What is the Colorado Indigent Care Program (CICP)?
The CICP provides discounted health care services to low income individuals at participating providers. **CICP is not a health insurance program.** The CICP is funded with federal and state dollars to partially compensate participating providers who provide health care to the uninsured and underinsured at or below 250 percent of the Federal Poverty Level. The Colorado Department of Health Care Policy and Financing (the Department) administers the CICP. Health care services are provided by hospitals and clinics throughout the State that participate in the CICP. Not all hospitals and clinics participate in the program.

Who is eligible?
- A U.S. citizen or legal immigrant
- A Colorado resident or migrant farm worker
- Applicants must meet income and resource guidelines
- Applicants can be of any age
- Applicants can have Medicare and other health insurance
- Applicants cannot be eligible for Medicaid or Child Health Plan Plus (CHP+)

<table>
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<tr>
<th>FAMILY SIZE</th>
<th>ANNUAL INCOME</th>
<th>MONTHLY INCOME</th>
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How does someone apply?
- An applicant must visit a hospital or clinic that participates in the CICP to complete the application process
- An applicant will need to meet with an eligibility technician to determine if they are eligible
- To find a participating hospital or clinic near you, please visit: [www.chcpf.state.co.us/HCPF/cicp/cicpindex.asp](http://www.chcpf.state.co.us/HCPF/cicp/cicpindex.asp)

What does it cost?
- Applicants will be given a “CICP rating” based on their total income and resources
- The results of the rating process will determine the client’s copayments for available service for one year
- CICP ratings cover services that were received at a participating provider up to 90 days before the application
- If a client moves or changes providers it is the client’s responsibility to tell the eligibility technician at the new provider of their CICP rating

What type of medical services will someone receive?
- **The CICP is not insurance** so covered medical services are different at each participating hospital or clinic
- The responsible health care provider decides what services are medically necessary
- All participating hospital providers must provide emergency care. Many participating providers also provide urgent care and other medical services such as inpatient hospital care, primary care, and some prescription drugs depending on the available funding

January 2008
Is there a “cap” on client copayments?
Under CICP, clients do not have to pay more than 10 percent of their income and resources towards copayments in a calendar year. For example, a family of four with an annual income of $16,500 will have to pay copayments only up to $1,650. Clients must give copies of receipts to their clinic or hospital once they have reached their copayment cap.

What documentation is needed?
Applicants may be asked to provide one or more of the following documents:

- State of Colorado drivers license or state identification card
- Proof of immigration status
- Copy of last months’ paycheck stubs
- If you are not working copy of last months’ household bills
- Social Security Disability Insurance (SSDI) award letter
- Supplemental Security Income (SSI) award letter
- Proof of payments from pension plans
- Proof of payments from Aid to the Needy and Disabled (AND) or Old Age Pension (OAP)
- A copy of Medicare or health insurance card
- Value for all of vehicle(s)
- Proof of other income sources
- Copy of current checking and/or savings statement
- Documentation of past medical, physician, pharmacy expenses

CONTACTS:
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