



# Understanding Renewals

## A Guide for Partners

Health First Colorado and  
Child Health Plan *Plus*

February 2025

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# How to use this guide

This guide is for partners to help them understand the Health First Colorado (Colorado’s Medicaid program) and Child Health Plan *Plus* (CHP+) annual eligibility renewal process. Partners play a crucial role in ensuring members who are eligible can maintain their health coverage and those who no longer qualify know where they can go for affordable coverage resources. Please continue to employ our toolkit materials to raise awareness and encourage members to prepare for and take action on their renewals.

Questions or feedback about this guide can be shared with us at [hcpf\\_comms@state.co.us](mailto:hcpf_comms@state.co.us).

# Renewal Process

Health First Colorado and CHP+ review information annually to make sure members still qualify for health coverage. Some members are automatically renewed based on information on file. Other members are asked to complete a renewal packet to determine their eligibility. This is known as the renewal process (sometimes called redetermination or RRR).

## Key terms

There are a few key terms that are helpful to know when navigating the renewal process with members:

1. **Notice of Action (NOA)** - A written notice to let an applicant or member know the final eligibility determination and reason for an approval, denial or termination.

*Important: the actual notices do not say “Notice of Action,” so we simply call them “letters” when talking with members.*

This notice also provides information for the individual to appeal the determination. The notice is primarily mailed out and may also be sent electronically through email or text notification. Notices are always available for viewing in PEAK.

2. **Renewal packet** - Prepopulated forms sent to a member to see if anything has changed and request necessary verification to determine whether a member continues to be eligible to receive Medical Assistance. Also referred to as a redetermination or RRR.
3. **Modified Adjusted Gross Income (MAGI)** - Modified Adjusted Gross Income refers to the methodology by which income and household composition are determined for the MAGI Medical Assistance groups under the Affordable Care Act. These MAGI groups include Parents and Caretaker Relatives, Pregnant Women, Children, and Adults.
4. **PEAK** - an online portal where Coloradans can apply for and manage several benefits including food assistance, cash assistance, transportation, and health care.
5. **Health First Colorado App** - a mobile application that members can download to their phones and use to manage their Health First Colorado or CHP+ benefits.

## Links to key resources:

### Sample renewal packets

- [English MAGI](#)
- [Spanish MAGI](#)
- [English non-MAGI](#)
- [Spanish non-MAGI](#)

### Videos:

- Health First Colorado: Updating; Renewing; Transitioning [Playlist](#)

## Renewal process quick overview

The automated renewal process (Ex Parte\*) begins by checking information from data sources for individual members.



The member passes ex parte, is automatically renewed and receives a determination letter approving their continued coverage.



One or more household members does not pass ex parte, and is not automatically renewed. A pre-populated renewal packet is mailed and sent to their PEAK inbox.



The renewal packet must be reviewed, updated, signed and returned along with any requested verifications by the deadline specified in the packet.



The returned renewal packet is reviewed by an eligibility site. Some renewals are more complicated and may take longer to process.



Members receive a determination letter approving or denying coverage.

Members have a right to appeal a benefit decision. If no longer eligible, they can transition to other health coverage. Members who failed to return their paperwork have 90 days to resubmit for redetermination.

\*Some members are automatically renewed based on the most recent information already on file for them from other data sources. This process is known as ex-parte.

## Automatic renewal or “Ex parte”

Some members are automatically renewed based on information we have for them from other data sources. This means that some members do not receive a renewal packet. Instead, they receive a “notice of action” letter that lets them know they are still eligible for coverage.

{firstName} {lastName}  
Health First Colorado ID: {MA\_stateId}

{fName} qualifies for:

- ✓ {benefitCategory}{benCatSubSctmIt}{benCatSubSctmTrailing}. You will still get benefits. Your benefits continue on {benefitStartDate}. We used the information we had on record to approve you. If you would like to view the information we used, visit [CO.gov/PEAK](http://CO.gov/PEAK) or contact your County’s Human Services agency and request a copy of your Renewal Report.

