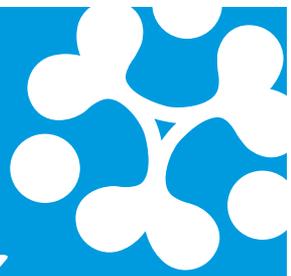


Member Handbook



Health First
COLORADO™

Colorado's Medicaid Program

Dear Member,

Welcome to Health First Colorado, Colorado's Medicaid program. Health First Colorado is public health insurance for Coloradans who qualify. It is funded jointly by the federal government and Colorado state government, and is administered by the Colorado Department of Health Care Policy and Financing. To learn about the Department, visit Colorado.gov/hcpf.



This Member Handbook explains your Health First Colorado benefits. Use it to learn more about your coverage.

We're here to help. For questions, call the **Health First Colorado Member Contact Center** at **800-221-3943** (State Relay 711) Monday to Friday, 7:30 a.m. to 5:15 p.m. The call is free.

Visit us online anytime at HealthFirstColorado.com.

Thank you,
Susan E. Birch, MBA, BSN, RN
Executive Director

To read more about the topics in this handbook, go to HealthFirstColorado.com. You can also use the **PEAKHealth** app from your cell phone.



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Large print or other languages

If you need this handbook in large print, in other formats or languages, read aloud, or need another copy, call **303-839-2120** or **888-367-6557**. For TDD/TTY, call 888-876-8864. Call Monday to Friday, 8 a.m. to 5 p.m. The call is free.

Si usted habla **español**, tenemos a su disposición servicios de asistencia, gratuitos, en su idioma. Llame al **800-221-3943** (State Relay 711).

Nếu bạn nói **Tiếng Việt**, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số **800-221-3943** (State Relay 711).

1 Let's get started

Now you can manage your Health First Colorado benefits on the go with the PEAK website and PEAKHealth app. Both give you easy access to what you need 24 hours a day, every day of the year.

Step 1. Create an account



Go to Colorado.gov/PEAK. Create a username and password.

Step 2. Manage your health care



If you have a mobile device, download the PEAKHealth app for easy access to tools to manage your health care. PEAKHealth is the easiest way to manage your coverage.



App and website comparison chart

	PEAK <i>Health</i> app	PEAK website
Get your mobile medical card with coverage status	■	
Find providers and add them to your favorites	■	
Learn more about your benefits	■	
Read health articles	■	
Call the Nurse Advice Line or smoking QuitLine	■	
Send a paystub	■	■
Update your income or job	■	■
Change your mailing address, phone number, email	■	■
Set your communication preferences	■	■
Add or remove family members	■	■
Chat with a call center representative	■	■
Apply for coverage		■
View your coverage letters		■
Order a medical card		■
Complete your redetermination (renewal)		■
Update expenses and assets for Long Term Supports and Services program		■

Your Health First Colorado card

Your mobile card:

- Is available right away in the *PEAKHealth* app
- Is an easy way to show providers your coverage
- Tells you if your coverage is active or inactive. If your coverage is **inactive**, it has stopped and you do not have current benefits. You do not need to reapply. Contact your Eligibility Site. You can also appeal. Read more in **Part 6: Appeals**.

An **Eligibility Site** is a full-service place, like a county office or medical assistance site, where you can apply for and update your Health First Colorado coverage. Find an Eligibility Site near you at Colorado.gov/apps/maps/hcpf.map.

If you want a paper card, you can print one from Colorado.gov/PEAK. Or you can ask us to mail you a card. Call the **Health First Colorado Member Contact Center** at **800-221-3943** (State Relay 711) Monday to Friday, 7:30 a.m. to 5:15 p.m. The call is free.

You do **not** need a card to get services. You **do** need your date of birth and either your Social Security number or your Health First Colorado ID Number (Medicaid ID). Your ID Number is a letter followed by 6 numbers.



Health care coverage and plans

Health First Colorado covers all of your health care with 3 types of health plans:

- Physical health plan
- Dental health plan
- Behavioral health plan

A **health plan** is a group of doctors, hospitals and other providers who work together to get you the health care you need.

You are automatically enrolled in your dental health plan and behavioral health plan. You need to choose your physical health plan. You can get services before you choose.

Physical health plan

A **physical health plan** covers health care having to do with the body, including vision services and prescription drugs. Your choice of physical health plans depends on where you live. You may choose a Health Maintenance Organization (HMO) or an Accountable Care Collaborative (ACC) plan. In some areas, you may only choose an ACC. An ACC plan is also called a Regional Care Collaborative Organization (RCCO).

