

## **Table of Contents**

**State/Territory Name: Colorado**

**State Plan Amendment (SPA) #: 20-0009**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
601 E. 12th Street, Suite 355  
Kansas City, MO 64106



**Medicaid & CHIP Operations Group**

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August 13, 2020

Kim Bimestefer, Executive Director  
Department of Health Care Policy & Financing  
1570 Grant Street  
Denver, CO 80203

RE: Colorado State Plan Amendment (SPA) 20-0009

Dear Ms. Bimestefer:

We have reviewed the State Plan Amendment (SPA) submitted under transmittal number 20-0009. This amendment changes from paying licensed pharmacists individually for Medication Therapy Counseling to contracting with an entity to run the program, and updates program requirements and restrictions.

Please be informed that this SPA was approved on August 12, 2020, with an effective date of August 1, 2020. Enclosed are the CMS-179 and the amended plan pages.

Should you have any questions about this amendment, please contact Curtis Volesky at (303) 844-7033.

Sincerely,



James G. Scott, Director  
Division of Program Operations

cc: Dr. Tracy Johnson, [Tracy.Johnson@state.co.us](mailto:Tracy.Johnson@state.co.us)  
Laurel Karabatsos, [laurel.karabatsos@state.co.us](mailto:laurel.karabatsos@state.co.us)  
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Jami Gazarro, [Jami.Gazero@state.co.us](mailto:Jami.Gazero@state.co.us)

<b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL</b>  <b>FOR: CENTERS FOR MEDICARE &amp; MEDICAID SERVICES</b>		1. TRANSMITTAL NUMBER:  <b>20 – 0009</b>	2. STATE:  <b>COLORADO</b>
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES		3. PROGRAM IDENTIFICATION: <b>TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)</b>	
4. PROPOSED EFFECTIVE DATE:  <b>August 1, 2020</b>			
5. TYPE OF PLAN MATERIAL ( <i>Check One</i> ):  NEW STATE PLAN                      AMENDMENT TO BE CONSIDERED AS A NEW PLAN <b>X AMENDMENT</b>			
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT ( <i>Separate transmittal for each amendment</i> )			
6. FEDERAL STATUTE/REGULATION CITATION:  <b>42 U.S.C. 1396a, et seq. and 42 CFR Section 456.705</b>		7. FEDERAL BUDGET IMPACT:  a. FFY 2019-20: <b>\$0</b> _____ b. FFY 2020-21: <b>\$0</b> _____	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:  <b>Supplement to Attachment 3.1-A, Item 6.d, Pages 1-2 of 2</b>		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT ( <i>If Applicable</i> ):  <b>Supplement to Attachment 3.1-A, Item 6.d (TN 18-0019)</b>  <b>Supplement to Attachment 3.1-A, Item 6.d, Pages XX and XX (TN 12-006)</b>  <b>Supplement to Attachment 3.1-A, Item 6.d, Page 3 of 3 (TN 15-0036)</b>	
10. SUBJECT OF AMENDMENT:  <b>Changes from paying licensed pharmacists individually to contracting with an entity to run the program and updates program requirements and restrictions.</b>			
11. GOVERNOR'S REVIEW ( <i>Check One</i> ):  GOVERNOR'S OFFICE REPORTED NO COMMENT <b>X OTHER, AS SPECIFIED</b>  COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <b>Governor's letter dated 11 October, 2019</b>  NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL			
12. SIGNATURE OF STATE AGENCY OFFICIAL:  		16. RETURN TO:  <b>Colorado Department of Health Care Policy and Financing 1570 Grant Street Denver, CO 80203-1818</b>  <b>Attn: Lauren Reveley</b>	
13. TYPED NAME:  <b>Tracy Johnson</b>			
14. TITLE:  <b>Medicaid Director</b>			
15. DATE SUBMITTED: <u>Initial</u> : May 15, 2020 <u>Update #1</u> : August 7, 2020			
<b>FOR REGIONAL OFFICE USE ONLY</b>			
17. DATE RECEIVED      May 15, 2020		18. DATE APPROVED      August 12, 2020	
<b>PLAN APPROVED – ONE COPY ATTACHED</b>			
19. EFFECTIVE DATE OF APPROVED MATERIAL  August 1, 2020		20. SIGNATURE OF REGIONAL OFFICIAL  	
21. TYPED NAME  James G. Scott		22. TITLE  Director, Division of Program Operations	
23. REMARKS			

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

STATE OF COLORADO

Supplement to Attachment 3.1-A  
Page 1

LIMITATIONS TO CARE AND SERVICES

6.d. Other practitioners' services

The following services are provided:

1. Services provided by State licensed Psychologists.
2. Services provided by Certified Registered Nurse Anesthetists.
3. Services provided by Clinical Nurse Specialists.
4. Services provided by Physician Assistants.
5. Services provided by licensed Pharmacists.
  - a. Licensed Pharmacists administering vaccines in the state of Colorado must be certified in pharmacy based immunization delivery in compliance with the Colorado Board of Pharmacy Rules at 3 CCR 719 § 19.00.00 (2017).
  - b. Licensed Pharmacists that have entered into a Collaborative Pharmacy Practice Agreement for the purposes of administering antagonist injections must be certified in compliance with the Colorado Board of Pharmacy Rules at 3 CCR 719-1 § 17.00.00 (2017).
  - c. Licensed Pharmacists, or licensed pharmacy interns under the supervision of licensed Pharmacists, may provide medication therapy counseling services to fee-for-service Medical Assistance Program clients. Medication therapy counseling services may be conducted face-to-face, over the telephone, or through a virtual meeting.

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

**STATE OF COLORADO**

SUPPLEMENT TO  
ATTACHMENT 3.1-A  
Page 2

Telemedicine Services

Telemedicine means the use of medical information electronically exchanged from one site to another, whether synchronously or asynchronously, to aid a health care practitioner in the diagnosis or treatment of a client.

Telemedicine includes:

- Synchronous services provided "live" where the client and the distant provider interact with one another in real time through an audio-video communications circuit. Peripherals may be included, such as transmission of a live ultrasound exam.
- Asynchronous services involving the acquisition and storage of medical information at one site that is then forwarded to and retrieved by a health care practitioner at another site for medical evaluation and consultation.

Telemedicine does not include consultations provided by telephone (interactive audio) or facsimile machines.

To provide telemedicine services, health care practitioners must act within their scope of practice and be licensed practitioners as defined by State law.

All state plan prior authorization requirements apply to services provided through telemedicine. Prior authorization requests must state the intent to provide the service as a telemedicine service. A telemedicine service is not covered when the service delivered via telecommunication technology is deemed to be investigational or experimental.