



COLORADO
Department of Health Care
Policy & Financing

Putting Colorado's Health First



2015 - 2016 ANNUAL REPORT

The Department of Health Care Policy and Financing focuses on person-centered initiatives, increasing access to care, improving health outcomes and containing health care costs as we do our part to help Colorado become the healthiest state in the nation.

At the federal level, the Department is regulated by the Centers for Medicare and Medicaid Services. At the state level, the Department is overseen by the Medical Services Board, which adopts rules to govern all Department programs, ensuring compliance with state and federal regulations. Learn more about the Medical Services Board at co.gov/hcpf/medical-services-board.

This report summarizes Department accomplishments and activities for state Fiscal Year (FY) 2016, which spans July 1, 2015-June 30, 2016, unless otherwise noted.

TABLE of CONTENTS

- The People We Serve 04
- Programs 09
- Value 14
- Delivery System 18
- Our Future 24



On the cover: Stella, 5, has a rare chromosomal condition called Cri-du-chat. Read her story on page 6.

A year in review

This was an exciting year of progress and improvement for the Department and the people we serve.

In June 2016 we unveiled Colorado Medicaid's new name: Health First Colorado. The new name reflects significant improvements to modernize Colorado's Medicaid program to better engage members and improve the quality and coordination of care. We are committed to putting our members' health first and developing a person-centered approach, providing tools and opportunities to empower members to put their own health first. We never forget the people behind the programs.

We worked with the Colorado General Assembly with nearly unanimous support to pass legislation increasing access to care and controlling costs through mail delivery for maintenance medications and changes to regulations surrounding providers of non-emergency medical transportation.

Our Chronic Pain Disease Management Program is leveraging technology to improve outcomes and increase value. The program uses teleconferencing technology to connect pain management specialists throughout the country with primary care providers in Colorado. In its second year, the program is expanding to support providers treating those with opioid addiction.

The Accountable Care Collaborative Program continues to promote improved health for members by delivering care in an increasingly cost-effective way. The program is working to further integrate physical and behavioral health for members to improve their health outcomes while using resources wisely. These improvements will be part of the next iteration of the Program: Accountable Care Collaborative Phase II.

We are happy to share the Department's work featured in this report with you. We look forward to continual progress toward making Colorado the healthiest state in the nation.

Sincerely,



Susan E. Birch, MBA, BSN, RN
Executive Director



Susan E. Birch, Executive Director

THE PEOPLE WE SERVE

OUR MISSION

The Department's mission is to improve health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources.

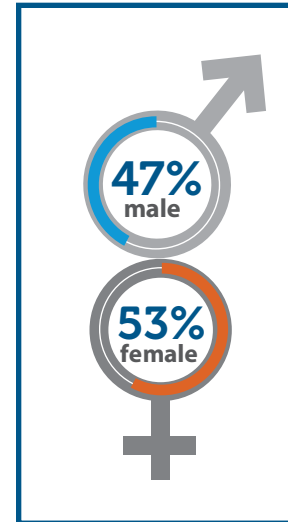
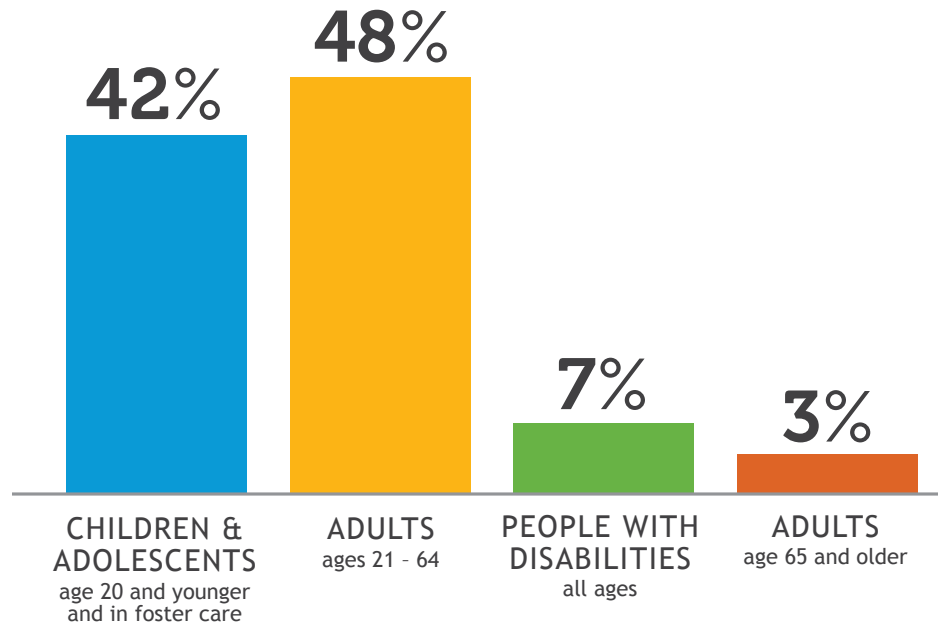
OUR VISION

Our vision is that the people we serve have integrated health care and enjoy physical, mental and social well-being.

In FY 2015-16 **Health First Colorado** provided coverage to approximately 1.3 million Coloradans. Child Health Plan *Plus* (CHP+) enrollment, which includes both children and pregnant women, was just over 51,000 in FY 2015-16.

Health First Colorado Demographics

FY 2015-2016



INTRODUCING Health First Colorado

In June 2016, Colorado Medicaid became Health First Colorado. The new name conveys the Department's commitment to putting its members' health first and encouraging its 1.3 million members to put their own health first.

The Health First Colorado rename was made possible through grants from the Colorado Health Foundation and Caring for Colorado Foundation.

All About Health First Colorado

FY 2015-2016

MEDICAID COVERAGE

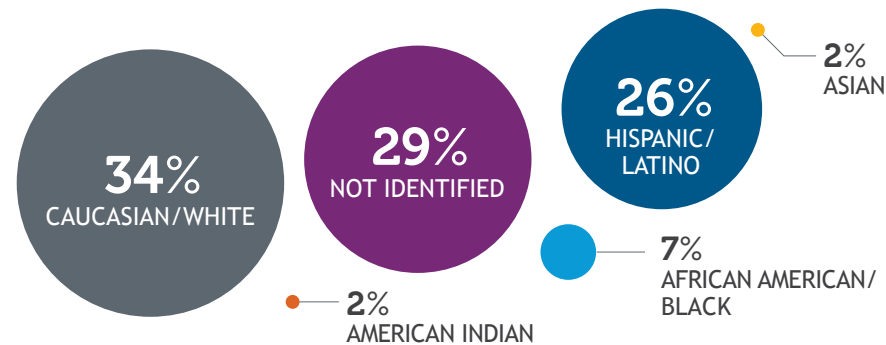
Colorado expanded Medicaid coverage in January 2014 to certain adults without disabilities under the Affordable Care Act.

Adults covered through this expansion cannot earn income over **133 percent of the Federal Poverty Level**.

2016 Federal Poverty Levels by Family Size*

FAMILY OF 1	FAMILY OF 4
\$15,804	\$32,328

*Some earning more may still qualify



45%

of babies in CO were born to mothers on Health First Colorado or CHP+ in 2015.

