

### Elimination of 5 Year Bar for Legally Present Pregnant Women and Children

Frequently Asked Questions

In 2009, Colorado passed HB 09-1353 which eliminates the five-year residency bar for Medicaid and Child Health Plan *Plus* (CHP+) eligibility for legally present children, and eliminates the five-year residency bar for CHP+ eligibility for legally present pregnant women. The implementation of this law was contingent on the Department of Health Care Policy and Financing state funding being made available. In 2014, funding for HB 09-1353 was provided effective July 1, 2014.

The following frequently asked questions seek to address questions regarding the Department's implementation plan for HB 09-1353.

#### Does the Department need federal approval to implement HB 09-1353?

Yes, although funding was granted, the Department does not have Federal authority to implement this policy. The Department must request approval from the Centers for Medicare and Medicaid Services (CMS) through a State Plan Amendment prior to implementing this policy.

#### Does the implementation of this new policy require a rule change?

Yes, the Medical Services Board must review and approve this new policy through a rule change prior to implementing this policy.

# Can qualifying individuals gain coverage now through Medicaid or CHP+ under this policy?

No, although funding was granted, the Department does not have Federal authority to implement this policy. The Department must request approval from the Centers for Medicare and Medicaid Services (CMS) through a State Plan Amendment prior to implementing this policy. This means the Department is unable to provide coverage to these individuals effective as of July 1, 2014.

# Do changes need to be made to the eligibility system in order to implement this policy change?

Yes, changes must be made to the eligibility system to implement this policy. The Department has already initiated steps to incorporate this policy change into the project plan.

#### Has the Department developed a plan to implement this policy change?

The Department is currently working to develop a plan to implement this policy change. The plan will include soliciting stakeholder feedback, crafting and adopting rules through the Medical Services Board, requesting CMS approval on the State Plan Amendment and others.

#### Will qualifying individuals receive coverage on July 1, 2014?

No, qualifying individuals will not receive coverage on July 1, 2014. Although funding was granted, the Department does not have Federal authority to implement this policy. The Department must receive approval from the CMS through a State Plan Amendment and a new rule must be adopted through the Medical Services prior to implementing this policy.

### What is the Department's expected timeline for implementation of this policy change?

The general timeline for implementation is as follows:

- Policy change must be incorporated into the CBMS project plan: Summer 2014
- Initial consultation with Centers for Medicare and Medicaid Services (CMS): early Fall 2014
- Initial stakeholder engagement: Fall 2014
- Stakeholder feedback on proposed rule: Winter 2015
- Presentation of proposed rule to Medical Services Board: Spring 2015
- State Plan Amendment finalized and sent to CMS for approval: late Spring 2015
- Update to CBMS to reflect new policy: early Summer 2015

## Has the 5 year bar residency requirement been removed for pregnant women who qualify for Medicaid?

Yes, legal permanent residents who are pregnant and meet all program criteria to be eligible for **Medicaid** are exempt from meeting the 5 year bar.

## If a qualifying individual applies prior to implementation of the policy (tentatively Summer 2015), will they be denied?

Yes, an individual applying prior to the implementation of this policy will be denied based on the five year residency requirement.

# If a qualifying individual applies prior to implementation of the policy and receives a denial, will they need to reapply after the implementation of the policy?

Yes, a qualify individual will need to reapply for Medical Assistance after the policy is implemented (tentatively Summer 2015).

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