

# HCPF/Eligibility Sites Monthly Touch base June Renewal Project 10595 Focus

June 26, 2025

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Marivel Klueckman | Eligibility Division Director



# Agenda

- Welcome
- June Renewal Project 10595
- Questions



# CMS Medical Assistance Renewal Requirements

## Understanding the Changes and New Functionality Project 10595

Ana Bordallo | Eligibility Policy Lead  
Tracy Pasillas | Eligibility System Analyst



# Welcome

- Presentation speakers and Subject Matter Experts (SMEs)
- Question and Answer breaks
- Questions and Answers will be posted after the presentation
- Session recorded and posted on HCPF training topics website
- Contacts
- Office hours during the upcoming Touch Base Meeting
- Revamp of the Medical Assistance (MA) Renewal Workbook



# Introduction

## Overview of Colorado Benefits Management System (CBMS) and Project 10595

- Project Objective:
  - Ensuring continued medical assistance coverage upon timely Renewal information submission.
  - Aligning system processes with federal requirements.
  - Enhancing client notification and correspondence.

# Covered Topics

- MA Renewal Ex-Parte Process - Previous functionality
- MA Renewal Ex-Parte Process - New functionality
- PEAK Inbox update
- Client correspondence and notifications
- Processing Guidelines
- Reporting and monitoring enhancements

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# MA Renewal Ex-Parte Process

## Previous Functionality

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# MA Renewal Ex-Parte Process

## Previous Functionality

### Ex-Parte Process

- Income verified:
  - 6-month lookback period (verified by an electronic interface such as The Federal Data Service Hub (FDSH), Equifax, or The Colorado Department of Labor and Employment (CDLE) or,
  - Pay stub, employer statement, etc.
- Reasonable Compatibility (RC) Check with a 20% income buffer.
- Approvals were granted when there was an income discrepancy letter sent and no other income and/or resource VCLs were required.
- Cases/members with verified income auto-renewed
- Cases that required income or resource verification were sent a Renewal Packet and a VCL.
  - Signature Page required to complete the Renewal Process

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# MA Renewal Ex-Parte Process

## New Functionality

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# MA Renewal Process Ex-Parte Process

## New Functionality

### Ex-Parte and System Renewal Changes Quick Glance:

- Removal of Reasonable Compatibility Check at Ex Parte
- New 6-month lookback period income calculation
- PEAK Inbox Update
- MA Reinstatement Process
- CBMS screen updates

### Client Correspondence Quick Glance:

- New MA Reinstatement Speed Letter
- Updated MA Renewal Verification Checklist Cover Letter

### Reporting and Monitoring Enhancements Quick Glance:

- Dashboard updates

*\*New logic will begin at Ex Parte in July 2025, which will affect September 2025 Renewals.*

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# MA Renewal Ex-Parte Process

## New Functionality

- The reasonable compatibility (RC) check, including the 20% buffer, was removed during the Renewal Ex-Parte process due to guidance received from the Centers for Medicare & Medicaid Services (CMS).

*\* Reasonable compatibility still applies during both Intake and Ongoing.*

# MA Renewal Ex-Parte Process

## New Functionality

As a reminder, before the removal of RC at Ex-Parte:

- An electronic data source in CBMS verified earned income.
- The system conducted an RC check and determined that the household exceeded the 20% buffer at Ex Parte.
  - The household received an approval NOA and an Income Discrepancy Notice.
  - The household had to respond to the Income Discrepancy Notice.

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# MA Renewal Ex-Parte Process

## New Functionality

### After Removal of RC at Ex-Parte:

- The Reasonable Compatibility Check no longer applies at Ex Parte.
  - Instead, eligibility will review a given member's earned Income record(s) during the MA Ex Parte Renewal process.
- The household will be sent a Renewal packet and a VCL if the earned income is not verified within the 6-month look-back period.
- If the Earned Income record does not meet eligibility income requirements, a Renewal packet will be generated.
  - No longer sending an Income Discrepancy Notice along with an approval notice.

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# MA Renewal Ex-Parte Process

## New Functionality

After Removal of RC at Ex-Parte:

In the MA Ex Parte screen, the “Reasonable Compatibility” field was renamed to “Unverified Earned Income”

Search: ... Search...

CBMS Home WD/EF Home Search HCA Application Telephonic Application Incomplete Applications Case Benefit

Inquire on Individual Application Medicare Buy-In Summary Indi PEAK Inbox ICR Documents Work Program Hours Case Information

SearchCriteria

Case# RRR Month

Select RRR Month ...

MA Ex Parte Results

Name	Eligibility Status	Change in Eligibility	VCL Required	Unverified Earned Inc...	RRR Packet to be sent	Pr
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# MA Renewal Ex-Parte Process

## New Functionality

CBMS will first check the Self-Attested Earned Income screen to see if there is verified earned income and/or interfaced income found within the last 6 months

- If there are multiple open Self-Attested Earned Income records, CBMS will use the records with the latest dates verified in the Paycheck Summary screen and/or the dates verified for the interfaced income.
- If both Self-Attested Earned Income and interfaced earned income records have the same posting date (Date Verified), then only the interface income record(s) will be used (along with any other type of countable unearned income or self-employment income on the case).
- If there are any existing interfaced records within the 6-month lookback but no Self-Attested Earned Income records, CBMS will use the most recent interfaced income records for Ex Parte.

