

## **Table of Contents**

**State/Territory Name: Colorado**

**State Plan Amendment (SPA) #: 23-0004**

This file contains the following documents in the order listed:

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

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
601 E. 12th St., Room 355  
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

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September 15, 2023

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

Re: Colorado State Plan Amendment (SPA) 23-0004

Dear Ms. Bimestefer:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 23-0004. This amendment proposes to add coverage and reimbursement of eConsult telemedicine services for consultations between primary care providers and specialty providers.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations 42 CFR 440.60. This letter is to inform you that Colorado Medicaid SPA 23-0004 was approved on September 15, 2023, with an effective date of February 1, 2024.

If you have any questions, please contact Michala Walker at 816-426-6503 or via email at [Michala.Walker@cms.hhs.gov](mailto:Michala.Walker@cms.hhs.gov).

Sincerely,

A large black rectangular redaction box covers the signature and name of the sender.

Division of Program Operations

Enclosures

cc: Russell Zigler  
Naomi Mendoza  
Chris Lane  
Raine Henry  
Jami Gazerro  
Alex Lyons  
Erica Schaler

**TRANSMITTAL AND NOTICE OF APPROVAL OF  
STATE PLAN MATERIAL  
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

|   |                       |
|---|-----------------------|
| 1. TRANSMITTAL NUMBER<br><u>2 3 — 0 0 0 4</u>   | 2. STATE<br><u>CO</u> |
| 3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT<br><input checked="" type="radio"/> XIX <input type="radio"/> XXI |                       |

TO: CENTER DIRECTOR  
CENTERS FOR MEDICAID & CHIP SERVICES  
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE  
~~September 30, 2023~~ **February 1, 2024**

5. FEDERAL STATUTE/REGULATION CITATION  
~~42 CFR §410.78~~ 42 CFR 440.60

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)  
a. FFY ~~2023~~ **2024** \$ ~~0~~ **\$932,424**  
b. FFY ~~2024~~ **2025** \$ ~~(1,919,112)~~ **\$1,398,636**

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT  
~~-Supp to Att 3.1-A - Limits to Care and Services - 5.b Med and Surg Services Furn by a Dentist, page 3 of 3 AND 6.d Other Practitioner's Services, page 2 of 2~~  
~~-Att 4.19-B M&S for Est Pay Rates - Other Types of Care - 5.a Phys Services, p. 20 of 20~~

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)  
~~-Supp to Att 3.1-A - Limits to Care and Services - 5.b Med and Surg Services Furn by a Dentist, page 3 of 3 AND 6.d Other Practitioner's Services, page 2 of 2 (TN CO-20-0019)~~  
~~-Att 4.19-B M&S for Est Pay Rates - Other Types of Care - 5.a Phys Services, p. 20 of 20, (TN CO-23-0017)~~

9. SUBJECT OF AMENDMENT  
Add Electronic Consultation (eConsult) telemedicine service for eConsults between primary care medical providers (PCMPs) and Specialty Providers delivered through the Department's authorized eConsult Platform.

10. GOVERNOR'S REVIEW (Check One)

GOVERNOR'S OFFICE REPORTED NO COMMENT  
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED  
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

OTHER, AS SPECIFIED:  
**Governor's letter dated 5 April 2023**

11. SIGNATURE OF STATE AGENCY OFFICIAL  
[Redacted]

12. TYPED NAME  
Adela Flores-Brennan

13. TITLE  
Medicaid Director

14. DATE SUBMITTED  
6/20/23

15. RETURN TO  
Colorado Department of Health Care Policy and Financing  
1570 Grant Street  
Denver, CO 80203-1818

Attn: Alex Lyons

**FOR CMS USE ONLY**

|                                    |   |
|------------------------------------|---|
| 16. DATE RECEIVED<br>June 20, 2023 | 17. DATE APPROVED<br>September 15, 2023 |
|------------------------------------|---|

**PLAN APPROVED - ONE COPY ATTACHED**

|   |   |
|---|---|
| 18. EFFECTIVE DATE OF APPROVED MATERIAL<br>February 1, 2024 | 19. SIGNATURE OF APPROVING OFFICIAL<br>[Redacted]                           |
| 20. TYPED NAME OF APPROVING OFFICIAL<br>James G. Scott      | 21. TITLE OF APPROVING OFFICIAL<br>Director, Division of Program Operations |

22. REMARKS  
Box 5 - State authorized pen and ink change on 7/25/2023.  
Boxes 7 and 8 - State authorized pen and ink changes on 9/14/23.

**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 (including telephone and relay calls), audio-video, or data communications. 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.
  - Electronic Consultations (eConsults) between Primary Care Medical Providers (PCMPs) and Specialty Providers must be initiated by PCMPs through a Department-approved eConsult Platform to seek a Specialty Provider's expert opinion without a face-to-face member encounter with the Specialty Provider. Under Item 6.d authority, Clinical Nurse Specialists and Physician Assistants are the only Item 6.d PCMP providers authorized to request an eConsult from a Specialty Provider. The Specialty Provider must respond to the PCMP, and provide clinical guidance when necessary, through the eConsult Platform. All dialogue between the PCMP and Specialty Provider pertaining to the eConsult must be transmitted through the eConsult Platform. The eConsult must be performed for the direct benefit of the member.

Telemedicine does not include consultations provided by facsimile machines, text messaging, or electronic mail.

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.

TN: 23-0004  
Supersedes TN: 20-0019

Approval Date: September 15, 2023  
Effective Date: February 1, 2024

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

Attachment 4.19-B  
Page 20 of 20

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES – OTHER  
TYPES OF CARE

**Telemedicine Services**

*Distant Site Transmission Fee:* Physician services provided via telemedicine by physicians, podiatrists, and optometrists located at eligible distant sites shall be reimbursed a distant site transmission fee of \$5.00 in addition to the fee for the procedure code billed.

*Originating Site Facility Fee:* Eligible originating sites hosting, transmitting, or facilitating physician services provided via telemedicine shall be reimbursed an originating site facility fee, according to the Department's fee schedule. An originating site may not bill for assisting the distant site provider with an examination.

*Asynchronous Electronic Consultation:* To be reimbursed for asynchronous electronic consultation, primary care medical providers (PCMPs) must fulfill the following requirements:

Electronic Consultation (eConsult) between PCMPs and Specialty Providers is reimbursable only if the eConsult is delivered through a Department-approved eConsult Platform. Specialty Providers may only be reimbursed through the eConsult Platform. eConsults may be reimbursed after (1) the eConsult is provided to the PCMP by the Specialty Provider for the direct benefit of the member; (2) the eConsult did not require a face-to-face in-person visit referral to the Specialty Providers; and, (3) the eConsult is closed after the PCMP reviews the care plan provided by the Specialty Provider.

Except as otherwise noted in the State Plan, state-developed fee schedule rates are the same for both governmental and private providers. The rates are effective for services on or after the date listed on the Attachment 4.19-B Introduction Page.