



Department of Health Care Policy and Financing

PUBLIC NOTICE

September 25, 2013

Update to August 19th Public Notice - Regarding Alternative Benefit Plan for Medicaid Expansion Population

General Information

On October 1, 2013 the Department intends to submit a State Plan Amendment to comply with requirements of the federal Affordable Care Act of 2010 (ACA). As previously described in the August 25th Public Notice titled "Medicaid State Plan Amendment – Alternative Benefit Plan for Expansion Population," the Alternative Benefit Plan must be offered to all clients newly eligible for coverage as a result of the Medicaid expansion included in the ACA. This notice is intended to provide additional information on the Alternative Benefit Plan. The plan will include the same services that are traditionally available in regular Medicaid, plus a few new benefits that are required under the ACA. Currently Medicaid offers the following benefits: primary care, behavioral health, hospitalization, rehabilitative services, laboratory services, outpatient care, prescription drugs, emergency care, dental care, maternity and newborn care. In addition to these benefits, the Alternative Benefit Plan will offer habilitative and preventive and wellness services ([A&B Recommendations](#)), all of which are required by the ACA. In an effort to ensure all Medicaid patients receive the same benefits, the Department will add the new ABP preventive and wellness services to the current Medicaid plan and is investigating whether habilitative services may also be added. As the Department gathers more information on the proposed amendments to the State Plan, the State Register will be updated accordingly.

Primary Care Case Management (PCCM), Pre-Paid Inpatient Health Plan (PIHP), and Managed Care Organization (MCO) State Plan Amendments to Include Expansion Population

October 16, 2013, the Department plans to submit a State Plan Amendment to the PCCM SPA, and the PIHP and MCO SPAs that will clarify that the Medicaid Expansion populations will be included in those delivery systems. This expansion population includes individuals who: a) are ages 19-64, b) have incomes no more than 133% of the federal poverty level, and c) were not eligible for Medicaid in Colorado as of December 1, 2009.

A link to this notice will be posted on the Department's web site (www.colorado.gov/hcpf) starting on September 25, 2013. Written comments may be addressed to: Director, Medical and CHP+ Program Administration Office, Department of Health Care Policy and Financing, 1570 Grant Street, Denver, CO 80203.

Improving health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources.

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