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# MA Renewal Ex-Parte Process

## New Functionality

- If there are 'No' earned income records found on the Self-Attested Earned Income screen, and 'No' existing interfaced income within the 6-month lookback period, CBMS will call the interfaces in this specified order. If a response is received on the first call, no further calls will be made, and the newly interfaced income will be used for Ex Parte.
  - FDSH (1st call)
  - Equifax

*\*Note: Any record(s) with an open-end date that does not fall within the 6-month lookback period will not be used for Ex Parte.*

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# MA Renewal Ex-Parte Process

## New Functionality

- If CBMS does not identify a Self-Attested Earned Income or an interface record on file during the six-month lookback period, and after making the interface calls, there is still no response, then the member(s) will pass Ex-Parte based on the member having zero income on file.
  - Approval NOA will be triggered
- If the member's verified countable income is at or below 100% FPL or at or below the member's aid code evaluated income threshold, and the member is otherwise eligible based on all other eligibility criteria:
  - Approval NOA will be sent to the member

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# Questions?

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# PEAK Inbox Update at Renewal

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# PEAK Inbox Update at Renewal

## Electronic Documentation Through PEAK:

- During the Renewal Period, if the RRR is in Started (S) status, and a change is reported and received through PEAK/HFC mobile, the information will not allow RTE and will go into the PEAK Inbox.

The screenshot displays the PEAK system interface. On the left, the 'Members' section is visible, featuring a large blue placeholder box and an 'Add Member' button. Above this section are buttons for 'Actions', 'Create Application', and 'Copy HOH'. On the right, a table lists program details with columns: Program Name, Case Worker, Program Status, Expedited, EX Override, and Status. Below this, the 'PEAK/ICR Inbox Search' section is highlighted with a green border, showing a table with columns: App Type, Tracking #, App Submit ..., Applicant/Cli..., Program(s) R..., and Program Status. The table contains two rows of 'Change Reports' with tracking numbers and submission dates. At the bottom, a 'Work Program Summary' section is partially visible.

Program Name	Case Worker	Program Status	Expedited	EX Override	Status
Medical Assist...		Approved			

PEAK/ICR Inbox Search					
App Type	Tracking #	App Submit ...	Applicant/Cli...	Program(s) R...	Program Status
Change Reports		06/13/2025 6...		MA	
Change Reports		06/13/2025 6...		MA	

Work Program Summary



# MA Renewals and the New Reinstatement Process

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# MA Renewals and the New Reinstatement Process

## New MA Reinstatement Process

The MA Renewal Reinstatement process applies to members who provided a Renewal Packet and/or any requested documentation before the end of their Renewal (after the 15<sup>th</sup> of the Renewal Due Month). Medical Assistance coverage must be maintained or restored for those who may have been terminated until a final determination is made.

# MA Renewals and the New Reinstatement Process

The new MA reinstatement process requires action from eligibility sites to keep the member active or restore a member's coverage until the documentation can be reviewed. This will enable CBMS to extend/reinstate the member(s).

- The Program Action Page now includes three newly added fields
  - Renewal Paperwork Received Date
  - Renewal Paperwork Data Entry Date
  - Program Group (Medical Assistance)

*\*Any user who needs access to use the new functionality created with this project who does not already have one of these Security Profiles (110 - RRR -Update or 111 - RRR - Inquiry) will need to have them added by their county security team.*

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# MA Renewals and the New Reinstatement Process

To initiate the new MA Reinstatement Process, the Eligibility Site must manually enter the newly added field Renewal Paperwork Received Date on the Program Action screen when the Renewal paperwork is received, including those received in the PEAK Inbox.

- CBMS will then automatically pre-populate the Renewal Paperwork Data Entry Date and the Program Group after the Eligibility Site completes the Renewal Paperwork Received Date.
- **IMPORTANT:** Eligibility Sites must still complete the Edit RRR Detail Screen in addition to the new Renewal Paperwork Received Date in the Program Action Screen.

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# MA Renewals and the New Reinstatement Process

## Program Action Screen:

Members	Case Information	Case Questions	Case Wrap Up	CDHS Scheduling Interviews	CDHS Interview Attendance	Child Support R...
Program Group A...	Request Date	Status	Reason	Effective Begin Date	Effective End Date	
Medical Assistance	01/27/2003	Approved		09/08/2023		👁️ ✎️
Long Term Care	01/27/2003	Approved		03/15/2011	09/30/2013	👁️ ✎️
SNAP	07/13/2023	Denied		07/14/2023		👁️ ✎️
Medicare Savings P...	08/01/2004	Discontinued		09/24/2008		👁️ ✎️
Childrens Health Pl...	06/01/2013	Denied		07/02/2013		👁️ ✎️

### Detail

**\*Effective Begin Date**

**Effective End Date**

**Status**

**Reason**

**Renewal Paperwork Received Date**

**Renewal Paperwork Data Entry Date**

# MA Renewals and the New Reinstatement Process

A hyperlink from the Members Page will be added to the MA program's case header. Clicking on this hyperlink will take the Eligibility Worker directly to the Program Action Screen.