All plans offer the same basic benefits and care coordination. With some plans, you may get more benefits and support. You can find a comparison chart online at [Colorado.gov/hcpf/choose-plan](https://colorado.gov/hcpf/choose-plan).

Enrollment counselors can help you choose or change your physical health plan. They can also help you find providers that meet your needs.

Call **303-839-2120** or **888-367-6557**.

For TDD/TTY, call 888-876-8864. Call Monday to Friday, 8 a.m. to 5 p.m. The call is free.

Changing your physical health plan

After you qualified for Health First Colorado, you may have chosen or been assigned to a physical health plan. You can call us to change your plan:

- Within **90 days** of your health plan enrollment date. You may get an enrollment letter with the enrollment date on it. If you do not know your enrollment date, call us at **303-839-2120** or **888-367-6557**. For TDD/TTY, call 888-876-8864.
- During open enrollment. Your **open enrollment** period is the **2 months** before your birth month. For example, if your birthday is June 5, you have from April 1 to May 31 to change your plan each year.
- For cause, at any time. **Cause** may include:
 - » You move outside the physical health plan's service area
 - » Due to moral or religious reasons, the plan does not cover the service you need
 - » You need to get related services at the same time and they are not all available through your plan's network. Your provider decides that getting the services separately will put your health at risk.

- » You have to change the support provider for your residence, institution or employment because they moved outside your plan's network (if you get Long Term Supports and Services)

For other reasons or for more information, call us at **303-839-2120** or **888-367-6557**. For TDD/TTY, call 888-876-8864.

If you change your plan, your new plan starts the first day of the next month. For example, if you change your plan on May 2, your new plan starts June 1. You will be in the old plan until your new plan starts. If you change plans during open enrollment, the new plan starts the first day of your birth month.

Dental health plan

Health First Colorado covers your dental services through DentaQuest. DentaQuest providers are available all across Colorado. If you need help choosing or changing your dental provider, call DentaQuest Member Services at **855-225-1729** (State Relay 711). Or go to [DentaQuest.com](https://www.dentaquest.com).

Behavioral health plan

Health First Colorado covers your mental health and substance use care services through a Behavioral Health Organization (BHO). We automatically enroll you in a BHO near you. You can find out the name and contact information for your BHO on the list that came with this booklet or online at [Colorado.gov/hcpf/behavioral-health-organizations](https://colorado.gov/hcpf/behavioral-health-organizations).

Other insurance

If you have other insurance and Health First Colorado, your other insurance pays first. If you have access to other insurance, we may pay for some or all of your premiums, deductibles, co-pays and coinsurance. To find out more visit [MyCOHibi.com](https://mycohibi.com) or call **855-692-6442**.

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Providers and getting care

Your Primary Care Provider (PCP)

Your **Primary Care Provider (PCP)** is a doctor, nurse, nurse practitioner, clinic or other provider that helps you stay healthy. Your PCP will get to know you, your medical history and your health goals. You should see your PCP:

- For physical exams
- For preventive care services
- When you have questions or concerns about your health
- When you are not feeling well and need medical help

Participating providers

It is important that the providers you choose accept Health First Colorado members. This means they must be **participating providers** in your health plan's network. A **network** is a group of providers that agree to give health care services and products to plan members.

If you have Health First Colorado **and** other health insurance, your providers also need to participate in that insurance network. **Health insurance** covers your costs for check-ups or if you get sick.

A **non-participating provider** is a provider, facility or supplier that does **not** give health care services and products to plan members. If one of your providers is not a Health First Colorado participating provider, you can ask them to join the network.

For family planning services you can go to any provider, even a non-participating provider.

Choosing a PCP

If your PCP is a participating provider (accepts Health First Colorado), you may be able to keep the PCP you have now. To find out, call your PCP. You can also call us to find out if your PCP accepts Health First Colorado. You can change your PCP at any time.

Call **303-839-2120** or **888-367-6557**. For TDD/TTY, call 888-876-8864. Call Monday to Friday, 8 a.m. to 5 p.m. The call is free.

If your physical health plan is Denver Health or Access Kaiser, tell your health plan you want to keep your provider.

If your physical health plan is Rocky Prime, tell your provider you want to keep him or her.

Finding participating providers

There are many ways to find a PCP or other providers, such as specialists. A **specialist** is a provider who works in one area of medicine, like a surgeon.