75%

of Health First Colorado adult members work.*

*Colorado Benefits Management System monthly snapshot of employment data for June 2016. Includes only Health First Colorado members ages 16 through 64 with identified employment or earned income in June 2016.

407,338 ADULTS

in Colorado were Health First Colorado members in FY 2015-16 due to Affordable Care Act Medicaid expansion.

100%

of the costs associated with Health First Colorado expansion members were covered by the federal government in FY 2015-16.

There was no impact on the state General Fund.

\$\$\$

FEDERAL POVERTY LEVEL

The Federal Poverty Level, or FPL, is a measure of income issued every year by the U.S. Department of Health and Human Services. FPL is one factor used to help determine if individuals or families qualify for programs such as Health First Colorado and Child Health Plan *Plus*.



PERSON- AND FAMILY-CENTEREDNESS ADVISORY COUNCIL

The Department has created two Person- and Family-Centeredness Advisory Councils for Health First Colorado and Child Health Plan *Plus* members. The Councils help the Department better learn about its members' experiences while developing and maintaining a culture of person-centeredness. For more information, visit co.gov/hcpf/mfac.



Stella, center, with her mom, Stephanie, and her dad, Peter.

Hear Stella roar

In-home therapy helps Stella work toward her goals.

Step by step

Like many children, Stella loves to roar like a lion. The five-year-old warms up for an in-home physical therapy session in early September with a few big roars.

Then Stella, along with her physical therapist, her mom, Stephanie, and her dad, Peter, go outside to the driveway to practice walking.

Stella has a rare chromosomal condition called Cri-du-chat. The condition manifests differently in each person who has it. For Stella, physical and speech development have been delayed. She works weekly with speech, physical and occupational therapists with the goal to get her to walk and talk.

The family's enrollment in the Department of Health Care Policy and Financing's Health Insurance Buy-In program allows for her therapy to take place in her family's Lakewood home.

Tremendous strides

Prior to starting in-home therapy, Stephanie would take Stella across town to Children's Hospital Colorado for therapy. Stephanie says it was difficult to replicate the therapy Stella received at the state-of-the-art facility when they returned home.

Stella's much more comfortable with in-home therapy, Stephanie says, and the whole

Stella shines bright

- ★ **She's cheesy**
One of Stella's favorite foods is cheese puffs, which her mom Stephanie has ready during therapy sessions.
- ★ **She plays shadow games**
Stella has recently discovered her shadow. She's very interested in it.
- ★ **She's a princess**
Stella loves princesses and all of their sparkly accessories. One of her favorite shows is Sophia the First, which features a young princess.

family learns how to do the therapeutic work so that they can practice between sessions.

"She's made so many tremendous strides," Stephanie says. "If she didn't have in-home therapy, I think it'd be a different story."

During her recent physical therapy session, Stella grips her walker as her physical therapist helps move Stella's legs. The family has a goal of having Stella walking on her own by Halloween.

Her hour-long morning therapy comes to an end, and Stella gives hugs to her mom and dad. They prepare to head off to Stella's favorite part of her day - school. ▲

Sisters, best friends

When it comes to health care, Anna and Teresa know the importance of family.

Motivated sisters

Sisters Teresa and Anna make a good team. The two live together in a downtown Denver apartment, co-parent three dogs, and encourage each other to live healthy lives.

Teresa, 28, has osteogenesis imperfecta, commonly known as brittle bone disease. Teresa has a master's degree in public health, commutes to the University of Colorado's Anschutz campus for work, and uses her personal experiences to help others manage their health care.

One of her greatest joys is wrangling Mylo, her mutt that wants to love everyone he meets.

Anna, 25, is also pursuing a career in health care. She is a professional research assistant in medical oncology, also on the Anschutz campus, and she has applied to physician assistant graduate programs. Anna's 3-lb. Chihuahua, Nala, mostly nestles in Anna's arms and watches the world go by.

Optimized health

Teresa has been a Health First Colorado member for most of her life.



Anna, left, with dog Mylo, and Teresa, right, with dog Nala.



Anna, left, and Teresa walk their dogs in a Denver park.

Sister act

- **Strolls with the dogs**
One of Teresa and Anna's favorite things to do is take Mylo and Nala for walks at the nearby park. Their third dog, Simba, behaves best when at home.
- **The power of a chair**
Teresa calls her motorized wheel chair the "No. 1 thing I rely on every day." With it, she gets to bus stops, work, the park, and anywhere else she needs to go.

Growing up Teresa fractured more than 100 bones - "We stopped counting," she says. She had over 10 surgeries and dozens of hospital stays.

Today she uses home therapies to help support her fragile immune system, and prevent infections and other complications. Among those are a "cough assist;" a BiPAP machine to aid sleep; and oxygen.

"I can't emphasize this enough: Without the support services that Health First Colorado provides me," Teresa says, "I don't believe my health would be at the most optimized level for me to perform professionally, personally - everything."

Studies first

Anna became a Health First Colorado member while studying biology and public health as an undergraduate at the University of Colorado Denver.

"The insurance was really helpful for me as a student," she says. "I worked two jobs as a full-time student, but wasn't able to afford health insurance. Health First Colorado enabled me to maintain my health, which allowed me to focus on my studies."

She graduated in 2015 and later enrolled in health insurance through her employer.

Teresa and Anna both say their experience navigating the health care system has been formative. For Teresa, Health First Colorado has helped her be who she wants to be and do what she wants to do.

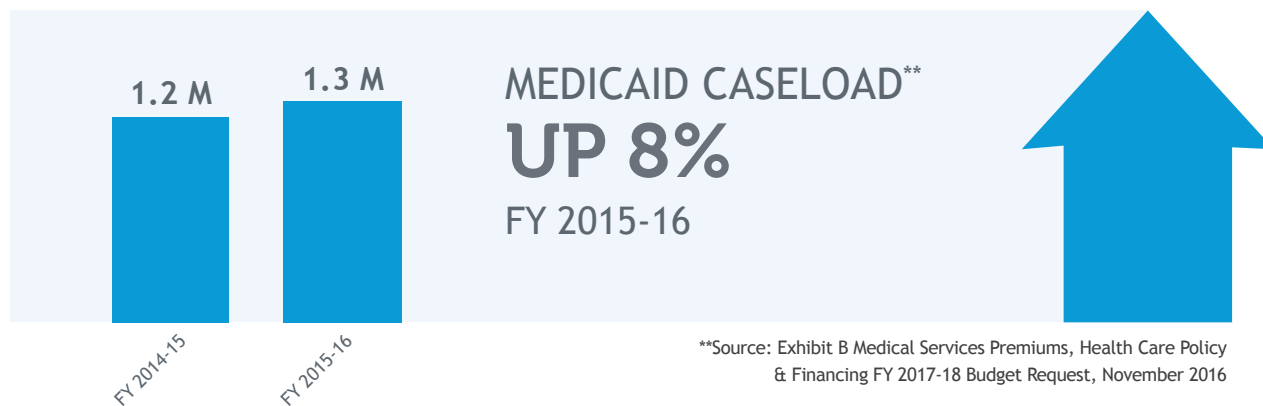
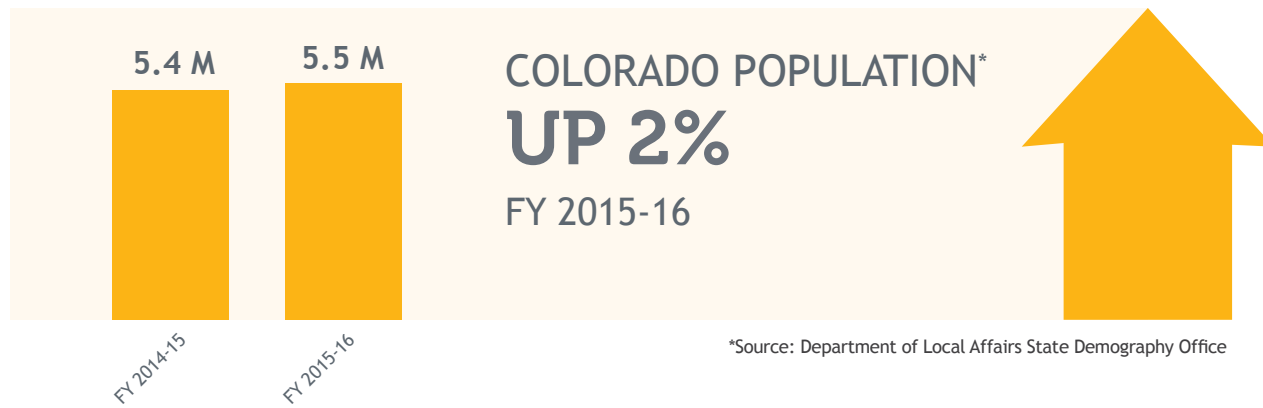
"A system like Health First Colorado really allows for people like me to thrive and to contribute to society as a working individual," Teresa says. "I think that's really important for people to understand."

