# **Table of Contents**

# State/Territory Name: Colorado

# State Plan Amendment (SPA) #: 21-0013

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages



## **Financial Management Group**

September 29, 2021

Bettina Schneider, Chief Financial Officer Attn: Amy Winterfeld Colorado Department of Health Care Policy and Financing 1570 Grant Street Denver, CO 80203-1818

## RE: Colorado State Plan Amendment (SPA) Transmittal Number 21-0013

Dear CFO Schneider:

We have reviewed the proposed Colorado State Plan Amendment (SPA) to Attachment 4.19-B of your state plan, which was submitted to the Centers for Medicare & Medicaid Services (CMS) on July 09, 2021. This plan amendment allows an increase to certain Medicaid provider rates by 2.5% for specific services in accordance with the 2021 Long Bill (SB21-205) for the State of Colorado.

Based upon the information provided by the State, we have approved the amendment with an effective date of July 01, 2021. We are enclosing the approved CMS-179 and a copy of the new state plan pages.

If you have any additional questions or need further assistance, please contact LaJoshica (Josh) Smith via 214-767-6453 or lajoshica.smith@cms.hhs.gov.

Sincerely,

Todd McMillion Director Division of Reimbursement Review

Enclosures

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable):			
Attachment 4.19-B – Methods and Standards for Establishing Payment Rates – Other Types of Care – Effective Dates for Reimbursement Rates for Specified Services, Page 1-3 of 3	Attachment 4.19-B – Methods and Standards for Establishing Payment Rates – Other Types of Care – Effective Dates for Reimbursement Rates for Specified Services, Pages 1-3 of 3 (TNs 20-0023, 20-0001)			
10. SUBJECT OF AMENDMENT:				
Effective July 1, 2021, 2.5% across-the-board rate increases for the included services, and targeted rate increases and rate decreases, per state statute. Endoscopic rates are also being rebalanced, reducing four codes currently above Medicare to 100% of Medicare rates and increasing one code below 80% of Medicare up to 80% of the Medicare rate, which is in line with the Department's standard rate review process. Finally, prosthetics, orthotics, and supplies rates below 80% or above 100% of the benchmark are being rebalanced to between 80-100% of Medicare, which is in line with the Department's standard rate review process.				
11. GOVERNOR'S REVIEW (Check One):				
GOVERNOR'S OFFICE REPORTED NO COMMENT X OTHER, AS SPECIFIED				
COMMENTS OF GOVERNOR'S OFFICE ENCLOSED GOV	ernor's letter 14 July, 2021			
NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL				
12. SIGNATURE OF STATE AGENCY OFFICIAL:	16. RETURN TO:			
Digitally signed by Bettina Schneider Date: 2021.09.03 10:18:59 -06'00'	Colorado Department of Health Care Policy and Financing 1570 Grant Street			
13. TYPED NAME:	Denver, CO 80203-1818			
Bettina Schneider	Attn: Amy Winterfeld			
14. TITLE:				
Chief Financial Officer				
15. DATE SUBMITTED: Initial: July 9, 2021				
<u>Update No. 1</u> : September 3, 2021				
FOR REGIONAL C	FFICE USE ONLY			
17. DATE RECEIVED July 9, 2021	18. DATE APPROVED September 29, 2021			
PLAN APPROVED – ONE COPY ATTACHED				
19. EFFECTIVE DATE OF APPROVED MATERIAL July 1, 2021	20. SIGNATURE OF REGIONAL OFFICIAL			
21. TYPED NAME	22. TITLE			
Todd McMillion	Director, Division of Reimbursement Review			
23. REMARKS				
FORM CMS-179 (07/92) Instructions on Back				

DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES		FORM APPROVED OMB NO. 0938-0193
TRANSMITTAL AND NOTICE OF APPROVAL	1. TRANSMITTAL NUMBER:	2. STATE:
OF	21-0013	COLORADO
STATE PLAN MATERIAL	3. PROGRAM IDENTIFICATION:	
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	TITLE XIX OF THE SOCIAL SE	CURITY ACT (MEDICAID)
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE & MEDICAID SERVICES	4. PROPOSED EFFECTIVE DATE:	
DEPARTMENT OF HEALTH AND HUMAN SERVICES	July 1, 2021	
5. TYPE OF PLAN MATERIAL (Check One):		
NEW STATE PLAN AMENDMENT TO BE CONSIDERED	AS A NEW PLAN X AMEN	DMENT
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AM	ENDMENT (Separate transmittal for each a	amendment)
6. FEDERAL STATUTE/REGULATION CITATION:	7. FEDERAL BUDGET IMPACT:	
Social Security Act Title XIX, Section 1902(a)(30)(A)	3. Laboratory and Radiology Serv FFY 2021: (\$1,624,992) FFY 2022: (\$6,512,044)	ices
	4.b. Early and Periodic Screening Services FFY 2021: \$1,212,247 FFY 2022: \$4,437,574	, Diagnosis and Treatment
	<b>4.c. Family Planning</b> FFY 2021: \$497,062 FFY 2022: \$1,988,247	
	4.d. Tobacco Cessation Counselin FFY 2021-21:\$8 FFY 2022: \$30	ng for Pregnant Women
	5.a.2.a. Physician Services – Com FFY 2021: \$3,218,390 FFY 2022: \$12,916,291	prehensive fee schedule
	5.a.2.b. Physician Services – Alternative Payment Model Co Set	
	FFY 2021: \$349,636 FFY 2022: \$1,425,511	
	5.b. Medical and Surgical Service FFY 2021: \$2,577 FFY 2022: \$10,310	s Furnished by a Dentist
	6.d. Services Provided by Non-Ph FFY 2021: \$153,738 FFY 2022: \$630,201	ysician Practitioners
	7.AB. Home Health Care Service FFY 2021: \$2,231,935 FFY 2022: \$9,059,382	s
	7.C. Durable Medical Equipment FFY 2021: \$876,757 FFY 2022: \$3,492,153	
	8. Private Duty Nursing Services FFY 2021: \$1,600,347 FFY 2022: \$6,434,845	
	9. Clinic Services FFY 2021: \$114,124 FFY 2022: \$456,633	
	10. Dental Services	

FFY 2021: \$2,463,708 FFY 2022: \$9,809,825 11. Physical Therapy, Occupational Therapy, Speech Therapy, and Audiology Services FFY 2021: \$187,566 FFY 2022: \$750,491 12.b. Dentures FFY 2021: \$25,485 FFY 2022: \$101,969 12.c. Prosthetics FFY 2021: \$16,841 FFY 2022: \$67,383 12.d. Eyeglasses and Contact Lenses FFY 2021: \$40,308 FFY 2022: \$167,780 13.c. Preventive Services – Screening, Brief Intervention, and Referral to Treatment (SBIRT) FFY 2021: \$407 FFY 2022: \$1,630 13.d. Rehabilitative Services: Substance Use Disorder Treatment FFY 2021: \$1,571 FFY 2022: \$6,287 13.d. Rehabilitative Services: Behavioral Health Services FFY 2021: \$60,858 FFY 2022: \$241,580 13.d. Rehabilitative Services: Mental Health and Substance Abuse Rehabilitation Services for Children FFY 2021: \$17,574 FFY 2022: \$70,319 19. Targeted Case Management: Persons with a **Developmental Disability** FFY 2021: \$101,159 FFY 2022: \$413,067 19.a. Targeted Case Management: Outpatient Substance Use Disorder Treatment FFY 2021: \$144 FFY 2022: \$577 19.b. Targeted Case Management: Transition Services FFY 2021: \$890 FFY 2022: \$3,651 20. Extended Services for Pregnant Women FFY 2021: \$2,415 FFY 2022: \$9,663 24.a. Transportation FFY 2021: \$273,583 FFY 2022: \$1,089,334 28. Freestanding Birth Center Services FFY 2021: \$2,485 FFY 2022: \$10,983 Aggregate FFY 2021: \$12,089,597 FFY 2022: \$48,155,032

#### STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT MEDICAL ASSISTANCE PROGRAM

### STATE OF COLORADO

Attachment 4.19-B Introduction Page 1 of 3

#### METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES-OTHER TYPES OF CARE

#### Effective Dates for Reimbursement Rates for Specified Services

Reimbursement rates for the services listed below on this Attachment 4.19-B introduction page are effective for services provided on or after the corresponding effective date. All payment rates can be found on the official website of the Department of Health Care Policy and Financing at <a href="https://www.colorado.gov/hcpf/provider-rates-fee-schedule">https://www.colorado.gov/hcpf/provider-rates-fee-schedule</a>

