

Coding County Activities: Enhanced/Non-Enhanced

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Ask Questions Throughout!

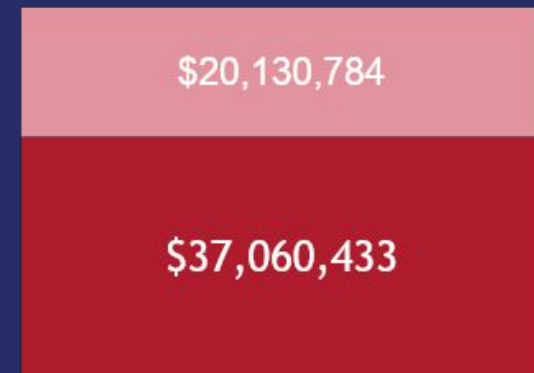


County Administration Allocation

- How is each county's county administration allocation formulated?
- How are costs split between different public assistance programs?
Random Moment Time Sampling (RMTS)

FY 2021-22 HCPF Allocation:
\$57,191,217.00

■ Enhanced ■ Non-Enhanced



FY 2021-22



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CFMS Coding requirements: Existing/Recurring Expenditures

- Recurring expenses
- Should be coded as required by HCPF financial rules, Medicaid guidance and approved allocation plans
- Allocated/shared expenses coded to some cost pools will also receive a portion of enhanced match based upon RMTS information collected.

Medicaid only expenses that are not eligible for enhanced match must be coded **M100**.

- These are matched at 50% Federal, 30% State, 20% County
- Only expenses as defined by the 2015 Agency Letter 15-006 may be coded to enhanced match **M675.4015**

These are matched at 75% Federal, 15% State, 10% County



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75% Federal
15% State
10% Local

Enhanced

Non-Enhanced

50% Federal
30% State
20% Local

Eligible for 75/25 Application, On-going Case Maintenance and Renewal*	Eligible for 50/50 Policy, Outreach and Post-eligibility
<ul style="list-style-type: none"> • Intake - Application/data receipt(i) • Acceptance- Edits, verification and resolution of inconsistencies(ii) • Eligibility determination (iii) • Outputs-Issuance of eligibility notices to customer, file updates and transactions to partners(iv) • On-going case maintenance activities, including intake activities related to renewals(v) • Customer service, including call center activities (vi) and out-stationed eligibility worker activities (vii) related to eligibility determination. • Maintenance and Routine Updates, including routine system maintenance, security updates, and other routine maintenance activities related to the Eligibility Determination System. 	<ul style="list-style-type: none"> • Outreach and Marketing – General public outreach, beneficiary education and outreach, including explanation of eligibility policies, program and benefits. • Policy development and research even if related to eligibility determination standards and methodologies • Staff development and training even if related to eligibility determination, except for Operational Readiness training as defined in the response to question 3 below. • Community-based application assistance • Program integrity, including auditing efforts • Appeals of final eligibility system determinations • On-going case maintenance activities, including plan choice/counseling and enrollment • Customer service, including call center activities and out-stationed eligibility worker activities, related to beneficiary education, benefits, plan choice/enrollment, and civil rights complaints.

2015 Agency Letter



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How does coding affect my county?

- What does it look like for a county eligibility tech?
 - Depends on county process
 - Generalists typically report to a cost pool or group of cost pools
 - If reporting to more than one program/cost pool, must complete 100% time reporting
- What does it look like for finance staff?
 - Payroll techs enter appropriate units for each program that includes fringe (vacation, sick, etc.) into CFMS
 - Invoices should come to accountants include details of what program/cost pool should be coded in CFMS



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How does coding affect my county?

- How does it benefit the county to pay close attention to correct coding?
 - Correct entry cuts down on re-work
 - Helps budget correctly at local & state level
 - If the coding is incorrect and is not caught before end of fiscal year, it could become a 100% county-only expense
- What is the difference for my county between coding to a cost pool and coding to enhanced/non-enhanced?
 - Code to enhanced only (M675) when the expense or activity meets the criteria to receive greater federal drawdown
 - Cost pools will get some enhanced match based upon hits to the RTMS and may be a simpler business process for some counties



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Further Requirements

- Costs must not duplicate payments for activities.
- Employee time reporting must have proper documentation for those who work on more than one program or cost pool.
(100%-time reporting)
- All costs must have appropriate supporting documentation.
- If you have questions as to what is an allowable expense, please reach out to: HCPF_audit@state.co.us
(HCPFunderscoreaudit@statedotcodotus)



Coding Activities for PHE Budget Amendment Funds

- Activities related to the Public Health Emergency should be coded to the county's PHE Budget Amendment-provided funds
 - Enhanced/Non-Enhanced activities will still follow the 2015 Agency Letter
- There is **no local match** for these funds
- Funds should be expended according to each county's staffing plan (See Operational Memo HCPF OM 21-036)
 - PHE-related expenses eligible for enhanced match must be coded to **M216.5405**
 - PHE-related non-enhanced expenses must be coded to **M215.5400**



How does coding appropriately to the PHE Budget affect my county?

- **Is coding to the PHE budget different than coding regular non-PHE activities?**
 - The only difference between coding regular and PHE activities are the CFMS codes used; there is no change in process
- **What if I don't have enough non-enhanced match to cover expenses?**
 - Continue coding expenditures to the appropriate non-enhanced code; the Department is monitoring the availability of funding as expenditures are coded.
- **What is going to happen since the PHE unwind has been extended?**
 - The Department is working through the implications of the PHE unwind extension; counties should follow current guidance
- **If there's no local match, why does coding correctly matter?**
 - Coding correctly ensures the state draws down the correct amount of federal match, which is subject to repayment if ineligible expenditures are charged to federal funding.





Questions?