As for Anna, she says, "I hope people can see that Health First Colorado can help everyone, with or without a disability, to lead happy and productive lives." ▲

PROGRAMS

The Department administers Colorado’s public health insurance programs, including Health First Colorado (Colorado’s Medicaid Program) and Child Health Plan *Plus* (CHP+), as well as a variety of other programs for Coloradans who qualify.

Growth of Medicaid Caseload & Colorado Population



Reaching young mothers



Allison Grooms is a dietitian at Children’s Hospital Colorado’s Colorado Adolescent Maternity Program (CAMP). CAMP supports mothers under the age of 21 throughout

pregnancy and the birth process, and in parenthood. Many of the women CAMP serves are a part of Health First Colorado’s Prenatal Plus program, which provides mothers who qualify with health care support to lower the chances of delivering a baby with a low birth weight. Learn more at co.gov/hcpf/prenatal-plus.

“We take a very holistic approach with the young mothers we serve. It’s one thing to be pregnant, but when you peel back the layers, you see so many other needs. We help them with mental health, nutrition and diet, their living situations and other preventive care. We also help them be good parents, offering education on everything from how a baby should sleep to car seats.”

– Allison Grooms



Dental Program

Health First Colorado offers dental benefits to children and adults. The adult dental program completed its second year of services on June 30, 2016.

In FY 2015-16 there were 1,687 dental providers serving Health First Colorado members, a 16 percent increase in providers from year one.



Home and Community-Based Services and Other Programs

The Department offers Home and Community-Based Services and supports to qualifying Health First Colorado members. These services allow older members and members with physical, or intellectual and/or developmental disabilities to live everyday lives with family and friends in the communities of their choosing.



Buy-In Programs

The Buy-In Program for Working Adults with Disabilities and the Buy-In Program for Children with Disabilities allow individuals and families the opportunity to purchase Health First Colorado coverage. Members pay a monthly premium based on their income.



The Colorado Indigent Care Program

The Colorado Indigent Care Program (CICP) allows Coloradans with incomes up to 250 percent of the Federal Poverty Level (FPL) to receive discounted health care services at participating hospitals, community health centers, and clinics. CICP is not health insurance. In FY 2014-15, CICP served more than 58,000 Coloradans. CICP is an important safety net for those who do not qualify for Health First Colorado or Child Health Plan *Plus*.



Child Health Plan *Plus*

Child Health Plan *Plus* (CHP+) offers comprehensive health care benefits to two populations: uninsured children ages 18 and younger, and pregnant women who do not qualify for Health First Colorado but cannot afford private health insurance.

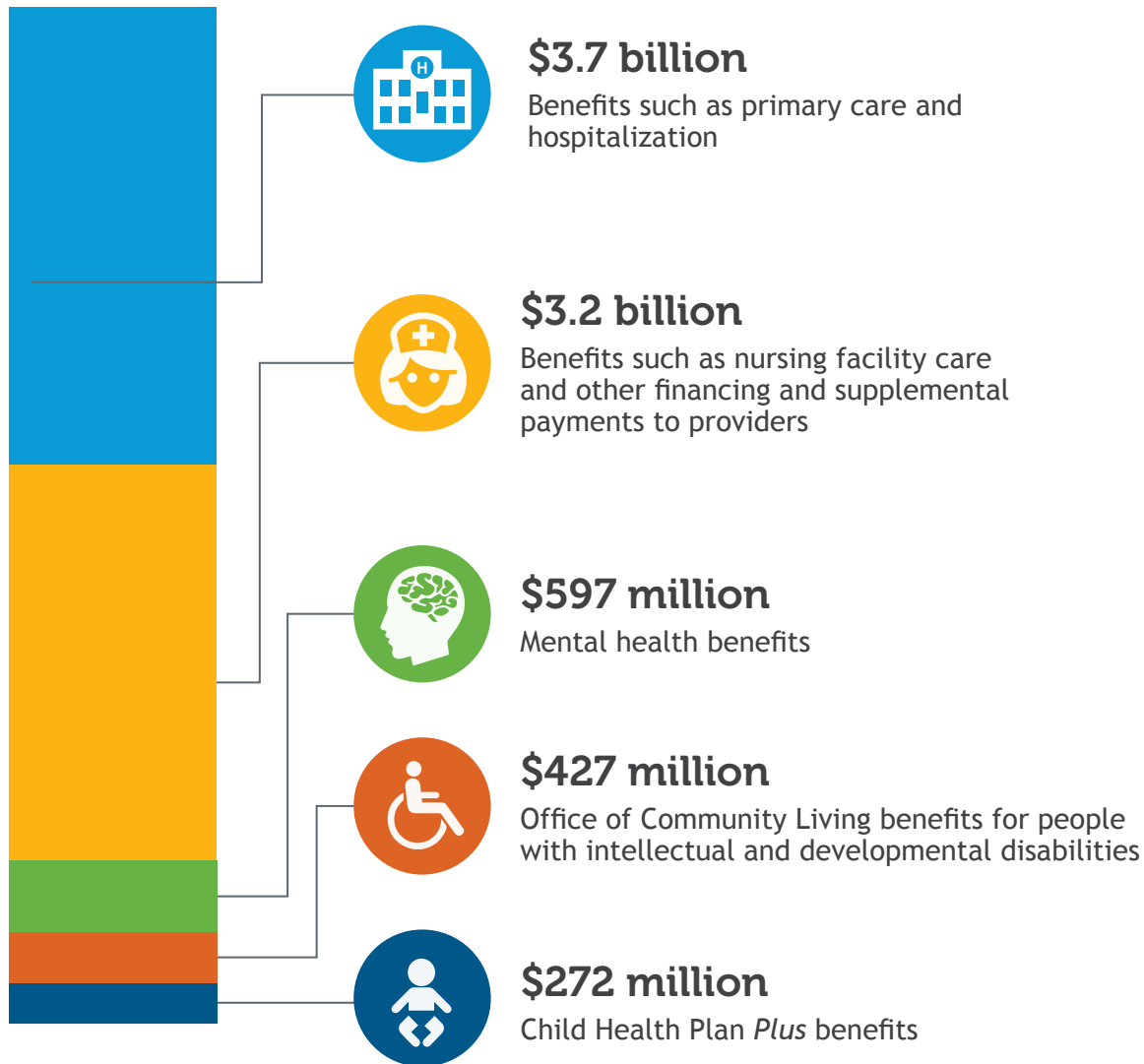
In FY 2015-16 the CHP+ dental program served nearly 35,000 children. This is a five percent increase over the previous year. The percentage of CHP+ children seeing a dentist, at least once during the year, increased from 40 percent to 45 percent.



