



CBMS/interChange Eligibility Issue

Frequently Asked Questions

Jan. 2020

The Issue

Between 2013 and last year, there were 35,531 Health First Colorado (Colorado's Medicaid program) and Child Health Care Plan *Plus* (CHP+) members who were no longer eligible for coverage, and who were properly terminated in the eligibility system (CBMS) but erroneously kept open in the claims payment system (interChange). These individuals received a termination Notice of Action (NOA), but some continued to have Health First Colorado or CHP+ claims improperly paid past their termination date.

Who is Affected?

35,531 Health First Colorado and CHP+ members were properly terminated in the eligibility system but were showing as eligible in the claims system.

It is unclear at this time how many of those may have had claims improperly paid. The Department will continue to do analysis.

What is the Department doing to address this?

The Department of Health Care Policy & Financing has fixed the CBMS/interChange issue and will send a letter on Jan. 30, 2020, to those affected. The letter is titled **Update on Benefit Termination**. With this letter, they will also receive a copy of the original termination NOA for their reference.

The Update on Benefit Termination:

- Briefly explains the system issue;
- Provides an interChange termination date of March 31, 2020, after which claims will no longer be paid;
- Assures them that they do **not** owe us any money for any benefits they received during the time they were ineligible;
- Informs them they may reapply to see if they are now eligible;
 - Refers them to PEAK or their county to reapply; and



- Advises them to call our Member Contact Center if they have questions.

What can letter recipients do?

Letter recipients can reapply for medical assistance if they wish to do so through [PEAK](#) or their county. They can call the Member Contact Center if they have questions at 1-800-221-3943. The Member Contact Center is also prepared to offer the option to apply by phone, as well.

Do providers owe the Department money for services these individuals received when they were not eligible?

No. Since the individuals were showing as eligible in interChange, providers will not owe the Department money for services they provided to these individuals. These individuals will be removed from interChange on March 31, 2020, so providers can continue to submit claims for services provided through March 31, 2020.

FAQs for Letter Recipients

Why did I get this letter?

You got this letter to let you know about an error in our system. You became ineligible for Health First Colorado/CHP+ at the time you received your original termination notice, but our billing system kept paying claims for you. We have corrected the billing system so we won't be paying claims for you anymore after March 31, 2020. You can reapply to see if you are now eligible for coverage.

Do I owe money for the benefits I received when I wasn't eligible?

If you received a service before March 31, 2020, you may owe a co-pay to a provider. You do not owe Health First Colorado or CHP+ money.

Am I owed money for services I received and paid for?

If you paid a provider for covered services you got before March 31, 2020, you can ask the provider to reimburse you and bill Health First Colorado or CHP+. You may owe a Health First Colorado co-pay to the provider.

If you have or had other insurance, your other insurance pays first. You can ask your provider to bill Health First Colorado. You are only responsible for the Health First Colorado co-pay.

What if I have an unpaid Health First Colorado or CHP+ bill, or bill that went to collections during the time before March 31, 2020?

Call the Member Contact Center at 1-800-221-3943 for help with unpaid bills or bills that have been sent to collections.



Is there any identity theft or fraud involved in this system issue?

No. Your information has been safe and was **not** revealed during this system issue.

What do I need to do?

You don't have to do anything. If you want to reapply for Health First Colorado or CHP+, you can. The only way to know for sure if you qualify now is to apply again. Go to co.gov/PEAK or contact your county department of human services.

What happens if I get denied when I reapply?

If you are denied when you reapply, you have the right to appeal the decision. Your denial letter will tell you how to appeal.

Am I eligible to purchase a health plan with a subsidy through Connect for Health Colorado?

Possibly yes, this may qualify as a special enrollment period and you may be eligible for a subsidy through Connect for Health Colorado. Contact Connect for Health Colorado, the state's official health insurance marketplace, to get private health insurance coverage for the year 2020. Visit the website ConnectforHealthCO.com or call the Customer Service Center at 855-752-6749. You will need to show them the letter you received from us.

Why did this happen? How can you be sure this won't happen again?

This happened because of an error in our computer systems. We have fixed the error and have taken steps to make sure it doesn't happen again.

I don't remember getting this original termination notice. Does it "count" if I never got it?

Yes, it still counts—you are not eligible for benefits after March 31, 2020. This Notice of Action letter is in the communication section of your PEAK account. Please remember we understand that you are not responsible for our error. You are not responsible for payment due to our error. You will not face any consequence for receiving benefits during the time of this system error.

Can I appeal this decision?

You were provided appeal rights with your eligibility termination. There are no appeal rights associated with this computer system change.

Do I need to tell my doctor/providers about this?

No. Beginning April 1, 2020, your providers will see that you are not eligible in their provider portal.

Can I go to the doctor now?

Yes. Technically coverage will end on March 31, 2020. Reapply now for Health First Colorado to see if you qualify for coverage after March 31. Go to CO.gov/PEAK or contact your county department of human services to apply.



My provider has told me that I need proof that this is going to be paid.

Show the letter you received to your provider. Providers can verify member eligibility in the Provider Portal or by calling Provider Services at 1-844-235-2387, option 1.

Why did you decide I was no longer eligible?

You will need to contact your county department of human services for more information about why you were determined not eligible.

