



## **COLORADO**

**Department of Health Care  
Policy & Financing**

**Behavioral Health  
Administration**

# **Behavioral Health Administration Community Services High-Level Program Group FAQ**

## *Frequently Asked Questions*

*June 2024*

A new High-Level Program Group (HLPG) has been added to the Colorado Benefits Management System (CBMS) for Behavioral Health (mental health and substance use services). The new HLPG “Behavioral Health Administration Community Services” was set up for uninsured and under-insured individuals in Colorado with behavioral health needs. The HLPG policy went into effect on July 1, 2023. This HLPG encompasses two new aid codes. Within PEAK and PEAKPro, the HLPG is listed as Behavioral Health Administration Community Services.

### **What is the Behavioral Health Administration (BHA)?**

The Behavioral Health Administration (BHA) is the state administration responsible for ensuring equitable access to quality mental health and substance use disorder services among people in Colorado, regardless of where they live or their ability to pay.

BHA will help bring together providers, community groups, and governmental agencies to design a behavioral health system for all people in Colorado that is easy to access, and offers high-quality care that considers the whole person and their needs.

BHA impacts the behavioral health system in many ways. These include:

- Continuously improving access to and quality of affordable behavioral health care;
- Reducing stigma so that the people of Colorado feel confident and comfortable seeking support and/or treatment for their mental health and substance use disorder;
- Providing ways to find care;
- Engaging with diverse community groups and providers to expand services;
- Recruiting and retaining the workforce to support the people of Colorado.

## What is the “Behavioral Health Admin” High-Level Program Group?

This new HPLG is listed as "Behavioral Health Admin" within CBMS. The Behavioral Health Admin HPLG allows individuals to seek mental health and substance use disorder services from BHA-contracted providers. This HPLG includes a range of services and programs available to different populations. These populations include both uninsured and under-insured individuals.

Currently individuals cannot be simultaneously assigned to both Medical Assistance and BHA HPLGs in CBMS. For those with Medicaid benefits, the Medical Assistance HPLG will continue to offer coverage for behavioral health services. In contrast, assignment to the BHA HPLG is not a guarantee of services. Services are dependent on the availability of BHA contracted providers, provider-evaluated eligibility, and the services providers offer. For more information on the BHA and the services they fund, please visit the [BHA's official website](#).

## Is Behavioral Health Administration (BHA) a Medical Assistance (MA) program?

No, BHA is not part of the Medical Assistance HPLG. This is a new High-Level Program Group in CBMS. The BHA HPLG was implemented on July 1, 2023.

## Which department is overseeing the new BHA High-Level Program Group?

The new BHA high-level program group (HPLG) is administered by BHA. The Colorado Department of Health Care Policy & Financing's (HCPF's) role is to support BHA's operations. More specifically, HCPF will support BHA's use of existing IT systems.

## Who may be eligible for BHA Community Services?

As of July 1, 2023, anyone who is not eligible for Medical Assistance (MA) HPLG, may still seek behavioral health services from individual BHA-funded programs and providers. The BHA HPLG is not a benefit plan in the same sense as Medicaid. It is not an entitlement program or insurance-type plan. In other words, the BHA HPLG does NOT guarantee certain benefits. Instead, the HPLG is used to help connect registered individuals with income and non-income based behavioral health services in their communities. Availability of services varies by community and BHA funding in a given year.

## How can people access BHA Community Services?

There are three ways to access BHA-funded services - contact the local Community Mental Health Centers (CMHC), Administrative Services Organizations (ASO), or Managed Service Organization (MSO). Services can also be accessed directly through a BHA-contracted provider.

## Will there be a third-party vendor that deals with BHA-only cases?

Yes, there is a third-party vendor, Denver Health CMAP (Colorado Medical Assistance Program). They will manage BHA-only cases in intake, ongoing, and RRR mode and assist BHA providers with technical questions. Individuals seeking care need to direct questions to their BHA-contracted provider. [Providers are listed on this website](#)

## What is the county's role when processing PEAK applications with BHA services?

Counties and medical assistance (MA) sites are responsible for managing combination (combo) cases. Combo cases are cases where a person has applied for multiple HLPGs, which could include the BHA HLPG. Counties and medical assistance (MA) sites will process PEAK applications that have failed Real Time Eligibility (RTE) and report changes from the PEAK inbox. They will continue to manage the ongoing and RRR combo cases. Additionally, if an individual seeks BHA support at a county office, the county will help the individual apply with BHA.