- Search for all types of providers in the *PEAKHealth* app or go to [HealthFirstColorado.com/find-doctors](https://www.healthfirstcolorado.com/find-doctors)
- To find physical health providers, call **303-839-2120** or **888-367-6557** (TDD/TTY 888-876-8864)
- To find dental providers, call DentaQuest's Member Services at **855-225-1729** (State Relay 711)
- To find behavioral health providers, call your BHO. You can find your BHO on the list that came with this booklet or online at [Colorado.gov/hcpf/behavioral-health-organizations](https://www.colorado.gov/hcpf/behavioral-health-organizations).

Getting to your appointment

If you don't have a way to get to and from your health care services and appointments, you may be able to get a free ride. This service, called **Non-Emergent Medical Transportation**, is **not** for emergencies. If you are having an emergency, call **911**.

To get a ride if you live in:	Call:
Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, Jefferson, Larimer or Weld County	Veyo at 855-264-6368 (toll free) State Relay 711
Eagle, Grand, Jackson, Pitkin, Routt or Summit County	Mountain Ride Transportation Resource Center at 844-686-7433 (toll free) State Relay 711
Any other county	Call your local county Department of Human or Social Services Office. To find an office near you, go to Colorado.gov/HCPF/ Counties .



Canceling and rescheduling

If you can't make your appointment, call your provider's office right away. Most providers ask you to call 24 hours before your appointment if you have to cancel.

Referrals

You may need a referral from your PCP or plan to see other providers, such as specialists. You can call your PCP to find out.

You do not need a referral to see behavioral health, dental or family planning providers.

Second opinions

You have the right to a second opinion. You do not need a referral to see a participating provider for a second opinion about your care.

Advance directives

Advance directives are written instructions to those caring for you that tell them what to do in case you can't make decisions for yourself. They list the type of care you do or do not want if you become so ill or injured that you cannot speak for yourself. Your PCP can tell you more and give you an advance directives form. Or go to [CoBar.org/For-the-Public/Advance-Medical-Directives](https://www.co-bar.org/For-the-Public/Advance-Medical-Directives).

The **Health First Colorado Nurse Advice Line** gives you free medical information and advice 24 hours a day, every day of the year. Call **800-283-3221** (TTY 303-389-1210).

Nurse Advice Line

The **Health First Colorado Nurse Advice Line** gives you free medical information and advice 24 hours a day, every day of the year. Call **800-283-3221** (TTY 303-389-1210) to:

- Talk to a nurse who will answer medical questions, give care advice, and help you decide if you should see a provider right away
- Get help with medical conditions such as diabetes or asthma, including advice about what kind of provider may be right for your condition

The Nurse Advice Line **cannot** help with clinic appointments or medication refills. Call your provider's office if you need help with these.

Urgent care

Urgent care is for a sickness or injury that needs medical care quickly. If it's not an emergency, but you need medical attention quickly, first call your PCP. Your PCP may see you in their office or help you over the phone. If you're not sure if your symptoms are urgent or you need help deciding, call the free **Nurse Advice Line** at **800-283-3221** (TTY 303-389-1210).

Emergencies

An **emergency** is when an illness or injury is so serious that your (or your unborn baby's) health, bodily functions, body organs or body parts may be in danger if you don't get medical care right away. This includes childbirth labor and delivery. If you're not sure, or need help deciding if it's an emergency, call the **Nurse Advice Line** at **800-283-3221** (TTY 303-389-1210).

If you need it, you can get emergency services in any emergency department anywhere in the United States, 24 hours a day, every day of the year. This includes ambulance and emergency room care. If you are having an emergency, call **911**. Or go to the nearest emergency room. You do **not** need pre-approval. **Pre-approval** is getting approval for services before you use them.

You never have to pay more than the co-pay for covered services.

Ready to quit smoking?

Get **free** nicotine patches, gum and counseling. Call **800-QUIT-NOW** (800-784-8669) to find out how. Or go to CoQuitLine.org. It's free!



Co-pays

For some services, you may have a **co-pay**. It is a fixed amount you pay when you get a covered health care service. The co-pay amount depends on the service. There are no co-pays for behavioral health or dental services.

You never have to pay more than the co-pay for covered services. This is true even if you also have other insurance. You do have to pay for services that are not covered. It's the law!

If you cannot pay the co-pay right away, the provider must still see you. You may have to pay the co-pay later.

