



**CO L O R A D O**

**Department of Health Care  
Policy & Financing**

**SOLICITATION #:**

**2017000265**

**Appendix F**

**Enrollment and Attribution**

## **Appendix F**

### **Enrollment and Attribution**

To ensure that clients can quickly benefit from the ACC and that Regional Accountable Entities (RAEs) and Health Neighborhood providers can more seamlessly connect with clients, the Department is making several significant changes to how Medicaid clients are enrolled into the ACC, attributed to Primary Care Medical Providers (PCMPs), and assigned to RAEs. There are three main components of the Department's enrollment plan:

1. All Medicaid enrollees will be mandatorily enrolled into the ACC;
2. All ACC members will be immediately attributed to a PCMP; and
3. All clients will be assigned to a RAE based upon who their PCMP is.

#### **1. Mandatory ACC Enrollment**

- The Department will mandatorily enroll all full-benefit Medicaid beneficiaries into the ACC at the time of Medicaid enrollment.
- Enrollment into the ACC will occur daily and will be effective on the day in which the enrollee becomes eligible for Medicaid.
- Clients will be automatically reenrolled in the ACC when they lose and regain Medicaid eligibility.

#### **2. PCMP Attribution**

- All ACC clients will be immediately attributed to a PCMP, upon being determined eligible for the ACC. The Department will attribute clients using the following three methods:
  - 1) Claims-based attribution methodology – the Department will use historical claims data to identify the PCMP that the client has seen the most often during the past 12 months.
  - 2) System Attribution methodology - In the absence of any claims history for the client or family member, the Department will attribute the client to a PCMP based on three factors: 1) proximity of the PCMP to the client's residence; 2) PCMP appropriateness; and 3) PCMP performance.
  - 3) Client choice – all clients will receive notice of their enrollment into the ACC and have the opportunity to change their PCMP at any time.

#### **3. RAE Assignment**

- All clients will be automatically assigned to a RAE based upon who the client's PCMP is.
- A PCMP's RAE will be determined by the geographic location of the practice site. Each practice site location will be treated as a single PCMP.
  - For example, if client resides in Denver County, but is attributed to a PCMP in Adams County, he/she will be assigned to the RAE whose catchment area includes Adams County.
- All PCMP practice sites will be contracted with only one RAE.

#### **4. RAE Reassignment Process**

- Members who reside in a RAE region different from the region of their PCMP will be able to request reassignment to the RAE serving their county of residence if they meet all the following criteria:
  - 1) The Member is receiving an array of mental health and community support services from a Community Mental Health Center.
  - 2) The Member has a current plan of care that utilizes state plan services, 1915(b)3 community-based system of care services, and other state resources to support recovery.
  - 3) The Member requires ongoing therapeutic and community based services as evidenced by a history of hospitalization for a mental health condition, utilization of the Colorado Crisis Services system, involvement with the criminal justice system, or other similar indicator of the complexity of the Member's mental health condition within the past 12 months.
  - 4) The Member and care coordinator/case manager from the CMHC initiate conversation with both the RAE serving the Member's PCMP and the RAE serving the Members county of residence.
- Both RAEs will review a Member's request on an individual basis and determine the most appropriate RAE assignment for the Member.

# ACC Enrollment Flowchart

