

Department of Human Services Tip Sheet: Clients Enrolled in Health First Colorado (Colorado's Medicaid Program)

RAE Enrollment

Many children involved in the child welfare system are eligible for Medicaid which provides physical and behavioral health services. Once enrolled in Medicaid, a child is assigned to a Regional Accountability Entity (RAE) based on the physical location of the child's primary care physician.

- Many children are enrolled in Medicaid before their involvement with child welfare and juvenile delinquency. As a result, the child may be in a RAE that does not cover the county with jurisdiction over the dependency and neglect action
- The Department is revising its member attribution process to ensure children who gain Medicaid eligibility as a result of a dependency and neglect action are attributed to the RAE covering the county with jurisdiction over the action, in accordance with HB20-1237.
- HB20-1237 codifies in statute the state's intended policy to keep children in child welfare and juvenile delinquency in the **RAE in which they were originally enrolled** so that vulnerable children maintain services and do not risk delays in services.
- A child's RAE assignment can only be changed with the permission of the legal guardian.

Initial Appointment Requirements	
Well-child Visit (including vision screenings)	Within 14 days of placement
Dental Exam	Within 8 weeks of placement
Behavioral Health Screening*	Within 30 days of placement

*Behavioral Health Screening is a RAE performance metric.

Physical Health Services

Foster care children who are newly placed need a **well-child visit, including vision screening, scheduled within 14 days of placement.**

- The child may have a history with a specific primary care provider. **RAEs recommend maintaining this connection, when possible, as the primary provider is often an excellent source of historic information.** If the child was enrolled in Health First Colorado before his/her foster care placement and received care, likely the attributed PCMP is the child's medical home and it is best practice to keep this connection. An exception may be in instances of safety concerns.
 - If this is not possible because of the location of the child's placement, the child's RAE is available to help find a PCMP near the child's placement who accepts Medicaid and has same-day or after-hours appointments.
- All children, especially those in child welfare need **well-child visits** on an ongoing basis, so it is important to find a PCMP that meets their needs. The schedule is as follows:
 - Children age four years and under: based on the [American Academy of Pediatrics/Bright Futures periodicity schedule](#) adopted by The Department under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT)
 - Children age four years and over: a minimum of annually

Developmental Screening

All children under the age of 3 and removed from home must have a developmental screening within the last 6 months after their removal. If a screen was not completed, one must be scheduled. These should be completed during the well-child screening completed within the first 14 days. The RAE can assist in locating a screen that may have already been completed and providing that information to the county staff.

Dental Care Services

Newly placed foster children need a **dental exam within eight weeks of placement**.

- Oral health benefits begin on the first day after the month of eligibility.
- The state partners with DentaQuest to deliver dental care to Health First Colorado members. DentaQuest provides a network of dentists across Colorado.
 - To find a dentist, go to DentaQuest.com/Colorado or call **1-855-225-1729**.
 - The RAE can also help find a dentist who meets the foster child's needs.
- On an ongoing basis, foster children should have a **dental exam every six months** (starting at the time of eruption of the first tooth).

Behavioral Health Services

Behavioral health (BH) services for Health First Colorado members are administered and paid for by the RAE the child is enrolled with.

- Each RAE is responsible for creating a statewide Behavioral health provider network, but the network is unique to each RAE.
- Each RAE is also responsible for the payment of BH services for anyone assigned to the RAE. **For this reason, to ensure payment of BH services, a referring DHS worker should connect a child to a contracted BH provider in the child's RAE network.**
 - DHS workers should contact the RAE care coordinator upon placement for assistance with paid services, screenings, medications, past care and to assure children are using contracted providers for behavioral health services.
 - RAE case managers can help determine funding and medical necessity.
- Generally, foster care children can receive services at any community mental health center, as the centers are contracted with most RAEs.
- Please note that all Health First Colorado members have access to six short-term, limited behavioral health services in primary care settings. These short-term, limited services are provided by select PCMPs and are not reimbursed by the RAE. For this reason, any applicable provider can be accessed for these sessions, and a member's assigned RAE does not need to be considered.

Behavioral Health Screening

Children involved in Child Welfare are at higher risk for behavioral health concerns, so it is a best practice that a newly placed foster child of any age also receives a **behavioral health (BH) screening during their first appointment**. This screening may take place at primary care if this provider also provides BH services.

- The child's RAE can help you find this type of provider.