The image shows two screenshots from a web application. The top screenshot is a blue box representing a case header for 'Medical Assistance (AP)'. It includes the text 'Cert: 06/01/2024-05/31/2025' and 'RRR: 05/2025 - P'. A green box highlights the text 'Medical Assistance (AP)'. The bottom screenshot is a screenshot of the 'Medical Assistance (AP)' case header in the system. It shows the 'Members' tab selected, with a 'Members' section containing a blue box and an 'Add Member' button. To the right, there is a 'Programs' table with columns: Program Name, Case Worker, Program Status, Expedited, Ex Override, Status Reason, and Status. The table contains two rows: 'Medical Assist...' with status 'Approved' and 'SHARP' with status 'Denied'. Below the table, there is a message: '1 Info: No Records found for entered search criteria'. At the bottom, there is a 'PEAK/ICR Inbox Search' section with columns: App Type, Tracking #, App Submit, Applicant/CR..., Program(s) R..., and Program(s) A....

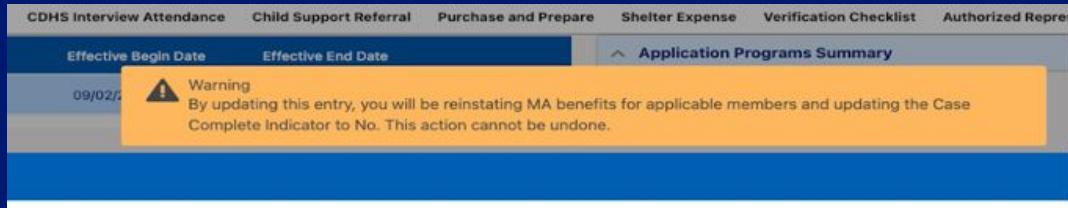
# MA Renewals and the New Reinstatement Process

When an Eligibility Site enters information into the new fields on the Program Action page, it initiates the MA Reinstatement Process. A message with an “OK / Cancel” button will appear in a pop-up.

- When the Eligibility Site clicks “Cancel”, no action is performed.
- When the Eligibility Site selects “OK”, the save action and the Rescind process will be automatically performed by CBMS.

A message will appear in a pop-up window.

- *“Warning: By updating this entry, you will be reinstating MA benefits for applicable Member(s) and updating the Case Complete Indicator to No. This action cannot be undone.”*



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# MA Renewals and the New Reinstatement Process

The Eligibility Site must complete the Program Action data entry on or before the last day of the month following the MA Renewal month for CBMS to automatically rescind or use the reapply function to reinstate a member's coverage.

- An “MA reapply” record will be created with a “reapply Date” set as the first day of the month following the MA Renewal Due Month.
- The Case Wrap-Up screen will automatically change to case complete “No”
- A member will be reinstated into their most recent aid code
- The member will receive a MA Reinstatement Speed Letter
- System-Generated Comment language: *“Coverage will be extended until a final determination of benefits can be made for the new Renewal period”*

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*\*As a reminder, Eligibility Workers must change case wrap-up complete to "Yes" after completing all data entry and before running EDBC.*



# MA Renewals and the New Reinstatement Process

## Updates to Case Wrap-Up Screen:

- A message will be displayed when the Eligibility Worker updates Data Entry Complete from “No” to “Yes” and the “Renewal Paperwork Data Entry Date” has a date populated on the Program Action Screen.
- This message will warn Eligibility Workers that upon saving the record on “Case Wrap-up”, the “Program Action” page for Medical Assistance will be cleared and moved to history.
  - **Warning:** Changing Data Entry Complete to Yes clears Program Action fields. Data entry in the fields is only possible in or up to a month after the MA Renewal Due Date.

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**Warning**

Changing Data Entry Complete to Yes clears Program Action fields. Data entry in the fields is only possible in or up to a month after the MA Renewal Due Date.



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# MA Renewals and the New Reinstatement Process

If the Eligibility Site completes the Program Action data entry after the last day of the month following the MA Renewal month, the Eligibility Worker will need to manually rescind or use the reapply function to reinstate the member.

- A member will be reinstated into their most recent aid code
- The member will not receive a MA Reinstatement Speed Letter
- The Eligibility Worker needs to enter a case comment explaining why the case was rescinded as part of the reinstatement process, including a timeframe of 30 days.
- The Eligibility Worker must complete the Edit RRR Detail Screen.
- If the data entry date on the Program Action screen exceeds the last day of the month following the MA Renewal Month, a warning will be displayed: *"You are past the window to edit this field. Edits can only be made one month after the MA Renewal Due Date"*.

*\*As a reminder, Eligibility Workers must change case wrap-up complete to "Yes" after completing all data entry and before running EDBC.*



# MA Renewals and the New Reinstatement Process

Example for Automatic Rescind/Reapply Process:

- MA Renewal is due September 30<sup>th</sup>
- The member provides the Renewal paperwork on September 17<sup>th</sup>
- The Eligibility Site completes the Renewal Paperwork Received Date in the Program Action screen on October 18<sup>th</sup>
  - The data entry must be completed on or before the last day of the month following the MA Renewal month.
- CBMS will now automatically rescind/reapply the case if it is closed, and reinstate the member's coverage as of October 1<sup>st</sup>

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*\*As a reminder, the Rescind process is used when a case is completely closed and there are no active members on a case.*

