State of Colorado Emergency Medical Services (EMS) Supplemental Payment Fiscal Year (FY) 2024-25 Training

Presented by:

Colorado Department of Health Care Policy and Financing (HCPF)
Public Consulting Group (PCG)

September 9-11, 2025



Housekeeping



- Facilities
- Sign-in sheet
- We encourage questions and engagement
- Refreshments
- Link to slides were emailed and recorded version will be available after virtual training session



Introductions:

Colorado Department of Health Care Policy and Financing (HCPF)

The Colorado Department of Health Care Policy and Financing (HCPF) will administer the Colorado (CO) EMS Supplemental Payment, communicating with the Centers for Medicare and Medicaid Services (CMS) to disburse supplemental payments to public providers who successfully complete the annual cost report.

HCPF points of contact:

- Shannon Huska
- Olga Gintchin
- Sam Mateer

- Daniel Harper
- Tracy Gonzales







Introductions: Public Consulting Group (PCG)



Public Consulting Group (PCG) is the third party assisting public providers with CO EMS Supplemental Payment activities on behalf of HCPF.

- Garrett Abrahamson
- Miles Brown
- Michelle Silvestre
- Griffin Day



Agenda

Part	Content	
	 FY 2023-24 Snapshot CO EMS Supplemental Payment Overview FY 2024-25 Data Collection Timelines Break (10 minutes) 	Interactive Activities & Discussion
II	 Ambulance Services Cost Report (ASCR) Portal Demonstration Stakeholder Group Training Feedback Contact Information 	



Before we dive in...

Key Acronym	Definition	
AFG	Assistance to Firefighters Grant	
ASCR	ASCR Ambulance Services Cost Report	
CAC Cover All Coloradans		
CAD Computer-Aided Dispatch		
CAR Comprehensive Audit Review		
CARES Coronavirus Aid, Relief, and Economic Security		
CHP+ Child Health Plan Plus		
CMCS	Center for Medicaid and CHIP Services	
CMS	Centers for Medicare & Medicaid Services	
CO Colorado		
EMS	Emergency Medical Services	
FFS	Fee-for-Service	
FEMA	Federal Emergency Management Agency	



Acronyms (cont.)

Key Acronym	Definition	
FMAP	Federal Medical Assistance Percentage	
FY Fiscal Year		
HCPF	CPF Colorado Department of Health Care Policy and Financing	
MTS Medical Transportation Services		
NPI National Provider Identifier		
PCG Public Consulting Group		
SAFER	Staffing for Adequate Fire & Emergency Response	
SIT	Strategic Intervention Trainings	



Ice Breaker



Fire & EMS Department Provides both Fire & EMS

Please form small groups based on your department type



EMS DepartmentSolely provides EMS



Hospital-Based EMS Department
Operates alongside a Hospital



FY 2023-24 CO EMS Supplemental Payment Snapshot

FY 2023-24 CO EMS Supplemental Payment Recap



70+ calls received & 300+ emails issued on the Help Desk



96 providers completed the FY 2023-24 Cost Report



\$50 Million in supplemental payment funding



CO EMS Supplemental Payment Provider Count

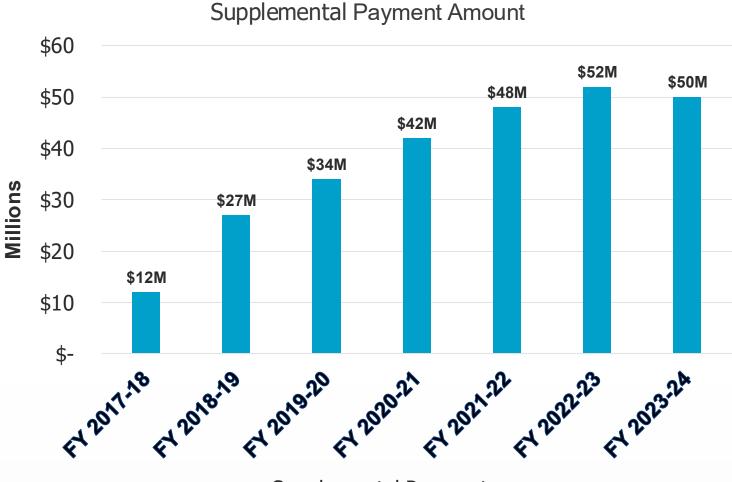


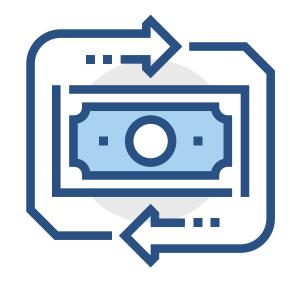






CO EMS Supplemental Payment Statistics





Supplemental Payment



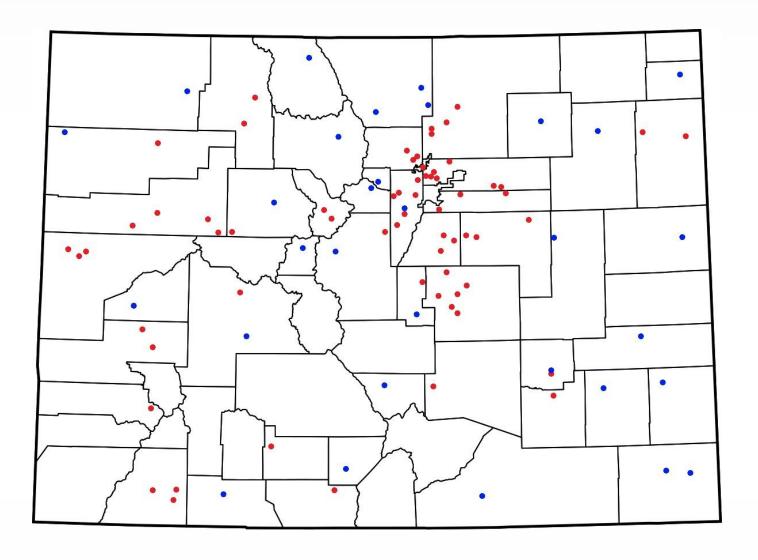
FY 2023-24 CO EMS Supplemental Payment Participating Provider Locations