Health Insurance Buy-In Program

The Health Insurance Buy-In Program is a premium assistance program for Health First Colorado members. It sends monthly payments to members for all or a portion of the cost of their commercial health insurance premiums.

Breakdown of Department Costs by Benefit



Connecting oral and physical health



Erin Cettie, DDS, works regularly with Dental Lifeline Network (DLN), which provides free, comprehensive dental treatment to people with

disabilities, the elderly, and the medically fragile. The Department is one of several sponsors for DLN Colorado, which serves many Health First Colorado members. Cettie regularly treats clients in nursing homes and mental health facilities via the Dental HouseCalls portable dental office.

“We are seeing a connection between oral health and physical health - especially concerning diabetes and heart disease. We hope that helping clients with oral hygiene and getting their mouths to a stable condition can help keep diabetes and heart disease under control.”

– Erin Cettie, DDS

Chris, t-shirt entrepreneur

Chris and his mom have felt ‘very supported’ by the Department in creating a person-centered system to meet Chris’s needs.



Chris, left, and his mom, Anne, sell Chris's t-shirts at a Denver yoga event.

From senior project to money maker

It's a Saturday morning in early September, and Chris and his mom, Anne, stand in front of a table filled with t-shirts in a rainbow of colors, all of them printed with a variety of Chris's sayings.

Chris, 32, runs a t-shirt company, Lopsided Heart Creations, and they've set up a booth at a local yoga event.

A prospective customer approaches.

"Hi, my name is Chris," he says through an assistive computer tablet. "I have a really great life selling t-shirts. I yearn for truth."

Chris has autism. His t-shirt company started as his senior project in 2004 while at PS1 Charter School. It was a way for him to reach others by using his love of words and poetry.

After partnering with local nonprofit organization YouthBiz, he sold \$1,100 worth of t-shirts in two hours. Twelve years later, he has his own website and remains enthusiastic about the business.

'Tears of happy great joy'

Chris receives support through Health First Colorado's Home and Community-Based Services Waiver for Persons with

Developmental Disabilities. The program provides access to 24-hour, seven-days-a-week support.

Two years ago Anne became Chris' provider for this waiver, which has allowed her to help build customized care for Chris.

"When you have the option of meeting your child's needs in a very person-centered way, it can be very effective, and outcomes tend to be better, too," Anne says. "He is supported to create his own life.

"I've felt very supported by both the Department of Health Care Policy and Financing and the Department of Public Health and Environment to do this," she says.

Chris lives in a Central Denver neighborhood, and he is supported by a team of five enthusiastic people, whom he selected.

"Tears of happy great joy." That's how Chris explains his feelings for his team.

Anne and other family members have noticed Chris sleeps better, eats more healthily, has more meaningful activities in his community, and, overall, is happier with his person-centered approach.

"When you can put the right supports in place," she says, "it's so cool to see what potential rises up." ▲

T-shirt poetry



Some of the t-shirt sayings

- Develop Ways to Treasure Everyone
- I Am Extra Vast and Lopsided
- Love Brings Peace



A pioneer

Chris was the first self-employed person with a disability to get funding from the Colorado Department of Labor and Employment's Division of Vocational Rehabilitation.



VALUE

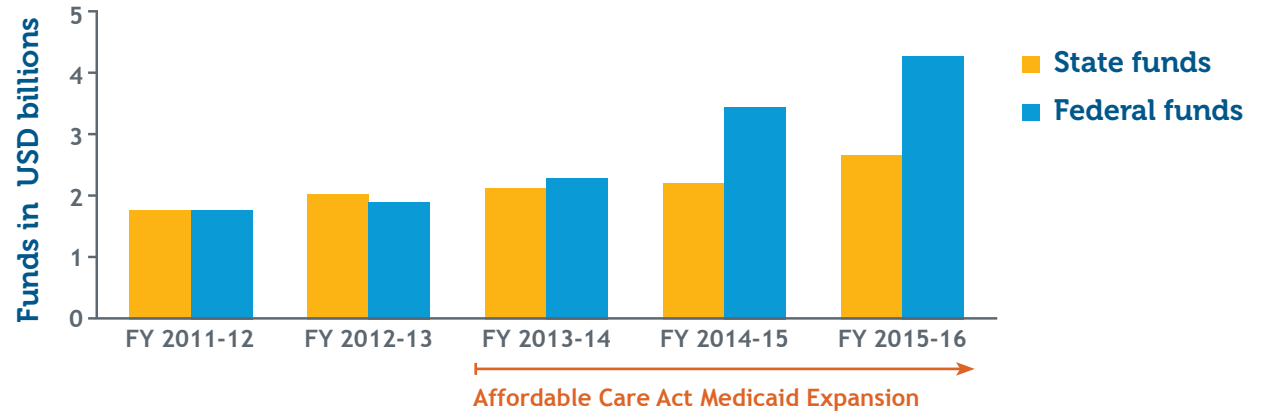
The Department strives to improve health outcomes while using resources wisely.

From July 1, 2015 to June 30, 2016 the Department paid for*

\$8.2 B IN SERVICES** FOR **1.3 M** PEOPLE

*Numbers are approximate
**Health First Colorado and CHP+ expenditures only

Expenditure Over Time by State vs. Federal Funds*



*Medical services premiums only

Department Spending Authority by Fund

FY 2015-16

Total funds
\$9.1 billion*



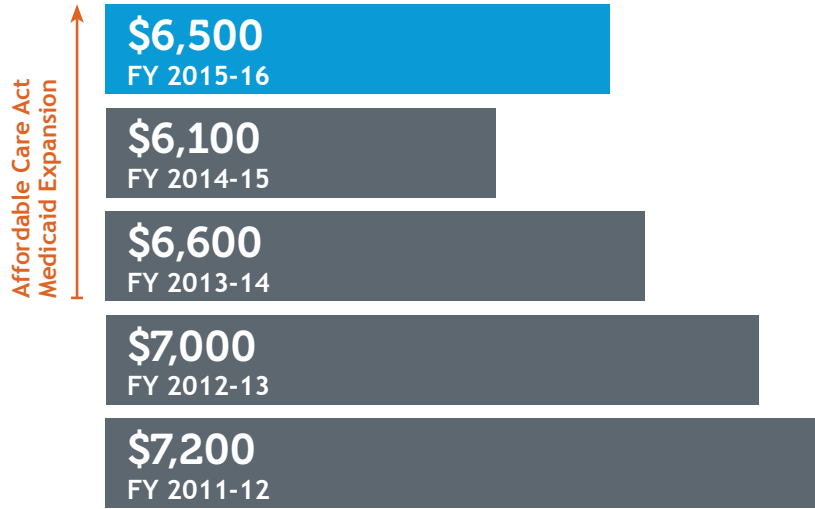
Administrative Costs

2.8%

of Department expenditures were for administrative costs in FY 2015-16.

