

WELCOME!

Welcome to Colorado Health Partnerships. The State of Colorado has chosen Colorado Health Partnerships (CHP) to arrange mental health services for people who live in the counties listed below. Colorado Health Partnerships is your Behavioral Health Organization (BHO). If you or your family has emotional or mental health problems, we can help you. If you get Medicaid, you are automatically enrolled in the program.

You can use this handbook to answer questions you have about your new plan. We want you to understand your benefits. We want you to feel confident that you are receiving the best possible mental health care. If you have any questions or comments about your services, you can call our

Access to Care Line

24 hours a day, 7 days a week

1-800-804-5008

Or

During business hours, call the
Office of Member and Family Affairs

1-800-804-5040

Or

visit us on the Web at:

www.yourchp.org

You will get your mental health care from Colorado Health Partnerships (CHP) if you live in one of the following counties.

Alamosa	Eagle	La Plata	Prowers
Archuleta	El Paso	Las Animas	Pueblo
Baca	Fremont	Mesa	Rio Blanco
Bent	Garfield	Mineral	Rio Grande
Chaffee	Grand	Moffat	Routt
Conejos	Gunnison	Montezuma	Saguache
Costilla	Hinsdale	Montrose	San Juan
Crowley	Huerfano	Otero	San Miguel
Custer	Jackson	Ouray	Summit
Dolores	Kiowa	Park	Teller
Delta	Lake	Pitkin	

Colorado Health Partnerships (CHP) and our providers want to make sure that you and your family receive the best mental health care possible. We help people with emotional problems as well as people with serious mental illness. We also provide help to families of children and adults with emotional problems and mental illness. CHP and our providers believe that everyone can recover from emotional disorders and mental illness. We know that individuals and families are resilient and have the ability to overcome problems. The principles of recovery and resiliency are at the core of everything that we do.

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GETTING AND CHOOSING SERVICES

If you or your family need mental health services, we make it easy to get services from the provider of your choice.

We are as close as any telephone.

- Call 1-800-804-5008. You can call 24 hours a day, 7 days a week. You can talk to a mental health counselor who will help you find a provider who meets your needs; OR
- Call or visit the community mental health center serving your county. The mental health centers are listed in [Appendix A](#). Also, you can call 1-800-804-5008 for the number of your mental health center; OR
- Go to our Web site at www.yourchp.org - Our Web site gives you all of the information in this handbook and much more. It is a good place to find information about mental health and resources in your community; OR
- Call one of our network providers. We included a list of providers with this handbook. You can also find a provider by zip code on our Web site www.yourchp.org by clicking on the “*Referral Connect*” link on the left hand of the page.

You may choose to get your services at one of our community mental health centers or with one of our independent providers. You have the right to choose. You may also ask to have a provider added to our network. If you need the care of a specialist, we will refer you to one.

Our provider list is easy to get. You may ask for this list at any time. It gives you the provider’s name, address, and languages other than English that the provider speaks. Call us at 1-800-804-5040 during business hours to ask for this list. Or go to our Web site at www.yourchp.org. Our providers do not have incentive plans.

There is no charge to you for any services covered by your Medicaid Mental Health Plan. There are NO co-pays. If you get a bill for any mental health services you get, contact us at:

**Colorado Health Partnerships
Office of Member and Family Affairs
7150 Campus Drive, suite 300
Colorado Springs, CO 80920
1-800-804-5040**

Hours of operation

Our business offices are open from 8:00 a.m. to 5:00 p.m. Monday through Friday. You can talk to someone on our Access to Care Line 24 hours a day, 7 days a week by calling 1-800-804-5008.

Location of Services

We have sent you a list of mental health providers in this handbook. You can also find CHP mental health centers in [Appendix A](#) of this handbook. The business offices at the mental health centers are open from 8:30 a.m. to 5:00 p.m. Monday – Friday. Call them to find out when they have clinical hours. Some offer appointments in the evening and on weekends. The phone numbers are listed in [Appendix A](#).

When will I be seen?

As a Medicaid member, you have the right to get mental health services in a timely manner.

- When you call to make a first or routine care appointment, we will offer you an appointment within 7 days.
- If you call us about an urgent mental health problem, we will see you within 24 hours.
- If you are calling with a mental health emergency, we will see you within one hour if you live in a city. If you live in a rural area, we will see you within two hours.

When you call to make a first appointment, it is important to tell us if you have a special need. Some of our members may need special help to get the most from their mental health services. If you have a disability and need an accommodation, please let us know when you call for an appointment. Also let us know if you need an interpreter for a non-English language or someone who knows sign language.

What can I expect at my first appointment?

When you begin mental health treatment, we will ask questions to help us understand what you need. We will ask about your background and family history. We will talk with you about your strengths, your problems, and any mental health symptoms you have. Because your mental and physical health affect one another, it is important that you tell us about any medical care you are getting and any medications you are taking. We will use all that you tell us to decide what kinds of services or medication will help you get better. You are a partner in these decisions.

You will get a Care Coordinator. Your Care Coordinator will:

- Be in charge of your records and your treatment.
- Help you create your service (treatment) plan.
- Ask you to sign releases of information for other providers and your supporters. This is so that we can coordinate your mental health and other health services.
- Help you identify any special needs you may have.
- Work with other community agencies to help make sure that your other needs (such as medical and housing) are met.
- Provide follow-up and help in a crisis.

What if I miss an appointment?

Modern life is busy. We understand that people sometimes can't make it to their scheduled appointment. If you have to miss an appointment, we ask that you call at least 24 hours before your scheduled appointment. This way, your provider can make another appointment for you. It also gives other people who need an appointment the chance to get one. If you keep missing appointments, we may think you do not want to come. We will call you to ask why. If you miss more than three (3) appointments without calling or returning our calls, we may ask you to see a different provider.

Who will be my care coordinator?

A Care Coordinator can be your therapist or case manager. He or she is your primary mental health provider. We want you to get the best possible care. Only the most skilled providers are included in our network. You have the right to select a provider from our network, but we will try to match the provider's skills with your needs. You may ask for an out of network provider, or ask to have a provider added to the network. If you choose to see a provider who is not in our network, and don't get approval to see the provider, you may have to pay for your care.

What is a service plan?

This is a plan that you help develop that will guide your treatment. It takes into account your goals in life as well as in treatment. It may include wellness activities, housing, jobs, education, and relationships you want. As a partner in your care, you need to be involved in writing your service plan. If you want, you can include other people who can advocate for and support you when making your plan.

What mental health services can I get?