Blue = 30 participating 100%

EMS-only providers

Red = 66 participating mixed-use

Fire & EMS Departments





CO EMS Supplemental Payment Overview

The Current Situation of Providers

Current Medicaid payment rates do not account for the actual costs incurred by providers for the provision of EMS

- EMS providers are left to use alternative funding sources to supplement the shortfall between the true cost of providing EMS transports and current payment rates
- The CO EMS Supplemental Payment provides additional funding on top of current Medicaid payments

Provider transports Health First Colorado beneficiary.

Provider bills Medicaid for transport.

HCPF draws the
Federal Medical
Assistance
Percentage (FMAP) for
calculated Medicaid
allowable costs.



CO EMS Supplemental Payment Summary



- Voluntary opportunity
- For public providers only
- Created to reduce the gap between Medicaid reimbursement rates and cost to public providers
- Required annual cost report based on the most recent state fiscal year (July 1st to June 30th)



How Does the CO EMS Supplemental Payment Work?

Supplemental Payment programs allow states to access additional federal funds for healthcare services

- Since Medicaid is a jointly funded federal and state health insurance program, each entity is responsible for its share of costs
- The expenses already incurred by participating public EMS providers represent the state share

Key Steps

1

Bill Health First Colorado Fee for Service (FFS)

2

Receive Health First Colorado Interim Payments

3

Complete the annual CO EMS Supplemental Payment cost report

4

Receive supplemental payment



CO EMS Supplemental Payment Eligibility Criteria



Medicaid

Enrolled as a Medicaid provider



Transport

Provide EMS transports to Medicaid enrollees



Public

Owned or operated by a government entity



How to Obtain a Supplemental Payment

- Must be a public EMS provider—provide EMS transports to Health First Colorado patients
- 2 Bill Health First Colorado
- Receive Health First Colorado Interim Payments
- Fill out the FY 2024-25 Intent of Participation Form
- Complete the FY 2024-25 cost report by November 27th, 2025

- 6 Complete Desk Review
- If selected, complete Comprehensive Audit Review (CAR)
- 8 Complete Cost Report Certification
- Receive supplemental payment through the cost settlement process



New Provider Participation Agreement

Important - Please complete the form in full to avoid any delays by:

- Returning both pages of completed Participation Agreement to HCPF SupplementalEMS@state.co.us
- Providing hand-written signature or digital signature through adobe

Colorado Emergency Medical Services (EMS) Supplemental Payment Annual Provider Participation Agreement State Fiscal Year (FY) 2024-25			
Important Instructions: Complete all fields below including signature and date fields. Access to the Ambulance Services Cost Report Portal FY 2024-25 cost report will be delayed without a completed form.			
First and Last Name:			
Title:			
Email Address:			
Phone Number:			
Street Address:			
City, State and Zip:			
Provider Name:			
Doing Business As (dba):			
Provider NPI:			
Additional NPI (if applicable):			
Additional NPI (if applicable): Provider Authorized Representative's Signature:			
Date:			
Return <u>both pages</u> of the completed Participation Agreement to the Department of Health Care Policy and Financing, Attn: EMS Supplemental Payment, HCPF_SupplementalEMS@state.co.us. Please notify us if your banking information has changed since last year or if this will be your first year receiving the supplemental payment.			
Improving health care equity, access and outcomes for the people we serve while saving Coloradans money on health care and driving value for Colorado. hcpf.colorado.gov			

Sam Alex Mateer Digitally signed by Sam Alex Mateer Date: 2024,05,01 13:57:49 -06'00'



Cost Settlement Calculation Example

The following example is of a fire department and should not be used for budgeting

- Several variables will impact the supplemental payment including allowable Medicaid transports
- Providers will receive both, the Health First Colorado Paid Claims and the supplemental payment
- Reimbursement for the EMS
 Supplemental Payment is federal
 matching dollars that are authorized
 through Title XIX of the Social
 Security Act (which establishes
 Medicaid). Reimbursement does not
 include members whose eligibility
 are through non-Title XIX programs
 such as CHP+, or any other non Title XIX program.

Sample Cost Settlement		
Total Expenditures	\$8,000,000	
EMS Allocation Statistic	x 75%	
Total EMS Expenditures	= \$6,000,000	
Total Transports	/ 5,000	
Average Cost per Transport	= \$1,200	
Total Health First Colorado Transports	x 250	
Total Cost of Providing Health First Colorado Transports	= \$300,000	
Health First Colorado Paid Claims	(\$75,000)	
Net Cost of Providing Health First Colorado Transports	= \$225,000	
FMAP Application (FY 2024-25)	x 50%	
Total Computable	= \$112,500	
State Administration of Program (10%)	(\$11,250)	
Projected Supplemental Payment	= \$101,250	



HCPF Federal Resources

Understanding the Impact of the Federal Changes to Medicaid





Check for Understanding



CO EMS Supplemental Payment FY 2024-25 Data Collection

Data Collection

The Supplemental Payment data collection requirements are designed to utilize reports and materials that most providers prepare for other purposes

- It is recommended that providers have inter-departmental support to collect this data
- All reports should be pulled to match the State Fiscal Year 2025 (7/1/2024 - 6/30/25) cost reporting period

