

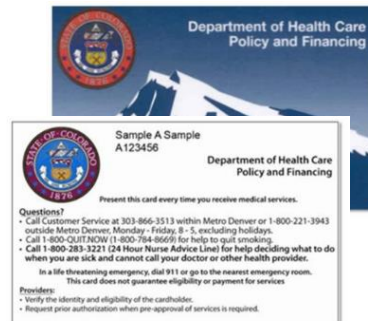
Changes to Medicaid Card Mailing Address

This guide explains how the mailing address to physically send out a Medicaid Card is determined - after Release 5 of Modernized Trails. An issue with locating a Medicaid Card for a client may prompt the need to use this guide.

Note: This document will NOT cover eligibility rules for receiving a Medicaid Card.

What is changing?

As of the Modernized Trails Resource release on January 18-19, 2020, the [Service Level Address](#) will no longer be used as the mailing address for sending Medicaid Cards. Instead, an address hierarchy as described below will be used to determine the mailing address.



Address Hierarchy

Assuming the client has an active open Medicaid entitlement with the appropriate county, the system will use the following logic to choose from among the various addresses in Trails as the mailing address:

1. Placement / Provider Address

If an out-of-home placement is found, the system will first look to the provider address(es) of the provider identified on the service authorization - not the governing body - in this order:

- 1.1. **Provider's mailing address**, if present.
- 1.2. **Provider's location address**, if present.
- 1.3. Else, if no active mailing or location address exists for the provider, the system will use the **provider's most recent end-dated address**.

Addresses	
Address Type	Address
Location	8405 W 100TH AVE
Mailing	8405 W 100TH AVE

Notes:

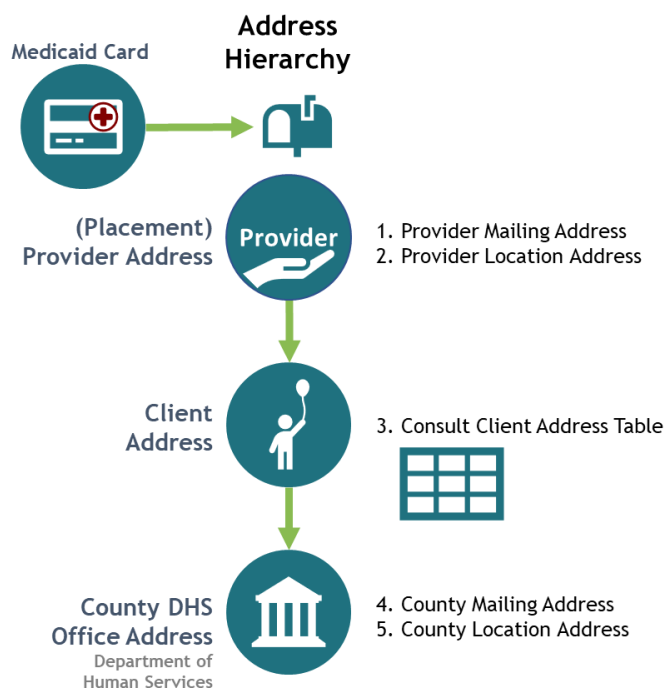
- You will use legacy Trails to search for placements/service authorizations, but you will view providers and provider addresses in modernized Trails.
- The Provider addresses may need to be reviewed for accuracy if cards or other HCPF mailings are returned to the county and not sent to the provider. This page should be shared with your Entitlement staff that open Trails Medicaid.

2. Client Address

If no out-of-home placement is found, the system will look at available client addresses and choose the client address type based on the logic as described in a [table on the following page](#).

3. County Department of Human Services (DHS) Address

If no placement or client addresses are found, the Medicaid card will be mailed to the County Department of Human Services (DHS) office.



- 3.1. **County DHS Mailing Address**, if present
- 3.2. **County DHS Location Address**, if present
- 3.3. Otherwise, the **last known County DHS Address** (This is a very unlikely scenario, but would entail looking at the County DHS's most recent end-dated address.)

Notes:

- Independent Living client Medicaid cards will continue to go to the Department of Human Services (DHS) address because these clients have an open service authorization for Independent Living, and the address for this service is the address of the county department.
- If an address change for a County Department of Human Services is made in Trails, then submit a ticket in Customer Service Portal (<http://oit servicedesk.state.co.us>) requesting an update to the address with HCPF - table 1094 HCPF 1095 for IRS.

Client Address Hierarchy

A client may have multiple addresses, differentiated by address type. At a high-level the **Address Type** selected for the Medicaid Card mailing address is driven by the **Participation Category** and **Participation Type**.

- You can search, view and update client addresses in either legacy or modernized Trails.
- Participation Category and Participation Type can only be managed in legacy Trails.

Screenshots of the Participation Category and Participation Type fields from legacy Trails are provided below for reference.

Address Detail Same As

Format

Street Address

P.O. Box

Rural Route Address

Address Type: Permanent Home

P.O. Box:

Rural Route Number:

Start Date: 05/31/2018

End Date: 00/00/0000

Box Number:

Participation Category: Other **Participation Type:** Youth Corrections, Medicaid C

Order	Scenario Description	Participation Category	Participation Type	Client Address Type chosen...
1	Client Placement	Other	"Youth Corrections, Medicaid Only"	PlacementAddress
2	Permanent Home	PA6	"Spec Needs IVE Elig, /CPA Rel Adopt"	Permanent Home Address
3	Client Perm Home/Residence	PA6	"Relative Guardianship"	Residence (if different from Permanent Home)
4	Client Mailing Address	Other	"IV-E Emancipation Medicaid"	Mailing Address
5	Client Mailing Address	Other	"Emancipation Medicaid"	Mailing Address
6	Non-Colorado Client Residence	PA4	"Non Colorado Adoption / Courtesy Supervision" or "Non Colorado Foster Child / Courtesy Supervision"	Residence (If different from Permanent Home)
7	Non-Colorado Client Mailing Address	or PA5		Mailing Address
8	Non-Colorado Client Placement Address	or PA6		Placement Address
9	Non-Colorado Client Permanent Address			Permanent Home
10	Open Emancipation Medicaid	If the scenario does not fit any of the combinations of Participation Category or Participation Type above, then if the client is Medicaid-eligible and younger than 18-years-old, then... →		Mailing Address
11	Independent Living (IL)	PA4 or PA5	"At Risk/Request Services" "Court Order Services" "Adj. Deliq" "Beyond control" "Behavior dangerous"	County Department of Human Services Office Address
12	S, Ute Tribe Ute Mt Ut Tribe	All	All	County Department of Human Services Office Address