Your Medicaid mental health plan covered benefits

<p>Case Management Services</p>	<p>These are services you get in the community. They help you stay in the community. They include service planning, outreach, referral, and coordination of services. Routine case management is part of the services provided by your mental health outpatient care coordinator.</p>
<p>Emergency Care</p>	<p>Emergency care is the treatment of a mental health condition that is life threatening. It is life threatening to the person who is having the crisis. Or, another person may think it is life threatening to you.</p>
<p>Inpatient Hospital</p>	<p>Inpatient services are those mental health services that need to be given in a hospital. Your plan benefit allows up to 45 inpatient hospital days per year. However, youth under age 21 may qualify for more hospital days if medically necessary. This is through the Early Periodic Screening, Diagnosis and Treatment Program (EPSDT).</p>
<p>Medication Management</p>	<p>This is when a doctor, or other licensed prescriber, prescribes and monitors your psychiatric medications.</p>
<p>Outpatient Treatment</p>	<p>These are services you get in an office or other place in the community. Services include individual, brief, family, and group therapy. Your Medicaid plan benefit allows up to 35 individual or brief sessions per year. Through the EPSDT, youth under age 21 may qualify for more outpatient treatment visits if medically necessary.</p>
<p>Psychosocial Rehabilitation</p>	<p>Psychosocial rehabilitation programs help people with serious mental illness. They teach people the skills they need to live in the community.</p>
<p>Residential Treatment</p>	<p>A residential treatment program is a 24-hour living situation. It provides care when a person does not need to be in the hospital, but still needs help and structure 24-hours a day. Residential treatment can be for adults or children.</p>
<p>School Based Services</p>	<p>School-based services are for children and youth with special mental health care needs. They are provided in the school setting. Services may include smaller classrooms, specially trained staff, counseling, and other services to help the child succeed.</p>

Other required services

The following services may be offered in your community. To learn more, call your mental health center or CHP. The mental health center numbers are listed in Appendix A.

- Vocational and employment services;
- Home-based services for children and adolescents;
- Intensive case management;
- Respite services;
- Drop-in centers;
- Clubhouses;
- Peer services and support services;
- Peer mentoring for children and adolescents;
- Assertive community treatment programs;
- Warm (telephone support) lines;
- Special services for adoption issues;
- Early childhood intervention services;
- Family support, education and training services;
- Multi-systemic therapy;
- Prevention services and early intervention activities;
- Recovery services;
- Supported employment;

How will I know if there are changes in my mental health coverage or benefits?

CHP gives you this information in several ways:

- We will give you written notice of any major change at least 30 days before the date of that change.
- We will notify you of your right to ask for information about Medicaid mental health benefits and services at least once a year.
- If there are changes with the person or the location where you get your mental health services, we will contact you by mail. We will try to let you know at least 15 days ahead.
- We will have information on changes at our community mental health center centers.
- We will have information on changes on our Web site www.yourchp.org

You may also call the CHP Office of Member and Family Affairs at 1-800-804-5040 to ask for a copy of this information at any time.

How do you make decisions about my care?

Medical necessity

We consider medical necessity when working with you to come up with a service plan. The state defines a service as medically necessary if it:

- Is reasonably needed to treat the problem,
- Is reasonably needed to improve, make stable or keep your conditions from getting worse,
- Is given in the most appropriate, least restrictive and safe setting, and
- Cannot be stopped without it having a bad effect on your health or the quality of your care.

It is important that you get medically necessary services when you need them.

Clinical guidelines

Our licensed clinicians also use clinical guidelines to help us make decisions about care that is right for you. Our clinical guidelines are based on the definition of medical necessity above. Providers, members, and family members help us develop these guidelines. We do not deny services based on moral or religious objections.

If you would like a copy of our clinical guidelines, please visit our Web site at www.yourchp.org or call us at 1-800-804-5040.

Least restrictive setting

State and federal Medicaid rules require that we provide services in the least restrictive setting that will meet your needs. This means that care should be provided in the community whenever possible.

What if I have a disability, special need, or need help speaking or understanding English?

When you call to make a first appointment, please let us know of any special needs you may have. For example, you may have a disability and need an accommodation. We will use AT&T Language Line telephone interpreters if we do not speak your language. Or we will use Relay Colorado or a TTY line if you are Deaf or hard of hearing.

If you do not speak English, we will try to find a provider who speaks your native language. If you are Deaf, we will try to find a provider who signs. If none are available, we will provide an interpreter. We never ask family or friends to interpret--unless that is your choice.

Our written materials are available in Spanish. If you speak a language other than English or Spanish, we will arrange to have an interpreter read our materials to you. We also have materials on audiotape or in large print.

There is no fee for any of these services. Please call us to ask for any of these services or materials at 1-800-804-5040.

New treatment procedures

Sometimes you find out about a new treatment or medication and would to learn more about how it might work for you. We keep up with new treatment and new medications. You have the right to ask that we review any new treatment or medications that you think might help you.

EMERGENCIES

What if I have an emergency?

An “Emergency Medical Condition” is a serious medical or mental health condition. An emergency condition has severe symptoms. The symptoms are so severe that a person who knows a little about health would think that not getting help could:

- Put a person’s health at serious risk.
- Cause harm to a person’s body functions.
- Cause harm to a body part or organ.

If you have a mental health emergency, you should do one of the following:

- Call your mental health center (listed in [Appendix A](#)).
- Call your individual provider, if you have one.
- Call the CHP toll-free number at 1-800-804-5008. This number is available 24 hours a day, 7 days a week.
- Go to the nearest emergency room (listed in [Appendix B](#)).
- Call 911.

You do not need prior approval to get emergency services. You can get emergency services from any hospital or qualified provider emergency rooms in your area. Hospitals in your area are listed in [Appendix B](#).

What happens when the emergency is over?

You may need services after the emergency is over to help you stay stable or improve your mental health condition. This is called Post-Stabilization Care. Post-stabilization services are inpatient and outpatient services provided just after an emergency. Your emergency provider must get approval from your BHO for these services after the emergency is over.

What if I am away from home and I have an emergency?

“Out of Area Care” is when you get services outside the counties served by CHP. If you need emergency “*out of area care*”, go to the nearest emergency room. Tell the staff that you are signed up with CHP for mental health coverage. The emergency room will contact us. When your emergency care is finished, we will work with the emergency room or hospital to move you back to your mental health provider.

Only emergency room and emergency inpatient care is covered when you are traveling or visiting outside of CHP’s area. If you need non-emergency mental health help when you are out of area, call your care coordinator or the toll free BHO number on the back page of this handbook. A licensed clinician will help you decide what to do.

OTHER THINGS YOU SHOULD KNOW ABOUT YOUR SERVICES

Are there limits on the services I can get?

Yes, Medicaid limits the individual therapy sessions and inpatient hospital days. You may not use more than 35 individual therapy sessions in one year. You may not use more than 45 days per year for inpatient hospital stays. There are some exceptions to these limits. You can talk to your Care Coordinator or CHP Office of Member and Family Affairs if you have questions about this, at 1-800-804-5040.

There may be exceptions to these limits for youth, ages 20 and under, who have been screened under the Early Periodic Screening, Diagnosis and Treatment (EPSDT) program. Please see the EPSDT section in the handbook to learn more.

Even though there are limits to individual therapy and inpatient days, there are many services that are not limited. These include appointments for medications, group therapy, wellness classes, peer services, clubhouses, support groups and many more services.

How do I get my medications?

Colorado Prescription Drug Program

The State of Colorado has a Preferred Drug List (PDL) for many Medicaid members who need prescription medication. The PDL is a list of drugs that the state does not require prescribers to get prior approval to prescribe. Drugs that are not on this list need approval from the state. This means that some drug choices are limited.

Medicaid members get their psychiatric (mental health) medications in one of two ways:

- If you have Medicaid only, you get psychiatric medications through the state fee-for-service Medicaid prescription program. Currently, only certain psychiatric medications for Attention Deficit Hyperactive Disorder (ADHD) are included on the Colorado Preferred Drug List (PDL). The state has a process that will allow people with serious mental illness to get the prescriptions they need, even if those medications are not on the PDL.
- If you have Medicare and Medicaid (dual eligible), you must enroll in a Medicare Part D plan. Since you are dual eligible, you can get help to pay for your medications. If your Part D plan will not pay for certain classes of drugs, then Medicaid will pay. One of these excluded classes is a mental health drug class, benzodiazepines.