These Health First Colorado members do **not** have co-pays:

- Children 18 years old and younger
- Women in the maternity cycle (pregnancy, labor, birth and up to 6 weeks after delivery)
- Members who choose Denver Health as their physical health plan
- Members who live in a nursing home
- Members who get hospice care
- American Indian or Alaska Native members
- Former foster care children ages 18 through 26 for medical services



PEAKHealth has fitness, happiness, health, nutrition and parenting tips and articles to help you stay healthy!

Co-pay chart

Service type	Service	Co-pay
Inpatient hospital services	Care at a hospital when you stay overnight	\$10 per day up to half of the Medicaid cost for the first day of care in the hospital
Outpatient hospital services	Care at a hospital when you do not stay overnight Care in the emergency room when it is not an emergency	\$3 each visit
PCP and specialist services	Care you get from your PCP or specialists outside of a hospital	\$2 each visit
Clinic services	Visit to a health center or clinic	\$2 each day of service
Laboratory services	Blood tests and other lab work	\$1 each day of service
Radiology services	X-rays	\$1 each day of service Dental X-rays do not have co-pays
Prescription drugs or services (each prescription or refill)	Medications	\$1 for generic and \$3 for brand name drugs Same co-pays for a 3-month supply by mail

Premiums

Some members pay Health First Colorado a premium (monthly cost for coverage). Members in the Children with Disabilities Buy-In Program or the Working Adults with Disabilities Program have monthly premiums.

Estate recovery

Some members may have to pay back Health First Colorado for services they received. If a member dies, payment for those services comes from the member's estate.

- Members of any age who lived in a nursing home or assisted living facility at death:
 - » Health First Colorado must recover (get paid back) from the estate all payments made by Health First Colorado
- Members over age 55 at death:
 - » Health First Colorado must recover from the estate all payments for nursing facility services, home and community-based services, and related hospital and prescription drug services

To learn more about estate recovery and exemptions, contact your county. You can find out the name and contact information for your county at Colorado.gov/HCPF/Counties.

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Benefits and services

Health First Colorado coverage gives you 3 kinds of basic benefits:

1. Physical health
2. Dental
3. Behavioral health

Any medically necessary service to treat any physical, dental or behavioral diagnosis is covered when you get the service from a participating provider. You may need pre-approval before getting some services. Your provider gets pre-approval from Health First Colorado.

Medically necessary services include any program, product or service that will (or is reasonably expected to) prevent, diagnose, cure, correct, lower or help with:

- Pain and suffering
- Physical, mental, cognitive or developmental effects of an illness, injury or disability

These services may also include treatment that is observation only.

Medically necessary services do **not** include:

- Treatments that are untested or still being tested
- Services or items not generally accepted as effective, services outside the normal course and length of treatment, or services that don't have clinical guidelines
- Services for caregiver or provider convenience

Members 20 years old and younger get extra benefits and services. Read **Part 5: Child and youth well care** for more information.

Members who have a disability may get Long Term Supports and Services.

Physical health benefits

Basic physical health benefits are listed below. To see a full list, go to HealthFirstColorado.com/benefits-services. Benefits with a star (*) may need pre-approval.

- Acute home health therapies and services
- Allergy testing and injections
- Ambulance services for an emergency
- Transportation to your appointments and services
- Audiology
- Durable Medical Equipment (DME)* (see definition)
- Emergency room visits
- Family planning office visits and counseling (you can go to a non-participating provider)
- Habilitative therapies* (see definition)
- Rehabilitation therapies (see definition)
- Home health care (see definition)*
- Hospice care (see definition)
- Inpatient medical and surgical care
- Lab and radiology*
- Long-term home health therapies and services*
- Outpatient hospital services
- Outpatient surgery*
- PCP visits
- Pediatric services, including oral and vision care
- Prescription drugs*
- Private duty nursing*
- Skilled Nursing Services (see definition)
- Specialist visits
- Telemedicine
- Urgent care
- Vision services*
- Women’s health services

Durable Medical Equipment (DME) — Reusable medical equipment used when there is a medical need for the treatment or therapy for an illness or physical condition. Examples include oxygen, wheelchairs, walkers and bathroom or bedroom safety equipment.

Habilitative therapies — Outpatient physical, occupational and speech therapies that help you keep, learn or improve skills and functioning for daily living. These services are covered for children and youth ages 20 and younger and for some adults. They always require pre-approval. Talk to your provider to find out if you qualify.

Home health care — Hospital or nursing facility services given in your home for an illness or injury.

