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## **Table of Contents**

**State/Territory Name: Colorado**

**State Plan Amendment (SPA) #: 17-0047**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) 179
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
Denver Regional Office  
1961 Stout Street, Room 08-148  
Denver, CO 80294



**REGION VIII - DENVER**

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February 1, 2018

Kim Bimestefer, Executive Director  
Department of Health Care Policy & Financing  
303 East 17<sup>th</sup> Avenue, 7<sup>th</sup> Floor  
Denver, CO 80203

RE: Colorado #17-0047

Dear Ms. Bimestefer:

We have reviewed the proposed State Plan Amendment (SPA) submitted under transmittal number (TN) 17-0047. This Amendment would phase out the Accountable Care Collaborative: Medicare-Medicaid Program (ACC:MMP) effective December 31, 2017. The members currently enrolled in the ACC:MMP will be enrolled into the Accountable Care Collaborative (ACC) effective January 1, 2018. ACC Members with full Medicare and Medicaid benefits will not experience any change to their benefits or enrollment under the ACC State Plan.

Please be informed that this State Plan Amendment was approved today with an effective date of December 31, 2017. We are enclosing the CMS-179 and the amended plan page(s).



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

Sincerely,



Richard C. Allen  
Associate Regional Administrator  
Division for Medicaid & Children's Health Operations

cc: Gretchen Hammer  
John Bartholomew  
David DeNovellis  
Russell Ziegler

<b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL</b>		1. TRANSMITTAL NUMBER: <b>17-0047</b>	2. STATE: <b>COLORADO</b>
		3. PROGRAM IDENTIFICATION: <b>TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)</b>	
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES		4. PROPOSED EFFECTIVE DATE: December 31, 2017	
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES			
5. TYPE OF PLAN MATERIAL (Check One): NEW STATE PLAN                      AMENDMENT TO BE CONSIDERED AS A NEW PLAN <b>X</b> AMENDMENT			
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate transmittal for each amendment)			
6. FEDERAL STATUTE/REGULATION CITATION: <b>Social Security Act Section 1932(a) / 42 CFR 438 and 440</b>		7. FEDERAL BUDGET IMPACT: a. FFY 2017-18: \$__(\$1,299,708)___ b. FFY 2018-19: \$__(\$1,528,011)___	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: <b>Attachment 3.1-F – Section 4: The Medicare-Medicaid Program (MMP) – Page 1 of 1</b>		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): <b>Attachment 3.1-F – Section 4: The Medicare-Medicaid Program (MMP) – Pages 1-14 of 14 (TN 17-0001)</b>	
10. SUBJECT OF AMENDMENT: <b>Phase out the Accountable Care Collaborative: Medicare-Medicaid Program (ACC:MMP) effective December 31, 2017. The Members currently enrolled in the ACC:MMP will be enrolled into the Accountable Care Collaborative (ACC) effective January 1, 2018. ACC Members with full Medicare and Medicaid benefits will not experience any change to their benefits or enrollment under the ACC State Plan.</b>			
11. GOVERNOR'S REVIEW (Check One): GOVERNOR'S OFFICE REPORTED NO COMMENT <b>X</b> OTHER, AS SPECIFIED COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <b>Governor's letter dated 15 January, 2015</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  Attn: David DeNovellis</b>	
13. TYPED NAME: <b>Gretchen Hammer</b>			
14. TITLE: <b>Medicaid Director</b>			
15. DATE SUBMITTED: <u>Initial: December 8, 2017</u> <u>Update #1: January 26, 2018</u>			
FOR REGIONAL OFFICE USE ONLY			
17. DATE RECEIVED <b>December 8, 2017</b>		18. DATE APPROVED <b>February 1, 2018</b>	
PLAN APPROVED – ONE COPY ATTACHED			
19. EFFECTIVE DATE OF APPROVED MATERIAL <b>December 31, 2017</b>		20. SIGNATURE OF REGIONAL OFFICIAL 	
21. TYPED NAME <b>Richard C. Allen</b>		22. TITLE <b>ARA, DMCHO</b>	
23. REMARKS			

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Citation	Condition or Requirement
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**SECTION 4: THE MEDICARE-MEDICAID PROGRAM (MMP)**

**This Section has been deleted effective December 31, 2017.**