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State/Territory Name: Colorado

State Plan Amendment (SPA)#: 25-0026

This file contains the following documents in the order listed:

1) Approval Letter

2) Form CMS-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

March 5, 2026

Adela Flores-Brennan
Medicaid Director
Colorado Dept of Health Care Policy and Financing
303 E. 17th Avenue, Suite 1100
Denver, CO 80203-1818

Re: Colorado State Plan Amendment (SPA) – 25-0026

Dear Director Flores-Brennan:

Enclosed please find a corrected approval package for your Colorado State Plan Amendment (SPA) submitted under transmittal number (TN) 25.0026. This SPA revised the State Plan Clinic Services Benefit to provide an exception to the four-walls requirement for certain facilities. The SPA was approved on February 10, 2026. The approval package sent to Colorado included the following errors:

- The state signature on the CMS-179 was missing. CMS had the signed CMS-179, so we are issuing a corrected package with the signed CMS-179.

The enclosed corrected package contains the CMS-179 and SPA pages.

If you have any questions, please contact Ronna Bach at ronna.bach1@cms.hhs.gov.

Sincerely,

Wendy E. Hill Petras
Acting Director, Division of Program Operations

Enclosures

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

FORM APPROVED
OMB No. 0938-0193

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL

FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES

1. TRANSMITTAL NUMBER: 2 5 — 0 0 2 6

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: 10/1/25

5. FEDERAL STATUTE/REGULATION CITATION
Section 1905(a)(9) of the Social Security Act and 42 CFR 440.90

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)
a. FFY 2025 $ 0
b. FFY 2026 $ 0

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT
Attachment 3.1A – Limitations to Care and Services – Clinic Services – Pages 1-4

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT *(If Applicable)*
Attachment 3.1A – Limitations to Care and Services – Clinic Services – Page 1 of 1 (19-0006)

9. SUBJECT OF AMENDMENT
Updates the state plan Clinic Services Benefit to provide an exception to the four-walls requirement for certain facilities.

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

12. TYPED NAME
Adela Flores-Brennan

13. TITLE
State Medicaid Director

14. DATE SUBMITTED
11/13/25

15. RETURN TO
Colorado Department of Health Care Policy and Financing
303 E. 17th Avenue, Suite 1100
Denver, CO 80203

Attn: Jessica Farmen

FOR CMS USE ONLY

16. DATE RECEIVED
11/14/2025

17. DATE APPROVED
02/10/2026

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL
10/01/2025

19. SIGNATURE OF APPROVING OFFICIAL

20. TYPED NAME OF APPROVING OFFICIAL
Wendy E. Hill Petras

21. TITLE OF APPROVING OFFICIAL
Acting Director, Division of Program Operations

22. REMARKS

Instructions on Back

State Plan under Title XIX of the Social Security Act
State/Territory: Colorado

Section 1905(a)(9) Clinic Services

The state provides coverage for this benefit as defined at section §1905(a)(9) of the Social Security Act (the Act) and 42 C.F.R. 440.90 and as described as follows:

General Assurances

☒ The state assures services are furnished by a facility that is not part of a hospital in accordance with 42 C.F.R. 440.90.

☒ The state assures that services are furnished by facilities that are organized and operated to provide medical care to outpatients in accordance with 42 C.F.R. 440.90.

☒ The state assures that services are furnished under the direction of a physician or dentist in accordance with 42 C.F.R. 440.90(a).

Types of Clinic Services and Limitations in Amount, Duration, or Scope

☐ Limitations apply to all services within the benefit category.
Click or tap here to enter text.

Types of Clinics and Services:

☒ Behavioral Health Clinics
Behavioral Health Services includes substance use disorder (SUD) services that include services along the continuum of care defined by the American Society of Addiction Medicine (ASAM).

☐ Limitations apply only to this clinic type within the benefit category.
Click or tap here to enter text.

PRA Disclosure Statement - This use of this form is mandatory and the information is being collected to assist the Centers for Medicare & Medicaid Services in implementing section §1905(a)(9) of the Social Security Act. Under the Privacy Act of 1974, any personally identifying information obtained will be kept private to the extent of the law. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid Office of Management and Budget (OMB) control number. The OMB control number for this project is 0938-1148 (CMS-10398 #91). Public burden for all of the collection of information requirements under this control number is estimated to take about 25 hours per response. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to CMS, 7500 Security Boulevard, Attn: Paperwork Reduction Act Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

State Plan under Title XIX of the Social Security Act
State/Territory: Colorado

Section 1905(a)(9) Clinic Services

☐ IHS and Tribal Clinics

☐ Limitations apply only to this clinic type within the benefit category.

☒ Renal Dialysis Clinics**:**

☐ Limitations apply only to this clinic type within the benefit category.

☒ Other Clinics
Provided in an ambulatory surgery center that has an agreement with the Centers for Medicare and Medicaid Services under Medicare to participate as an ambulatory surgery center and meets the conditions set forth in the Act.

☒ Limitations apply only to this clinic type within the benefit category.
Covered surgical procedures are those groupings of surgical procedures approved by the Centers for Medicare and Medicaid Services. Additional surgical procedures may be included as approved by the Department of Health Care Policy and Financing.

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State Plan under Title XIX of the Social Security Act
State/Territory: Colorado

Section 1905(a)(9) Clinic Services

Four Walls Exceptions

The state assures that the following services may be furnished outside of the

☒ Services furnished outside the clinic, by clinic personnel under the direction of a physician, to an eligible individual who does not reside in a permanent dwelling or does not have a fixed home or mailing address in accordance with 42 C.F.R. 440.90(b).

☐ Services furnished outside a clinic that is a facility of the Indian Health Service, whether operated by the Indian Health Service (IHS) or by a Tribe or Tribal organization (as authorized by the Indian Self-Determination and Education Assistance Act (ISDEAA), Pub. L. 93-638), by clinic personnel under the direction of a physician in accordance with 42 C.F.R. 440.90(c).

The state elects to cover the following services outside of the clinic:

☒ Services furnished outside of a clinic that is primarily organized for the care and treatment of outpatients with behavioral health disorders, including mental health and substance use disorders, by clinic personnel under the direction of a physician in accordance with 42 C.F.R. 440.90(d)
Substance Use Disorder Clinics

☒ Services furnished outside of a clinic that is located in a rural area and is not a rural health clinic (as referenced in section §1905(a)(2)(B) of the Act and 42 C.F.R. 440.20(b) of this subpart) by clinic personnel under the direction of a physician in accordance with 42 C.F.R. 440.90(e)

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State Plan under Title XIX of the Social Security Act
State/Territory: Colorado

Section 1905(a)(9) Clinic Services

Four Walls Exceptions (continued)

☐ A definition adopted and used by a federal governmental agency for programmatic purposes
Click or tap here to enter text.

☒ A definition adopted by a state governmental agency with a role in setting state rural health policy**:**
In accordance with the Colorado State Office of Rural Health, all counties that are not designated as parts of Metropolitan Areas (MAs) are considered rural.

The state attests that:

☒ The selected definition of a rural area best captures the population of rural individuals that meets more of the four criteria that mirror the needs and barriers to access experienced by individuals who are unhoused:

- The population experiences high rates of behavioral health diagnoses or difficulty accessing behavioral health services;
- The population experiences issues accessing services due to lack of transportation;
- The population experiences a historical mistrust of the health care system; and
- The population experiences high rates of poor health outcomes and mortality.

Additional Benefit Description (Optional)

At its option the state may provide additional descriptive information about the benefit, beyond what is included in the federal statutory and regulatory definitions and descriptions. **[Describe below.]**:
Click or tap here to enter text.

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