You can get more information about the PDL and any future changes by:

- Going to the state Web site,
www.colorado.gov/cs/Satellite/HCPF/HCPF/1197969485609,
- Calling the state Pharmacy Liaison at 303-866-3583, 1-800-866-3513, or
- Calling the CHP's Office of Member and Family Affairs at 1-800-804-5040.

Dual eligible persons who need help signing up with a Medicare Part D plan can contact Medicare at 1-800-633-4227 or the State Health Insurance Assistance Program at 1-888-696-7213.

How much does it cost to get mental health services?

As a Medicaid Member, you are entitled to get mental health services at no cost to you. There are **no co-pays** for your mental health services. If you get a bill for any mental health services, contact CHP at 1-800-804-5040.

What if I want a second opinion about my treatment or diagnosis?

You may have questions or concerns about your treatment or services, and you want a review of this. You have the right to get a second opinion about your mental health care or diagnosis. To get a second opinion, call CHP's toll free number at 1-800-804-5008.

What If I Have Other Insurance in addition to Medicaid?

By law, Medicaid is always the last payer. If you have insurance in addition to Medicaid (such as Medicare or private insurance) you **MUST** follow the rules of that insurance company when seeking services. For example, you must use the providers in your insurance company's network. You also must follow their rules for preauthorization. If your other insurance does not cover a mental health service that is covered by Medicaid, you can ask CHP to provide that service. If you can't find a Medicare Provider, you can ask CHP to help you at 1-800-804-5008.

If you do not follow the rules of your other insurance company and that company denies payment, then Medicaid will reduce what it pays. If that happens, you **WILL** have to pay the difference. Call your primary insurance company for a list of their providers and to find out their rules for preauthorization.

How can I get transportation to appointments?

If you can't walk or you are so sick that you can't get to your appointments by using regular means of transportation (walk, drive a car or take a bus), talk with your care provider or a case manager. Ask them about how you may be able to get a ride to your appointment. They can help you find a way. The mental health center numbers are in [Appendix A](#) of this handbook.

YOUR RIGHTS AS A MEDICAID MEMBER

Your Rights and Responsibilities

As a Medicaid member, you have certain rights and responsibilities.

Rights: You have the right to:

- Be treated with respect, dignity and regard for your privacy;
- Be free from discrimination on the basis of race, religion, gender, age, disability, health status, or sexual orientation;
- Get information on treatment options. You should get information in a way that is easy to understand;
- Take part in decisions made about your health care. This includes the right to refuse treatment, except as required by law;
- Be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience, or retaliation;
- Ask for and get a copy of your medical records. You can ask that they be changed or corrected;
- Have an independent advocate;
- Ask that we include a specific provider in our network;
- Get a second opinion;
- Receive culturally competent services;
- Get interpreter services if you have disabilities or if you do not speak English;
- Be told if your provider stops seeing members, or has changes in services;
- Tell others your opinion about our services. You can tell regulatory agencies, the government, or the media without it affecting how we provide covered services;
- Get medically necessary mental health care services according to federal law;
- Be free to use all of your rights without it affecting how you are treated; and
- Be free from sexual intimacy with a provider. If this happens, report it to the Colorado Department of Regulatory Agencies (DORA) at 303-894-7788. Or write to DORA at 1560 Broadway, Suite 1350, Denver 80202.

Responsibilities: You have the responsibility to:

- Learn about your mental health benefits and how to use them;
- Be a partner in your care. This means:
 - following the plan you and your care coordinator have agreed on;
 - participating in your treatment and working toward the goals in your service plan;
 - taking medications as agreed upon between you and your prescriber.
- Tell your therapist or doctor if you do not understand your service plan. You should tell him or her if you do not agree with your service plan, or want to change it.

- Give your therapist or doctor the information he or she needs to give you good care. This includes signing releases of information so that your providers can coordinate your care.
- Come to your appointments on time. You should call the office if you will be late, or if you can't keep your appointment.
- Cooperate with CHP when you choose a provider or are seen by your provider. If you have questions about choosing a provider, or how to make an appointment, call CHP at 1-800-804-5008
- Let us know when you change your address or phone number.
- Treat others with the same courtesy and respect that you expect to be treated.

Confidentiality

Information about your mental health services is considered “*protected health information*” (PHI). We will only use your PHI to make sure that you get good mental health care and for activities of payment. For example, we can only use PHI:

- For treatment. We may share your health information with those who are involved in providing your healthcare.
- For coordinating your care among providers, or between a provider and an insurance company.
- To communicate with mental health professionals who have given you services so we can pay claims.
- To look at how our members use services. This helps us to provide better care.
- When required by law. We will share PHI when federal, state or local law requires it. We will share PHI if we get a court order or if your records are subpoenaed.
- To collect information about disease or injury to report it to a public health authority.
- In order to avoid a serious threat to health or safety. We may share PHI with law enforcement or other persons if we believe this is necessary to prevent or reduce the threat of harm.

What if I have problems with services or my rights are not respected?

At Colorado Health Partnerships (CHP), we care about you and the quality of services that you get. We work hard to give you the best care. We are always trying to improve how we serve you. If you have problems with your services or if you disagree with a clinical decision, we need to hear from you.

Medicaid has a process for you to file a grievance (complaint) about your services. Medicaid also has a process for you to appeal a denial or reduction in service. Our Office of Member and Family Affairs staff can help you file a complaint or appeal. You can also contact our Service Center to start an appeal process.

Terms

Action: An Action is when the CHP:

1. Denies or limits all or part of a requested treatment.
2. Reduces, changes or ends treatment that was already approved.
3. Denies payment in whole or in part for a service.
4. Does not provide services in a timely manner.
5. Fails to act within approved timeframes for grievances and appeals.
6. Denies a request to obtain treatment outside the network in rural areas.

Appeal: An Appeal is when a member disagrees with an Action by CHP and asks for a review of the Action.

Designated Client Representative (DCR): This is a person whom you name to file a grievance or appeal on your behalf. This person can be one of your service providers, including your doctor, a friend, or a family member.

Grievance: A Grievance is when a member complains about his or her mental health services, a provider or staff. Members can file a Grievance about any dissatisfaction with a service or staff person.

Notice of Action: This is a letter which explains the Action CHP is taking and your Appeal rights.

State Fair Hearing Process: This is a hearing before a state administrative law judge and is available for Appeals, only.

How do I file a grievance (Complaint)?

If you are comfortable doing so, it is a good idea to talk directly with your provider or a supervisor so that problems can be fixed quickly. If you don't want to do that, or if you have tried that and are still not satisfied, there are many ways you can file a grievance:

- Contact the Client or Family Advocate at your mental health center: They are listed in [Appendix A](#) of this handbook.
- Contact the Office of Member and Family Affairs at 1-800-804-5040.
- Contact the Ombudsman for Medicaid Managed Care at 303-830-3560, 1-877-435-7123, TTY 1-888-876-8864. They will help you file a grievance with the BHO.

