available. If verification or information is available for any of the three months prior to redetermination month, no request shall be made of the client and a notice of the findings of the review will go to the client. If not all verification or information is available, the eligibility site shall only request the additional minimum verification from the client. This procedure is referenced as Ex Parte Review.
- B. The only verification that can be required at redetermination is the minimum verification needed to complete a redetermination of eligibility. ~~If no documentation is required, a written declaration from the client is sufficient verification for redetermination. If the redetermination is performed by phone and no documentation is required, a verbal statement from the client is sufficient verification for redetermination and should be noted in the case record and in CBMS case comments.~~ The redetermination form shall direct clients to review current information and to take no action if there are no changes to report in the household. Eligibility sites and CBMS shall view the absence of reported changes from the client at this redetermination period as confirmation that there have been no changes in the household. This procedure is referenced as automatic reenrollment.

An eligibility site may redetermine eligibility through telephone, mail, or electronic means. The use of telephone or electronic redeterminations should be noted in the case record and in CBMS case comments.