



**HEALTHY COMMUNITIES**

*Connecting you to health care*





## Healthy Communities

### *Understanding health care benefits*

Healthy Communities is a comprehensive community-based outreach program designed to assist families, children and pregnant women to find appropriate services. Through this program, Family Health Coordinators connect families with resources to obtain treatment for medical, dental, vision, mental health, and developmental problems. All families eligible for CHP+ or Medicaid are encouraged to use these services.

The Healthy Communities program is for children and youth age 20 and under and pregnant women. It helps to provide a medical home that helps children get the medical and non-medical services they need.



## Medicaid

*Medicaid is health insurance for low-income families and children*

### Who Qualifies for Medicaid?

Families or individuals must:

- Be 18 years of age or younger, or have a child, or be pregnant,
- Live in Colorado,
- Meet the Medicaid income limits, and
- Be a U.S. citizen, a legal permanent resident for at least 5 years, an asylee, a refugee, or a non-citizen with a qualifying emergency.

OR

- Be receiving Supplemental Security Income (SSI)

### What Does Medicaid Cost?

- There are no enrollment fees for Medicaid,
- Children 18 and under have no co-pays for services,
- Pregnant women (any age) have no co-pays for any services, and
- Persons 19 and over have small co-pays for doctor visits, prescription drugs, laboratory tests, durable medical equipment and hospital stays.



## The Family Health Coordinator and Your Medicaid Benefits

*Family Health Coordinators can help you with your Medicaid benefits*

Some of the benefits for children include:

- Yearly (or more frequent for those under the age of 2) check-ups with your provider or clinic, including:
  - Physicals for school, camp, or daycare
  - Other visits when your child is sick
- Immunizations
- Developmental screenings
- Dental visits beginning at age 1 and then every 6 months
- Vision screening and eye glasses
- Hearing screening and hearing aid if medically necessary
- Lab and blood tests, such as testing for lead poisoning
- Behavioral health screenings and services
- Family planning
- Pregnancy testing and prenatal care
- Prescription drugs

Some of the benefits for pregnant women include:

- Discussing eating habits
- Lab and blood tests
- Mental and behavioral health services
- Pregnancy testing and prenatal care
- Prescription drugs
- Family planning after the birth of a child

A referral is not required from your provider to see a dentist, eye doctor, behavioral health provider, or for hearing services or family planning services.

## How to Find a Provider

To find a participating Medicaid provider or dentist near you, please call your Family Health Coordinator, the Medicaid Customer Contact Center or visit [insurekidsnow.gov](http://insurekidsnow.gov) for a dentist or [medicalquest.com](http://medicalquest.com) for other providers.



## How to Get to Appointments

Medicaid clients are eligible for Non-Emergency Medical Transportation services to appointments. If you live in a Denver metro county (Denver, Larimer, Boulder, Broomfield, Adams, Arapahoe, Douglas, Jefferson) call LogistiCare at 1-800-284-5150. If you live outside the metro area, call your local department of human/social services for assistance with transportation.

## Approval for Some Services

Some services or items require a Prior Authorization Request (PAR). The PAR must be signed by your Primary Care Provider (PCP) and sent to Medicaid.

- If the PAR is **APPROVED**, call the provider on the form sent to you to get the service or item.
- If the PAR is **DENIED**, you have 15 days from the date on the letter to file an appeal. If you need help, call your Family Health Coordinator or the Ombudsman for Medicaid Managed Care.

Medicaid covers services and items that are medically necessary. Medicaid evaluates each service or item to decide if it is:

- Standard medical practice
- Correct for the problem
- Not for the convenience of the parent, guardian, or health care provider



## Child Health Plan Plus (CHP+)

*CHP+ is low-cost health insurance for children and pregnant women*

### Who Qualifies for CHP+?

Families or individuals must:

- Be 18 years of age or younger, or pregnant,
- Not be eligible for Medicaid,
- Meet the CHP+ income limits,
- Live in Colorado, and
- Be a U.S. citizen or permanent U.S. resident for the last 5 years, asylee or refugee.

AND

- Do not have other insurance, and
- Do not have access to State employee health insurance.

### What does CHP+ Cost?

The cost of CHP+ depends on your family size and income

- There may be an annual enrollment fee for some families.
- There may be co-pays of \$2 - \$20 for some medical and dental services and emergency and urgent care visits.
- Pregnant women have no enrollment fees and are only responsible for co-pays for non-prenatal care.
- There are no enrollment fees or co-pays for Native Americans and Alaskan Natives.

CHP+ clients receive their health services through a Health Maintenance Organization (HMO) and applicants must select a HMO at the time of application. An HMO is a group of doctors, nurses, hospitals and other providers who work together to give clients health care. Clients must visit a provider who is in their CHP+ HMO.

Pregnant women will be enrolled in the CHP+ State Managed Care Network.



## The Family Health Coordinator and Your CHP+ Benefits

*Family Health Coordinators can help you with your CHP+ benefits*

Some of the basic benefits for children include:

- Developmental screening
- Mental health screening
- Dental screening
- Vision screening
- Hearing screening
- Immunizations
- Doctor visits
- Yearly check-ups, including
  - School physicals
  - Other visits when your child is sick
- Lab and blood tests
- Behavioral health services
- Pregnancy testing and prenatal care
- Prescription drugs
- X-rays

Benefits for pregnant women age 19 and older include:

- Discussing eating habits
- Lab and blood tests
- Mental and behavioral health services
- Pregnancy testing and prenatal care
- Prescription drugs

Dental services are NOT covered for pregnant women.