Expenditures by Cost Center	Annual detailed actual expenditures broken out by cost center
Depreciation Report	Depreciation schedule file that includes capita asset number, description, date placed in service, years of useful life, and original cost
Allocation Statistics	Report showing the total amount of time spent on EMS and non-EMS calls
Indirect Cost Rate Proposal	Cost Allocation Plan or Indirect Cost Rate proposal from the provider's county/city/town to incorporate additional overhead costs
Net Revenue Summary	Report of net revenues for all payer types, except Health First Colorado
Total Transports	Report all emergency medical transports, including Health First Colorado
Federal Funds	Award files including descriptions, and the amount spent during the fiscal year



Expenditures

Report expenses incurred between July 1, 2024 and June 30, 2025

- Allowable expenses are those required for the provision of EMS (ex: celebrations or fundraising events are not allowable)
- On the Ambulance Services Cost Report (ASCR) portal, determine whether the expense is:
 - 1. Solely dedicated to the provision of EMS (**Medical Transportation Services (MTS) Expense** tab)
 - Solely dedicated to fire services (Non-MTS Expense tab)
 - 3. Shared between fire and EMS operations (Expense Allocation tab)







If a provider reports on a calendar year basis, costs can be pro-rated to report 50% of the expenses from 2024 and 2025.

Do not use budgeted or balance sheet totals. Ensure that actual expenses incurred for the reporting period are used to avoid overreporting.



Depreciation Required Fields

Description of Asset	Include the provider's unique label or title for each asset
Expense Type	Select the asset type in the in drop-down of the corresponding category (MTS, Non-MTS, Shared)
Asset Number	Unique identifier that will tie back to the provider's fixed asset report
Month/Year Placed in Service	The date the depreciable asset was first placed into service
Years of Useful Life	Estimated useful life as identified in the provider's fixed asset report/depreciation schedule
Month/Year Placed out of Service	The ASCR portal automatically calculates this date based on the <i>Month/Year Placed in Service</i> and <i>Years of Useful Life</i>
Cost	Initial cost of asset as identified in the provider's depreciation schedule
Salvage Value	Estimated resale value of the asset at the end of its useful life



Depreciation

Report capital assets that are \$5,000 or more under the Depreciation tab

- If an asset is less than \$5,000, it can be reported under the appropriate expense tab (MTS, Non-MTS, or Expense Allocation), if it was purchased during the cost reporting period. If not, it is unallowable.
- All assets should be labeled as either MTS, Non-MTS, or Shared.





Helpful Tips



CMS guidelines require that vehicles reported under Depreciation should only be categorized under MTS if they transport patients.

Ambulances that transport patients are the only vehicle types that should be categorized under MTS.

All other vehicle types should be categorized under Non-MTS



Allocation Statistics

The **Allocation Statistics** determine how much of your shared expenses (reported under the **Expense Allocation** tab) and capital assets can be allocated toward the total allowable costs

- Report total amount of time spent on EMS related calls (MTS Duty) and non-EMS calls (Non-MTS Duty) under the Allocation Statistics tab
- The total "time on task" is the time spent between "dispatch" time to "clear" time





Indirect Cost Rate Proposal

Known as Cost Allocation Plan or Indirect Cost Rate Proposal

- Determines the percentage of shared costs between a county/town/city and the provider.
- Examples include Utilities, Human Resources, Legal and other administrative expenses.
- Not commonly reported in Colorado.





Net Revenues Summary

Report the amount that the provider **received (net)** only for transports from non-Medicaid payor types on the **Revenues** tab, under the **Other Revenues from Transports** section

- Do not report amounts charged (gross).
- The Medicaid Fee for Service Revenue from
 Transports section on the Revenues tab is locked for editing and will be populated on your behalf.
- If a revenue source does not fit the categories previously listed, add a new row and title it appropriately to identify the additional revenue sources.





Total Transports

Report transports on the **Final Settlement** tab, under the **Number of MTS Transports** section, in the **Total** column

- Report the total amount of ALL EMS transports regardless of payment.
 - This should include Medicaid, Medicare and all calls that resulted in an EMS transport.
- The Health First Colorado transports will be reported in August of 2026 by HCPF.
 - Note that crossover claims are not eligible Medicaid transports



Important: Eligible Medicaid transports are required to receive supplemental reimbursement.



Total Transports Cont.

The number of transports is highly important to calculate an accurate cost settlement

- An allowable transport is an emergency ambulance transport of a patient to an emergency facility.
- Non-emergent or scheduled inter-facility transports are not allowable.
- The total number of transports should include every single transport completed by the provider, regardless of payor type.





Federal Funds

Report only **federal** grants under the **Reclassification** and **Adjustments** tab.

- Do not report state and local grants as they do not affect the CO EMS Supplemental Payment.
- Only report the **amount expended** during the cost reporting period (July 1, 2024, through June 30, 2025).
- Supporting documentation should include the original grant (fully awarded amount), and items expended during the cost reporting period.





Helpful Tips

All Coronavirus Aid, Relief, and Economic Security Act (CARES) Act funding spent during the FY 2024-25 cost reporting period must be reported on the **Reclassifications** and **Adjustments** tab on the ASCR portal.

Other examples of Federal Funds include:

- Staffing for Adequate Fire & Emergency Response (**SAFER**)
- Assistance to Firefighters (**AFG**)
- Federal Emergency Management Agency (**FEMA**)



Cost Report Discussion

Why do providers call the CO EMS Help Desk?