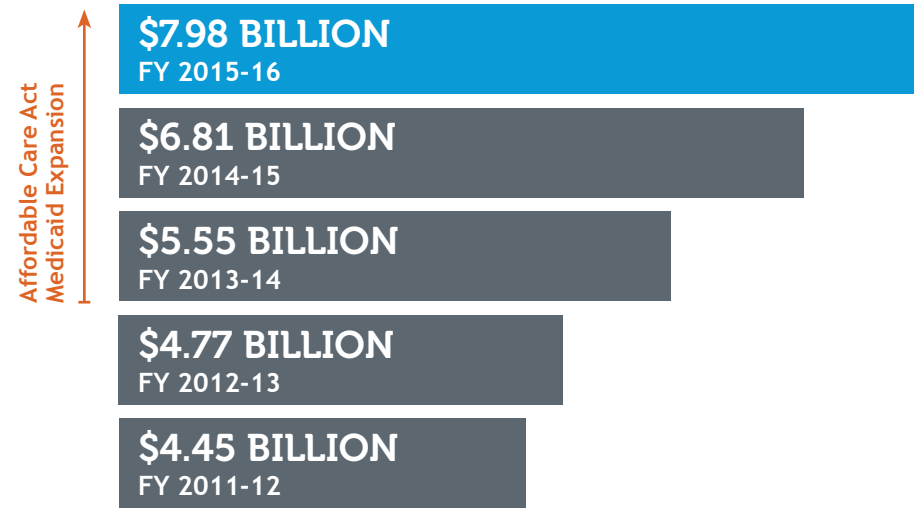
*For all services and administrative line items including CICP and Old Age Pension; the entire Department budget

Health First Colorado Per Capita Cost of Care Over 5 Years*

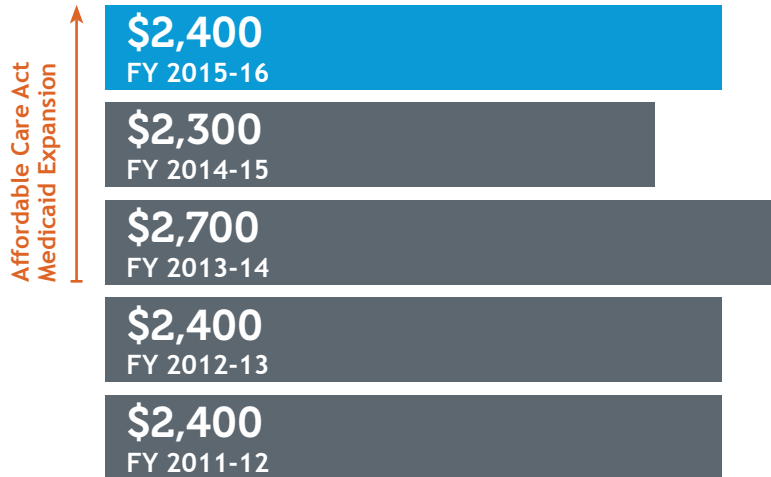


*The increase in cost per capita in FY 2015-16 included additional Hospital Supplemental Payments. An estimate of the total per capita without the additional Hospital Supplemental Payments is \$6,092, or a decrease of 0.79 percent.

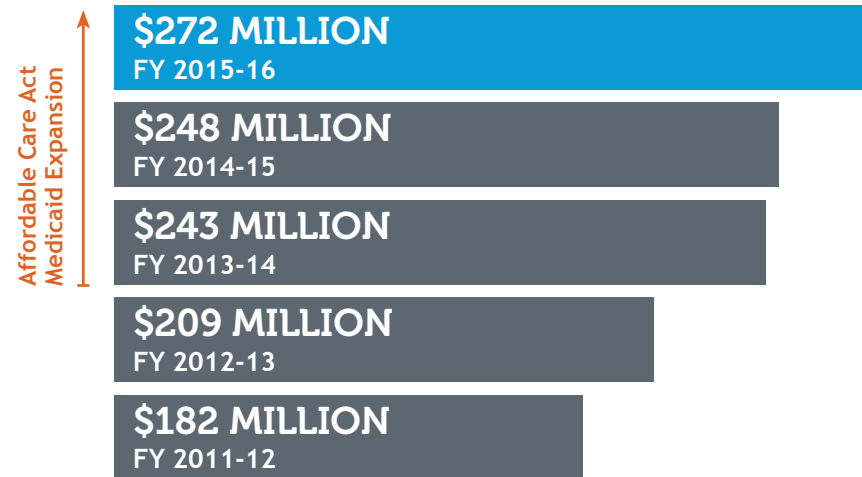
Health First Colorado Costs Over 5 Years



Child Health Plan Plus Per Capita Cost of Care Over 5 Years



Child Health Plan Plus Costs Over 5 Years



Hospital Provider Fee in action

The Department collects a yearly fee from participating Colorado hospitals. This fee is matched by federal dollars to increase payments to hospitals, to fund hospital quality incentive payments, and to expand health care coverage. Colorado is one of only a few states in the nation reducing its number of uninsured residents with this federal and state funding partnership.

Hospital Provider Fee: \$764 Million
FY 2015-16

\$79M

Payments for services and care for
438,444 Clients

317,552	Adults without kids
95,284	Parents
16,569	Child Health Plan <i>Plus</i> (CHP+)
6,217	Buy-in Individuals with Disabilities
2,822	Other eligible groups