All benefits are administered through the HMO and some HMOs may include additional benefits.



## Presumptive Eligibility (PE)

What is PE?

PE allows eligible pregnant women and children to receive temporary medical coverage through Medicaid or CHP+.

The temporary medical coverage lasts for at least 45 days while your eligibility for full health care benefits is determined.

To apply for PE coverage you will need to visit a local PE site. To find a PE site please visit [Colorado.gov/hcpf](http://Colorado.gov/hcpf) or call 303-866-3513 in the Denver metro area or toll-free at 1-800-221-3943 or 1-800-359-1991 outside of the Denver metro area.

Benefits for PE Medicaid Pregnant Women 19 and over:

- Prenatal Care
- Outpatient Services

Inpatient care, labor and delivery are NOT covered for pregnant women under PE. These services ARE covered as Medicaid benefits.

PE benefits for Medicaid Children 18 and under:

- Regular Medicaid benefits
- Mental health services (under regular Medicaid)
- Dental services

PE benefits for CHP+ Children and Pregnant Women:

- Full CHP+ medical benefits
- Dental services are not covered

## Medical Home

*A medical home coordinates all health services and is centered on you and your family's needs*

A medical home:

- Builds a relationship with your family,
- Makes sure that your children get the check-ups and care that they need, and
- Keeps their health records together.

Often the medical home is the doctor or clinic who performs your children's regular checkups or treats them when they are sick.

Your medical home:

- Respects your cultural beliefs and family values,
- Helps you to understand treatment options and honors your treatment choices,
- Helps your child get regular well-care, sick-care and shots,
- Helps you get your sick or injured child medical care, even after hours,
- Helps you decide if your child should be seen in the emergency room or an urgent care clinic,
- Helps you find specialists, and
- Assures your child has a health care team that includes your child, the provider, the office staff and others and ensures that you are an important part of the team.

If you would like a list of providers that serve as medical homes, please visit [MedicalHomeColorado.org](http://MedicalHomeColorado.org) or call your local Family Health Coordinator.



## Family Health Coordinators

Healthy Communities Family Health Coordinators want you to get the most of your benefits and to understand what those benefits can do for you. Family Health Coordinator services are **free** and can help you:

- Find available medical homes and health or dental providers in your area,
- Assist you in working with Medicaid and CHP+, and
- Connect you to available low or no-cost services and referrals to places in your community like food banks, housing agencies, childcare, Head Start, Health Care Program for Children with Special Healthcare Needs (HCP), and Women, Infants and Children (WIC).

Family Health Coordinators act as a link with other community and statewide programs and services and are available as the first level of advocacy.

Healthy Communities Family Health Coordinators CANNOT:

- Determine or approve Medicaid or CHP+ eligibility, or
- Assist with TANF, Food Stamps or Cash Assistance programs.

If you are interested in applying for the above public assistance programs, please visit [Colorado.gov/benefits](http://Colorado.gov/benefits).

To locate your Family Health Coordinator, please visit [Colorado.gov/hcpf](http://Colorado.gov/hcpf) or call 303-866-3513 in the Denver Metro area or Toll Free at 1-800-221-3943. TDD is available at 1-800-659-2656.

## Resource Contact Information

### Family Health Coordinators

Call the Family Health Coordinator if you have questions about your benefits or services if you are pregnant or have children.

To locate your Family Health Coordinator, please visit [Colorado.gov/hcpf](http://Colorado.gov/hcpf) or call 303-866-3513 in the Denver Metro area or Toll Free at 1-800-221-3943. TDD is available at 1-800-659-2656.

### Medicaid Customer Care Center

Call Medicaid Customer Care Center if you have questions about your benefits or services if you are an adult.

Denver Metro Area: **303-866-3513** or

Toll Free: **1-800-221-3943**

TDD, Metro Area: **303-866-3883**

**Se habla Español**

### Medicaid Nurse Advice Line

Call the Nurse Advice Line when you are sick or hurt and cannot call your health care provider. The Nurse Advice Line workers will ask you questions about your problems and help you decide what to do. The Nurse Advice Line is free and open 24 hours a day, 7 days a week.

Toll Free: **1-800-283-3221**

**Se habla Español**

### CHP+

[ChpPlus.org](http://ChpPlus.org)

Toll Free: **1-800-359-1991**

**Se habla Español**



## **Presumptive Eligibility (PE)**

Denver Metro Area: **303-866-3513**

Toll Free: **1-800-221-3943** or **1-800-359-1991**

[Colorado.gov/hcpf](http://Colorado.gov/hcpf)

Or call your Family Health Coordinator

**Se habla Español**

## **The Ombudsman for Medicaid Managed Care**

The Ombudsman can help you solve any problems with your health care providers and your mental health care providers, and can help if you cannot reach your health plan.

Call the Ombudsman if you have problems or to help you file grievances and appeals.

Denver metro area: **303-830-3560** or

Toll Free: **1-877-435-7123**

**Se habla Español**

## **HealthColorado**

Contact *HealthColorado* to enroll or to change your Medicaid Primary Care Provider or health plan.

**HealthColorado.org**

Denver metro Area: **303-839-2120**

Toll Free: **1-888-367-6557**

TTY: **1-888-876-8864**

**Se habla Español**

## **Colorado Program Eligibility and Application Kit (PEAK)**

To see if you may be eligible for medical programs online, please visit [Colorado.gov/benefits](http://Colorado.gov/benefits).