**Important:** If you have changes or corrections to your information you need to report them within 10 days of the change. Follow the instructions below under “Reporting Your Changes and Managing Your Benefits Online,” or contact your County’s Human Services agency.

The majority of these members do not need to take further action to keep their coverage. In some cases members may also receive a letter requesting to check if their income information is correct or make updates. See the example below.

Dear [Case Name]:

**Update your household income information by [ROP due date]**

You’re getting this letter because we got new information about your income. Please read this letter and let us know if the new information is wrong, even if you or others in your household received a letter saying medical assistance benefits were approved.

**Important:** If our new information is incorrect, you must let us know, or you and others in your household may lose medical assistance benefits. We need you to check our information to make sure it is correct. If you do not update incorrect information, you or members of your household may lose Health First Colorado (Colorado’s Medicaid Program) or Child Health Plan *Plus* (CHP+) coverage.

- **If any of the information below is wrong, please update it by [ROP due date]. Instructions about updating your information are on the next page of this letter.**
- **If all the information below is correct, you do not need to update anything or respond to this letter.**

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**Income information**

This is the information we got about your gross income. Gross income is your income before taxes and other deductions are taken out of your pay.

## Renewal packet

If we are not able to verify a member's eligibility based on most recent information already on file (reported information from members and/or information from other data sources) they will have to go through the renewal process to see if they still qualify for coverage. The renewal packet will ask them if anything about their situation has changed, a signature to acknowledge review of the information, and may request verification to determine whether they still qualify to receive Medical Assistance. Renewals can be completed electronically through PEAK, the Health First Colorado App or by mail.

**Members must complete the renewal and supply required documentation by their renewal deadline or risk losing coverage.**

### Important things to know about the renewal packet:

- Members will receive a renewal packet approximately 70 calendar days before their renewal deadline to allow time for completion.
- The renewal packet is sent out to members of a household who could not be approved by ex parte. It will include verification information for each person in the household who is a Health First Colorado or CHP+ member.
- The renewal packet must be reviewed fully, including providing updates if applicable. All renewals must be signed where indicated, and returned along with any requested verifications by the deadline specified in the packet, even if there are no changes. If designating an authorized representative, the Authorized representative page in the packet must be completed, signed, and returned along with the signature page.

**NOTE:** Any household members that passed ex parte do not need to complete the renewal packet. The pre-populated renewal packet includes information we have for members who have not passed ex parte and averages 16 pages per household (front and back). If members need help with their renewal they can contact an [eligibility site](#) for assistance. **It is really important that members review the full packet, provide the signature page and any requested documents.**

**There are many ways to complete the renewal process.**

1. Online at: [CO.gov/PEAK](https://CO.gov/PEAK)
2. Through the [Health First Colorado App](#)
3. By mail, fax, or bringing the completed signature page and updated renewal form pages to the local county office

Once the renewal paperwork is received, eligibility sites must begin processing within the renewal month. Some renewals are more complicated and may take longer to process. Members are encouraged to submit their renewal packets early to allow for processing times. If a member no longer qualifies or failed to provide the information needed to complete the renewal, a notice of action letter providing the denial or termination reason is sent with appeal information.

## 90-Day Reconsideration Period

Members may be eligible to resume medical coverage if they still qualify by returning their renewal packet and any missing information to their eligibility site for processing within 90 days of losing coverage. In PEAK, an item will appear in the To-Do List to indicate when a late medical assistance renewal can be submitted and processed without needing a new application. If they are determined still eligible during that 90-day period, coverage begins as of the 1st of the month they are determined eligible again. If there is a gap in coverage, members must ask the eligibility site to be enrolled retroactively or they can request retroactive coverage in PEAK once they are approved and their new eligibility date is known. Members are encouraged to return their renewal packet if they miss their deadline rather than submitting a new application.

## Appeals

Individuals are always allowed to appeal any action taken on an eligibility decision. They can ask for a State Level Hearing (Formal), Dispute Resolution Conference (Informal), or both simultaneously. Information about the appeals process and how to appeal is part of the member letter known as a “notice of action”. Learn more about the [appeals process](#).