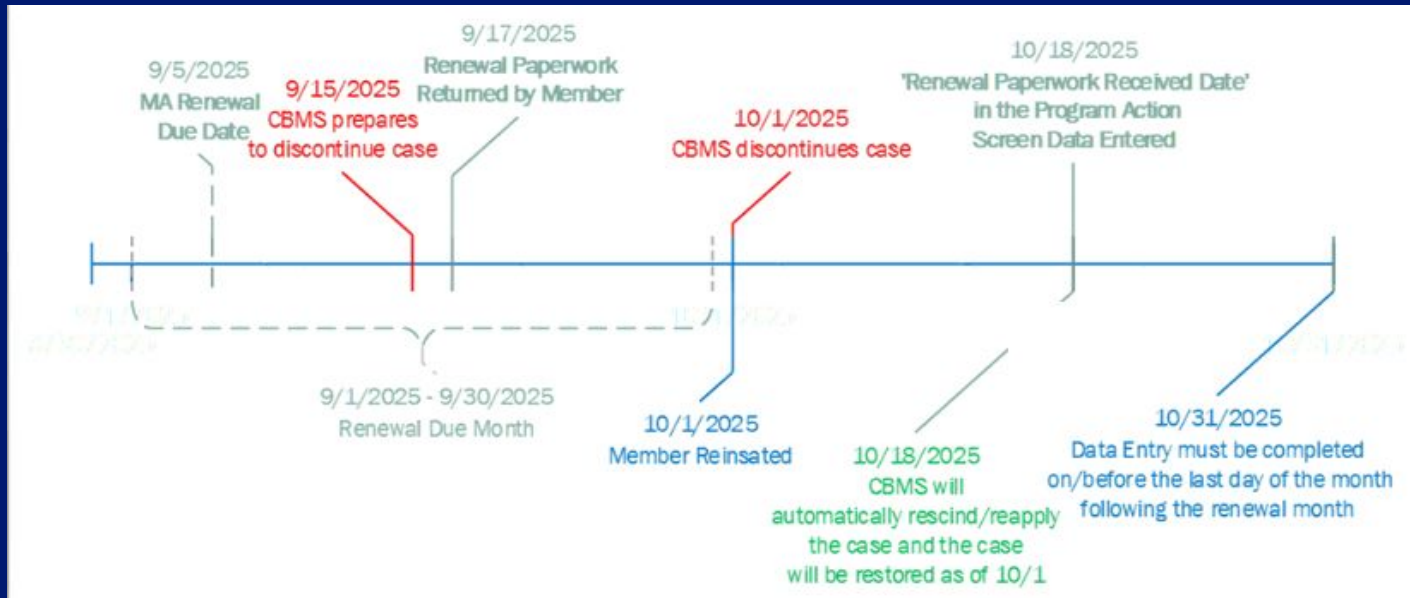


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# MA Renewals and the New Reinstatement Process

Example for Automatic Rescind/Reapply Process Timeline:





# MA Renewals and the New Reinstatement Process

## Example for Manual Rescind and/or Reapply Process:

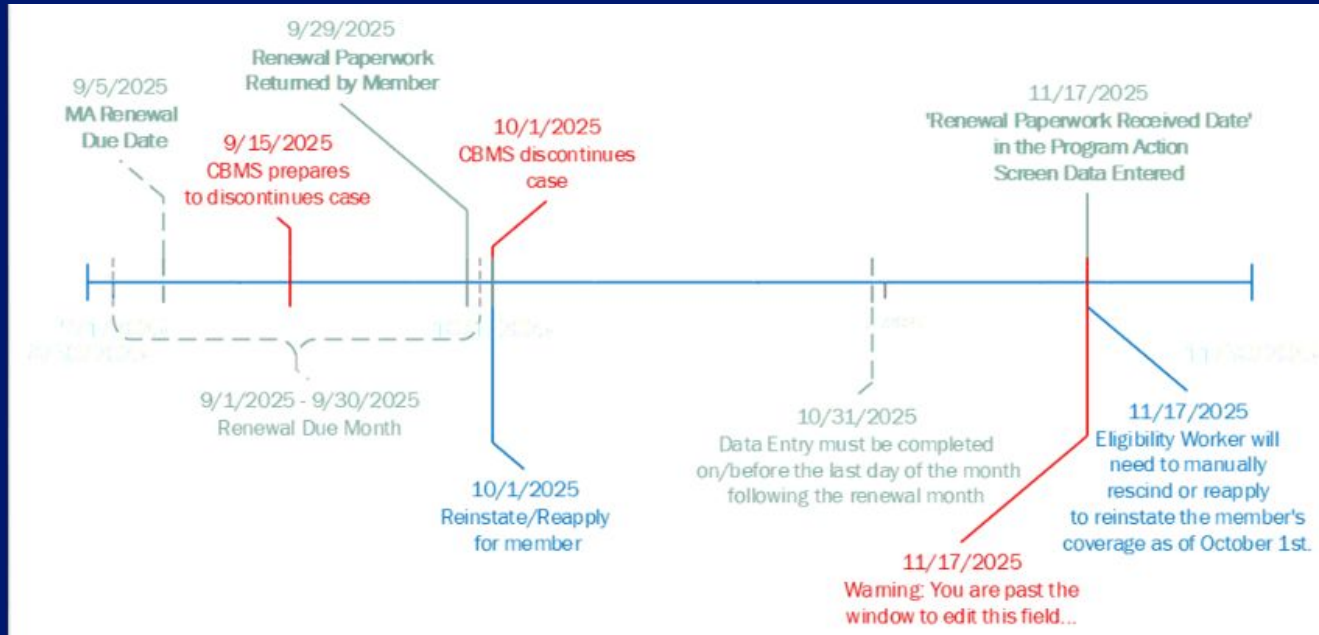
- MA Renewal is due September 30<sup>th</sup>
- The member provides the Renewal paperwork on September 29<sup>th</sup>
- The Eligibility Worker completes the Renewal Paperwork Received Date in the Program Action screen on November 17<sup>th</sup>
  - The data entry was not completed after the last day of the month following the MA Renewal month.
  - A warning will be displayed: “You are past the window to edit this field. Edits can only be made one month after the MA Renewal Due Date”.
- The Eligibility Worker will need to manually rescind or use the reapply function for the case to reinstate the member’s coverage as of October 1<sup>st</sup>