Your Guide to Success



Get to know us if this is your first year of participation and connect with other participating providers



Reach out to the Help Desk when needed



Become familiar with the resources available



Confirm all data matches the 7/1/2024 through 6/30/2025 cost reporting period



Give your department enough time to gather required data



Check for Understanding



CO EMS Supplemental Payment Timelines

FY 2024-25 Cost Report Timeline

The upcoming CO Supplemental Payment Program Timeline at a glance:

September 2025

In-Person & Virtual Trainings

February to March 2026

All providers undergo Desk Reviews

August 2026

- Collection of final signed Cost Report Certification forms
- Fee-For-Service (FFS)
 Medicaid Transports and
 Revenues Populated

November 2025

Electronic Cost Report Certification due November 27th, 2025

March to April 2026

- Selected providers undergo Comprehensive Audit Review (CAR)
- Strategic Intervention Trainings (SITs) are required for providers whose CAR resulted in cost report revisions

September 2026

Supplemental payments disbursed



Desk Reviews

All providers must undergo a Desk Review between February and March of 2026

- This is a process designed to maintain accuracy.
- Provider responds to triggered warnings and thresholds.
- Responses will be reviewed and follow up questions will be asked if necessary.
- If any Desk Review items require cost report revisions, the cost report can be reopened.

1 Submit annual cost report

Respond to all Desk Review questions

Complete Cost Report Certification tab



Comprehensive Audit Review (CAR)

Selected providers must undergo the CAR process between March and April of 2026

- All providers must undergo a CAR at least once every three years.
- Desk Review performance is considered when CAR selections are made.

Provider uploads supporting documentation during cost reporting process

Provider is notified of CAR selection

Provider receives an email requesting further clarification

Provider may receive a list of required revisions



Comprehensive Audit Review (CAR) Observations

Some of the common findings from the Comprehensive Audit Review (CAR) process include:

- Missing supporting documentation
- Incorrect reporting of expenses by expense category and/or cost center
- Double-reporting depreciable asset expenses

Size Category	Number of MTS Transports	Number of Selected Providers
Small	1-399	11
Medium	400-1,999	18
Large	2,000+	7
	Total	36



Strategic Intervention Training (SIT)

SITs are a requirement for providers whose CAR resulted in cost report revisions

SITs will take place between March and April of 2026

Provider receives list of required revisions

Provider is required to attend SIT

Provider makes required revisions on the ASCR portal



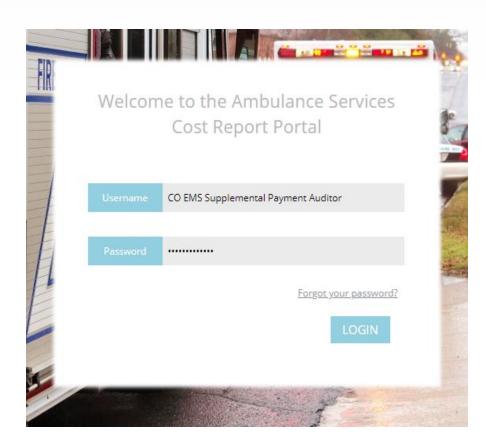


Ambulance Services Cost Report (ASCR) Portal Demonstration

ASCR Portal

Goals and Objectives of ASCR Portal:

- Integrate the federally-approved cost reporting template into an easy-to-use online application.
- Streamline data input and calculations.
- Implement real-time data validation quality assurance and accuracy.
- Create enhanced reporting capabilities for year-to-year trend analysis.
- To access the ASCR portal, go to: ascr.pcghealthservices.com

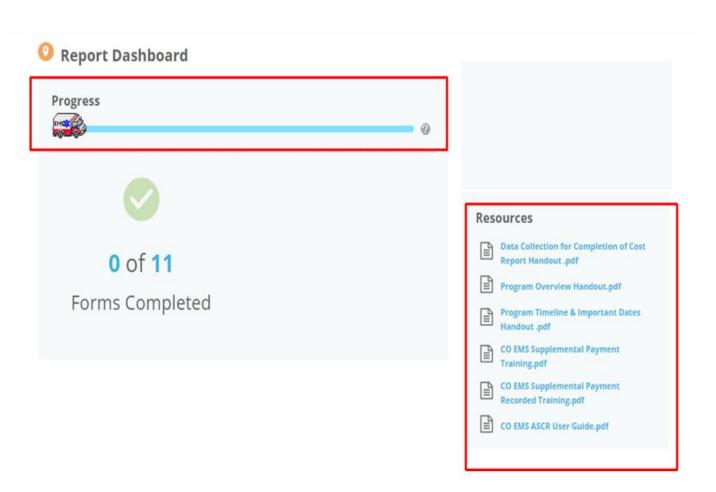




ASCR Portal — Dashboard

What will you find on the ASCR *Report Dashboard*?

- Cost Report Progress
- Resources





Additional Resources

The following documents will be available on **October 1, 2025:**

- FY 2024-25 Ambulance Services Cost Report (ASCR) User Guide
- FY 2024-25 Frequently Asked Questions
- FY 2024-25 Recorded Trainings



ASCR Portal—Save & Mark Complete

Do you have more work to do on a tab?

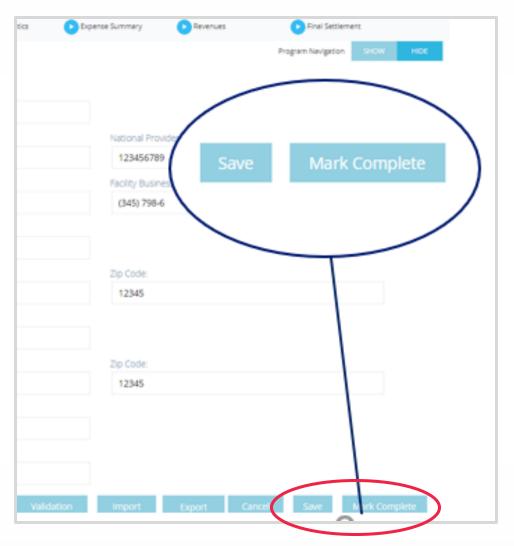
• Save your progress and return to it when you are ready.

