

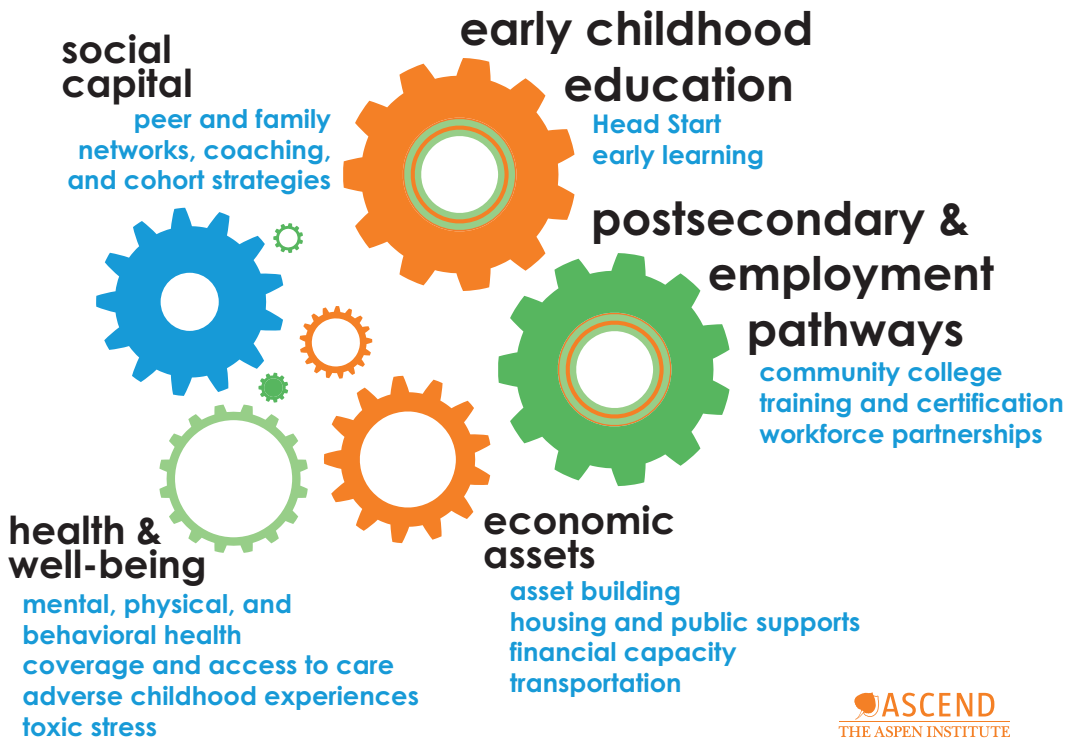


HEALTHY FAMILIES CHECKLIST: HOW COLORADO MEDICAID IMPLEMENTS A TWO- GENERATION APPROACH TO SUPPORT FAMILIES

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Medicaid provides health insurance coverage for low-income children, pregnant women, parents and caregivers across the nation. At this large scale, Medicaid builds the well-being of millions of young children and their families, so they can reach their full potential. Using a two-generation framework, Medicaid can be designed to support the social capital, health and well-being, educational attainment and economic security of children and families, together, so they can maximize their health and thrive.

This checklist outlines specific Medicaid policies and design choices adopted in Colorado to implement a two-generation approach to improve the lives of children and families.



Another core principle of two-generation work is the engagement of families in the design and implementation of ideas and programs. The Colorado Medicaid program convenes two Member Experience Advisory Councils, one in-person and one virtual, to engage Medicaid and CHP+ members to help design programs, develop communications and pursue policy ideas that align with and will meet the needs of members.

MEDICAID AND SOCIAL CAPITAL

Social capital is the web of social connections and resources available to an individual, family or community. These connections and resources can have a powerful impact, both positive and negative, on the health and well-being of children and families. Over the last decade, Colorado Medicaid has expanded eligibility for children, pregnant women and parents and incented services that support the development of high social capital for Medicaid members.

Eligibility Policy

□ **12 months Continuous Eligibility for Children**

Children can establish long term relationships with pediatric providers without disruptions in their health insurance coverage.¹

□ **Expanded Eligibility and Presumptive Eligibility for Pregnant Women**

Pregnant women with incomes up to 185% of the federal poverty level can apply for Medicaid and begin accessing care while their final eligibility is determined.²

□ **Medicaid Expansion**

Adults, parents and caregivers with incomes up to 138% of the federal poverty level can receive primary, preventive and comprehensive health care services allowing them to improve their health before becoming a parent or while being a parent or caregiver.³

Benefit Design

□ **Group Visits**

Group visits allow Medicaid members to establish relationships with other members of their community, gain support and access high quality services.