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# MA Renewals and the New Reinstatement Process

Example for Manual Rescind and/or Reapply Process Timeline:



# Questions?

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# Client Correspondence and Notifications

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# Client Correspondence and Notifications

## New MA Reinstatement Speed Letter:

- Automatically generated when reinstatement is triggered
  - Applies to the automatic reinstatement process.
  - Sent when the Program Action Screen is completed.
  - Includes all affected household members.

## Updates to Renewal Verification Checklist Cover Letter:

- New correspondence with updated language notifying households of missing documentation.
- Includes all Household members with a missing verification.

# Client Correspondence and Notifications

## Example of the new MA Reinstatement Speed Letter



Colorado's Medicaid Program

[v\_Current\_Date\_Dt]

Case ID: [v\_Case\_Number]

[v\_Head\_of\_Households\_Name]  
[v\_Case\_Mailing\_Address\_Address\_Line\_1]  
[v\_Case\_Mailing\_Address\_Address\_Line\_2]  
[v\_Case\_Mailing\_Address\_Address\_Line\_3]

### We received your renewal paperwork

Dear [v\_Head\_of\_Households\_Name],

We recently sent a letter informing you that you or someone in your household no longer qualifies for Health First Colorado (Colorado Medicaid) benefits. After we sent that letter, we received your renewal paperwork. We have restored benefits for [Appl\_Individuals\_Name], [Appl\_Individuals\_Name], and [Appl\_Individuals\_Name] while we process your paperwork. If some members of your household are not listed above, please contact your county or sign into your PEAK account. We will send you another letter if we need more information.

### Questions?

- Add the standard county info here

Thank you,  
Health First Colorado

Manage your Health First Colorado coverage at [CO.gov/PEAK](https://CO.gov/PEAK) and on the Health First Colorado mobile app. Sign in or create an account to get started Take control of your health coverage by using the Health First Colorado mobile app! Sign in to the app using your PEAK account or create an account in the app.

With the free mobile app you can:

- Get your Member ID Card and see if your coverage is active
- Find providers
- Complete your yearly renewal
- Find out what's covered



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# Client Correspondence and Notifications

## Example of the New MA Renewal Verification Checklist Cover Letter



[v\_Current\_Date\_Dt]

Case ID: [v\_Case\_Number]

[v\_Head of Households Name]

Respond by: [v\_Due\_Date\_Dt]

[v\_Case\_Mailing\_Address\_Address\_Line\_1]

[v\_Case\_Mailing\_Address\_Address\_Line\_2]

[v\_Case\_Mailing\_Address\_Address\_Line\_3]

### Renew your health coverage: Action required

Dear[v\_Head of Households Name]

It's time to renew your health coverage. We need more information for [HH member Name], [HH member Name], and [HH member Name], to see if they still qualify for health coverage. Please review the "How to complete this paperwork" section below and provide the information by [due date].

### How to complete this paperwork:

**1. Renewal Form Signature Page:** Read, sign and send us the Renewal Signature Page, even if you do not have any new information or changes to report. This form must be signed and returned.

**2. Request for More Information:** This letter will provide more information about what is needed for these member(s) of your household listed above. The "Request for More Information" letter is included in this packet.

**3. Review your Health coverage:** Review the information we have on file for your household and do the following:

- Correct any information that is wrong.
- Add any information that is missing.
- Return any pages you update.

### When we need it:

Return the requested information, any pages you updated and the signed renewal form signature page by [due date]

### Questions?

If you need help or can't return the information by the due date, contact us. We may be able to give you extra time if you are having trouble getting the information or documents. Our contact information is on the next page under: **How Can I Submit My Renewal?**



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# Processing Guidelines





# Processing Guidelines

Effective July 1<sup>st</sup>, 2025

Updates to Volume 8 Section 8.100.3.P.:

- Eligibility sites have 30 calendar days to determine a member's final eligibility. This update is consistent with federal regulation 435.912(c)(4)(i).
- This policy applies to Renewals and the 90-day Reconsideration Period.
- The Eligibility Worker has 15 days to work any additional verifications that were requested at Renewal.

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# Questions?