You may ask a family member, friend or provider to file a grievance for you. However, you must make that person your “Designated Client Representative”. This is a person whom you name to file a grievance or appeal on your behalf. This person can be one of your service providers. This means that you sign a form naming that person as your DCR and also sign a Release of Information for CHP to share information with that person.

You can file your grievance in person, on the phone, or by letter or grievance form. You must file your grievance within 20 calendar days from when the event happened. You need to tell us your name and the best way to contact you.

After we receive your grievance, we will send you a letter within two (2) working days telling you we received the grievance and asking you to tell us if we understood you correctly.

We will look into your grievance and may call you for more information. If your grievance involves a clinical issue, we will talk to a clinical person who was not previously involved. This process is confidential. You or your family member will not lose your Medicaid benefits for filing a grievance.

Within 15 working days after we get your grievance, we will mail you a letter with our decision. If you, or we, need more time to get information about your grievance that is in your best interest, we will extend the time for up to fourteen (14) more calendar days. We will send you a letter telling you why and how it is in your best interest to get the information.

The decision letter will explain that if you do not agree with our decision, you can appeal to the Department of Health Care Policy and Financing (HCPF). To do so, contact:

Medicaid Customer Service
303-866-3513 (Denver Metro area)
1-800-221-3943 (outside the Metro area)
TTY 303-866-7471

The decision of HCPF will be final.

How do I file an appeal (appeal an action)?

If you disagree with the decision in the notice of action, defined at the beginning of this section on grievances and appeals, you have the right to file an appeal. Staff of the BHO Office of Member and Family Affairs can help you in any way you need to file an appeal with the BHO or with the Office of Administrative Courts for a State Fair Hearing.

You must make your appeal within 20 calendar days from when we sent the Notice of Action. You can make your appeal in person or by phone, but must follow up in writing. You may ask a family member or friend or provider to appeal for you. However, you must make that person your Designated Client

Representative (DCR). This means that you sign a form naming that person as your DCR and also sign a Release of Information for CHP to share information with that person. An expedited (quick) appeal process is available if the standard time for resolving an appeal would cause harm.

What if my treatment was already approved, but the BHO now wants to stop my treatment?

This is a special situation. When CHP sends you a Notice that it plans to stop or reduce a treatment that was already approved, you can appeal and ask that the service continue. For this to happen, there are several things you must do:

- You or your provider must file the appeal timely. Timely means that you must make your appeal within 10 calendar days from when CHP sent the Notice or 10 calendar days on or before the treatment was scheduled to stop or change—whichever is later.
- The services (treatment) must have been ordered by an authorized provider
- The original period covered by the original authorization has not expired, and
- You must ask that the benefits (services) continue.

If the service is continued, it is for a limited time. The services will continue only until one of the following happens:

- You withdraw your appeal;
- Ten days pass after CHP mails the Resolution (decision) on your appeal; Unless, within the 10-day period, you have asked for a State fair hearing and services to continue until the hearing decision is reached;
- The decision of the State fair hearing is to stop your services;
- The time period or service limits of the original authorization has been met.

Who can I file an appeal with?

There are many ways you can file an appeal.

- Contact the CHP Care Management Department at 1-800-804-5008 or write them at:
Colorado Health Partnerships
Care Management Department
7150 Campus Drive, Suite 300
Colorado Springs, CO 80920
- Contact the Client Advocate at your Community Mental Health Center
- Contact the Ombudsman for Medicaid Managed Care at 303-830-3560, 1-877-435-7123, TTY 1-888-876-8864. They will help you file your appeal.

- Contact the state Office of Administrative Courts directly. You do not have to file with CHP first, but you must let CHP know you have contacted the Office of Administrative Courts. Their contact information is:

Office of Administrative Courts
633 17th Street Suite 1300
Denver, CO 80202
303-866-2000
Fax 303-866-5909

If you appeal to CHP, we will send you a letter to let you know we got your appeal. We will do this within two working days. The letter will also tell you more about the appeal process including the fact that you can provide evidence of fact or law in person.

We will make a decision within ten calendar days. If we need more time, we will send you a letter telling you why and how it is in your best interest. The letter will also tell you when to expect a decision. When we make the decision, we will send you a letter. We will also try to call you on the telephone. If you need more time (for example, to collect more information about your appeal), you can also ask for more time.

If you think a delay could be harmful to your health, you can ask for an expedited (quicker) appeal. In that case, we will send you a decision letter within three working days of the date we got your expedited appeal. We will also try to call you on the phone.

If you need more time to get information to help your appeal, or if we need more time, we will extend the time of the decision letter for up to fourteen (14) more calendar days. We will send you a letter telling why more time is needed and why it is in your best interest for us to get the information. It will tell you when to expect the decision.

What if I disagree with CHP's decision about my appeal?

If you are not satisfied with our decision on your appeal, you may ask for a State fair hearing. You do this by filing an appeal with the Office of Administrative Courts. You must do this within 20 calendar days from the date of the Notice of Action. You must appeal within ten (10) calendar days about a previously authorized service. We encourage you to file with the Office of Administrative Courts at the same time that you file your appeal with CHP. That way, you will not lose your right to a State fair hearing. If you prefer, you can file an appeal with the Office of Administrative Courts without appealing to CHP. You must do this within 20 calendar days of the date of the Notice of Action. You can provide evidence of fact or law and have someone represent you at the hearing.

If you ask for an appeal or a State fair hearing, the service you requested will continue if:

- You or your provider files the appeal within the required timeframes;
- You ask for your benefits to continue;
- The services you are asking to continue were authorized by the BHO; and
- The current service authorization has not expired.

During the time you are appealing, your requested services will continue for a limited time. The services will continue only until one of the following things happens:

- o You withdraw your appeal;
- o 10 days pass after we mail the notice of action, and you have not asked for a state fair hearing;
- o You have asked for a state fair hearing, and their decision is to stop your services; or
- o The original authorization for your service has expired.

Important note: if your appeal is denied at the State fair hearing level, you may have to pay for the cost of services you received while your appeal was being reviewed.

Ombudsman for Medicaid managed care

The Ombudsman is an advocacy organization independent of CHP. They can help you file a grievance or appeal, if you want. The Ombudsman for Medicaid Managed Care can also help you with other mental health quality issues. There is no cost to you to use the Ombudsman. Any Medicaid member who lives in Colorado can use them. Their contact information is:

Ombudsman for Medicaid Managed Care
1-877-435-7123 outside of Denver
303-830-3560 in the Denver Metro area
TTY 1-888-876-8864 for hearing impaired

Advance Directives

You have the right to provide advance written instructions to health care workers about the type of health care you want or do not want if you become so ill or injured that you cannot speak for yourself. These decisions are called *Advance Directives*. Advance Directives are legal papers you prepare while you are healthy. In Colorado, they include:

- A Medical Durable Power of Attorney. This names a person you trust to make decisions for you if you cannot speak for yourself.
- A Living Will. This tells your doctor what type of life sustaining procedures you want and do not want.
- A Cardiopulmonary Resuscitation (CPR) Directive. This is also known as a “Do Not Resuscitate” Order. It tells medical persons not to revive you if your heart and/or lungs stop working.

For more information about Advance Directives, talk with your **Primary Care Physician (PCP)**. Your PCP will have an Advance Directives form that you can fill out. Your BHO Office of Member and Family Affairs can also help you find out how to make an Advance Directive.