□ **Prenatal Care** ⁴

□ **Group Drug and Alcohol Abuse Therapy** ⁵

□ **Well Child Checks** ⁶

□ **Nurse Home Visitation**

Nurse home visitation provides first time mothers with the support they need to enhance the early development of their child and get their social and health needs met.⁸

□ **Case Management**

Case management services provide Medicaid enrolled families access to needed services including medical, social, educational and other services.

□ **Healthy Communities** ⁸

□ **Targeted Case Management** ⁹

Delivery System Design and Payment Policy

□ **Accountable Care Collaborative**

Regional Accountable Entities are contracted with to deliver a range of deliberate activities to facilitate health and social services that support member health and well-being, including addressing social needs and informal support systems of members.¹⁰

MEDICAID AND HEALTH AND WELL-BEING

Medicaid provides comprehensive health insurance benefits for children, pregnant women, parents and caregivers. These benefits allow members to establish relationships with health care providers, so they can get care when they are sick or injured or need advice about their health, pre-conception, during pregnancy and in the early years of a child's life. Like other Medicaid programs, Colorado provides the federally mandated benefits and services to support healthy early development and general health. In addition, Colorado has implemented many innovative programs and payment policies to help children and their caregivers thrive.

Benefit Design

□ **Family Planning**

Comprehensive family planning benefits allow women to prevent, delay or plan their pregnancies.¹¹

□ **Healthy Pregnancy**

Prenatal care is available for all pregnant women, with additional services for some.

□ **Prenatal Plus for women with complex risk factors**¹²

□ **Special Connections for women with substance use disorders**¹³

□ **Postpartum Care**

Care aligned with national standards is delivered for women and children following birth.¹⁴

□ **Pediatric and Adult Health**

Comprehensive health services are available to children and adults including physical health services and developmental screening.¹⁵

□ **Behavioral Health**

Behavioral health services are available to all members of the family including depression screening and treatment, substance use disorder screening and treatment.¹⁶

Delivery System Design and Payment Policy

□ **Family Planning**

Long acting reversible contraceptives are paid outside of the encounter rate for federally qualified health centers and rural health centers.¹⁷

□ **Bundled Payments**

Prenatal, delivery, and postpartum services payment to promote continuity of care.¹⁸

□ **Pregnancy Related Depression Screening**

Postpartum depression screening for mothers can be billed to infant's Medicaid identification.¹⁹

□ **Integrated Primary and Behavioral Health Care**

The Accountable Care Collaborative Phase II design allows for six behavioral health visits outside of capitated behavioral health benefit for members with low acuity conditions in primary care settings such as pediatric and obstetric practices.²⁰

□ **Pay for Performance**

Additional payments are made to a variety of health care providers and administrative entities for reaching performance milestones.

□ **Accountable Care Collaborative Phase I Clinical Key Performance Indicators** including post-partum care and well child visits.²¹

□ **Enhanced Primary Care Medical Provider** payments for providers who provide enhanced services including patient centered care plans and integrated care.²²

□ **Primary Care Payment Reform** is a comprehensive approach to paying providers for quality services including pre-natal and post-partum care, well-child visits, depression screening and other national quality indicators.²³

□ **Hospital Quality Incentive Program** measures include rates of cesarean sections and breastfeeding support practices within hospitals.²⁴

MEDICAID AND EDUCATION AND EMPLOYMENT

Medicaid plays a critical role in supporting school readiness for children and the ability to obtain and maintain employment for adults. Access to comprehensive benefits for children allows for the early identification of developmental delays. Access to care allows sick children to get the care they need to get back to school quickly and help the adult in their life maintain their education or employment. Colorado Medicaid has many benefits and programs designed specifically to support education and employment for members.

Benefit Design

□ **Developmental Screenings**

Colorado has adopted the American Academy of Pediatrics Bright Futures Periodicity schedule and provides access to early, periodic, screening, diagnosis and treatment (EPSDT) services.²⁵

□ **Vision and Hearing Benefits**

Children and adults have access to vision and hearing benefits to support their success in school and in the workplace.

□ **Child** ²⁶

□ **Adult** ²⁷

□ **Oral Health Benefits**

Children and adults have access to oral health benefits that support their overall health as well as minimizes pain and impacts on appearance that can affect their success in school and the workplace.