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# Reporting and Monitoring Enhancements

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# Reporting and Monitoring Enhancements

## County Dashboards with an Update:

- HCPF Renewal Timeliness
- HCPF RRR EPG
- HCPF Pending RRR

Each dashboard has a new filter titled "Renewal Extended" added to the available filters

Each dashboard has a new "Renewal Extended" column added to the existing raw data

*\*MAP Dashboard Webinar July 15<sup>th</sup> for more details on timeliness*

# Conclusion



# Conclusion

## Summary of Key Changes:

- Removal of Reasonable Compatibility Checks during Ex Parte.
- Requirement for household/member to submit income verification if not verified within the 6-month lookback period.
- PEAK Inbox update
- MA reinstatement period introduced for those who submit Renewal paperwork within the timeframe.

# Questions?

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# Contact Info

## Medicaid Inbox

[hcpf\\_medicaid.eligibility@state.co.us](mailto:hcpf_medicaid.eligibility@state.co.us)

## MAP Team

[HCPF\\_MAPDashboards@state.co.us](mailto:HCPF_MAPDashboards@state.co.us)



# Resources

- Medical Assistance Renewal Workbook (updated version)
- MAP Dashboard Timeliness Webinar 7/15/2025
- SDD COLearn WBTs Updates
- Office Hours
  - July (7/31) and August (8/28) Eligibility Site Touchbase meetings will have a standing agenda item for any questions on the Renewal project.

THANK YOU  
FOR ALL THAT YOU DO



# Questions & Answers

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From	Question	HCPF Answer
David Troy/Karen Asato-Chrysler	Did you say that if CBMS has 2 job records, CBMS will only look at the job record with the most recent updated income? Does that mean that the eligibility would be based on partial income?	<p>Following CMS guidance, we will count income from the most recently verified record(s) within the 6-month look-back period.</p> <p>If multiple income records exist for different jobs with the same 'Date Verified', all will be included in the income calculation. However, if multiple records have different 'Date Verified' dates, even within the same month, only the latest 'Date Verified' income will be considered. When an interface returns both records back, 'Date Verified' would remain the same.</p>
Jessica Berens-Boulder Count	So if someone may be self employed where no income would interface, they'll just continue to pass as zero income because nothing interfaces and a packet never goes out to them to ask what is going on? Assuming no SE record has ever been entered	Self-employment will still be verified with a renewal packet and a VCL sent to the member, as this income type cannot be verified through an electronic data source. The zero income will only be applied to earned income types that can be verified through an electronic data source.
Johnny Martinez - JeffCO HS	With the new updates for Ex-Parte, it said "only interfaced income records will be used..." does that mean that CBMS will now read the CDHS interfaced income records? Or, do we still need the manual paychecks added to the screen?	No, CBMS does not read CDHS interfaced income records for Ex Parte. You must still manually enter paychecks on the Self-Attested Earned Income screen and mark them as verified for the income to count, unless CBMS receives verified income through a standard interface like FDSH, Equifax, or CDLE.
Rosa Luna	Date Verified of the income paycheck summary? will determined if we will use the income or not?	This is correct. The Date Verified field is what CBMS will use to determine the latest income

From	Question	HCPF Answer
Bernadette O'Keefe	but what if they have 2 jobs at the same time - and are paid in different week?	If a member has multiple jobs, CBMS will use the income from the job that was most recently verified using 'Date Verified' that is closest date to the renewal month. If both jobs were verified on the same day (same 'Date Verified' dates), CBMS will include income from both jobs in the Ex Parte income calculation. When multiple income records exist for different jobs and the 'Date Verified' is the same, all will be included in the income calculation. However, if the 'Date Verified' dates are different, even within the same month, only the latest 'Date Verified' income will be considered."
Austin Lerner	IF client provides two checks for two different jobs at the same time CBMS will count both though correct?	If member has more than one job, CBMS will only use the job that was verified most recently using "Date Verified" (date closest to the renewal month) If both jobs were verified on the same day (Date Verified = same day), then CBMS will use both jobs income in the Ex Parte income calculation
Michaela Estrada - CDHS-CTY	Will RC be sent for the other job? What if they report both jobs on the application or we verify both jobs are current?	At the ex parte, the RC will not be applied, even if multiple jobs are listed. If a member reports both jobs and self-attests in the renewal packet that they still hold both jobs, these two jobs will be considered when making a final determination during the renewal process. If the member is approved for renewal, the current process of verifying income through income interfaces will continue as it does now. This means that income will still be verified in ongoing mode, because the at renewal it based on the self-attested information provided by the member.
Bridget Gittere	for the 2nd job that we have outdated income for, will a VCL generate to request updated income for that job??	If the second job does not have the latest verified date, we will not pend for income verification. The other job with the latest verified date will be used at ex-parte for income calculation.

From	Question	HCPF Answer
Jessica Berens-Boulder County	so if 2 jobs interface in the same month that is being reviewed, then both will be considered current and used?	Only if it is posted on the same date "Date Verified" field. Otherwise it will be the latest interface.
Kathy Gordova	If a MAGI is self-attested, would the member receive the renewal packet?	The member will receive a packet "Only" if the countable income exceeds the threshold.
Raven Stuart	Medicaid doesn't post the FDISH or Work Number income until Authorization in CMBS and by then it's too late to use the income received and the members are locked into coverage that they don't qualify for. Can we please look at having the income available prior to authorization so that we can make correct eligibility determinations	During Ex Parte CBMS will post the interfaces during Ex Parte and use the income to determine if a renewal packet should be sent out vs and approval. What I think is being discussed here is the Intake and Ongoing logic where it can take a few days to post after authorized. This will be taken back and discussed for consideration.
Shannon/Dina	Will the RRRs still be automatically started?	No. If the member closed on/after the 15th of the renewal due month and any renewal documents were received before end of renewal month, CBMS will automatically reinstate coverage if Program Action is completed by end of the following month. The edit RRR Detail Page still needs to be completed as this process has not changed
Jessica Berens-Boulder County	A flowchart desk aid would be very helpful for this reinstatement process	Flowcharts and desk aids for the reinstatement process are included in the updated Renewal Workbook (effective July 2025)