Counties and eligibility sites should assist people in submitting their PEAK application, or direct them to the online PEAK application, depending on that county site's capabilities. There are no different nor additional questions if the BHA HLPG is selected in addition to the MA application. If the individual registers only for the BHA HLPG, the individual's case will move to the CMAP's PEAK inbox. From there it will be assigned to CMAP for ongoing management as needed if RTE did not apply.

## Who are BHA providers?

A Behavioral Health Administration provider must be contracted with BHA. Not all behavioral health providers are BHA providers. BHA providers are contracted and funded through community mental health centers, Managed Service Organizations, and Administrative Service Organizations. For more information about contacting a BHA provider, please refer individuals seeking behavioral health support to [OwnPath](#) to find their closest crisis walk in clinic, CMHC, or MSO.

## What can individuals learn about BHA support through PEAK?

First, PEAK allows individuals to apply for Medical Assistance. Individuals will also be presented with information about the BHA. Individuals registering with the BHA will receive their notices through their PEAK account. Individuals can learn about accessing BHA support by working with a BHA-contracted provider.

Assignment to the BHA HLPG does not guarantee any benefit plan, nor does it guarantee services. Instead, assignment to the BHA HLPG creates a state ID for the individual if they do not already have one. This allows eligibility workers and BHA-contracted providers to rule out Medicaid services before considering BHA-funded programs. Medicaid services are generally more robust and preferable. In contrast, BHA programs continue to operate at a program-specific and provider-specific level. [Learn more on the BHA website.](#)

## What are the new program Aid Codes under the new BHA HLPG in CBMS?

There are two new aid codes associated with the BHA HLPG. It should be noted that not all BHA providers offer the same services. Individuals seeking support must contact a BHA provider to verify which services are available to them. For more information on BHA programs and services offered, please refer these individuals to [BHA's official website.](#)

- X1 - Means Tested- income must be at or under 300% federal poverty level. This aid code covers a broader range of services.
  - To become qualified for the Means-Tested category, individuals must be

denied for MA first. Their income must be verified and cannot exceed the 300% federal poverty level.

- X2 - Non-Means Tested- no criteria is used to assign this aid code.
  - Minimum essential data is required to register as an individual seeking behavioral health care. This includes name, date of birth, gender, and address.

## **Does the BHA HPLG adhere to the same federal requirements as Medical Assistance?**

No, the BHA HPLG is separate from Medical Assistance and its federal requirements. It's funded through the state General Fund and is overseen by BHA. HCPF's (the agency that administers the state's Medicaid program) role will be to support BHA operations through CBMS. Individuals seeking care with the BHA will be registered in CBMS.

## **What are the notable differences between MA Modified Adjusted Gross Income (MAGI) eligibility and BHA HPLG criteria?**

BHA HPLG processing within CBMS is modeled after MA MAGI eligibility with some significant differences. Out-of-state residents can receive BHA services. There are no citizenship or identity verification requirements. Verifications are not required, but they are highly recommended. For instance, verifying identity information can help determine if an individual is already in CBMS. If income cannot be verified for X1 BHA Means-tested Aid Code, the individual may still be assigned to X2 BHA Non-Means tested Aid Code.

## **Can the BHA HPLG be assigned retrospectively?**

Yes, the BHA HPLG can be assigned retrospectively. This is possible upon request only during the initial submission of the application and only for that current application. Retrospective assignment will not be granted for any dates prior to the go-live date of July 1, 2023. This retrospective assignment applies to BHA services provided by BHA-contracted providers. Case workers should expect the same data entry process used in CBMS for MA's retro requests.

## **How are other HPLGs impacted by BHA HPLG?**

An individual cannot be assigned to both MA and BHA HPLGs in CBMS. Medical Assistance eligibility will always take priority over the BHA HPLG. No other HPLG will be impacted by having BHA on the case.