Each tab of the cost report **must be completed** before you can submit your report

 When you have input all necessary data for each tab, select Mark Complete at the bottom of the tab.

If you **accidentally click** on the **Mark Complete** button, simply go back to the tab that requires an edit

 The page will automatically open again and updates can be made.





ASCR Portal — Import & Export

On many tabs of the cost report, you can use the Export/Import function to expedite data entry

- An Excel template will be generated, which can be completed and uploaded back to the system.
- If you need to add rows, please do so before exporting the Excel file



ASCR Portal — Uploading Supporting Documentation

All reported costs need to include supporting documentation

• If you have issues uploading a file, contact the Help Desk at COEMSsupplemental@pcgus.com or 877-775-3867

Supporting Documentation

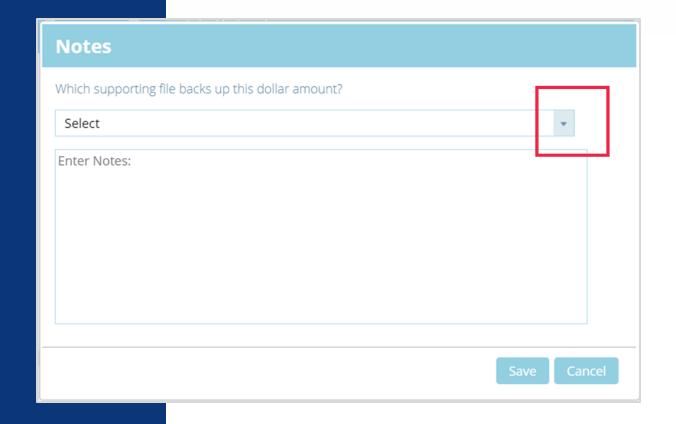
Please note: If your file exceeds the maximum upload size of 28 MB, contact PCG at COEMSsupplemental@pcgus.com for assistance submitting your file.

Upload Files



ASCR Portal — File Identification

If more than one file is uploaded to the MTS Expense tab, you will be asked to identify and select the file under which each expense will be found.





Helpful Tips

The preferred browser for optimal performance is **Google Chrome**.

If the ASCR portal has been opened for a long time, it may need to **refresh** to upload.

If a file is too large, try turning it into a **PDF** and uploading.



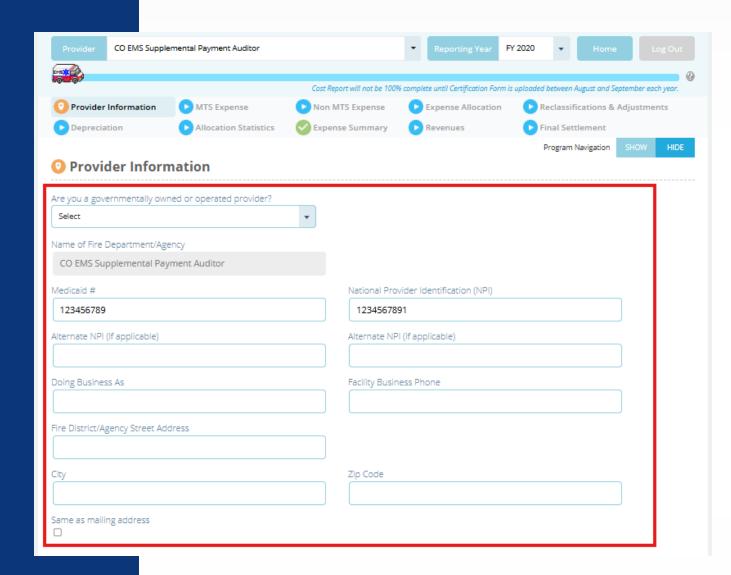
Check for Understanding



ASCR Portal — Provider Information

Additional fields: Name of person signing and certifying report, report contact person, and reporting period.

Multiple NPIs? Providers who have more than one NPI will be required to add all pertaining NPI(s).





ASCR Portal — Manage Users

Once an account has been created, the user will be able to create additional accounts for other members of the public provider's team who may need access to the ASCR portal

- Existing Feature: Add, edit, and remove all users assigned to your provider
 - All users will appear at the bottom of the Provider Information tab
 - All providers will need to review and confirm their active users before certifying the cost report

Active Users

User Name	First Name	Last Name	Email Address		
qaco	qa	со	pcgstaterole@gmail.com	Edit	Remove
Add New User				✓ Conf	firm Users



ASCR Portal — MTS Expense

Input expenditures related to Medical Transportation Services (MTS) only

• Cost centers: Capital Related, Salaries, Fringe Benefits, and Administrative & General



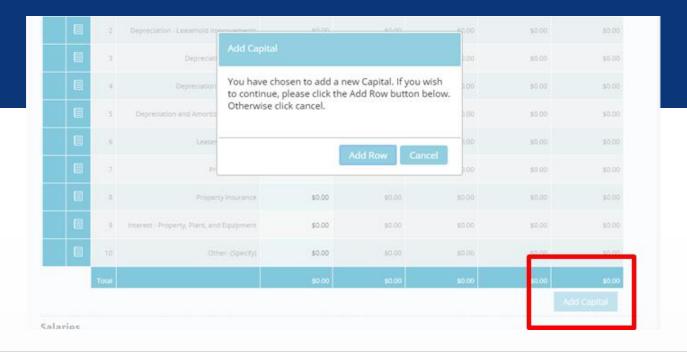
5	Salaries								
L			Line No	Cost Center	MTS Expense	Allocated Direct Service Cost	Total Reclasses	Total Adjustments	Total MTS Expense
П			11	Chie	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
			12	Administration/Directo	\$13,624.00	\$0.00	\$0.00	\$0.00	\$13,624.00
			13	Medical Directo	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
			14	Firefighter	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
			15	Paramedic	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
			16	Fire Marsha	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
П			17	Fire Prevention	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
			18	Emergency Management Coordinato	\$24,000.00	\$0.00	\$0.00	\$0.00	\$24,000.00