Hospice care — Care that focuses on comfort and support for people in the end stage of life.

Rehabilitation therapies — Physical, occupational and speech therapies that help you recover from an acute injury, illness or surgery.

Skilled Nursing Services — Health care services you need that can only be provided or supervised by a Registered Nurse or other licensed professional. A doctor must order Skilled Nursing Services. Services may be to improve or keep current health or to stop health from getting worse.



Vision benefits

Vision services are a physical health benefit. Basic vision benefits are listed below. To see a full list, go to [HealthFirstColorado.com/benefits-services](https://www.healthfirstcolorado.com/benefits-services).

Vision benefit	Ages 20 and younger	Ages 21 and older
Eye exams	Covered	Covered
Glasses	Covered	Covered after eye surgery only
Glasses repair or replacement	Covered	Not covered
Contact lenses	Pre-approval needed	Covered after eye surgery only
Contact lens replacement	Covered	Not covered
Ocular prosthetics (artificial eyes)	Pre-approval needed	Pre-approval needed
Low vision aids	Covered	Covered after eye surgery only

Prescription drug benefit

Prescription drugs are physical and behavioral health benefits. **Prescription drugs** are medicines or drugs your doctor prescribes (orders) for you. They treat a condition or illness. Basic prescription drug benefits are listed below. Prescription drugs need your provider's approval. Talk to your provider about which prescription drugs are covered. Or go to [Colorado.gov/hcpf/medicaid-pharmacy-benefits](https://colorado.gov/hcpf/medicaid-pharmacy-benefits). Benefits with a star (*) may need pre-approval.

- Brand name or generic drugs*
- Contraceptives and emergency contraceptives

You can get up to a 3-month mail order supply of maintenance medicines (drugs for chronic conditions). They can come from participating local and out-of-state Health First Colorado pharmacies. Talk to your provider about getting a prescription for a mail order 3-month supply. That way, you only pay one co-pay for the 3-month supply.

Dental benefits

Basic dental benefits are listed below. Members ages 21 and older are covered for services totaling up to \$1,000 between July 1 and June 30 of each year. To learn more, call DentaQuest Member Services at **855-225-1729** (State Relay 711). Or go to DentaQuest.com. Benefits with a star (*) may need pre-approval.

- Complete dentures*
- Complex dental services*
- Diagnostic and preventive services
- Emergency dental care
- Partial dentures*
- Restorative and other basic services

Behavioral health benefits

Basic mental health and substance use care benefits are listed below. To learn more, talk to your BHO. You can find your BHO on the list that came with this booklet or online at Colorado.gov/hcpf/behavioral-health-organizations. Benefits with a star (*) may need pre-approval.

- Alcohol and drug: screening counseling, group counseling by a provider, targeted case management*
- Behavioral health assessment*
- Emergency and crisis services*
- Inpatient psychiatric hospital services for a mental health diagnosis*
- Medication-assisted treatment*
- Outpatient day treatment, non-residential*
- Pharmacologic management of a patient's medication*
- Psychotherapy: family, group or individual*
- School-based mental health services*
- Social ambulatory detoxification*

If you have a mental health or substance use crisis, or you or someone you know is thinking of suicide, and you cannot reach your provider or BHO, call **Colorado Crisis Services** at **844-493-TALK** (844-493-8255). Or text TALK to 38255*. You can call or text 24 hours a day, every day of the year.

For questions about benefits, visit our website at HealthFirstColorado.com/benefits-services. You can also call the **Health First Colorado Member Contact Center** at **800-221-3943** (State Relay 711) Monday to Friday, 7:30 a.m. to 5:15 p.m. The call is free.



Child and youth well care

Health First Colorado automatically gives child and youth members ages 20 and younger special health care services. It makes sure they get the right preventive, dental, mental health, developmental and specialty services.

Members ages 20 and younger may have different co-pays depending on their age and the type of service:

- Members ages 18 and younger do not have co-pays
- Members ages 19 and 20 may have a co-pay for some services

Children in the county Department of Social/Human Services custody have these same benefits and co-pays.

For members ages 20 and younger, any medically necessary service to treat any physical, dental or mental diagnosis is covered. Covered services include:

- Well-child visits and teen check-ups
- Developmental evaluations
- Behavioral evaluations and therapies
- Immunizations (shots)
- Lab tests, including lead poisoning testing
- Health and preventive education
- Vision services
- Dental services
- Hearing services

These services are called Early and Periodic Screening, Diagnostic and Treatment (EPSDT). A service may be covered even if it is not a Health First Colorado benefit or has service limits. Your provider must ask Health First Colorado for the medically necessary service. Health First Colorado will read the medical necessity request and approve or deny it. You must still see licensed participating providers and get needed pre-approvals.