Your mental health provider will ask you if you have an Advance Directive and if you want a copy placed in your mental health record. But you do **not** need to have an Advance Directive to get mental health care. If you would like a copy of CHP’s policy on Advance Directives, please contact us at 1-800-804-5040.

If you think your providers are not following your Advance Directive, you can file a complaint with the Colorado Department of Public Health and Environment. They can be reached at:

Colorado Department of Public Health and Environment
4300 Cherry Creek Drive South
Denver, Colorado 80246-1530
303-692-2000

Should you make a mental health crisis plan?

Colorado does not have a law about mental health advance directives. However, it is a good idea to have a crisis plan. A crisis plan will help you have more control over decisions if you do have a mental health crisis. Talk with your mental health provider or Care Coordinator about writing a crisis plan. You can also write a Wellness Recovery Action Plan (WRAP, developed by Mary Ellen Copeland, M.A.) or other type of wellness plan. A wellness plan is a plan you can use to stay healthy. It also tells your family and providers what you want to happen in an emergency. Your provider can put a copy of your crisis plan or WRAP in your record.

OTHER THINGS YOU SHOULD KNOW TO HELP YOU USE YOUR MEDICAID MENTAL HEALTH BENEFITS

Office of Member and Family Affairs

CHP has an Office of Member and Family Affairs (OMFA) to help you with any problems or questions about your mental health services. The Office of Member and Family Affairs:

- Helps members with grievances (complaints) and appeals;
- Advocates for members and their families;
- Helps members and families understand the mental health services available and how to get those services;
- Provides information about other resources in the community, such as self-help groups and advocacy organizations;
- Helps members and their families understand their rights and responsibilities when getting mental health care; works to protect members' rights;
- Helps members and their families to have a voice in the mental health system by getting involved in committees and advisory boards;
- Provides education about mental health and other recovery issues.

Call your mental health center or CHP if you would like to talk to someone from the Office of Member and Family Affairs at 1-800-804-5040. They can also tell you about member advisory boards in your area.

Quality Improvement Program

CHP has a Quality Improvement (QI) Program. This program helps us measure and improve the quality of our services. It gives us information about things like:

- How our services help people get better
- How we are doing to help people meet their recovery goals
- How quickly we respond to complaints and appeals
- How satisfied members are with the complaint process
- How long people have to wait for appointments
- How long people stay in the hospital
- How we are doing at keeping people from going back to the hospital too soon after discharge

To learn more about our Quality Improvement program or to get a free copy of our Quality Plan, call us at 1-800-804-5040.

Member Surveys

We want to know your opinion about the services you get. To get your opinion, we do surveys over the phone or by mail. Our surveys ask you questions about your mental health treatment. They will also ask what you think we can do better. All information we get from the survey is confidential. We do not give out any names. If you have questions about the survey, please call CHP and ask to speak to someone in the Quality Department.

Member Advisory Committees

CHP and the mental health centers have advisory committees that give us feedback about how we are doing. If you would like to learn more about any member advisory committees in your area, call the Office of Member and Family Affairs, at 1-800-804-5040, to find out how you can get involved.

Other Medicaid Benefits

Your non-Mental health benefits under Medicaid

We have listed some of the Medicaid benefits you may be eligible for in the following section. This handbook does not list all of your Medicaid benefits. For more information about your Medicaid health care benefits please call:

Medicaid Customer Service

303-866-3513 (Denver Metro Area)

1-800-221-3943 (outside of Denver)

Or go to the state Medicaid Web site:

<http://www.colorado.gov/cs/Satellite/HCPF/HCPF/1197364086675>

How can I get care for physical health problems?

If you need medical care, see your primary care or other doctor. If you do not have a Primary Care Provider (PCP) call *HealthColorado*. *HealthColorado* is a state program that helps people on Medicaid enroll in (join) health plans to get Medicaid services.

HealthColorado

Metro Denver 303-839-2120

All Other areas 1-888-367-6557

TTY: 1-888-876-8864

<http://www.healthcolorado.net/>

CHP can also help you find a doctor. Call us at 1-800-804-5008.

You may have to pay a co-pay for medical care. A co-pay is your share of the cost of your health care. Call Medicaid Customer Service at 303-866-3513 or 1-800-221-3943 to learn more about co-pays. Or go to the state Web site at:

<http://www.colorado.gov/cs/Satellite/HCPF/HCPF/1197364127331>

Coordinating your care

Your mental and physical health affect one another. It is important that you tell your mental health and your medical providers about the care you are getting from all providers. It is especially important that all your providers know about any medications you are taking. If you have questions, or need help coordinating your care, call us at 1-800-804-5008.

Early Periodic Screening, Diagnosis & Treatment (EPSDT)

Early Periodic Screening, Diagnosis and Treatment (EPSDT) is a special health care program for children and youth ages 20 and under who have Medicaid. Children and youth can get health checkups, nutrition checkups, dental checkups, baby shots and other tests under EPSDT. There is no fee for EPSDT check-ups. Regular check-ups are important. They will help keep your child healthy and find any health problems early. If the EPSDT screening finds that your child has health problems, EPSDT will also provide for the medical treatment.

If your child is Medicaid eligible, and you would like to get an EPSDT check-up, call your Primary Care Physician (PCP). Your PCP will do the health check or refer you to a health clinic. To learn more about Colorado's EPSDT program, visit their Web site at:

<http://www.colorado.gov/cs/Satellite/HCPF/HCPF/1218622604254>

Under certain conditions EPSDT will also cover mental health services for children between 18 and 21 who have a disability. These youth must be eligible for Medicaid, but their paperwork has not transferred from the child system to the adult system.

Home and Community-Based Services (HCBS) waivers

The State of Colorado has many waiver programs. Waiver programs are special programs to help people with special health care needs to remain in their home and community. To qualify for a waiver, people must meet specific financial, medical and program criteria.

People who receive services through a waiver are eligible for all basic services that Medicaid covers except services in a nursing facility and long-term hospital care. Some waivers may be applied for through a state agency. Others must be applied for through a Single Entry of Point (SEP) agency. Appendix C of this handbook lists the Single Entry of Point organizations for your county.

Each waiver has an enrollment limit and may have a waiting list. People may apply for more than one waiver, but may only receive services through one waiver at a time. Anyone whose application for a waiver program is denied has a right to appeal to the state.

There are several different types of waiver programs. In most cases you can get general information about a waiver by calling:

Department of Health Care Policy and Financing (HCPF).

303-866-4770,
1-800-221-3943, or
TTY 1-800-659-2656

<http://www.colorado.gov/cs/Satellite/HCPF/HCPF/1223894303509>

Waivers for children

Children's HCBS Waiver: Provides Medicaid services in the home or community for disabled children through 17 years old. This is for children who are not eligible for regular Medicaid because their parents have income and/or resources above the required limit. Children must be at-risk of being placed in a nursing facility or hospital. Methods for applying for this waiver vary from area to area. To find out how to apply, call your county Single Entry Point, listed in Appendix C.

Children with Autism Waiver: Provides Medicaid services in the home or community for children through age 5 with a medical diagnosis of Autism. A child must have intensive behavioral needs making him/her at risk of being placed in an institution. To apply for this waiver, contact the Community Centered Board in your area (Appendix D).