## Other coverage options

### 1. Child Health Plan *Plus* (CHP+)

Some members who no longer qualify for Health First Colorado may qualify for a different kind of coverage. For example, kids may not be eligible for Health First Colorado, but could qualify for the CHP+ program. These members will receive information about the new program they qualify for in their notice of action (see example below) and we will connect them to the other coverage.

What you qualify for

 **Medical Assistance Benefits**

You applied for Medical Assistance benefits on May 1, 2022 and we made a decision on May 20, 2022 at 8:57 PM. The people in your household may have qualified for different benefits. The boxes below tell you about these benefits.

For questions about the Medical Assistance you qualify for, contact Community Support TM at Adams - HSC at (720) 678-5632 x22222 or 11860 PECOS ST WESTMINSTER CO 80234.

**Frquswvtxn LscimjxABC**  
CHP+ ID: Q965981

**Frquswvtxn qualifies for:**

- ✓ Child Health Plan *Plus* (CHP+). Your benefits start on May 1, 2022. Your CHP+ medical and dental cards will be in a separate letter. If you need to see a doctor before you get your card in the mail, call 800-414-6198 or visit [www.chplusproviders.com](http://www.chplusproviders.com). You will still need to pick an HMO. If you know which HMO you want, call 800-359-1991 and select option #5. **THE DENTAL BENEFIT IS NOT EFFECTIVE UNTIL YOU RECEIVE THE CARD.** If you do not receive a dental packet within 6 weeks contact DentaQuest at 1-888-307-6561, TTY 711, or email through the member access portal at [memberaccess.dentaquest.com](mailto:memberaccess.dentaquest.com). View and print your member ID card using the Health First Colorado mobile app or the [CO.gov/PEAK](http://CO.gov/PEAK) website. You will get a card in the mail.

We eliminated the CHP+ enrollment fee for kids and pregnant women to make the transition to coverage easier.

## 2. Reduced-cost coverage through the Connect for Health Colorado marketplace

If members no longer qualify for any of our health coverage programs, we will let them know that they may qualify for reduced-cost health insurance coverage through the state's health insurance marketplace, [Connect for Health Colorado](#). A sample notice of action letter for this situation is below:

What you qualify for

 **Medical Assistance Benefits**

You applied for Medical Assistance benefits on June 7, 2022 and we made a decision on June 7, 2022 at 10:52 AM. The people in your household may have qualified for different benefits. The boxes below tell you about these benefits.

For questions about the Medical Assistance you qualify for, contact Donald Kerr at Denver/FAD/ Division at (720) 555-9602 or 1200 FEDERAL BLVD DENVER CO 80204-3221.

**Sudo Wudo**  
Health First Colorado ID: Q972793

**Sudo does not qualify for:**

 You don't meet the requirements for any program, including Health First Colorado, Child Health Plan Plus, or help paying for medical costs. Go to [Colorado.gov/HCPF/Letters-FAQs](#) to see a list of programs we might have checked to see if you qualified.

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**Other Health Insurance Options**

**People in your household who DO NOT qualify for Health First Colorado or Child Health Plan Plus (CHP+):**

You may choose to enroll in a private health insurance plan through an employer, a private broker, or Connect for Health Colorado.

You may qualify for financial assistance through Connect for Health Colorado that can be used

Losing Health First Colorado or CHP+ coverage is a “qualifying event” which means these members can seek coverage outside of the regular Open Enrollment Period (Nov. 1- Jan. 15) during a Special Enrollment Period. The transition from state health coverage programs to Connect for Health Colorado looks like:

