



Automated Medical Payments

# Medicaid Bulletin

## Colorado Title XIX

Fiscal Agent

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INC

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### Mailing Addresses

Claims & PARs  
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Denver, CO 80201-0030

Correspondence, Inquiries & Adjustments  
P.O. Box 90  
Denver, CO 80201-0090

Provider enrollment, Provider information,  
Changes, Signature authorization,  
and Claim requisitions  
P.O. Box 1100  
Denver, CO 80201-1100

Medicaid bulletins contain important policy and billing information and should be shared promptly with billing staff.

Bulletins supplement information in the Medicaid Provider Manual and should be retained with the provider manual for reference. Retain all bulletins until published notification advises that the information is obsolete or reproduced in subsequent bulletins or provider manual updates.

Please direct questions about bulletins and billing information to Medicaid Provider Services.

**Distribution: Hospitals, Physicians,  
Clinics, Non-physician practitioners,  
Psychologists**

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**Reference: B9800001**

## Changes to Enrollment in the Mental Health Capitation Program

The Mental Health Capitation Program (MHCP) began in 1995 and expanded statewide in 1998. MHCP automatically enrolls Medicaid clients in the Mental Health Assessment and Services Agency (MHASA) for their county. Clients enrolled in the MHCP must receive mental health benefits through their MHASA. Each MHASA is responsible for authorizing and paying for all services necessary to treat covered diagnoses.

A new client's MHCP enrollment date was the same as their Medicaid eligibility date. If Medicaid eligibility was retroactive, so was the effective date of MHCP enrollment.

**Example:** An individual applied for Medicaid on September 4<sup>th</sup> and was determined eligible for Medicaid on November 10<sup>th</sup>. Medicaid eligibility was retroactive to September 4<sup>th</sup>. Enrollment in the MHCP also was retroactive to September 4<sup>th</sup>. The client's MHASA was responsible for the cost of any covered mental health benefits provided on or after September 4<sup>th</sup>.

### Transition to prospective enrollment

**Effective December 1, 1998**, enrollment in the MHCP will be on a prospective basis. The MHCP enrollment date will be the first day of the month following the month in which Medicaid eligibility is determined and entered into the eligibility system.

**Example:** An individual applies for Medicaid on September 4<sup>th</sup> and is determined eligible for Medicaid on November 10<sup>th</sup>. Medicaid eligibility is retroactive to September 4<sup>th</sup>. Enrollment in the MHCP is effective December 1<sup>st</sup>.

### Submission of claims

Currently, the MHASA is responsible for the cost of mental health services beginning on the Medicaid eligibility/MHCP enrollment date.

Beginning December 1, 1998, there will be a gap between the Medicaid eligibility date and the MHCP enrollment date for most new Medicaid clients. The client will be covered by the Medicaid fee-for-service program during this gap. Providers should submit claims for covered mental health benefits during this time directly to the Medicaid fiscal agent using the appropriate claim form. Any claims submitted to a MHASA for mental health services provided before the MHCP enrollment date will be denied by the MHASA.

### MHCP enrollment verification

Providers are reminded to always verify enrollment in the MHCP. Check the client's Medicaid Authorization Card (MAC), the Automated Medical Payments (AMP) system, Colorado Medicaid Eligibility Response System (CMERS), or Fax-Back.

### Coordination with client's MHASA

Providers who render mental health services to clients prior to MHCP enrollment should bill Medicaid on a fee-for-service basis. Contact the client's county MHASA to:

- Arrange to continue services; or

- Transfer the client to a new provider when MHCP enrollment begins.