Children's Extensive Support Waiver: Provides Medicaid services in the home or community for children through 17 years old with developmental disabilities or delays. The child must be at risk of being placed in an institution. Children age 0-4 must have a developmental delay; children 5-17 must have a developmental disability. Children must meet some additional criteria as well. For more information, call the Division of Developmental Disabilities, Colorado Department of Human Services (DHS) at 303-866-7467. To apply for the waiver, call the Community Centered Board in your area (Appendix D).

Children's Habilitation Residential Program Waiver: Provides residential services for children and youth in foster care who have a developmental disability and extraordinary needs. Children must be at risk for being placed in an institution. This program helps children and youth from birth to 21 years old to acquire, retain, and/or improve self-help, socialization, and adaptive skills necessary to live in the community. To be eligible, children and youth must be placed through a County Department of Human Services. Also, they must have a developmental disability and extraordinary service needs for which services cannot be provided at the county negotiated rate. For more information, call the Division of Developmental Disabilities, Colorado Department of Human Services at 303-866-4393. To apply call the Department of Human Services in your county.

Pediatric Hospice Waiver (HOPEFUL Program): Provides access to Medicaid services for children with a life-limiting illness. The program is for children from birth to age nineteen with a medical diagnosis of a life-limiting illness who would otherwise be placed in a hospital or institution. Additional eligibility criteria apply. To apply, call the Single Entry Point agency for your county (see Appendix C).

Waivers for adults

Waiver for Persons with Brain Injury: Provides a home or community-based alternative to hospital or specialized nursing facility for persons 16-64 years of age with brain injury. Qualified brain injuries are defined in the Colorado Code of Regulations. To apply for this waiver, call the Single Entry Point in your community (see [Appendix C](#)).

Waiver for Persons Living with AIDS: Provides a home or community-based alternative to hospital or nursing facility care for people of all ages living with HIV/AIDS. To apply for this waiver, call the Community Centered Board in your area (see [Appendix C](#)).

Waiver for Persons with Mental Illness: Provides a home or community-based alternative to nursing facility care for people 18 years of age and older with major mental illness. To apply, call the Single Entry Point in your community (see [Appendix C](#)).

Waiver for Persons who are Elderly, Blind, and Disabled: Provides a home or community-based alternative to nursing facility care for elderly, blind, and disabled persons 18 years of age and older. To apply, call the Single Entry Point in your community (see [Appendix C](#)).

Waiver for Supported Living Services: Provides supported living in the home or community to persons age 18 and older with developmental disabilities. For more information, call the Division of Developmental Disabilities, Colorado Department of Human Services, at 303-866-7462. To apply for this waiver, call the Community Centered Board in your area (see [Appendix C](#)).

Waiver for Persons Developmentally Disabled: Provides services and supports out of the family home which allow people age 18 and older with developmental disability to continue to live in the community. For more information, call the Division of Developmental Disabilities, Colorado Department of Human Services, at 303-866-7462. To apply, call the Community Centered Board in your area (see [Appendix D](#)).

GLOSSARY

Action: An Action is when the Behavioral Health Organization (BHO) does any of the following:

1. Denies all or part of a requested mental health service, including the type or level of service.
2. Reduces, changes, or ends treatment that was already approved.
3. Denies payment, in whole or in part, for a service.
4. Denies a request to obtain treatment outside the network, in rural areas.
5. Fails to provide services in a timely manner.
6. Fails to act within approved time frames to resolve grievances and appeals.

Appeal: An Appeal is when a member disagrees with an Action by the BHO and asks for a review of the Action.

Behavioral Health Organization (BHO): This is an organization that the state of Colorado contracts with to arrange for mental health services for Medicaid members. There are five BHOs in the state.

Care Coordinator: A Care Coordinator can be your therapist or case manager. He or she is your primary mental health provider and responsible for coordinating your mental health services and keeping your records.

Community Mental Health Center: Community mental health centers offer mental health services. There are seventeen community mental health centers in Colorado. Each center serves from one to several counties. See Appendix A to find the center that serves your county.

Covered Benefits: The mental health services you can get if you are on Medicaid.

Designated Client Representative (DCR): This is a person whom you name to file a grievance or appeal on your behalf. You must do this in writing.

Early Periodic Screening, Diagnosis and Treatment (EPSDT): A health care program for children who get Medicaid. It covers children ages birth to 21. EPSDT provides health checkups, nutritional checkups, baby shots and other services.

Grievance: A Grievance is when you complain about your mental health services, a provider or staff. You can file a Grievance about anything you are not satisfied with.

Notice of Action: This is a letter that the BHO sends you explaining the Action it is taking and your Appeal rights.

Out of Area Care: The mental health services you get when you are outside of the counties covered by your BHO.

Primary Care Physician (PCP): The doctor you have chosen to provide your medical care.

Provider: An organization or individual who provides mental health services. A provider can be a mental health center, a hospital or an individual.

State Fair Hearing Process: This is a hearing before a state administrative law judge and is available for Appeals only.

Waiver Program: These are special programs to help people with special health care needs stay in their home and community.

APPENDIX — A

COMMUNITY MENTAL HEALTH CENTERS

Your Community Mental Health Center (CMHC) may provide services in areas that are not listed here. If your community is not listed here, please call the nearest CMHC to learn about the services that are available close to your home. All CMHC's provide crisis services. You can get crisis services from your CMHC 24 hours a day, 7 days a week.

<p>ALAMOSA – (Main) San Luis Valley MHC 8745 CR 9 South Alamosa, CO 81101 719-589-3671</p>	<p>ASPEN Aspen Counseling Center Colorado West MHC 405 Castle Creek Rd. #9 Aspen, CO 81611 970-920-5555</p>
<p>CANON CITY (Main) West Central MHC 3225 Independence Rd. Canon City, CO 81212 719-275-2351</p>	<p>COLORADO SPRINGS (Main) Pikes Peak Mental Health Center Adult Services 875 West Moreno Avenue Colorado Springs, CO 80905 719-572-6200 1-800-285-1204 Admissions: 719-572-6330</p>
<p>COLORADO SPRINGS Pikes Peak Mental Health Center Child and Family Services 179 South Parkside Drive Colorado Springs, CO 80910 719- 572-6300 1-800-285-1204 Admissions: 719- 572-6330</p>	<p>COLORADO SPRINGS Pikes Peak Mental Health Center Crisis & Acute Services/Lighthouse 115 South Parkside Drive Colorado Springs, CO 80910 719- 635-7000</p>
<p>CORTEZ Southwest Colorado MHC 215 W. Arbecam Cortez, CO 81321 970-565-7946</p>	<p>CRAIG Colorado West MHC 439 Breeze St. Suite 200 Craig, CO 81625 970-824-6541</p>
<p>DELTA Midwestern MHC 107 W. 11th St Delta, CO 81416 970-874-8981</p>	<p>DURANGO Southwest Colorado MHC 281 Sawyer Dr. Suite 100 Durango, CO 81303 970-259-2162</p>