Well-child check-ups

Well-child check-ups are more complete than sports physicals. They make sure your child or teen is growing up healthy. The provider can identify physical, dental and behavioral health risks early and correct, reduce or control health problems. Your child also gets needed shots and screenings at the right ages.

Your child should get well-child check-ups at these ages:

- 2-4 days after birth
- 1 month
- 2 months
- 4 months
- 6 months
- 9 months
- 12 months
- 15 months
- 18 months
- 24 months
- 30 months
- Once a year from 3 to 20 years old

Well-child check-ups include:

- A complete history and head-to-toe physical exam
- Age-appropriate shots (Colorado follows the American Academy of Pediatrics Bright Futures Periodicity schedule)
- Lab tests, including lead poisoning testing
- Health education
- Vision and hearing screening
- Oral health screening
- Behavioral health assessment

Lead poisoning testing

All children enrolled in Health First Colorado must get lead poisoning testing at 12 and 24 months or between the ages of 36 and 72 months if they were not tested earlier.

Dental check-ups

By age 1, or when your child gets a first tooth, your child needs dental health check-ups and cleanings every 6 months.

Your child can get dental services such as:

- Office visits
- Teeth cleanings
- Fluoride treatment
- Dental sealants
- Space maintainers
- Oral examinations
- X-rays
- Dental fillings
- Crowns
- Oral surgery procedures
- Extractions
- Root canal treatment
- Gum treatment
- Dentures (false teeth)

Help getting child and youth well care services

Family Health Coordinators help members ages 20 and younger and pregnant women get the services they need. Your Family Health Coordinator can:

- Tell you about the services
- Find providers
- Coordinate services for you
- Connect you to other community services or programs such as food banks, housing agencies, child care, Head Start, Health Care Program for Children with Special Needs (HCP), and the Special Supplemental Nutrition Program for Women, Infants and Children (WIC)

Family Health Coordinators **cannot**:

- Decide or approve benefits or coverage
- Help you apply for or get Temporary Assistance for Needy Families (TANF), Supplemental Nutrition Assistance Program (SNAP) or Cash Assistance

To apply for any of the programs listed above, go to Colorado.gov/PEAK.

To find your local Family Health Coordinator, go to Colorado.gov/hcpf/healthy-communities. Or call the **Health First Colorado Member Contact Center** at **800-221-3943** (State Relay 711).

Mental health

If it appears your child needs residential treatment, call your Behavioral Health Organization (BHO) for an assessment. The Child Mental Health Treatment Act says your BHO must assess your child and decide on treatment in a timely way. If you don't like the decision, you can appeal (see **Part 6: Appeals**). Ask your BHO how to appeal.

If you lose your Health First Colorado coverage and cannot afford needed mental health treatment, call the Office of Behavioral Health at **303-866-7400**. The Child Mental Health Treatment Act may be able to help.



6 Appeals

You have a right to file an appeal. You can also choose someone to file one for you. You can file an **appeal** if you lose your **eligibility** (coverage), are denied a benefit, or disagree with any decision about your health insurance.

You can appeal a **coverage** decision within **60 days** if:

- Your Health First Colorado coverage changes or ends
- You are not given notice of a decision to change or end your coverage
- You are not given notice of a decision to change or end your coverage within required times
- A decision about your coverage is wrong

You can appeal a **service** decision within **60 days** if:

- A service you get is set to be reduced, suspended or stopped
- A type or level of service you requested is denied or limited
- You are not given notice of a service decision or a reply to your complaint
- You are not given notice of a service decision or a reply to your complaint within required times
- Your request to get care outside your plan network is denied, and you live in a rural area where there are no providers in your health plan
- Payment for your health services is denied

You cannot lose your coverage because you filed an appeal. That's the law!



Notice of Action

You will get a letter called a **Notice of Action** for any decision that affects your Health First Colorado coverage or services. It tells you what our decision is, why we made the decision, and how to appeal if you disagree.

Filing an appeal

If you disagree with a Health First Colorado coverage or service decision, you must appeal within **60 days** of the date on the Notice of Action letter.