□ **Child** ²⁸

□ **Adult** ²⁹

Delivery System Design and Payment Policy

□ **Early Intervention**

Early Intervention Colorado is managed by the Office of Early Childhood in the Colorado Department of Human Services. A strong interagency partnership allows for aligned delivery system and payment policy for the program.³⁰

□ **School Health Services**

Enrolled School Health Services Program Providers receive federal Medicaid funds for amounts spent providing health services to students who are Medicaid eligible and have an IEP or IFSP, leveraging millions of federal dollars to support student health.³¹

□ **School-based health centers**

School based health centers are clinics operated within a school that provide primary health care and behavioral health services that compliment services provided by school nurses allowing children to get health care during the day without parents losing hours of work.³²

MEDICAID AND ECONOMIC ASSETS

Health insurance protects the economic security of families by covering high cost and unexpected medical expenses. Families experiencing financial hardship may need to rely on public health insurance programs and other assistance programs such as cash assistance and nutrition assistance. Colorado Medicaid has taken significant steps to support family economic security by streamlining application and eligibility determination systems and implementing other financial policies.

Eligibility Policy

□ **Shared Eligibility Systems**

Colorado has an online, coordinated eligibility determination system that includes a mobile app, allowing residents to apply for health, nutrition and other assistance programs.³³

Delivery System Design and Payment Policy

□ **Parent Caregivers**

The parents of children enrolled in Medicaid may become a Certified Nursing Aid and receive payment for providing authorized Medicaid services.³⁴

Program Integrity

□ **Prohibition on Balance Billing**

Colorado law prohibits providers for billing members for the cost or cost remaining after payment by the Medicaid program.³⁵

¹ 10 CCR 20505-10 8.1003.Q allows children under the age of 19 continuous eligibility without regard to changes in income or other factors that would render the child otherwise ineligible [42 CFR 435.926].

² 10 CCR 20505-10 8.100.1 expands eligibility for pregnant women (until 60 days postpartum) to less than 185% FPL; 10 CCR 20505-10 8.100.4.F provides presumptive eligibility for children (under 19) and pregnant women, so they may access services immediately (45 days while the application is processed) [42 CFR 435.1102-3].

³ 10 CCR 20505-10 8.100.3.F provides authority for eligibility.

⁴ Centering Pregnancy and other group prenatal care models can be billed under 99078, TH and through Federally Qualified Health Centers.

⁵ Group substance abuse is available through behavioral health services available through a 1915b waiver and for pregnant women under 10 CCR 8.754.4.A.2 [42 CFR 440.250(p)].

⁶ CPT codes for billing group well child visits: 99411, 99412 (preventive medical counseling and/or risk factor reduction, 30 and 60 minutes), and 97084 (medical nutrition therapy for 2 or more patients).

⁷ State plan authority TN 09-009 and 10 CCR 20505-10 8.749 allows for TCM billing by nurses enrolled in Nurse Family Partnership, and nursing scope of practice under 10 CCR 20505-10 8.200.2.D. was expanded to "general" physician supervision, allowing nurses to deliver more in-home services. Billing Manual - https://www.colorado.gov/pacific/sites/default/files/CMS1500_NHVP%20v1_1.pdf

⁸ 10 CCR 8.280.3 allows EPSDT outreach to be delivered by local vendors who case manage services for EPSDT eligible members--includes connecting members to medical services, special Medicaid programs or waivers, and other social services [42 CFR 441.56]; State Medicaid Manual, Chapter V).

⁹ 10 CCR 20505-10 8.603.5.N authorizes targeted case management services to be reimbursed for individuals enrolled in HCBS Developmental Disabilities and Children's Extensive Support waiver programs.

¹⁰ Accountable Care Collaborative Care Coordination (contract section 11.3) Population Health Management (contract sections 11.2). <https://www.colorado.gov/pacific/hcpf/accphase2>

¹¹ 10 CCR 20505-10 8.700 allows the state reimburses for all FDA-approved contraceptives without requiring prior approval.

¹² 10 CCR 20505-10 8.748 provides enhanced benefits for women with complex risk factors which allows for access to an interdisciplinary team of dietitian, care coordinator and mental health professional in addition to obstetric care [42 CFR 440.250(p)].

¹³ 10 CCR 20505-10 8.745 authorizes Special Connections--Behavioral Health and Substance Use Disorder Services for Pregnant and Parenting women (Outpatient and Residential, with sites that allow infants to reside with mothers in treatment) [42 CFR 440.250(p)].

¹⁴ 10 CCR 20505-10 8.732 authorizes postpartum care be covered at a frequency that follows nationally recognized standards of care.

¹⁵ 10 CCR 20505-10 8.280 authorizes the EPSDT program providing medically necessary services for all members under 21 (42 CFR 441).

¹⁶ 10 CCR 20505-10 8.212 authorizes the community behavioral health program <https://www.colorado.gov/pacific/hcpf/behavioral-health-services>.