ASCR Portal—Add Row

If the listed categories do not fit your expenses, manually add a row and indicate the name of the expense

- Select the Add button
- All new expenses need to be added under the MTS Expense tab
 - Added expenses will be carried over to the Non-MTS Expense and Expense Allocation tabs





ASCR Portal — Non-MTS Expense

Input expenditures unrelated to MTS only

Cost centers: Capital Related, Salaries, Fringe Benefits, and Administrative & General



Salaries							
stments Total Non MTS Expense							
\$0.00 \$97,133.60							
\$0.00 \$64,168.00							
\$0.00 \$0.00							
\$0.00 \$436,995.93							
\$0.00 \$288,106.77							
\$0.00 \$48,185.28							
\$0.00 \$51,864.80							
5							



www.publicconsultinggroup.com

ASCR Portal—Expense Allocation

Input expenditures shared between fire and EMS operations

Cost centers: Capital Related, Salaries, Fringe Benefits, and Administrative & General



Sala	Salaries								
		Line No	Cost Center	Expense to be Apportioned	otal Reclasses	Total Adjustments	Net Expense to be Apportioned	MTS Allocation 65.31%	Non MTS Allocation 34.69%
		11	Chie	\$203,388.84	\$0.00	\$0.00	\$203,388.84	\$132,824.98	\$70,563.86
		12	Administration/Direc	\$217,591.81	\$0.00	\$0.00	\$217,591.81	\$142,100.36	\$75,491.45
		13	Medical Directo	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
		14	Firefighter	\$3,003,464.45	\$0.00	\$0.00	\$3,003,464.45	\$1,961,440.52	\$1,042,023.93
		15	Paramedic	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
		16	Fire Marsha	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
		17	Fire Prevention	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00



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Helpful Tips

The **Bad Debt** category is locked to prevent misreporting this unallowable cost.



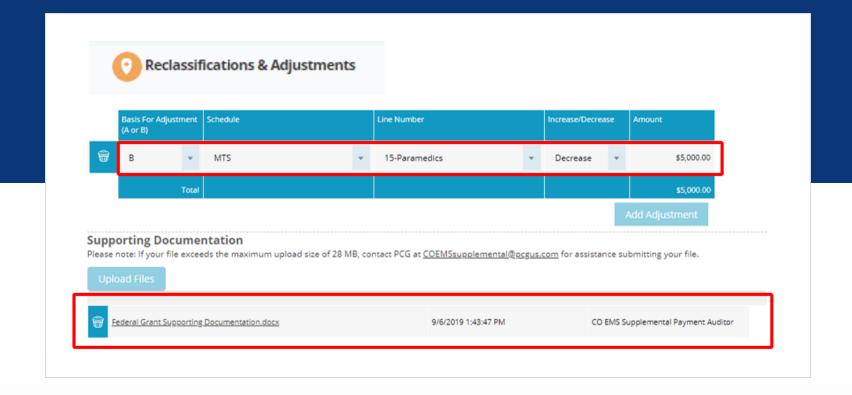


Cost identification methodologies that inappropriately allocate costs associated with fire and rescue personnel and equipment to the Medicaid program potentially would be unallowable under the federal cost allocation requirements.

Center for Medicaid and CHIP Services (CMCS)
 Informational Bulletin, Wednesday, August 18, 2022.

ASCR Portal — Reclassifications & Adjustments

Any federal funds/grants received and spent by the provider during the applicable reporting period must be reported on the **Reclassifications & Adjustments** tab





ASCR Portal — Depreciation

Report Depreciation for capital assets that exceeds \$5,000

- If you do not wish to report Depreciation, click on the Not Applicable for the <Provider Name>
 FY 2025 cost report button
- Cost centers: Building and Improvements, Equipment, Vehicles, Leasehold Improvements and Amortization—Other

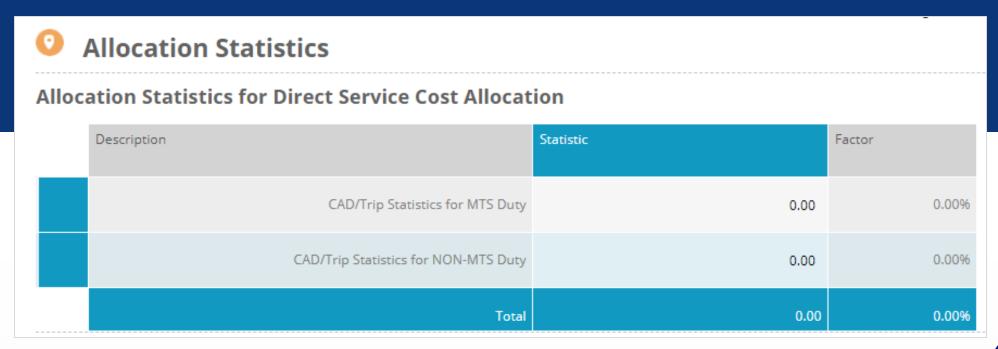




ASCR Portal — Allocation Statistics

Input the total number of minutes (time on task) spent on medical calls (MTS Duty) and fire calls (NON-MTS Duty)