Service	Attachment	Effective Date
3. Laboratory and Radiology Services	Attachment 4.19-B	July 1, 2021
4.b. Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Services	Attachment 4.19-B, Page 1 of 1	July 1, 2021
4.c. Family Planning	Attachment 4.19-B	July 1, 2021
4.d. Tobacco Cessation Counseling for Pregnant Women	Attachment 4.19-B	July 1, 2021
5.a.2.a. Physician Services – Comprehensive fee schedule	Attachment 4.19-B	July 1, 2021
5.a.2.b. Physician Services – Alternative Payment Model Code Set	Attachment 4.19-B	July 1, 2021
5.b. Medical and Surgical Services Furnished by a Dentist	Attachment 4.19-B, Page 1 of 1	July 1, 2021
6.d. Services Provided by Non-Physician Practitioners	Attachment 4.19-B	July 1, 2021
7.AB. Home Health Care Services	Attachment 4.19-B, Page 1 of 7	July 1, 2021
7.C. Durable Medical Equipment	Attachment 4.19-B, Pages 2a and 2b of 7	July 1, 2021
8. Private Duty Nursing Services	Attachment 4.19-B	July 1, 2021

TN No. 21-0013

Approval Date: September 29, 2021

Supersedes TN No. 20-0023

Effective Date: July 1, 2021

#### STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT MEDICAL ASSISTANCE PROGRAM

### STATE OF COLORADO

Attachment 4.19-B Introduction Page 2 of 3

### METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES-OTHER TYPES OF CARE

#### Effective Dates for Reimbursement Rates for Specified Services

Service	Attachment	Effective Date
9. Clinic Services	Attachment4.19-B, Page 1-3 of 4	July 1, 2021
10. Dental Services	Attachment 4.19-B, Page 1of 3	July 1, 2021
11. Physical Therapy, Occupational Therapy, Speech Therapy, and Audiology Services	Attachment 4.19-B	July 1, 2021
12.b. Dentures	Attachment 4.19-B	July 1, 2021
12.c. Prosthetics	Attachment 4.19-B	July 1, 2021
12.d. Eyeglasses and Contact Lenses	Attachment 4.19-B	July 1, 2021
13.c. Preventive Services - Screening, Brief Intervention, and Referral to Treatment (SBIRT)	Attachment 4.19-B	July 1, 2021
13.d. Rehabilitative Services: Substance Use Disorder Treatment	Attachment 4.19-B	July 1, 2021
13.d. Rehabilitative Services: Behavioral Health Services	Attachment 4.19-B	July 1, 2021
13.d. Rehabilitative Services: Mental Health and Substance Abuse Rehabilitation Services for Children	Attachment 4.19-B, Page 1-2 of 2	July 1, 2021
19. Targeted Case Management: Persons with a Developmental Disability	Attachment 4.19-B, Page 1-2 of 2	July 1, 2021
19.a. Targeted Case Management: Outpatient Substance Use Disorder Treatment	Attachment 4.19-B, Page 1 of 2	July 1, 2021
19.b. Targeted Case Management: Transition Services	Attachment 4.19-B, Page 1 of 1	July 1, 2021

TN No. <u>21-0013</u>

Approval Date: <u>September 29, 2021</u> Effective Date: <u>July 1, 2021</u>

Supersedes TN No. 20-0001

#### STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT MEDICAL ASSISTANCE PROGRAM

### STATE OF COLORADO

Attachment 4.19-B Introduction Page 3 of 3

#### METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES-OTHER TYPES OF CARE

### Effective Dates for Reimbursement Rates for Specified Services

Service	Attachment	Effective Date
20. Extended Services for Pregnant Women (Prenatal Plus Program)	Attachment 4.19-B	July 1, 2021
24.a. Transportation	Attachment 4.19-B	July 1, 2021
28. Freestanding Birth Center Services	Attachment 4.19-B	July 1, 2021