



## OPERATIONAL MEMO

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<b>Title:</b> Enrollment Denial of Potential Participants of Programs of All-Inclusive Care for the Elderly	<b>Topic:</b> PACE
<b>Audience:</b> PACE Organizations	<b>Sub-Topic:</b> Provider Guidance
<b>Supersedes Number:</b> N/A	<b>Division:</b> Benefits and Services Management
<b>Effective Date:</b> Nov. 13, 2023	<b>Office:</b> Office of Community Living
<b>Expiration Date:</b> Nov. 13, 2025	<b>Program Area:</b> PACE
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<b>Legal Authority:</b> 42 CFR Part 460	
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<b>Approved By:</b> Colin Laughlin	

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HCPF Memo Series can be accessed online: <https://www.colorado.gov/hcpf/memo-series>

### Purpose and Audience:

The purpose of this Operational Memo is to provide Programs of All-Inclusive Care for the Elderly (PACE) organizations with procedures for reporting an enrollment denial of a potential PACE participant, who cannot live safely in the community at the time of enrollment, to the Department of Health Care Policy & Financing (HCPF).

### Information:

In addition to the procedures in this memo, PACE organizations must follow all enrollment requirements set forth in [42 CFR Part 460](#), the PACE Program Agreement, the State of Colorado Contract, and all other applicable requirements.

- A. Intake process: Intake is an intensive process during which PACE staff members make one or more visits to a potential participant's place of residence and the potential participant makes one or more visits to the PACE center. Among other activities, the intake process must include the following:

1. PACE staff must assess the potential participant to ensure that he or she can be cared for appropriately in a community setting and that he or she meets all requirements for PACE eligibility.
  2. The appropriate members of the interdisciplinary team (IDT), as identified by the IDT, must review and discuss each potential participant and decide to approve or deny the individual's enrollment based on that review.
- B. Denial of enrollment: If a potential participant is denied enrollment because their health or safety would be jeopardized by living in a community setting, the PACE organization must meet the following requirements:
1. Notify the individual in writing of the reason for the denial.
  2. Refer the individual to alternative services, as appropriate, including a referral to the local Case Management Agency.
  3. Maintain supporting documentation of the reason for the denial.
  4. At the same time notice is issued, the PACE organization must notify the HCPF in the form and manner specified by HCPF and make the documentation available for review.
- C. Enrollment denial report: The PACE organization must submit an enrollment denial report, and the required supporting documents, to the organization's SharePoint page, which is managed by HCPF.
1. The report must include, but is not limited to:
    - a. The name of the PACE center at which the potential participant applied to receive services.
    - b. The name of the PACE organization.
    - c. The potential participant's name.
    - d. The potential participant's date of birth.
    - e. The potential participant's Health First Colorado (Medicaid) ID number, if applicable.

- f. The signature and title of the PACE representative who completed the form (e-signature is acceptable).
- g. The date the PACE representative submitted the form.
- h. The PACE staff who visited the potential participant's place of residence, including dates.
- i. The date(s) the potential participant visited the PACE center, or the reason why a visit did not occur.
- j. The date the IDT denied enrollment.
- k. The specific reason(s) for the enrollment denial and why the reason(s) could not be remediated.
- l. The alternative services to which the individual was referred.
- m. The PACE organization's written notice to the individual.
- n. The assessments conducted by PACE staff during the intake process.

**Note:** HCPF's criteria for a potential participant's ability to live in a community setting without jeopardizing his or her health or safety are specified in the PACE Program Agreement, Appendix Q. Appendix Q is saved to each PACE organization's SharePoint page. Path: Contracts & Program Agreements/Program Agreements/Templates/SAA Appendices.

- 2. At the same time the report is submitted to SharePoint, the PACE organization must notify HCPF via the general PACE email - [hcpf\\_pace@state.co.us](mailto:hcpf_pace@state.co.us).
- 3. Avoid encrypted emails when possible. To avoid encryption, the PACE organization should:
  - a. Title the email: Enrollment Denial Report for [PACE Center Name].
  - b. Include the following message in the body of the email: [PACE Center Name] uploaded an Enrollment Denial Report to SharePoint on [Date].

- c. Avoid attachments containing personally identifiable information.

HCPF may request additional information if the form is incomplete or if the required supporting documents are not provided.

**Action To Be Taken:**

PACE organizations must follow the reporting requirements in this memo, including the use of the Enrollment Denial Report Form.

**Definition(s):**

None

**Attachment(s):**

Note: The following attachment can be found in the “PACE Forms and Resources” section of the [HCPF PACE webpage](#):

- Enrollment Denial Report Form

**HCPF Contact:**

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