From	Question	HCPF Answer
Allie Woronovitch - CDHS-CTY	What drives the data entry date on the program action page? If we make one change, does it update that date to the day we made that change? And does it continue to update any time we made additional changes while working an RRR? Example: I corrected the phone number on 6/26, but tomorrow 6/27, I finish the data entry, will it show 6/26 or 6/27?	The program action page requires the date when the paperwork was received. This date will allow the system to extend or reinstate the member based on when the paperwork was received and when the eligibility worker completed the data entry. Additionally, the RRR details must be filled out to initiate the RRR process. The program action date should reflect the date on which the first piece of documentation related to the renewal was received.
Stefany Sawade - HCPF She Her	Any idea of the downstream effects of the ex parte change? If CMS is considering the income as old (if it's beyond 6 months for verification), are you expecting caseworkers to end date that income at some point or will it remain on the case potentially unverified and counting outside of the renewal?	There is no requirement to clean up or end date old income records solely because they fall outside the 6-month lookback. If the income is still open on the case but the member reports it is no longer active or income ending is verified via an interface, then the worker should end date it.
Jesica Antonucci	Will there be any State training for frontline workers (that do not determine eligibility) so that they can best determine if the document received warrants the action to utilize the program action page?	Currently, there is no training available for frontline workers. The site may offer training as part of its business processes to help determine whether the paperwork received pertains to the renewal. Frontline workers are not required to update the program action page; instead, eligibility workers can review the submitted paperwork and complete the program action page themselves. It is important to note that when business processes are designed around the program action page, depending on when the member submits their documentation. Workers will have until the end of the month following the renewal due date to make a final determination.

From	Question	HCPF Answer
Stacia Lippert	This is a lot of information! I agree a flow chart could be helpful. Do MA renewals no longer need to be started....just use program action?	<p>Flowcharts and desk aids for the reinstatement process are included in the updated Renewal Workbook (effective July 2025)</p> <p>For combo cases (e.g., SNAP + MA): CBMS automatically handles the initiation of the RRR for MA programs.</p> <p>The Program Action page does not start the RRR. It's used to log the date that renewal paperwork was received. It's necessary to trigger reinstatement if the case was closed after the 15th of the renewal due month.</p> <p>Workers must still complete the Edit RRR Detail screen to formally start the RRR (move from "Initiated" to "Started") and enter eligibility data.</p>
Jason Norton	So in these examples letters will be generated and sent to clients telling them they closed, then potentially 2 weeks later that they're open again because of an automatic process?	Yes, that can happen under the new reinstatement process. CBMS will automatically reinstate coverage through a nightly batch and generate a new MA Reinstatement Speed Letter. This letter will inform the member that their benefits have been restored. It is current policy to provide advance notice of termination and timely notification of any changes in eligibility, including reinstatement
Jessica Berens-Boulder County	Is there any difference in just rescinding manually in any of these situations or is this program action just supposed to make it easier?	<p>When a case is manually rescinded, these members will not receive the reinstatement speed letter, and the program action screen will no longer be available for completion.</p> <p>Yes, the purpose of the Program Action is to allow for automatic Rescinded/ or Reapply to extend benefits</p>



From	Question	HCPF Answer
Patrice Hauser - CDHS-CTY	Were new security profiles for the MA Program Action automatically updated or do we manually have to do this? In what instances will the Program Action not be able to be edited? Are we to do HDT for a case that is in the LTC Extension Period but MA shows discontinued and will not allow rescind or reapply? Without a flow chart, the new process is very confusing as others have mentioned.	<p>Workers with Security Profiles 110 - RRR - Update or 111 - RRR - Inquiry will automatically have access to the Program Action page.</p> <p>Any user who does not have the appropriate security profile, and needs access to use the new functionality created with this project, will need to have them added by their county security team.</p> <p>A communication will be sent out to county administrators.</p>
Kathy Cordova - CDHS-CTY	If we work an RRR timely data enter everything timely do we still need to update program action or can we just authorize the RRR because the MA will be approved.	The best practice is to utilize the Program Action page. If the renewal is worked on the same day through RRR details and authorized will still continue to work as it does today.
Stacy Vigil	Most Counties are not case based, but task based, so there is not a person who can just do this, even though 30 days, that's 30 days multiplied by how many cases, and then the other documents (verifications, etc)	This project is implementing CMS guidelines which may impact business processes at the county level. HCPF has noted this feedback and is open to having conversations to support counties in implementing these requirements.
Rosa Luna	Not all counties are participating on the EDMS process. Most of the Large Counties are not participating.	Although the larger counties do not participate in EDMS as a workflow management system, they still have to retrieve documents uploaded through PEAK via the PEAK inbox.