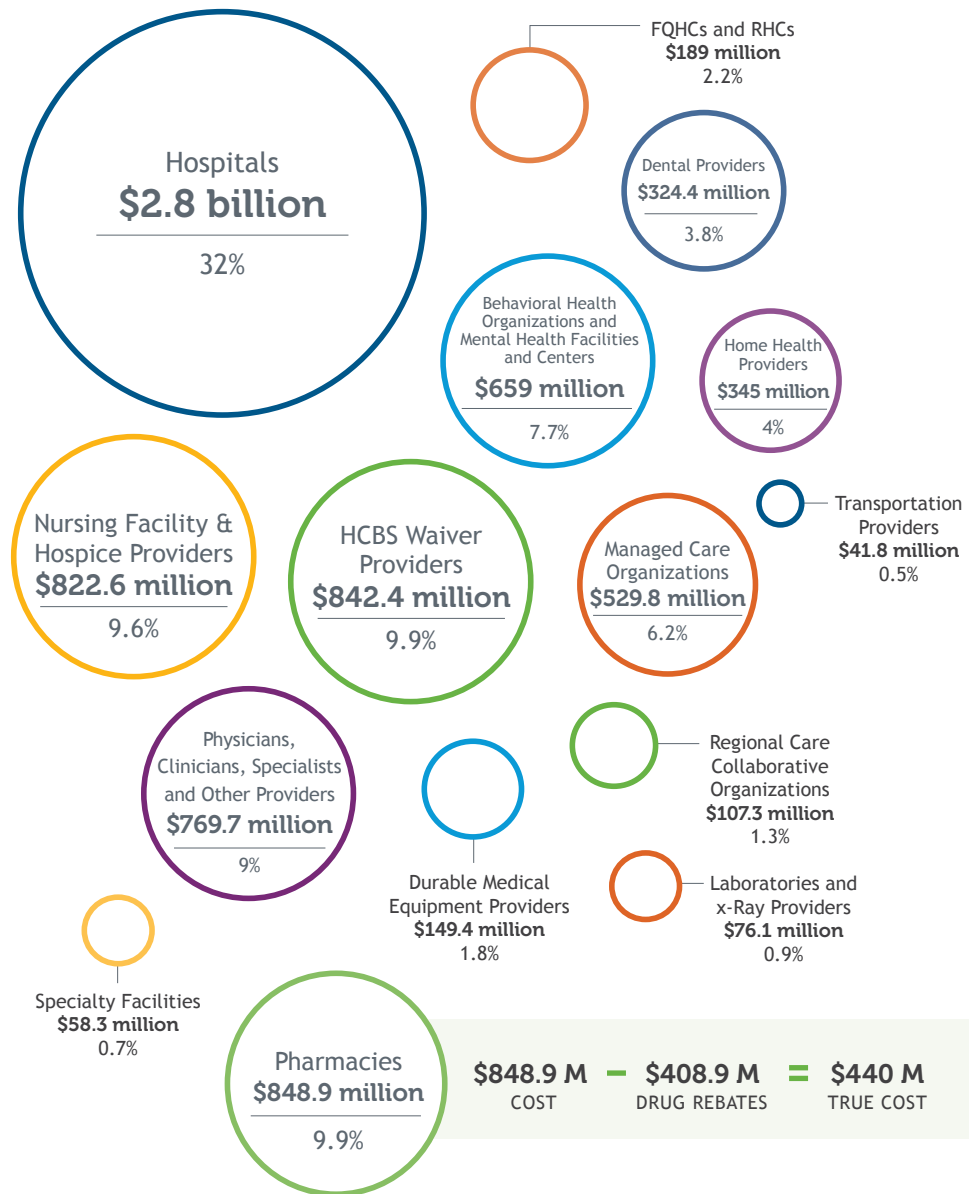


\$685 M

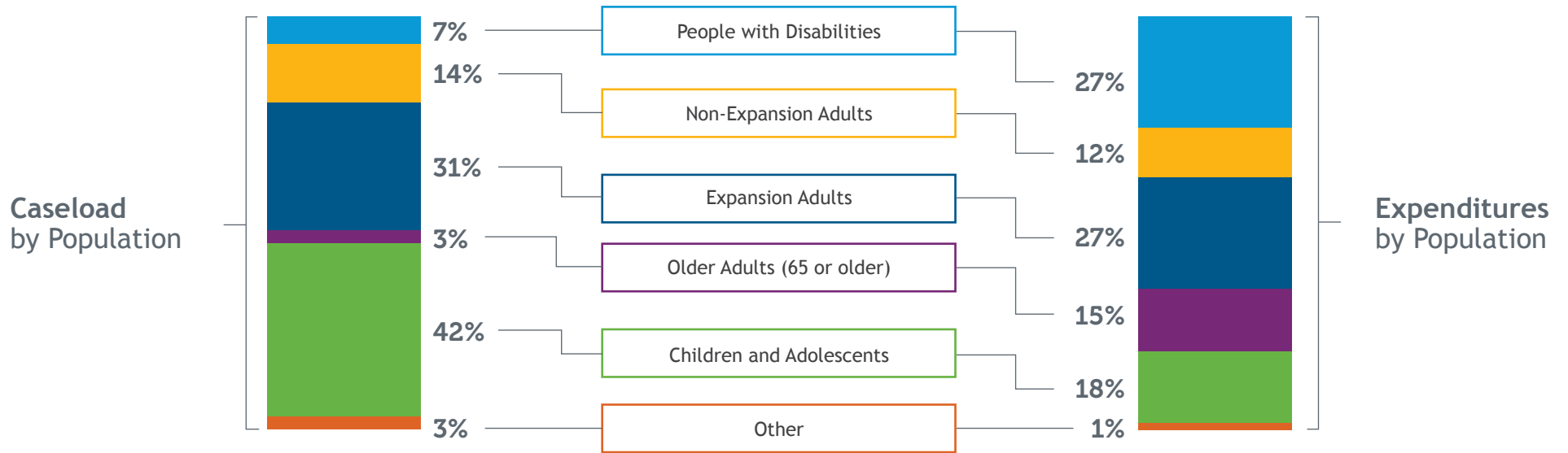
Total Hospital Supplemental Payments

FY 2015-16 MMIS Provider Type Data; may not match expenditures reported elsewhere by the Department.

Who gets Health First Colorado payments?



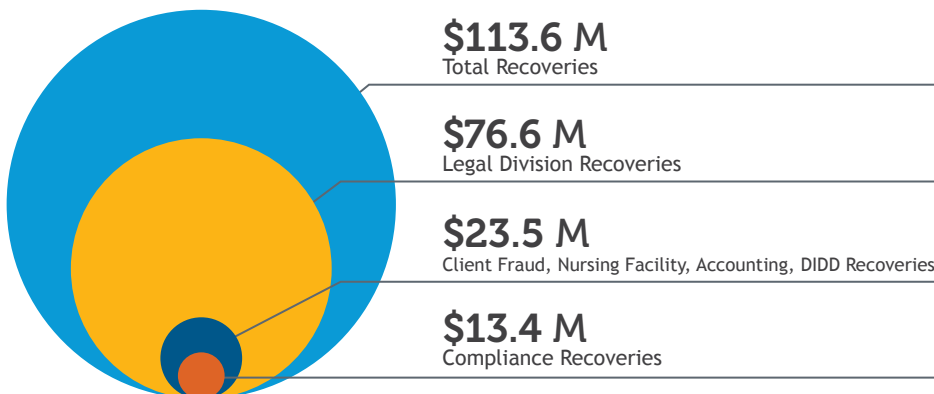
Who is Covered and What Does it Cost?



Reducing Fraud, Waste and Abuse

In FY 2015-16 the Department recovered approximately \$113.3 million due to overpayments, fraud, waste and abuse. This includes third-party liability repayments for benefits that should be paid for by another party, such as Medicare.

Total Department Recoveries



Grant Funding: Strengthening Public-Private Partnerships

\$21.4 M Funding Secured

from federal government, private industry and foundations in FY 2015-16.

Grant activities span the Department and fund diverse programs and initiatives. Everything from the Health First Colorado rename to better care coordination for our members, improved use of technology, and support for our members with disabilities who live independently in their communities have benefited from our Department's grant acquisition efforts.

