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State/Territory Name: Colorado

State Plan Amendment (SPA) #: 23-0012

This file contains the following documents in the order listed:

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

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



Medicaid & CHIP Operations Group

April 14, 2023

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

RE: Colorado State Plan Amendment (SPA) 23-0012

Dear Ms. Bimestefer:

We have reviewed the State Plan Amendment (SPA) submitted under transmittal number 23-0012. This Amendment updates the State Governor's Designation Letter for who can sign state plan submissions for Colorado.

Please be informed that this SPA was approved on April 14, 2023, with an effective date of May 1, 2023. Enclosed are the CMS-179 and the amended plan page.

Should you have any questions about this amendment, please contact Curtis Volesky at (303) 844-7033, or by email at curtis.volesky@cms.hhs.gov.

Sincerely,



Nicole Mcknight, Acting Director
Division of Program Operations

Enclosures

cc: Adela Flores-Brennan, adela.flores-brennan@state.co.us
Bettina Schneider, bettina.schneider@state.co.us
Russell Ziegler, russ.zigler@state.co.us
Jami Gazarro, jami.gazarro@state.co.us
Amy Winterfeld, amy.winterfeld@state.co.us
Erica Schaler, erica.schaler@state.co.us

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

1. TRANSMITTAL NUMBER

2 3 — 0 0 1 2

2. STATE

CO

3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT

XIX XXI

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

4. PROPOSED EFFECTIVE DATE

May 1, 2023

5. FEDERAL STATUTE/REGULATION CITATION

42 CFR 430.12(b)

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY ~~2022~~ 2023 \$ 0
b. FFY ~~2023~~ 2024 \$ 0

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Section 7.4 page 90 Governor's Designation Letter

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)

Section 7.4 page 90 Governor's Letter (22-0027)

9. SUBJECT OF AMENDMENT

State Governor's Designation Letter.

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
24 September 2022

11. SIGNATURE OF STATE AGENCY OFFICIAL

12. TYPED NAME
Adela Flores-Brennan

13. TITLE
Medicaid Director

14. DATE SUBMITTED
4/7/23

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

April 7, 2023

17. DATE APPROVED

April 14, 2023

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL

May 1, 2023

19. SIGNATURE OF APPROVING OFFICIAL

20. TYPED NAME OF APPROVING OFFICIAL

Nicole McKnight

21. TITLE OF APPROVING OFFICIAL

Acting Director, Division of Program Operations

22. REMARKS

Box 6: State authorized pen and ink changes on 04/12/23.



April 5, 2023

James G Scott, Director
Division of Program Operations
Medicaid & CHIP Operations Group
Centers for Medicare and Medicaid Services
601 E. 12th St., Room 355
Kansas City, MO 64106

Dear Mr. Scott,

We are pleased to designate the following individuals in the Department of Health Care Policy & Financing as the individuals authorized to submit the State Plan and/or State Plan Amendments regarding Colorado's Medicaid program, effective May 1, 2023:

- Kim Bimestefer, Executive Director
- Bettina Schneider, Chief Financial Officer, Finance Office
- Adela Flores-Brennan, Medicaid Director, Health Policy Office
- Ralph Choate, Chief Operations Officer, Medicaid Operations Office
- Colin Laughlin, Deputy Office Director, Office of Community Living

Sincerely,

A handwritten signature in blue ink that reads "Jared Polis".

Jared Polis
Governor
State of Colorado