From	Question	HCPF Answer
Alison Snider - CDHS-CTY	So Late RRR received and We register Late RRR will it auto rescind like SNAP? with in 30 days of closure?	A late RRR received after the Renewal Due Month will not be included in the Reinstatement process. In this case, the member would fall within the 90-day reconsideration period, and if the case is closed, it will need to be manually rescinded or the reapply functionality should be used.
Patrice Hauser - CDHS-CTY	How is this going to be addressed with our MAP requirements. The timelines for non-LTSS cases is only 30 days from the date of receipt, not necessarily the RRR due month.	<p>Per the HCPF OM 25-044:</p> <p>The MAP Dashboard will take a phased approach to compliance and incentive contract scoring, incorporating the new timeliness guidelines. The current timeliness guidelines will be applied to all renewals authorized through December 31, 2025. If no packet is received, or if the packet is received before the 15th of the renewal due month indicated in CBMS, the renewal will be considered timely if authorized by the last day of the renewal due month shown in CBMS. Should the packet be received on the 15th of the renewal due month indicated in CBMS or later, including any time during the 90-day reconsideration period, the renewal will be deemed timely if authorized within 30 days of the date the packet was received.</p> <p>Beginning with renewals authorized on January 1, 2026, and thereafter, the MAP Dashboard will adhere to the guidance provided by CMS for timeliness, based on federal regulation 435.912(4). When an eligibility site receives a renewal form and/or HCPF OM 25-044 Page 9 of 11 documentation with at least 30 calendar days remaining in a member's current eligibility period, it must authorize the renewal before the eligibility period ends for it to be considered timely. If the eligibility site gets a renewal form with fewer than 30 calendar days left in the current eligibility period, it must authorize the renewal by the end of the following month for it to be considered timely.</p>

From	Question	HCPF Answer
Stacia Lippert	If a SNAP RRR comes in late, it is placed in started status and automatically re-opens based on the date received and we have 30 days to process it, why can the same action not take place for med.....this is a very simple process.	For MA programs, we have specific regulations that must be followed. The reinstatement process is for members who submit their documentation prior to the end of their eligibility period; those who submit after their eligibility period has ended will not be eligible to be reinstated through this automatic process. If renewal information is received just before the renewal due month, and if the program action screen is completed by the end of the month following the renewal due date, those cases will be automatically rescinded. Case workers will have 30 days to process the paperwork from the date it is received.
David Troy - CDHS-CTY	Are we going to populate the Untimely Date for the MA RRR on the CBMS Workload Dashboard so workers can track these?	Per the verbal response in the meeting, this specific project did not update the Workload Dashboard, this may be a good project to request through User IPT.
Katie Hott	Did you say 15 "business" days?	Members will have the standard 10-calendar days to respond to any requests for additional information. The eligibility site will continue to have 15 business days to process the information that was received
Kimberly Preeson - HCPF	Apologies if I missed it earlier but what happens when a member turns their RRR in less than 30 days of the end of their cert period? Do the caseworkers still have 30 days from the point they receive it or...?	To complete a renewal determination, workers have 30 days from the date the paperwork is received to make a final decision. The program action page must be completed within the month after the renewal due date to enable CBMS to reinstate coverage automatically

From	Question	HCPF Answer
Jesica Antonucci	Profile Changes	<p>110 - RRR - Update 111 - RRR - Inquiry</p> <p>Any user who needs access to use the new functionality created with this project who does not already have one of these Security Profiles will need to have them added by their county security team</p> <p>September Renewals will go out July 15th</p>
Jessica Berens-Boulder County	seems like the program action entry wouldn't be used until after 9/30/2025 when some of these cases have closed	The Program action page can be used for any documents related to September renewals. Paperwork for these renewals may start arriving in late July and will continue through September.
Kathy Cordova - CDHS-CTY	Program Action is in interactive interview, normally when we data enter in interactive interview we run EDBC for all programs, this sounds like this may create a workload for SNAP or Cash as we do not want these cases to batch authorize. Is my above statement correct. Do you know if this data entry in program action force us to manually run EDBC for other programs?	<p>Data entry in Program Action for MA will not have any impact on other Program Areas.</p> <p>When the Program Action page is updated a mandatory case data change is set, meaning all active HLPGs on the case will run in mass update. This is no different than a user reporting a change via PEAK, or any other II data that may set a mandatory case data change.</p>

From	Question	HCPF Answer
Patrice Hauser - CDHS-CTY	As a CSA for our county, I just learned this during the call.	HCPF is working to communicate with system administrators. Security profiles 110 & 111 were updated to allow staff to access the Program Action page. This change will be applied automatically. The county security team will need to add any users who need access to the program page to one of these two profiles.
Jessica Berens-Boulder County	Does the entry on program action have to be done before the RRR details? or if it was marked as started, could the program action data entry still be done after to reinstate?	The program action page and the RRR details screen can be completed simultaneously. The purpose of the program action page is to assist CBMS in determining whether a member needs to maintain their coverage or have it reinstated until the eligibility worker reaches a final decision.
Amy Vannoy	If we receive a MA Renewal and we only receive partial verification but not everything, are we entering that we received verification?	Yes. If any renewal documentation is received, including partial verification, such as a signature page, income, or other supporting documents, the “Renewal Paperwork Received Date” on the Program Action page should be entered and the renewal should be processed as usual to make that final eligibility determination.