



## *March Provider Bulletin update from HCPF*

### **Eligibility Clarification**

Members in the Alternative Benefit Plan (ABP) eligibility category are eligible for abortion services.

Any claims denials providers may have received for ABP members will be reprocessed once the system fix is complete. Providers may reference the

Known Issues web page under the Women's Health drop-down section for additional information regarding the denial issues identified.

Contact Alex Weichselbaum at [Alex.Weichselbaum@state.co.us](mailto:Alex.Weichselbaum@state.co.us) for any policy questions regarding the Alternative Benefit Plan.

### **Family Planning Reminder**

The Family Planning Income Expansion (FAMPL) population receives a federal match. Under Senate Bill 21-025, an "eligible member" for FAMPL is defined as one who:

- Is not pregnant and whose income does not exceed the state's current effective income level for pregnant people under Child Health Plan Plus (CHP+).

Once a member becomes pregnant, they are no longer eligible for the FAMPL program.

The solution for abortion coverage for FAMPL members to ensure access to care:

- The member must report the pregnancy.
- The member will be evaluated for another eligibility benefit category, which covers elective abortions billed with Z33.2 using state-only funds.

The member will then be eligible for 12 months of coverage beginning at the end of the pregnancy.

Providers should assist members, when appropriate, in understanding the need to report pregnancy to ensure correct benefit enrollment.

Contact [hcpf\\_maternalchildhealth@state.co.us](mailto:hcpf_maternalchildhealth@state.co.us) for policy questions regarding FAMPL.

Managed Care Organization (MCO) Billing Clarification: DH must bill Fee for Service (FFS); elective abortions and associated medications are carved out and paid via FFS.

CHP+ providers must submit their claims to their CHP+ Managed Care Organization (MCO) for manual reconciliation reimbursement.