<p>EAGLE Colorado West MHC 137 Howard St. P.O. Box 1620 Eagle, CO 81631 970-328-6969</p>	<p>FRISCO Colorado West MHC 360 Peak 1 Dr. Suite 110 Frisco, CO 80443 970-668-3478</p>
<p>GLENWOOD SPRINGS Colorado West MHC 6916 Highway 82 Glenwood Springs, CO 81601 970-945-2583</p>	<p>GRAND JUNCTION Colorado West MHC 515 28 ¾ Road Grand Junction, CO 81501 970-683-7114</p>
<p>GUNNISON Midwestern MHC 710 N. Taylor P.O. Box 898 Gunnison, CO 81230 970-641-0229</p>	<p>LA JUNTA Southeastern Colorado MHC 711 Barnes La Junta, CO 81050 719-384-5446 800-511-5446</p>
<p>LAMAR Southeast Mental Health Services 3500 First Street South Lamar, CO 81052 719-336-7501 800-603-7501</p>	<p>LAS ANIMAS Southeast Mental Health Services 623 Carson Las Animas, CO 81054 719-456-0069</p>
<p>LEADVILLE West Central MHC 714 Front St. P.O. Box 1583 Leadville, CO 80461 719-486-0985</p>	<p>MEEKER Colorado West MHC 267 6th St P.O. Box 598 Meeker, CO 81641 970-878-5112</p>
<p>MONTE VISTA San Luis Valley MHC 402 Fourth St. Monte Vista, CO 81144 719-852-5186</p>	<p>MONTROSE Midwestern MHC 605 E. Miami Rd. Montrose, CO 81401 P.O. Box 1208 Montrose, CO 81402 970-249-9694</p>

<p>NORWOOD Midwestern MHC 1350 Aspen St. #B. P.O. Box 366 Norwood, CO 81423 970-327-4449</p>	<p>ORDWAY Southeast Mental Health Services 220 1st Street Ordway, CO 81063 719-267-4993</p>
<p>PAGOSA SPRINGS Southwest Colorado MHC 475 Lewis St. #104 P.O. Box 1347 Pagosa Springs, CO 81147 970-264-2104</p>	<p>PARK COUNTY Pikes Peak Mental Health Center Bailey Office 460 County Road #43 Ste 7 Bailey, CO 80421 303-838-5013</p> <p>Pikes Peak Mental Health 295 5th St. Fairplay, CO 80440 719-836-4157</p>
<p>PUEBLO Spanish Peaks MHC 1304 Chinook Lane Pueblo, CO 81001 719-545-2746</p>	<p>PUEBLO Spanish Peaks Community Support Program 1012 W. Abriendo Pueblo, CO 81004 719-583-2207</p>
<p>RANGELY Colorado West MHC- Rio Blanco 17497 Hwy. 64 County Annex Building Rangely, CO 81648 970-675-8411</p>	<p>RIFLE Colorado West MHC 2128 Railroad Ave. Suite 005 Rifle, CO 81650 970-625-3582</p>
<p>SALIDA West Central MHC 111 Vesta Road Salida, CO 81201 719-539-6502</p>	<p>SPRINGFIELD Southeastern Colorado MHC 1049 Kansas Springfield, CO 81073 719-523-4889</p>
<p>STEAMBOAT SPRINGS Colorado West MHC 407 S. Lincoln Ave. Steamboat Springs, CO 80477 970-879-2141</p>	<p>TELLER COUNTY Pikes Peak Mental Health Center Aspen Mine Resource Center 166 E. Bennett Avenue Cripple Creek, CO 80813 719-689-3584</p>

<p>TRINIDAD Spanish Peaks MHC 417 S. Indiana Trinidad, CO 81082 719-846-4416</p>	<p>VAIL Colorado West MHC- Eagle Valley 395 E. Lionshead Cir. Vail, CO 81657 970-476-0930</p>
<p>WALSENBURG Spanish Peaks MHC 926 Russell Walsenburg, CO 81089 719-738-2386</p>	<p>WALDEN Colorado West MHC 350 McKinley Walden, CO 80480 970-723-0055</p>
<p>WESTCLIFF West Central MHC Please call the Canon City office (719-275-2351) to make an appointment</p>	

APPENDIX — B

Area Hospitals

<p>ALAMOSA San Luis Valley Medical Center 106 Blanca Avenue Alamosa, CO 81101 719-589-2511</p>	<p>ASPEN Aspen Valley Hospital 0401 Castle Creek Road Aspen, CO 81611 970-544-7350</p>
<p>CANON CITY Thomas More Hospital 1338 Phay Street Canon City, CO 81212 719-285-2000</p>	<p>COLORADO SPRINGS Cedar Springs Health System 2135 Southgate Road Colorado Springs, CO 80906 719-633-4114</p>
<p>COLORADO SPRINGS Memorial Hospital 1400 E. Boulder Street Colorado Springs, CO 80909 719-365-5000</p>	<p>COLORADO SPRINGS Penrose – St. Francis Hospital 2222 N. Nevada Colorado Springs, CO 80907 719-776-5111</p>

<p>CORTEZ Southwest Memorial Hospital 1311 N. Mildred Road Cortez, CO 81321 970-565-6666</p>	<p>CRAIG The Memorial Hospital 785 Russell Street Craig, CO 81625 970-824-9411</p>
<p>DEL NORTE Rio Grande Hospital 0310 County Road 14 Del Norte, CO 81132 719-657-2510</p>	<p>DURANGO Mercy Medical Center 1010 Three Springs Blvd. Durango, CO 81301 970-247-4311</p>
<p>FRUITA Family Health West Hospital 228 N. Cherry Street Fuita, CO 81521 970-858-9871</p>	<p>GLENWOOD SPRINGS Valley View Hospital 1906 Blake Avenue Glenwood Springs, CO 81601 970-945-6535</p>
<p>GRAND JUNCTION Community Hospital 2021 North 12th Street Grand Junction, CO 81501 970-256-6200</p>	<p>GRAND JUNCTION Colorado West Crisis Unit 515 28 ³/₄ Rd. Grand Junction, CO 81501 970-241-6023</p>
<p>GRAND JUNCTION St. Mary's Hospital 2635 North 7th Street Grand Junction, CO 81501 970-244-2273</p>	<p>GUNNISON Gunnison Valley Hospital 711 N. Taylor Street Gunnison, CO 81230 970-641-1456</p>
<p>KREMMLING Kremmling Memorial Hospital 214 S. 4th Street P.O. Box 399 Kremmling, CO 80459 970-724-3442</p>	<p>LA JARA Conejos County Hospital 19021 State Hwy. 285 La Jara, CO 81140 719-274-5121</p>
<p>LA JUNTA Arkansas Valley Medical Center 1100 Carson Avenue La Junta, CO 81050 719-384-5412</p>	<p>LAMAR Prowers Medical Center 401 Kendall Drive Lamar, CO 81052 719-336-4343</p>