## **Are verifications required for assignment to the BHA HPLG?**

Officially, no verifications are required by BHA to seek their services. However, verification of income is needed in CBMS to qualify for the X1 BHA Means-tested Aid Code. If income cannot be verified, then the individual may still be assigned to X2 BHA Non-Means tested Aid Code. For some BHA programs, the financial criteria may be waived by a BHA provider if the person seeking services is within a priority population. The individual should be referred to a BHA provider regardless of the X1 or X2 eligibility determination from CBMS.

## **What if someone with an active MA case seeks care via the BHA HPLG?**

County caseworkers and eligibility site workers should run EDBC and authorize both MA and BHA HLPGs in Case Wrap-up. The individual will not be assigned both HLPGs in CBMS. If the BHA HLPG is denied, their MA will remain active. MA eligibility review may be triggered if the individual registering for BHA support reports information (e.g., change in income) that is inconsistent with Medicaid eligibility. Where possible, please remind MA members that they are eligible for behavioral health services through their Health First Colorado (Colorado's Medicaid program) benefits. They should contact their provider or regional organization for additional help.

## **Should eligibility sites "pend" the MA application until the BHA HLPG is assigned or denied?**

No, the goal is always for the Medical Assistance application to be processed first. Both Medical Assistance and BHA HLPGs can be selected when an individual is seeking services. Medical Assistance will always take priority over BHA when an individual seeks help from both entities. Since the BHA HLPG does not have any predefined benefits, it is more beneficial to any individual to secure Medical Assistance.

## **How does the BHA HLPG impact county metrics?**

There are no timeliness metrics defined for BHA so there will be no impact to county metrics, as long as other programs are processed according to their timeliness guidelines.

## **If asked, what should an eligibility site tell a person who is assigned to the BHA HLPG about BHA Community Services?**

If a person asks you about the BHA HLPG, please encourage them to go to [bha.colorado.gov/get-behavioral-health-help](http://bha.colorado.gov/get-behavioral-health-help) or [ownpath.co/](http://ownpath.co/). Additional information on BHA Community Services programs can be found on the [County Caseworker Guidance on BHA Community Services](#).

## **How should eligibility sites register an individual seeking BHA support who is also active on a non-Medicaid HLPG?**

An individual who is active in a non-Medicaid HLPG can be assigned to the BHA HLPG as part of a combo case. Our recommendation is always to encourage the individual to apply for Medical Assistance and register for the BHA HLPG at the same time. Therefore, the process is no different than the current Medical Assistance application experience. If the person is found ineligible for Medical Assistance, then the system will assign them to the BHA HLPG.

If the individual initially only tries to register for the BHA HLPG, county caseworkers should strongly recommend the individual apply for Medical Assistance, as that is the more definitive and comprehensive benefits program.

## **What are the differing roles and responsibilities between the BHA 3rd Party Vendor, currently Denver Health CMAP (Colorado Medical Assistance Program) and eligibility sites? What constitutes a "combo-case" relative to a "BHA-only case"?**