\$1.3 M Total Grant Expenditures

from those awards in FY 2015-16.

Funding secured is the total amount of all grants awarded to the Department in FY 2015-16. Total grant expenditures for FY 2015-16 do not match the amount of funding secured as each grant has its own timeline. While grant periods vary, most span several years and are not confined to any fiscal year. Each year's funding secured amount reflects what was awarded to us in new grants within that fiscal year, not the amount expended for each individual grant.

DELIVERY SYSTEM

Accountable Care Collaborative: Managing Care Appropriately

When the Accountable Care Collaborative launched in 2011, the Department's goal was not to simply deliver health care more efficiently and effectively, but to improve the health of our members. The FY 2015-16 Accountable Care Collaborative legislative request for information, which provides a comprehensive overview of the program, is available at co.gov/hcpf/legislator-resource-center.

How does the Accountable Care Collaborative work?



Better Health and Life Outcomes

Health Team



Coordinated care means improved health outcomes for everyone enrolled in Health First Colorado. It also means better clarity for and coordination with providers as they interact with the system and wiser use of state resources.

Regional Coordination



Improved health outcomes and smarter use of state resources requires regional and local coordination that recognizes the need for medical care, behavioral health care and community supports all working together.

Data

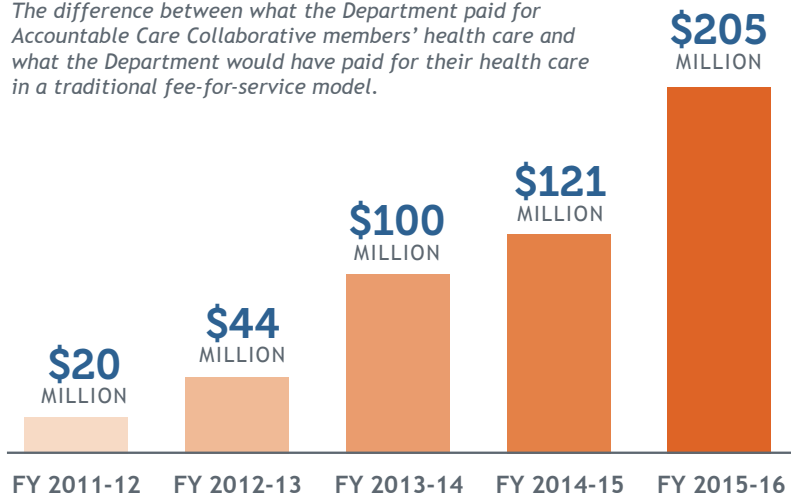


Members, providers and the system receive the data needed to make real-time decisions that improve care, increase coordinated services and improve overall efficiencies.

5 Years of the Accountable Care Collaborative

GROSS SAVINGS

The difference between what the Department paid for Accountable Care Collaborative members' health care and what the Department would have paid for their health care in a traditional fee-for-service model.



NET SAVINGS

How much the Department saved after deducting Accountable Care Collaborative administrative costs and incentive payments from the gross savings total.



ACCOUNTABLE CARE COLLABORATIVE PROGRAM KEY FINDINGS

Cost Savings

The program has reduced health care related expenditures persistently over time—about \$60 per member per month savings for adults, \$20 for children and \$120 for individuals enrolled in both Medicaid and Medicare.

Providers View Program Positively and Support Program's Direction

Many providers stated the program has been a step toward needed health care reform in Colorado by supporting provider practice transformations and facilitating community connections that previously were not implemented in a coordinated way. Providers laud the program's flexibility.

Maintaining Quality

The program increased value by reducing spending while keeping quality and access to care constant.

Members View Program Positively

Members praised the program for helping them access effective, affordable and timely care. Most reported maintaining or improving their overall health. Members feel care coordinators help facilitate relationships between them and their providers, addressing the members' holistic needs.

Meeting clients where they are



Alison Sale is a community health worker at North Colorado Health Alliance. She recently helped a Health First Colorado member with complex medical needs begin to improve his quality of life.

“When we do home visits, we meet the clients where they are. And for this man, it literally meant walking in the door. After that first visit, I would text or call him on a daily basis. And he started to trust me. I made it clear that we were equals in working on his health together, and that made a big difference.”

— Alison Sale

Taking time to care



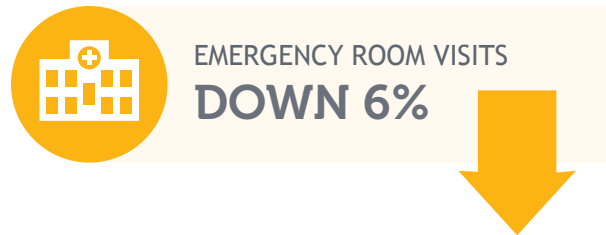
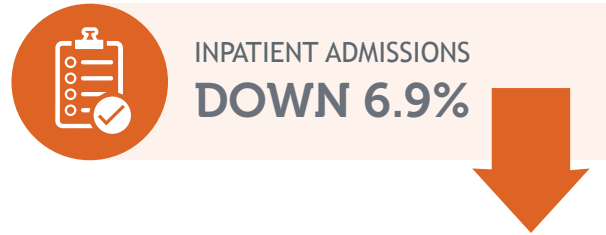
As the executive director of Carin' Clinic in Arvada, Margo Sobocinski estimates that 80 percent of the population she and her colleagues care for are Health First Colorado members.

Sobocinski, a nurse practitioner, and her fellow clinicians provide health care from birth to age 18.

“We do a great job with chronic health problems because we take the time to educate, and that keeps our clients out of the emergency room. But we also address chronic problems that come with poverty. We help our clients get resources. We don't just look at what's going on with their eyes and ears. Clients often say to us they come here over another clinic because they see how much we care.”

– Margo Sobocinski

Accountable Care Collaborative: Managing Care Appropriately*



*Percents reflect changes from year one to year five of the Accountable Care Collaborative

Integrating Behavioral Health and Primary Care in Colorado

The Colorado State Innovation Model, a federal initiative funded by the Centers for Medicare & Medicaid Services, helps health care practices integrate behavioral health and primary care, expand the use of telehealth, and enhance population health efforts. The initiative will reach 400 practices and four community mental health centers during its four-year timeline.

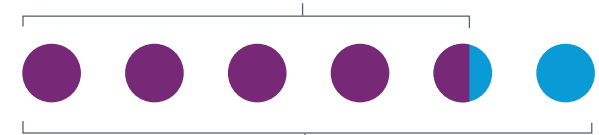
To learn more, visit co.gov/healthinnovation.



1.025 million people

enrolled in the Accountable Care Collaborative in June 2016.

77% of Health First Colorado members are enrolled in the Accountable Care Collaborative.



TOTAL HEALTH FIRST COLORADO MEMBERS

67%

Accountable Care Collaborative membership has increased by 67% since June 2014.

Finding comfort in their own homes

Home modifications improve members' everyday lives.

Person-centered process

Brian Johnson left behind a career at a top advertising agency to help people get comfortable in their own homes.

Brian's company is called Fixation, and he is one of the Department's contracted providers of home modifications. The Home Modification benefit, part of long-term services and supports, allows for specific modifications, adaptations or improvements in an eligible member's home setting.

