



COLORADO

Department of Health Care
Policy & Financing

1570 Grant Street
Denver, CO 80203

In response to questions regarding [HB 22-1260](#) the Department of Health Care Policy and Financing (HCPF) appreciates the outreach from providers and advocates and the opportunity to provide the following information.

HB22-1260 is focused on education and does not require HCPF to make any changes to our current operations, payment, policy or systems. While the HB did mention Colorado Medicaid in the Legislative Declaration, the Declaration does not mandate action and is informational only.

Currently, Applied Behavioral Analysis (ABA) services are covered in school and paid by the School Health Services (SHS) program. Medicaid's Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) requirements do not mandate how a program should be paid, only that costs should be covered if the services are found to be medically necessary.

The School Health Services (SHS) Program covers those individuals under the age of 21. ABA is covered in SHS as long as the school district or Board of Cooperative Education Services (BOCES) participates in the SHS Program and the service is listed on a plan of care where medical necessity has been established along with scope, duration and frequency and is delivered by a Medicaid qualified provider. Reimbursement is paid to the participating school district or BOCES, not to individual providers. **The SHS Program should be utilized to bill Medicaid for services provided at schools.** The Department is working with community providers (school-based health providers in particular) to help them understand how to bill for these services.

SHS Program currently allows ABAs that are nationally certified as Board Certified Behavior Analyst (BCBA) or from the Behavior Analyst Certification Board (BACB). Starting October 1, 2022, the SHS Program will allow for Registered Behavior Technicians (RBT) to participate in the SHS Program under the supervision of certified ABAs.

In accordance with program rules, the Colorado utilization management vendor will continue to deny Prior Authorization Requests (PARs) for these services and direct providers to the SHS Program for coverage. Colorado utilization management (UM) vendors follow the federal requirement in EPSDT, including the requirement that medical necessity decisions are individualized and flat limits or hard limits based on a monetary cap or budgetary constraints are not allowed and are not consistent with Department protocols. To the extent that members or providers find that the UM processes are not working as intended, they should contact HCPF at hcpf_UM@state.co.us.

Any questions regarding the SHS program should be directed to Olga Gintchin at olga.gintchin@state.co.us.