- Include total time on task for all calls, not just those that result in emergency medical transports
- EMS only providers do not populate Non-MTS Duty





ASCR Portal — Expense Summary

The Expense Summary combines expenditures from the following tabs:

- Capital Expenses from Depreciation
- MTS, Non-MTS and Shared and Expense Allocation
- Reclassifications and Adjustments to MTS, Non-MTS and Allocation Statistics tabs
- No data can be entered on this tab (only provides a summary of all reported costs)



Total Summary

	MTS Expense	Non MTS Expense	Administration & General	Total Expense
Total Fire District/Agency	\$0.00	\$116,538.12	\$450.56	\$122,972.75



ASCR Portal — Revenues

The Revenues tab is used to enter Other Revenues from Transports

- Only report revenues received (net)
 - Do not add pending charges to the revenue tab
- PCG will enter your Health First Colorado (Medicaid FFS) data
- Health First Colorado revenue will be deducted from the net cost to calculate your final cost settlement



C	Other Revenue/Funding Sources						
			Other Revenue/Funding Sources	MTS			
			Out of State Medicaid Fee for Service	\$0.00			
			Out of State Medicaid Managed Care Organizations	\$0.00			
			Auto Insurance	\$115,540.48			
			Contract	\$0.00			
			Governmental	\$0.00			
			Medicare	\$48,124.47			



ASCR Portal — Final Settlement

Enter the total number of ALL MTS Transports per quarter under the Total column only

• This should include Health First Colorado transports



8	Number of MTS Transports	Other Payor	Fee For Service	Total
Qtr 1	July 1 through September 30	60	d	60
Qtr 2	October 1 through December 31	67	0	67
Qtr 3	January 1 through March 31	77	0	77
Qtr 4	April 1 through June 30	80	0	80
		284	C	284
				284

Health First Colorado Transports & Revenue

Only **Health First Colorado transports** are eligible for reimbursement to public providers through the CO EMS Supplemental Payment

- After all cost report revisions are made, the allowable Health First Colorado transports and revenue will be uploaded on the provider's behalf
- The transports and revenue will be uploaded in August 2026





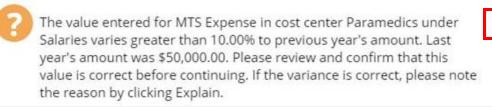
ASCR Portal — Validations

There are two types of required validations on the ASCR portal

- Confirm the accuracy of the data, or
- Provide an explanation as to why the warning is being triggered and then confirm it is correct

Sufficient Explanation Example: "The cost increase for Paramedic Salaries is due to our EMS department expansion. We hired five new paramedics. We have supporting documentation for this expense."

Insufficient Explanation Example: "I think this information appears reasonable."







Electronic Cost Report Submission

Once you have completed reporting all costs, click on the Certify button at the end of the Final Settlement tab

- Participating public providers are responsible for the accuracy of reported costs and supporting documentation
- For the Certify button to work, all previous tabs need to have been Marked Complete

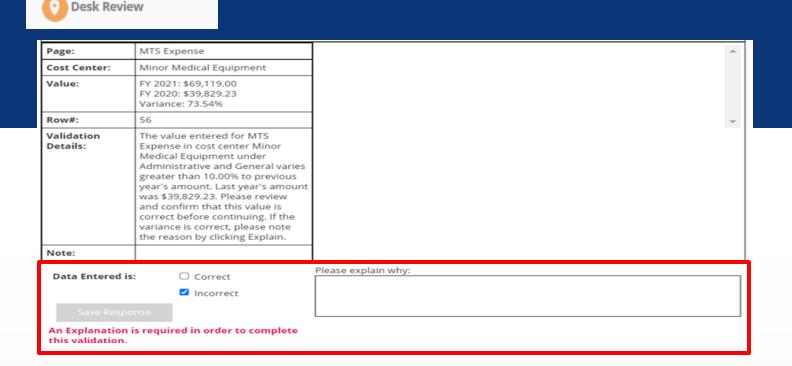




ASCR Portal — Desk Review

All responses provided for validations will be reviewed during the Desk Review process and if they are not sufficient, additional detail will be requested.

- Providers will receive automatic notifications that the Desk Review is ready for review
- All Desk Review entries need to be addressed prior to submission to PCG





ASCR Portal — Desk Review Cont.

Do not forget to submit!

 During the Desk Review period we have found many providers complete their Desk Review questions but forget to submit.

New: Providers will now find a reminder text at the top of the Desk Review tab.

O Desk Review		
	☐ Not Applicable for the HCPF TEST FY 2023 cost report	
Current Status: Released		
ONCE DESK REVIEW RESPONSES ARE COMPLETE, PLEASE "SUBMIT".		
Completed: 5		
In Process: 3 Pending: 0		



ASCR Portal — Desk Review Status

The provider can easily access Desk Review questions by selecting the Desk Review tab.

At the top of the page, it will display how many Desk Review questions are Completed, In Process, and Pending.



O Desk Review

Current Status: Cost Report Open

Completed: 25 In Process: 3 Pending: 0

The Desk Review may be in any one of the following statuses:

- Under Review: with PCG, provider cannot edit
- Released: with provider, PCG cannot edit
- Cost Report Open: cost report is open for provider to make necessary revisions
- Completed: all Desk Review entries have been accepted



ASCR Portal — Creating Desk Review Entries

If there are additional edits that providers need to make, the Revision Request button should be used

• Be as specific as possible when explaining the edit you would like to make

Revision Request		
State additional revisions that you need to make to the cost report and provide an explanation as to why.		
Page:		
Cost Center:		
Value:		
Row#:		
Validation Details:	Enter Details:	
	Save Cancel	



Revision Request



ASCR Portal — New File for Desk Review

If additional files are requested, use the Upload New Document button

• Provide a detailed explanation about which costs the newly uploaded file is related to

Supporting Documentation

Upload New Document



Helpful Tips



Documentation not uploaded after the Desk Review period will result in a SIT.