You can start your appeal by telling whoever made the decision that you disagree with it. Then you must send a written, signed appeal. You may appeal to whoever made the decision, including your health plan or Eligibility Site. An appeal to your Eligibility Site is called a County Conference. Look for your Eligibility Site on the Notice of Action letter. You can also find your Eligibility Site at [Colorado.gov/apps/maps/hcpf.map](https://colorado.gov/apps/maps/hcpf.map).

You can also ask for a State Hearing within **60 days** of the date on the Notice of Action letter if:

- You decide you do not want to appeal to your health plan or Eligibility Site, or
- You appeal to your health plan or Eligibility Site and get a decision you disagree with, or don't get a decision

To learn more about State Hearings, go to page 31.

Getting help with an appeal

If you are appealing the decision for:	You can get help from:
Health First Colorado eligibility or coverage	<p>Your Eligibility Site listed on your Notice of Action</p> <p>Colorado Legal Services Phone: 303-837-1313</p>
The level or type of service	<p>Your Health Plan listed on your Notice of Action</p> <p>Ombudsman for Health First Colorado Managed Care (RCCOs, HMOs, BHOs) Phone: 303-830-3560 or 877-435-7123 TDD/TTY: 888-876-8864 Email: help123@maximus.com</p> <p>DentaQuest DentaQuest Member Services Phone: 855-225-1729 State Relay 711</p> <p>Colorado Legal Services Phone: 303-837-1313</p>

After you appeal to your health plan

If you appeal to your health plan, you will get a letter within 2 business days. The letter will say they received your appeal. In most cases, you will get a decision within 10 business days from when they received your letter.

Asking your health plan for an expedited (rush) appeal

If you feel that waiting 10 business days for a health plan decision on your appeal would seriously affect your life or health, you may ask for an expedited (rush) appeal. Your health plan will decide if you can get an expedited appeal within 3 business days of getting your request. Your health plan will send you a letter within 2 business days if they deny your expedited appeal request.

State Hearing

You can ask for a State Hearing or choose someone to ask for you. A State Hearing is a court hearing with an Administrative Law Judge.

You must ask for a State Hearing within **60 days** from the date on the Notice of Action letter. Requests must be in writing and signed. Send your request to:

Office of Administrative Courts

1525 Sherman Street, 4th Floor

Denver, CO 80203

Phone: 303-866-2000

Fax: 303-866-5909

The Office of Administrative Courts will send you a letter about the hearing. They will give you a hearing date. Before and during the hearing you or the person you choose can give information to support your case. The Judge will make an Initial Decision. The Department of Health Care Policy and Financing will review the Judge's decision and issue a Final Agency Decision.

Keeping Health First Colorado during an appeal

To keep your Health First Colorado coverage while you appeal, you must ask for an appeal before your coverage ends. Look at your Notice of Action letter for your coverage end date. If you did not get a Notice of Action before the date your coverage ended, you may ask to keep your coverage during your appeal. If you lose your appeal, you may have to pay back the cost of any services you got during the appeal. You must ask us to stop your Health First Colorado coverage if you don't want to keep it while you appeal.

Keeping your health care services during an appeal

To keep your services and benefits while you appeal, you must ask for an appeal before the date your services end. You must also ask to keep your services while you appeal. Look for your service end date on your Notice of Action letter. You will keep your services until a final decision is made or until the approval to keep your services ends, whichever is first. If you lose your appeal, you may have to pay back the cost of any services you got during the appeal.

7 Complaints

Complaints

You have a right to complain. This may also be called a grievance. You can **complain** if you are unhappy with your service or think you were treated unfairly. You cannot lose your coverage for filing a complaint. That's the law!

If your complaint is about your provider, **talk to your provider first**. If you are still unhappy, you can make a complaint to your health plan or online at [Colorado.gov/dora/licensing/Activities/Complaint.aspx](https://colorado.gov/dora/licensing/Activities/Complaint.aspx).

How to file a complaint with your health plan

If you have a complaint, you have 30 days from when the problem happened to file. You or the person you choose to help you can complain in person, by phone, by mail or by email. You must include your name, Medicaid ID, address and phone number.

You can get help by calling your physical health plan, DentaQuest or BHO. Or call the Ombudsman for Health First Colorado Managed Care at **303-830-3560** or **877-435-7123**. For TDD/TTY, call 888-876-8864. Or email help123@maximus.com.