At any point during a child's placement, it may be determined that a foster child may benefit from Behavioral health treatment. When this occurs, the RAE can help the child access those services. Call the RAE or visit their website to learn more about their BH provider network. (See separate tip sheet with contact info for all RAEs.)

QRTP and PRTF

Many families involved with the DHS retain custody of a child covered by Health First Colorado benefits. In this situation, DHS-involved children and their family members are eligible for the full array of covered services, as long as there is a covered procedure code, a covered behavioral health (BH) diagnosis, and demonstrated medical necessity as supported by an Independent Assessment (IA).

Child in Custody of DHS

For a **child in the custody of DHS**, DHS is responsible for funding services in a Qualified Residential Treatment Program (QRTP) if the stay is not medically necessary and is for placement reasons only. The assigned RAE is not responsible for paying for these services. In cases where DHS pays for QRTP, the QRTP is responsible for treatment recommendations, discharge planning, and coordination of care for community-based services up to 6 months post discharge. The RAE is available to support the QRTP.

If a child in the custody of DHS needs PRTF level of care, a county will refer directly to the facility and the facility will bill HCPF directly for the total cost of care. If the county is seeking a State-funded high acuity bed, all other levels of care are exhausted.

Child in Custody of Parent/Guardian

When **the parent or guardian retains custody**, the RAE is responsible for funding QRTP treatment in cases where the child has a covered diagnosis and the level of care is determined to be medically necessary.

- Request pre-authorization for residential level of care by the RAE. QRTP may not be the appropriate level of care, and the RAE can help identify treatment alternatives that can keep the child in the community.
- Note that a court order for treatment does not constitute medical necessity for that service. The RAE will reimburse court-ordered treatment in a QRTP that is determined to be medically necessary. If not medically necessary, the RAE is not responsible for funding.

Denial of QRTP and PRTF Treatment for Children Not in DHS Custody

If the RAE denies a request for QRTP or PRTF treatment, the member/family will be informed about the reasons for denial, alternative recommendations, and how to appeal the decision.

- If denied because it does not meet medical necessity criteria, accessing the Fee-for-Service or Early and Periodic Screening, Diagnostic and Treatment (EPSDT) funding for the services is not permitted.
- If denied because the member's need is due to a non-covered diagnosis (e.g., autism spectrum disorder) the RAE will help the accepting provider pursue alternative funding through the Colorado Fee-for-Service or EPSDT programs. Send a request to epsdt@state.co.us
- Appeals should only be pursued if the family wants to request a second opinion from the Children and Youth Mental Health Treatment Act (CYMHTA).
- For members with a non-covered diagnosis, Fee-for-Service can fund QRTPs when the accepting facility is in state. The fee-for-service benefit only covers treatment costs. Room and Board and any costs for education will need to be funded separately.
- If a PRTF accepts a member, all services not funded by a RAE are covered Fee-for-Service.
- A child's home school district may contribute to the child's educational costs. The RAE care coordinators can help with other options for funding if needed.
- If there are no in-state options for care, please refer to the out-of-state Tip Sheet.

Funding through Colorado EPSDT Program

The [Colorado Early and Periodic Screening, Diagnostic, and Treatment \(EPSDT\) program](#) provides additional funding for medically necessary services not available to other Health First Colorado members under the state plan.

- Services covered under EPSDT still need to meet medical necessity requirements, and treatment may not be deemed experimental.
- Services may include preventive care, dental, mental health, development, and specialty services.

Former Foster Care Youth

Foster children who remain in care after their 18th birthday are eligible for services under **former foster care youth Health First Colorado**. Medical assistance extends to age 26 for former foster care youth who were in Colorado foster care at ages 18, 19, 20, or 21 and enrolled in Health First Colorado.

- Qualifying youth do not have copays for services, except for pharmacy.
- Qualifying youth do not have to do anything additional to apply for this continued benefit.

Youth who left foster care before their 18th birthday are not eligible under former foster care youth Health First Colorado, but may still be eligible for regular Health First Colorado benefits. For more information, refer to the [Member Frequently Asked Questions page](#),

Former Foster Care Youth FAQs, on the HCPF website: [Colorado.gov/hcpf](https://colorado.gov/hcpf).

Important Notes

Please help the youth understand that he/she will receive information based on the current address in Peak.

- If the address is not updated after the youth's last placement, the youth will not continue to receive Health First Colorado information after leaving this placement, unless the youth is educated on how to update his/her information in Peak.