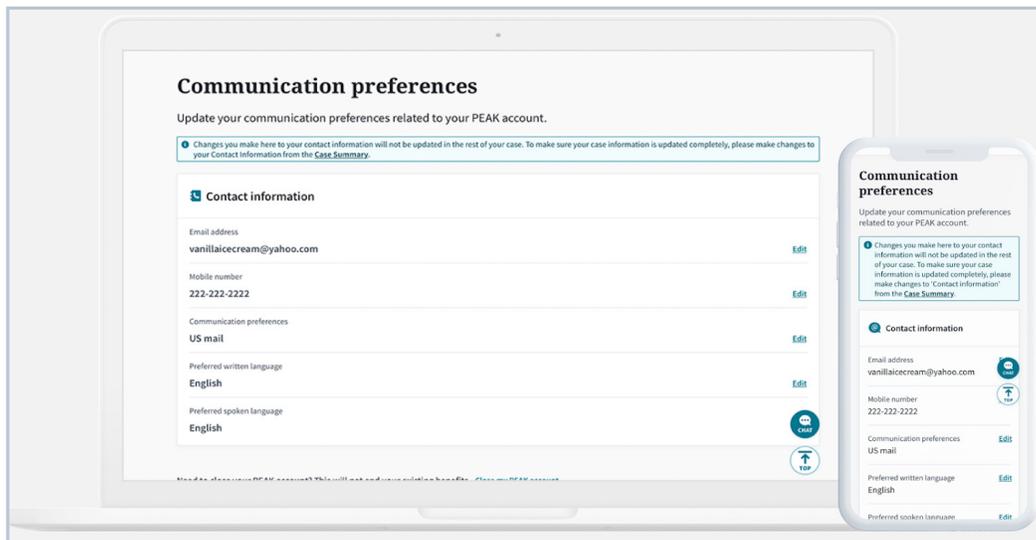
1. Customer receives a letter from the state telling them they are no longer eligible for Medicaid/CHP+ and encouraging them to apply with [ConnectforHealthCO.com](#)
2. Connect for Health Colorado conducts targeted outreach to the individuals receiving this letter
3. Customer may receive additional information from our coordinated stakeholders, such as Brokers, Assisters and Regional Accountability Entities
4. Customer selects a health insurance plan during their 60-day Special Enrollment Period, and their coverage begins on the first day of the month following plan selection
5. Customer is covered!

# PEAK Resources

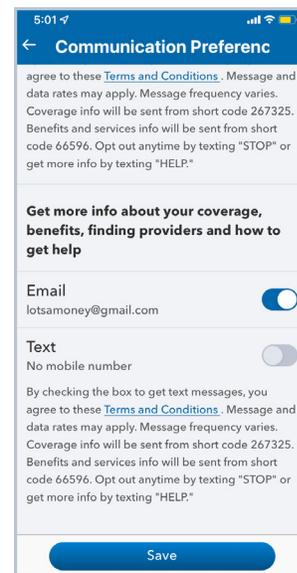
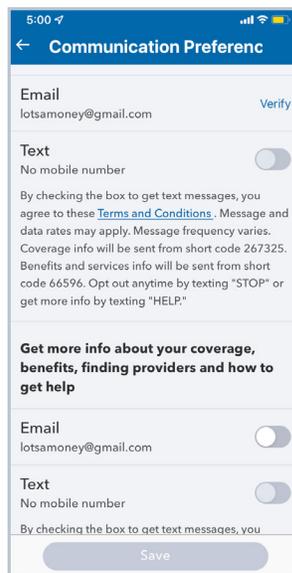
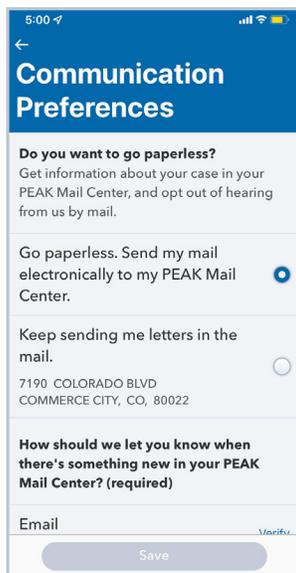
Colorado PEAK ([CO.gov/PEAK](https://CO.gov/PEAK)) is an online platform that any Coloradan can use to apply for or manage medical, SNAP, cash or other state of Colorado benefits. Health First Colorado and CHP+ members can use PEAK or the Health First Colorado app to manage their benefits. PEAK is an important self-service tool for members to receive timely notifications, update contact information and manage their benefits.