Brian works with case managers, Division of Housing inspectors, and others to modify clients' homes. But most importantly he works with the members from start to finish to make sure he and his team are meeting their needs.

"Clients really help flesh out what the final product is going to be," Brian says, adding that they approve every step of the process. "We do home modifications that are not only

functional but also complementary to the client's home. We want to provide them with something they can be proud of."

'It looks beautiful'

Brian's company began focusing on home modifications in 2008. It is a Certified Aging-In-Place Specialist business, and Brian estimates that 90 percent of its work is with Health First Colorado members.

Two of those members are Cristina and her son Adrian. They were in need of modifications to their Longmont house so that Adrian, who has cerebral palsy, could more easily enter and exit, and use the bathroom. Cristina was having a hard time taking Adrian out of the house and helping Adrian bathe when her husband wasn't home.

Brian and his team modified the stairs in the garage - adding bars and decreasing their grade - and revamped the bathroom. They



Brian Johnson, right, and his brother, Mark, at the site of a recent project.

also built bars near Adrian's bed and the couch for easier access.

"Brian understood everything we needed," Cristina says. "It looks beautiful. I love it. And now we can go outside by ourselves.

"You can tell he's a guy who really cares about people like my son," she says.

It's for this very reason that Brian works in home modification, he says.

"It's such a great business because you're changing people's lives, not just putting in new granite countertops," he says. ▲



Priscilla, right, and her partner, Dave, in their car, The Enterprise.

Priscilla and The Enterprise

Priscilla's car provides a way to work, greater freedom and fosters good health.

Wheels

The minute Priscilla and her partner Dave pull up to the Target in their hometown of Louisville, Priscilla begins to profess her love for her car.

“The Enterprise,” as it’s named, is a silver 2010 Dodge Grand Caravan. But it’s so much more - it’s her ride to her doctor’s appointments and her job on the University of Colorado’s Anschutz Medical campus. It’s

their way of picking up lemons and graham crackers as needed at Target.

Priscilla, 38, has Osteogenesis Imperfecta. Prior to her owning The Enterprise, she risked lung infections and other serious complications while waiting outdoors for multiple forms of public transportation to go about her day. In addition to her work at Anschutz - with the interdepartmental JFK Partners - Priscilla is also a life coach and event planner.

A gentle touch

Priscilla and Dave met while undergraduates at the University of Colorado Boulder. At the time Priscilla was a part of the Department’s Consumer-Directed Attendant Support Services (CDASS), which allows Health First Colorado clients to direct and manage the attendants who provide their personal care.

Osteogenesis Imperfecta means that Priscilla’s bones are fragile. She needs attendants who understand that.

Enter Dave. He is blind and, as Priscilla points out, people who are blind have one of the highest unemployment rates in the country.

As Dave and Priscilla got to know each other, he developed just the right touch in her care. Priscilla was able to employ him through CDASS.

“People say, ‘He’s blind,’ but he listens,” Priscilla says. “He knows how to lift me, and he’s never put me in an unsafe situation.”

Home ownership

Priscilla and Dave moved in together after college, but their rent kept increasing. They wanted to buy a home, but Priscilla needed to maintain a certain income to continue receiving services through the State of Colorado.

That is, until the Department launched the Buy-In Program for Working Adults with Disabilities. It allows her - and other Health First Colorado members - to earn a living wage but still qualify for services.

She and Dave were able to save money and eventually put a down payment on a home in Louisville.

“This is probably one of the coolest things that Colorado has done,” she says.

Priscilla and Dave are now settling in to normal suburban life. Though she loves her car, she’ll still use public transportation when the weather’s nice so that they save money on gas. But they do indulge in frequent trips to Target. Luckily it’s three blocks from their house. ▲

Priscilla’s ambitions



Driver - and pilot?

Priscilla had to complete 70 hours of behind-the-wheel training to get authorization from the Division of Vocational Rehabilitation to buy the car. It is outfitted with the same control system as the F-18 fighter jets.



Double degree

Priscilla had a prior life as a customer service trainer in North Dakota. Upon moving to Colorado, she found her lack of a college degree to be a barrier to employment. So she earned two bachelor’s degrees - in broadcast journalism and political science - from the University of Colorado Boulder.



Helping others

Priscilla helps JFK Partners advance its mission to promote the independence, inclusion, contribution, health and well being of people with developmental disabilities and special health care needs and their families.

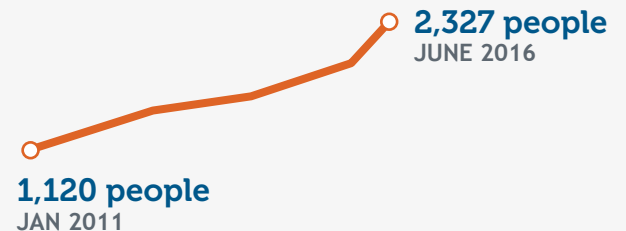
Office of Community Living

The Office of Community Living (OCL) is comprised of the Division for Intellectual and Developmental Disabilities (DIDD) and the Long-Term Services and Supports Division (LTSSD).

DIDD leads efforts to enable people with intellectual and developmental disabilities to live everyday lives in their communities. LTSSD oversees Home and Community Based Services (HCBS) waiver programs, the Program of All-Inclusive Care for The Elderly (PACE), Hospital Back-Up Services and nursing facilities contracted with the Department.

In FY 2015-16, the OCL created the Community Living Implementation Plan. The Plan is a strategy for implementing the 2015 Community Living Advisory Group and the 2014 Colorado Community Living Plan recommendations and goals.

Participation in the Supported Employment Benefit



Colorado has exceeded the national average for the percent of adults with intellectual and developmental disabilities receiving waiver services who are employed (2014: Colorado 28%, National Average 19%)*.

*Source: <http://www.statedata.info/statepages/Colorado>

OUR FUTURE

Accountable Care Collaborative Phase II

The Department continues to develop the next contract of the Accountable Care Collaborative. The contracts will leverage the successes of both the current Accountable Care Collaborative and Behavioral Health programs. Instead of two separate entities (RCCO and BHO), the state agency will contract with one Regional Accountable Entity (RAE) responsible for coordinating physical and behavioral health services. Spring 2017 is the target for the release of the formal solicitation vendor proposals, with RAEs assuming duties in July 2018. For more information, go to co.gov/hcpf/ACCphase2.

Colorado interChange and Provider Revalidation and Enrollment

The Colorado interChange will replace the legacy Medicaid Management Information System (MMIS) and Fiscal Agent services with a service delivery model that includes business intelligence and analytics tools that will improve data and reporting. These changes are required by federal law and include enhanced provider screening requirements set forth by the Centers for Medicare & Medicaid Services (CMS). Colorado interChange is scheduled to go live in 2017.

Do you know someone who needs health insurance?

If you know someone who may benefit, please visit the Department website at Colorado.gov/hcpf and click the Apply Now button for more information.

Individuals and families can see if they qualify for Health First Colorado or Child Health Plan *Plus* coverage online through Colorado.gov/PEAK.

Applicants without internet access can visit their local county human services office for assistance.

We're all in this together! Do your part to stay healthy and be well!



COLORADO
Department of Health Care
Policy & Financing