¹⁷ 10 CCR 20505-10 8.700.6.B allows for the reimbursement of LARCs separately from the FQHC encounter rate; 10 CCR 20505-10 8.740.7.C allows for the reimbursement of LARCs separately from RHC encounter rates.

¹⁸ Obstetrical Care Billing Manual defines policy of global payment for prenatal, delivery and postpartum care payment structure. https://www.colorado.gov/pacific/sites/default/files/CMS1500_OB%20v1_2.pdf

¹⁹ August 2014 Provider Bulletin authorizes billing https://www.colorado.gov/pacific/sites/default/files/Bulletin_0814_B1400355.pdf

²⁰ <https://www.colorado.gov/pacific/hcpf/accphase2>

²¹ Historical: <https://www.colorado.gov/pacific/sites/default/files/KPI%20Incentive%20Payment%20Fact%20Sheet.pdf> ; Current: https://www.colorado.gov/pacific/sites/default/files/Performance%20Measurement%20fact%20sheet%20June%202018_1.pdf

²² <https://www.colorado.gov/pacific/sites/default/files/Enhanced%20Primary%20Care%20Medical%20Provider%20Definitions.pdf>

²³ <https://www.colorado.gov/pacific/hcpf/primary-care-payment-reform-3>

²⁴ <https://www.colorado.gov/pacific/sites/default/files/2018%20HQIP%20Program%20Details.pdf>

²⁵ 10 CCR 20505-10 8.240.4.A.3 includes developmental screening as part of EPSDT services, <https://www.colorado.gov/pacific/sites/default/files/EPSDT%20Periodicity%20Schedule.pdf> .

²⁶10 CCR 2505-10 8.280.4.A.2-3c includes vision screening in the EPSDT services package. Eyeglasses for children are authorized by 8.20.5.D-E. 10 CCR 2505-10.2.e.iii-iv authorizes audiology services for children.

²⁷10 CCR 2505-10 8.203 authorizes coverage for annual eye exams for adults and indicates that eyeglasses for adults are covered when the members has had past eye surgery. 8.200.3.D.2.g.vii outlines that hearing exams and evaluations for adults are covered when the member has a concurrent medical condition.

²⁸10 CCR 2505-10 8.202 authorizes dental services for children

²⁹10 CCR 2505-10 8.201 authorizes dental services for adults, CRS 25.5-5-207 authorizes the adult dental benefit

³⁰10 CCR 2505-10 7.900 authorizes Early Intervention Program, http://coloradoofficeofearlychildhood.force.com/eicolorado/EI_Home?lang=en

³¹10 CRS 25.5-5-318 authorizes the School Health Services program, <https://www.colorado.gov/pacific/hcpf/school-health-services>

³²CRS 25.5-5-301.5 authorizes school based health centers as providers of clinic services. Because they are enrolled as primary care and behavioral health care providers, the rules pertaining to physician and behavioral health services apply.

³³Colorado PEAK <https://coloradopeak.secure.force.com/>

³⁴10 CCR 2505-20-8.520.5.B.13.h allows family members or caregivers who have a Certified Nursing Assistant (CNA) credential to be reimbursed for CNA services. <https://www.colorado.gov/pacific/cdphe/parents-their-childs-certified-nursing-aide-cna>

³⁵CRS 25.5-4-301 (II), [42 U.S.C 139a (a)(14)], <https://www.colorado.gov/pacific/hcpf/policy-statement-billing-medicaid-members-services>.



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Gretchen is fiercely passionate about public leadership and the awesome opportunity everyone has to improve our communities. She is thrilled to return to consulting and work with clients to meet their goals. To meet client's diverse needs, in addition to her own involvement, Gretchen maintains a network of partnerships with other skilled consultants. Previously, as Medicaid director and deputy executive director at the Colorado Department of Health Care Policy and Financing, Gretchen experienced first hand the responsibility of administering public programs to meet the needs of members. She navigated complex regulatory challenges, worked with elected officials, and directly engaged with stakeholders. She also worked across sectors, partnering with other state and local agencies to align policies and programs to maximize impact. Gretchen is fiercely passionate about public leadership and the awesome opportunity everyone has to improve our communities. Gretchen is a graduate of the Colorado College and the University of Washington School of Public Health and Community Medicine. She lives in Denver with her husband and two sons.

“The fellowship helped me to build meaningful relationships that I have drawn on since the end of our formal time together. I now have a network of colleagues around the state who lead family serving work at all levels - local, regional, statewide and in the government and non-profit sector. I consider this network a huge asset not only for their content knowledge, but also for their friendship and their passion for serving kids and families.”