

Child Health Plan *Plus* (CHP+)

Please review the following to learn more about CHP+, including important updates and information for the program

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CHP+ General Information:

Child Health Plan *Plus* (CHP+) is a public health program that offers low-cost health and dental insurance for Colorado's uninsured children and pregnant women who qualify. CHP+ covers doctor visits, emergency care, preventive care such as screenings and immunizations, and other procedures and treatments.

CHP+ works with health plans to manage the health care and services for eligible CHP+ members. Kaiser Permanente is a CHP+ health plan in the Denver/Boulder area. After members are approved for CHP+, they are enrolled with a health plan, like Kaiser Permanente, and have 90 days to select another health plan by calling CHP+ Customer Service at 1-800-359-1991.

CHP+ Dental Care is provided by DentaQuest and if members have questions, they can call DentaQuest directly at 1-888-307-6561. Presumptive Eligible members are not enrolled in DentaQuest.

To get CHP+ coverage, members must follow the CHP+ enrollment process. The enrollment process details who is eligible and what enrollment forms are required. To learn more about CHP+ and CHP+ enrollment, please visit [Child Health Plan Plus \(CHP+\) | Colorado Department of Health Care Policy & Financing](#)

To learn more about the Kaiser Permanente CHP+ Health Plan, view the CHP+ member documents, like the CHP+ Evidence of Coverage, CHP+ Provider Directory, CHP+ Formulary, and CHP+ New Member Guide, online at: [Member Resources – Charitable Health Government Programs | Kaiser Permanente Colorado Options](#)

State Managed Care Network Retiring:

On July 1st 2021, the state is going to retire the State Managed Care Network and members will be reassigned to CHP+ health plans, like Kaiser Permanente.

The State Managed Care Network was for pregnant moms, newborns, and Presumptive Eligible child CHP+ members (these are members who receive

temporary CHP+ coverage while their application is processed). For more information about the State Managed Care Network, visit: [Child Health Plan Plus \(CHP+\) State Managed Care | Colorado Department of Health Care Policy & Financing](#)

Moving forward all CHP+ members will be directly enrolled with a health plan, like Kaiser Permanente, and they have 90 day to select another health plan. Starting in July, Kaiser Permanente's CHP+ program will now include newborns, children, and pregnant moms who are enrolled with Kaiser Permanente.

New member's in their 2nd or 3rd trimester of pregnancy who already have established care with an OB/GYN provider can stay with their provider if they choose. Members must let us know right away by calling Member Services at **303-338-3800**. Member Services can help send continuity of care requests for Prior Authorization so the member can stay with their current provider, even if the provider is not in the Kaiser Permanente CHP+ Provider Network.

New members with special health care needs can also stay with their current provider for 60 calendar days from the date of enrollment if the member is in an ongoing course of treatment with the provider. If the member with special health care needs is currently receiving ancillary covered benefits, they may continue to receive these benefits for 75 days. Members must let us know by calling Member Services right away at **303-338-3800**.

Provider Enrollment:

Providers who see CHP+ members must be enrolled with the state. Kaiser Permanente's Utilization Management team will deny referrals for CHP+ members to providers who are not enrolled with the state.

For more information about provider enrollment and how to enroll, visit: [Provider Enrollment | Colorado Department of Health Care Policy & Financing](#)

Providers need to complete an enrollment application for each provider type. Providers who are enrolled can see CHP+ and/or Medicaid members. Provider do not have to see Medicaid members, but it is a requirement for providers to be enrolled to see CP+ members.

Kaiser Permanente has the right to deny provider claims if a provider sees a CHP+ member and is not enrolled appropriately with the state. Please let us know if your enrolled status has changed.

To view providers in the Kaiser Permanente CHP+ Provider Network view the **CHP+ Provider Directory**: [CHP+ Provider Directory - April Updates \(kaiserpermanente.org\)](#)

CHP+ Fee-For-Service:

Providers will need to bill the state (similar to Medicaid), when CHP+ members are not enrolled with a health plan, but eligible for CHP+. It's important to verify enrollment and eligibility through the Provider Portal.

Providers should only bill Kaiser Permanente for CHP+ members enrolled with our health plan. If a provider tries to bill Kaiser Permanente and the member is not enrolled with Kaiser Permanente, the claim will deny, and the provider will need to bill the state for reimbursement.

Note: all Medicaid claims go to the state for reimbursement

CHP+ Benefit Notes:

- ABA is not a covered benefit for CHP+
- Prior authorization may be required for some CHP+ benefits
- Pregnant moms, American Indians, and Native Alaskans are exempt from copays
- CHP members cannot be billed for services not reimbursed by the health plan
- View details about CHP+ benefits, view the **Kaiser Permanente CHP+ Evidence of Coverage**: [Important Benefit Information Enclosed | Evidence of Coverage | Kaiser Permanente Colorado 2020](#)

CHP+ Membership Information:

CHP+ Members are in group 9900

- Subgroup A## = CHP+ Child Members
- Subgroup B## = CHP+ Prenatal Members
- Subgroup C## = CHP+ Newborn Members
- Subgroup D## = CHP+ PE Prenatal Members
- Subgroup E## = CHP+ PE Child Members

For any questions, please email CO-MCP@Kaiser Permanente.org