After you file a complaint with your health plan

Your health plan will send you a letter within 2 business days to tell you they got your complaint. Someone who was **not** involved in your situation will review your complaint. They will work with you to solve the problem. They may contact you or the person you chose to help you. Within 15 business days, they will send another letter. The letter will tell you what they decided.

Second reviews

If you do not agree with the answer you get from your plan, you may be able to ask for a second review of your complaint.

If your health plan is:	Ask for a second review from:
Accountable Care Collaborative (ACC), Health Maintenance Organization (HMO) or other managed care plan	Colorado Department of Health Care Policy and Financing Medicaid Managed Care Contract Manager 1570 Grant Street, Denver, CO 80203 Phone: 303-866-4623 Email: hcpf.mcos@state.co.us
Behavioral Health Organization (BHO)	Colorado Department of Health Care Policy and Financing BHO Managed Care Contract Manager 1570 Grant Street, Denver, CO 80203 Phone: 303-866-4623 Email: hcpf.mcos@state.co.us

If you ask for a second review of your complaint, the Colorado Department of Health Care Policy and Financing will work with you and send you a letter about their review. This decision is final.

Rights and responsibilities

As a member of Health First Colorado you have rights and responsibilities.

Your rights

You have the right to:

1. Get the information in this handbook and about your coverage, plans, benefits and services
2. Be treated with respect and consideration for your privacy and dignity
3. Get information in a way you can easily understand
4. Get information from your provider about treatment choices for your health condition
5. Be involved in all decisions about your health care and say “no” to any treatment offered
6. Not be secluded or restrained as a punishment or to make things easier for your provider
7. Ask for and get a copy of your medical records and ask that they be changed or corrected
8. Get health care services
9. Use your rights without fear of being treated poorly
10. Any other rights guaranteed by law
11. Be free from discrimination based on race, color, ethnic or national origin, ancestry, age, sex, gender, sexual orientation, gender identity and expression, religion, creed, political beliefs, disability or health status

Your responsibilities

You have the responsibility to:

1. Understand your rights
2. Follow this handbook
3. Treat other members, your providers and staff with respect
4. Choose a provider from your plan network or call us if you want to see a different provider
5. Pay for services you get that are not covered by Health First Colorado
6. Tell your provider and Health First Colorado if you have other insurance or family or address changes
7. Ask questions when you do not understand or want to learn more
8. Tell your provider information they need to care for you, such as your symptoms
9. Take medications as prescribed and tell your provider about side effects or if your medications are not helping
10. Invite people who will be helpful and supportive to you to be included in your treatment
11. Report suspected member or provider fraud or abuse to Member Fraud at 844-475-0444 or Provider Fraud at 855-375-2500

Nondiscrimination policy

The Colorado Department of Health Care Policy and Financing runs Health First Colorado (Colorado's Medicaid program). The Department does not discriminate on the basis of race, color, ethnic or national origin, ancestry, age, sex, gender, sexual orientation, gender identity and expression, religion, creed, political beliefs or disability in any of its programs, services and activities. For more information about this policy, to request free disability and/or language aids and services, or to file a discrimination complaint, contact:

504/ADA Coordinator

1570 Grant Street

Denver, CO 80203

Phone: 303-866-6010 (State Relay 711)

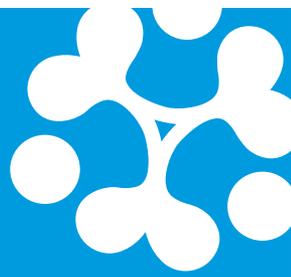
Fax: 303-866-2828

Email: hcpf504ada@state.co.us

Complaints can also be filed with the U.S. Department of Health and Human Services Office for Civil Rights at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>.

Get involved!

Health First Colorado's Person- and Family-Centeredness Advisory Council helps to improve member experiences. To learn more or to get involved, go to [Colorado.gov/pacific/hcpf/mfac](https://colorado.gov/pacific/hcpf/mfac) or email HCPF_PeopleFirst@state.co.us.



We're here to help

For questions, call the **Health First Colorado Member Contact Center** at **800-221-3943** (State Relay 711) Monday to Friday, 7:30 a.m. to 5:15 p.m.

Si usted habla **español**, tenemos a su disposición servicios de asistencia, gratuitos, en su idioma. Llame al **800-221-3943** (State Relay 711).

Nếu bạn nói **Tiếng Việt**, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số **800-221-3943** (State Relay 711).



To read more about the topics in this handbook, go to HealthFirstColorado.com. You can also use the **PEAKHealth** app from your cell phone.