There are two ways members can receive notifications digitally:

1. Through the PEAK platform by adjusting their communication preferences. Members can sign up to receive texts or email alerts every time they get a new letter in their PEAK mailbox. To update communication preferences on PEAK, select 'More' in the top navigation, then 'Account settings' and 'Communication preferences'.



2. Through the Health First Colorado app by opting into push notifications.



Members will see a renewal to-do card on their PEAK dashboard when it's time to complete their renewal. They can also see their renewal date in PEAK at any time under the 'Benefit overview' section of their dashboard.

Benefit program	Start date	Redetermination due on	Amount	Status
Health First Colorado (Colorado Medicaid)	01/01/2015	12/31/2015	N/A	Active

Members will receive a renewal packet approximately 70 calendar days in advance of the renewal deadline to allow time for completion. They will also see a renewal to-do card on their PEAK dashboard. They can begin the renewal process in PEAK or by mail. Below are some resources for partner organizations and assisters to help members along in the renewal process using PEAK.

## PEAK how-to instructions for key tasks

### Update your information

- [Update your contact information and communication preferences](#) (PDF)
- [Update your address](#) (PDF)

### Learn when you are up for renewal

On the PEAK dashboard, scroll down the page to the **Benefit overview**. You'll see each member associated with the case and their renewal (redetermination) date.

Benefit overview		+ Request new benefits			
<p><i>This benefit overview may not be inclusive of all benefits you have applied for or receive. For example, WIC, RTD, and CCCAP benefit information is stored outside of PEAK.</i></p>					
<p><b>Lotsa (29 yrs)</b> Head of Household</p>					
Benefit program	Start date	Redetermination due on	Amount	Status	
Health First Colorado (Colorado Medicaid)	01/01/2015	12/31/2015	N/A	Active	<a href="#">View details</a> <a href="#">End benefits</a>
<p><b>Grandpa (68 yrs)</b></p>					
Benefit program	Start date	Redetermination due on	Amount	Status	
Health First Colorado (Colorado Medicaid)	01/01/2015	12/31/2015	N/A	Active	<a href="#">View details</a> <a href="#">End benefits</a>
<p><b>LITTLE (7 yrs)</b></p>					
Benefit program	Start date	Redetermination due on	Amount	Status	
Health First Colorado (Colorado Medicaid)	01/01/2015	12/31/2015	N/A	Active	<a href="#">View details</a> <a href="#">End benefits</a>

From the main navigation bar, choose **Manage my benefits > Overview of health coverage benefits**. Member renewal dates are listed in the right column.

Household: Household details

## Overview of health coverage benefits

Case ID: 1B0PYG8

See below for details about health coverage benefits. Programs include Health First Colorado and CHP+. To see information about other benefits, go to your [Dashboard](#). Go to 'Learn more' for more information about each benefit status. [Learn more](#)

### Summary of health coverage benefits

Individual(s)	Status	Program(s)	Monthly premium	Renewal due date
Lotsa (29 yrs)	Active	Health First Colorado (Colorado Medicaid)	N/A	12/31/2015

## How to complete your renewal

[How to complete a renewal on PEAK \(PDF\)](#)

Once it's time to complete your renewal, you will see a to-do card on your PEAK dashboard. Select 'Renew my benefits' to begin.

Dashboard Manage my benefits Find resources Get help More Español Sign out

## Hello DemoUser, welcome to PEAK

Below are the details related to your case.

CASE ID: 1B XXXX

### To-do list (1) [View all](#)

#### Renewal due

**Health First Colorado**

Demo User (37 yrs)

Your renewal is due. Please complete your renewal to see if you still qualify for benefits.

Due in 29 days 09/15/2023

[Renew my benefits](#)

## Upload a document

[Document uploads \(PDF\)](#)