



Over the past two years *2010 All Kids Covered*, a coalition of over 50 organizations, by working with policy makers and partners, has shepherded reforms through the legislature that have laid the ground work for making our public health insurance programs work better for kids and families. We're making it easier for eligible children to enroll, improving the quality of services they receive and expanding public programs to serve more kids.

**History:** The *2010 All Kids Covered* participants began meeting in the fall of 2006 to agree on legislative priorities and steps that lead to affordable and appropriate health coverage for all children in Colorado by the year 2010. In the 2007 legislative session, 2010 successfully passed:

- SB07-130 that defines a medical home, declares that a medical home is important for children, and directs the Colorado Department of Health Care Policy and Financing (HCPF) to implement standards and systems to increase the number of children in Medicaid and CHP+ programs with a medical home.
- SB07-211 that establishes presumptive eligibility for children applying for Medicaid or CHP+ (allows coverage of children while they are completing the application process), requires an annual report from HCPF on quality, access, and health outcomes, allows for continuous enrollment for CHP+ kids moving to Medicaid, and, in order to decrease barriers for enrollment in public programs, clarifies the identity documentation required for pregnant women and 18-19 year olds applying for CHP+.

In 2008, *2010 All Kids Covered* championed two bills successfully through the legislative process:

- SB08-160 expands health insurance coverage for uninsured children through CHP+ by increasing eligibility from 205% to 225% of FPL, which is approximately \$48,000 a year for a family of four. It also enhances the CHP+ mental health benefit.
- SB08-161 reduces barriers to enrollment in Medicaid and CHP+ by eliminating the requirements for families to submit paycheck stubs; instead allowing the State to verify a family's income using data that is already available. It allows for easy re-enrollment of children at the end of their eligibility period, thus avoiding interruption in coverage.

**Next Steps:** We can keep Colorado moving forward in its effort to get all kids covered. We can keep reducing the number of uninsured children by adopting a few critical, common-sense reforms.

1. **Reform the System to Work Better for Kids and Families** by modernizing the eligibility determination process and improving Medicaid and CHP+ to create a seamless program for children and families. We must successfully implement legislation passed over the last two years including presumptive eligibility for kids, expanding the Child Health Plan Plus (CHP+) to 250% of FPL and expanding mental health benefits in CHP+ to meet the needs of children.
2. **Reduce red tape so it's easier for kids to get and keep health coverage** including successfully implementing administrative verification of income, implementing a proactive renewal system to eliminate procedural denials and closures in Colorado and securing administrative verification of identity and place of birth to eliminate a common barrier to enrollment for families.
3. **Improve outreach to and enrollment of eligible kids** by funding community organizations to provide application assistance and securing a structured evaluation of outreach activities.
4. **Fill in the gaps in care and coverage for kids and pregnant women** by improving kids' access to needed dental care by enhancing the dental benefit under CHP+, adding a dental benefit for pregnant women under Medicaid and CHP+, monitoring the implementation of medical home for all kids including defining specific child health outcome measures for all providers and ensuring data is captured and easily accessible.
5. **Create coordinated systems of care for our children and a family** that enables families to benefit from a medical home, allows the State to track the health outcomes of children involved in public health insurance programs, and maximizes the value of the services and care provided through our public investments.

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