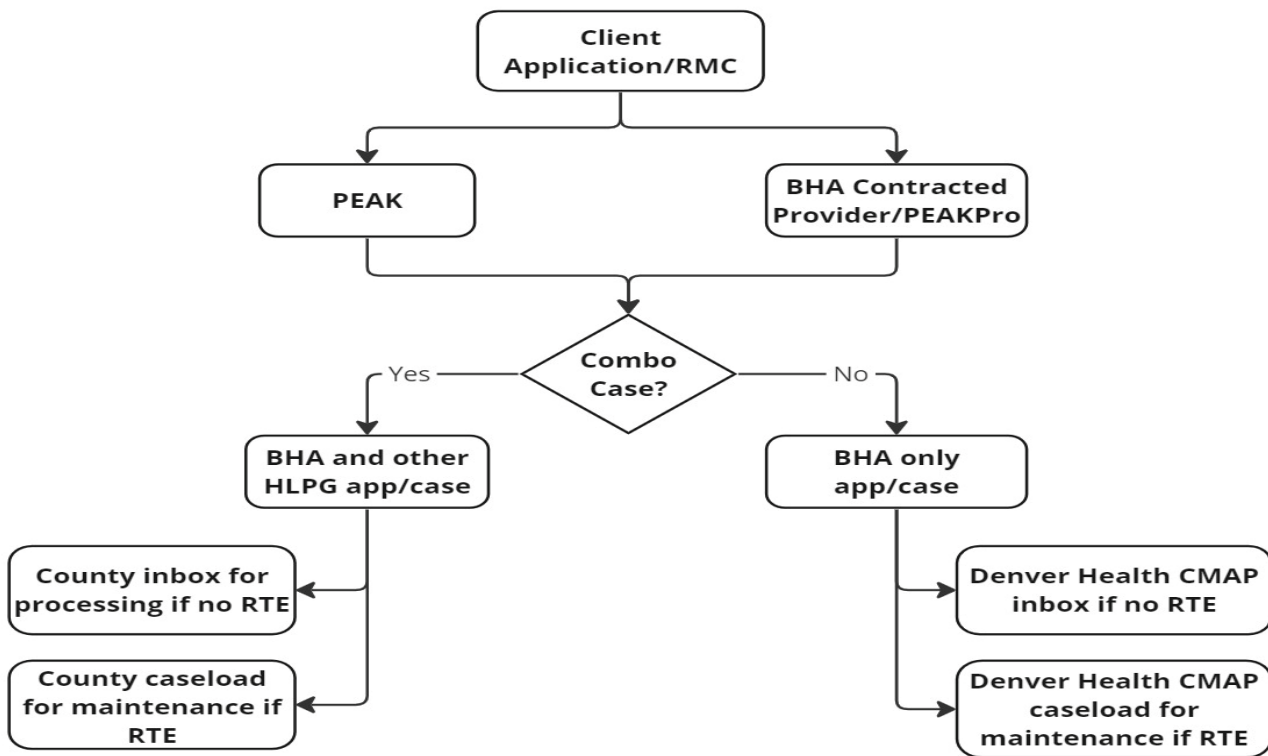
Eligibility sites may assist any individuals who are inquiring into any available HPLG, which may include the BHA HPLG. The suggestion for any individual seeking the BHA HPLG is to (1) recommend that they also apply for Medical Assistance or (2) recommend that they first contact a BHA provider.

CMAP will handle case maintenance for BHA-only applications and ongoing cases that receive RTE or not. A BHA-only case is someone who only has the BHA HPLG and no other HPLGs (e.g., Health First Colorado, SNAP). A combo case has BHA HPLG and at least one other HPLG. Eligibility sites will continue to manage combo cases.

### What is the level of effort expected to maintain a BHA "combo-case"?

Maintaining a BHA combo case should require the same effort as an MA HPLG combo case. Like an MA HPLG combo case, a BHA combo case will be active for another non-Medicaid HPLG. The Staff Development Division (SDD), in conjunction with HCPF and BHA, is working to create training material to better inform eligibility workers on case maintenance for combination cases that involve the BHA HPLG.

### Does BHA have a flow chart demonstrating how all of this is connected and who is responsible for what actions when processing BHA requests??



The flowchart begins with the question of how the individual pursues BHA services. The two options are via PEAK, or via BHA Contracted Provider using PEAKPro. From there, processing the person's information is dependent on whether the person inquired about one or multiple HPLGs. The person's information goes to the PEAK Inbox for processing if Real Time Eligibility

(RTE) does not apply. If RTE does apply, it will go to the county caseload for case maintenance. If the person inquired about only one HLPG and RTE does not apply, it will go to the PEAK Inbox and be assigned to Denver Health CMAP for manual processing. It will go to Denver Health CMAP caseload for maintenance if RTE applies and the person is only registering with the BHA.

## **Who are the points of contact from both the BHA and HCPF for the CBMS/PEAK and the BHA HLPG?**

Because of the variety of questions eligibility sites may have, please direct questions about the BHA HLPG through [hcpf\\_medicaid.eligibility@state.co.us](mailto:hcpf_medicaid.eligibility@state.co.us), which will then direct your question to the appropriate person. Questions about BHA community services will be directed to relevant BHA staff members, whereas questions about CBMS functionality when processing BHA HLPG applications will be directed to relevant technical staff.