<p>LEADVILLE St. Vincent General Hospital 822 West 4th Street Leadville, CO 80461 719-486-0230</p>	<p>MEEKER PIONEERS HOSPITAL 345 Cleveland Street Meeker, CO 81641 970-878-5047</p>
<p>MONTROSE Montrose Memorial Hospital 800 South Third Street Montrose, CO 81401 970-249-2211</p>	<p>PUEBLO Colorado Mental Health Institute 1600 West 24th Street Pueblo, CO 81003 719-546-4000</p>
<p>PUEBLO Parkview Medical Center 400 W. 16th Street Pueblo, CO 81003 719-584-4000</p>	<p>PUEBLO St. Mary Corwin Medical Center 1008 Minnequa Ave. Pueblo, CO 81004 719-557-4000</p>
<p>RANGELY Rangely Hospital 511 South White Avenue Rangely, CO 81648 970-675-5011</p>	<p>RIFLE Grand River Medical Center 501 Airport Road Rifle, CO 81650 970-625-1510</p>
<p>SALIDA Heart of the Rockies Medical Center 1000 Rush Dr. Salida, CO 81201 719-530-2200</p>	<p>SPRINGFIELD Southeast Colorado Hospital 373 East 10th Avenue Springfield, CO 81073 719-523-4501</p>
<p>STEAMBOAT SPRINGS Yampa Valley Medical Center 1024 Central Park Drive Steamboat Springs, CO 80487 970-879-1322</p>	<p>TRINIDAD Mt. San Rafael Hospital 410 Benedicta Avenue Trinidad, CO 81082 719-846-9213</p>
<p>VAIL Vail Valley Medical Center 181 W. Meadow Drive Vail, CO 81657 970-476-2451</p>	<p>WALSENBURG Spanish Peaks Health Center 23500 US Highway 160 Walsenburg, CO 81089 719-738-5000</p>

APPENDIX — C

Single Entry Point Agencies

<p>ALAMOSA AND SAGUACHE: Alamosa County Public Health 8900 Independence Way Alamosa, CO 81101 Main Phone Number: 719-589-6639 FAX Number: 719-589-1103</p>	<p>BENT AND KIOWA: Bent County Public Health 701 Park Avenue Las Animas, CO 81054 Main Phone Number: 719-456-0517 FAX Number: 719-456-0518</p>
<p>CHAFFEE, CUSTER, FREMONT, LAKE AND PARK: Central Mountain OLTC 172 Justice Center Road Canon City, CO 81212 Main Phone Number: 719-275-2318 FAX Number: 719-275-5206</p>	<p>CONEJOS AND COSTILLA: Conejos County Nursing Service PO Box 78 La Jara, CO 81140 Physical Address: 19023 State Highway 285 South La Jara, CO 81140 Main Phone Number: 719-274-4307 FAX Number: 719-274-4309</p>
<p>DELTA, GUNNISON, HINSDALE: Delta County Dept of Social Services Courthouse Annex 560 Dodge Street Delta, CO 81416 Main Phone Number: 970-872-1201 FAX Number: 970-872-1229</p>	<p>HUERFANO, LAS ANIMAS: Las Animas City Dept of Human Svs 204 South Chestnut Trinidad, CO 81082 Main Phone Number: 719-846-2276 FAX Number: 719-846-4269</p>
<p>MESA Mesa County Dept. of Human Services PO Box 20000 Grand Junction, CO 81502-5035 Physical Address (if Different): 510 29 1/2 Road Grand Junction, CO 81501 Main Phone Number: 970-248-2888 970-241-8480 FAX Number: 970-248-2849</p>	<p>DOLORES, MONTEZUMA Montezuma County Health Department County Annex Building 106 West North St Cortez, CO 81321-3189 Main Phone Number: 970-565-3056 FAX Number: 970-565-0647</p>

<p>MONTROSE, OURAY, SAN MIGUEL Montrose County Dept of Health and Human Services 1845 S. Townsend Ave. Montrose, CO 81401 Intake Phone Number: 970-252-5092 Main Phone Number: 970-252-5000 FAX Number: 970-252-5024</p>	<p>EAGLE, GARFIELD, GRAND, JACKSON, MOFFAT, PITKIN, RIO BLANCO, ROUTT, SUMMIT: Northwest OLTC 195 W. 14th Street Rifle, CO 81650 or 108 Eighth Street, Suite 300 Glenwood Springs, CO 81601 Main Phone Number: 970-945-9191 FAX Number: 970-928-0465</p>
<p>CROWLEY, OTERO: Otero County Dept of Human Services PO Box 494 La Junta, CO 81050 Physical Address (if Different): Courthouse, 13 West 3rd La Junta, CO 81050 Main Phone Number: 719-383-3166 FAX Number: 719-383-4607</p>	<p>BACA, PROWERS: Prowers City Public Health Nursing Sv 1001 S Main Street Lamar, CO 81052 Main Phone Number: 719-336-1015 FAX Number: 719-336-9763</p>
<p>PUEBLO Pueblo County Dept of Social Services 212 W. 12th Street Pueblo, CO 81003 Intake Phone Number: 719-583-6862 Main Phone Number: 719-583-6160 FAX Number: 719-583-6348</p>	<p>MINERAL, RIO GRANDE Rio Grande County Dept of Social Svs Rio Grande County OLTC 925 6th St. Del Norte, CO 81132 Intake Phone Number: 719-657-4208 Main Phone Number: 719-657-4208 FAX Number: 719-657-4211</p>
<p>EL PASO, TELLER: Rocky Mountain Health Care Services 2812 E Bijou Street Colorado Springs, CO 80909 Main Phone Number: 719-457-0660 FAX Number: 719-457-0766</p>	<p>ARCHULETA, LA PLATA, SAN JUAN: San Juan Basin Health Department P.O. Box 140 Durango, Colorado 81302 Physical Address (if Different): 281 Sawyer Dr Durango, CO 81301 Main Phone Number: 970-247-5702 FAX Number: 970-247-9126</p>

APPENDIX — D

Community Centered Boards

ARKANSAS VALLEY COMMUNITY CENTER 1500 San Juan Avenue PO Box 1130 La Junta, CO 81050 719-384-8741	HORIZONS SPECIALIZED SERVICES 405 Oak PO Box 774867 Steamboat Springs, CO 80477 970-879-4466
BLUE PEAKS DEVELOPMENTAL SERVICES 703 Fourth Street Alamosa, CO 81101 719-589-5135	MESA DEVELOPMENTAL SERVICES 950 Grand Avenue Grand Junction, CO 81501 970-243-3702
COLORADO BLUESKY ENTERPRISES 115 West 2nd Street Pueblo, CO 81003 PO Box 1975 Pueblo, CO 81002 719-546-0572	MOUNTAIN VALLEY DEVELOPMENTAL SERVICES 700 Mount Sopris Drive PO Box 338 Glenwood Springs, CO 81602 970-945-2306
COMMUNITY CONNECTIONS 281 Sawyer Drive, #200 Durango, CO 81301 970-259-2464	SOUTHEASTERN DEVELOPMENTAL SERVICES 1111 South Fourth Street PO Box 328 Lamar, CO 81052 719-336-3244
COMMUNITY OPTIONS 336 South 10th Street PO Box 31 Montrose, CO 81402 970-249-1412	SOUTHERN COLORADO DEVELOPMENTAL SERVICES 1205 Congress Drive PO Box 781 Trinidad, CO 81082 719-846-4409

<p>DEVELOPMENTAL PATHWAYS 325 Inverness Drive South Englewood, CO 80112 303-360-6600</p>	<p>STARPOINT 700 S. 8th St. PO Box 2080 Canon City, CO 81212 719-275-1616</p>
<p>THE RESOURCE EXCHANGE 418 South Weber Colorado Springs, CO 80903 719-380-1100</p>	

How to get more information about Colorado Health Partnerships

For more information about CHP, please contact the Office of Member and Family Affairs. Our contact information is on the back of this Member Handbook. We can give you information about CHP’s structure and operations and about our unique Recovery Forum. We can also tell you how you can get involved in committees and meetings to help us improve services.

Colorado Health Partnerships will let you know, in writing, at least once a year of your right to ask for all of the information that is in this handbook.