ASCR Portal — Valid Response

Validations = Desk Review Questions

- If validations do not contain sufficient information this may result in a Desk Review follow-up
- Tips: Include details of cost, include value breakdown down and if possible, include where data can be found

Insufficient Response

Page:	MTS Expense
Cost Center:	Training
Value:	FY 2023: \$7,252.48 FY 2022: \$0.00
Row#:	48
Validation Details:	Please confirm Training under Administrative and General is a new cost center. Note that you did not report this cost center last year.
Note:	Yes, this is a new cost center.

Sufficient Response

Page:	MTS Expense
Cost Center:	Training
Value:	FY 2023: \$7,252.48 FY 2022: \$0.00
Row#:	48
Validation Details:	Please confirm Training under Administrative and General is a new cost center. Note that you did not report this cost center last year.
Note:	We have added a tuition reimbursement program which allows members to get reimbursed for furthering education which includes EMS specialized training.



ASCR Portal — Revisions as a Result of the Desk Review

Once all the Desk Review entries are addressed and approved by PCG, the cost report may be reopened if there are items to revise

- The Desk Review tab will list at the top of the page the items that need revision
- Providers must confirm that all items highlighted have been revised
- Providers need to recertify the cost report under the Final Settlement tab before releasing the Desk Review back to PCG

✓ I confirm that I have made this revision.

Save Response



ASCR Portal — Comprehensive Audit Review (CAR)

The CAR process will take place on the ASCR portal

- The CAR tab will appear on the dashboard
- All communication regarding the reported costs will take place on the ASCR portal
- Providers will receive automatic email notifications that the CAR is ready for review within the ASCR portal
- The timeline for the CAR will take place shortly after Desk Reviews





Discussion

What advice would you share with the other providers regarding the CAR process?



ASCR Portal — Cost Report Certification

Upon completion of all tabs, and once the Health First Colorado transports and revenues have been populated, an Authorized Signatory of the public agency **must print** the **Cost Report Certification** form and sign it.

The **Cost Report Certification** signing, and collection process will take place in late August of 2026.





ASCR Portal — Cost Report Certification

The Cost Report Certification form attests to and certifies the accuracy of the financial information reported

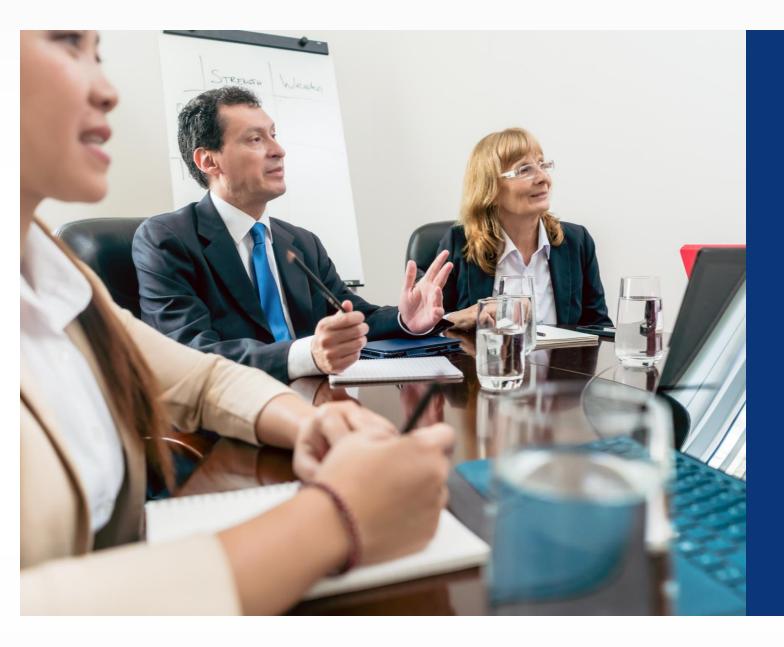
- Provider ensures that the information reported ties exactly to the supporting documentation
- Provider will sign the Cost Report Certification after the Desk Review, CAR, and inclusion of Health First Colorado transport and revenue data
- Signatory must hold fiscal authority and title such as:
 Fire Chief, EMS Director, Finance Director, etc.
- It is encouraged to add backup signers in the ASCR portal to ensure timely submission

If your provider holds more than one NPI number this will be available and visible to you when the Cost Report Certification form is printed





CO EMS Supplemental Payment Stakeholder Group



CO EMS Supplemental Payment Stakeholder Group

- Stakeholders inform program improvement suggestions
- Stakeholders contribute to public Provider outreach initiatives
- Stakeholders can guide and/or receive legislation and program updates, as available.
- You will be invited to participate in the annual Stakeholder Meeting on May 14, 2026.



CO EMS Supplemental Payment Training Feedback

Training Feedback

We want to hear your feedback on training

- Does this in-person training location work for you?
 - If **no**, please let us know your preferred training location.
- If attending virtually, would you have attended in-person if the training was offered at a different location?
 - If yes, please list your preferred training location.





CO EMS Supplemental Payment Contact Information



HCPF Contact

Olga Gintchin

Program Administrator

HCPF_SupplementalEMS@state.co.us



Ongoing Support

Please reach out to us if you have any questions!

On-Going Cost Reporting Support Information 877-775-3867

COEMSsupplemental@pcgus.com

Help Desk hours are Monday- Friday, from 8 am to 5 pm MT, excluding holidays.



Solutions that Matter