

## **Table of Contents**

**State/Territory Name: Colorado**

**State Plan Amendment (SPA) #: 21-0029**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS Form 179
- 3) Approved SPA Page

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
601 E. 12th Street, Suite 355  
Kansas City, MO 64106



**Medicaid & CHIP Operations Group**

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September 7, 2021

Kim Bimestefer, Executive Director  
Department of Health Care Policy & Financing  
1570 Grant Street  
Denver, CO 80203

RE: Colorado State Plan Amendment (SPA) 21-0029

Dear Ms. Bimestefer:

We have reviewed the State Plan Amendment (SPA) submitted under transmittal number 21-0029. This amendment updates the State Governor's Designation Letter.

Please be informed that this SPA was approved on September 7, 2021, with an effective date of August 1, 2021. Enclosed are the CMS-179 and the amended plan page.

Should you have any questions about this amendment, please contact Curtis Volesky at (303) 844-7033.

Sincerely,



A large black rectangular redaction box covers the signature area of the letter.

Digitally signed by James G.  
Scott -S  
Date: 2021.09.07 16:05:38 -05'00'

James G. Scott, Director  
Division of Program Operations

Enclosures

cc: Dr. Tracy Johnson, [Tracy.Johnson@state.co.us](mailto:Tracy.Johnson@state.co.us)  
Laurel Karabatsos, [laurel.karabatsos@state.co.us](mailto:laurel.karabatsos@state.co.us)  
Bettina Schneider, [bettina.schneider@state.co.us](mailto:bettina.schneider@state.co.us)  
Russell Ziegler, [Russ.Zigler@state.co.us](mailto:Russ.Zigler@state.co.us)  
Jami Gazarro, [Jami.Gazarro@state.co.us](mailto:Jami.Gazarro@state.co.us)  
Amy Winterfeld, [amy.winterfeld@state.co.us](mailto:amy.winterfeld@state.co.us)

<p align="center"><b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL</b></p> <p><b>FOR: CENTERS FOR MEDICARE &amp; MEDICAID SERVICES</b></p>		1. TRANSMITTAL NUMBER:  <b>21-0029</b>	2. STATE:  <b>COLORADO</b>
		3. PROGRAM IDENTIFICATION: <b>TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)</b>	
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES		4. PROPOSED EFFECTIVE DATE:  <b>August 1, 2021</b>	
5. TYPE OF PLAN MATERIAL ( <i>Check One</i> ):  NEW STATE PLAN                      AMENDMENT TO BE CONSIDERED AS A NEW PLAN <b>X AMENDMENT</b>			
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT ( <i>Separate transmittal for each amendment</i> )			
6. FEDERAL STATUTE/REGULATION CITATION:  <b>42 CFR 430.12(b)</b>		7. FEDERAL BUDGET IMPACT:  a. FFY 2018-19: \$ <u>          0          </u> b. FFY 2019-20: \$ <u>          0          </u>	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:  <b>Section 7.4 page 90 Governor's Designation Letter</b>		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT ( <i>If Applicable</i> ):  <b>Section 7.4. page 90 Governor's Designation Letter (19-0034)</b>	
10. SUBJECT OF AMENDMENT:  <b>State Governor's Designation Letter</b>			
11. GOVERNOR'S REVIEW ( <i>Check One</i> ):  GOVERNOR'S OFFICE REPORTED NO COMMENT <b>X OTHER, AS SPECIFIED</b> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <b>Governor's letter dated July 14, 2021</b> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL			
12. SIGNATURE OF STATE AGENCY OFFICIAL: 		16. RETURN TO:  <b>Colorado Department of Health Care Policy and Financing 1570 Grant Street Denver, CO 80203-1818</b>  <b>Attn: Amy Winterfeld</b>	
13. TYPED NAME:  <b>Tracy Johnson</b>			
14. TITLE:  <b>Medicaid Director</b>			
15. DATE SUBMITTED: August 31, 2021			
<b>FOR REGIONAL OFFICE USE ONLY</b>			
17. DATE RECEIVED  <b>August 31, 2021</b>		18. DATE APPROVED  <b>September 7, 2021</b>	
<b>PLAN APPROVED – ONE COPY ATTACHED</b>			
19. EFFECTIVE DATE OF APPROVED MATERIAL  <b>August 1, 2021</b>		20. SIGNATURE OF OFFICIAL  Digitally signed by James G. Scott -S Date: 2021.09.07 16:07:31 -05'00'	
21. TYPED NAME  <b>Jame G. Scott</b>		22. TITLE  <b>Director, Division of Program Operations</b>	
23. REMARKS			

JARED POLIS  
GOVERNOR



136 STATE CAPITOL  
DENVER, COLORADO 80203

TEL 303-866-2471  
FAX 303-866-2003

July 14, 2021

James G Scott, Director  
Division of Program Operations  
Medicaid & CHIP Operations Group  
Centers for Medicare and Medicaid Services  
601 E. 12th St., Room 355  
Kansas City, MO 64106

Dear Mr. Scott

We are pleased to designate the following individuals in the Department of Health Care Policy & Financing as the individuals authorized to submit the State Plan and/or State Plan Amendments regarding Colorado's Medicaid program, effective August 1, 2021:

- Kim Bimestefer, Executive Director
- Bettina Schneider, Chief Financial Officer/Finance Office Director
- Tracy Johnson, Medicaid Director/Health Programs Office
- Rachel Ollar Entrican, Legal Division Director

Please direct any questions to Amy Winterfeld at [amy.winterfeld@state.co.us](mailto:amy.winterfeld@state.co.us).

Sincerely,

A handwritten signature in blue ink that reads "Jared Polis".

Jared Polis  
Governor  
State of Colorado