



**COLORADO**

Department of  
Regulatory Agencies

Division of Insurance

# Patient Attribution Comment Form - Colorado Insurance Regulation 4-2-96

Please complete this form to provide comments/feedback to the Colorado Division of Insurance related to the **patient attribution** requirements for alternative payment models (APMs) for primary care services included in [Colorado Insurance Regulation 4-2-96](#). Per the regulation, carriers offering individual, small group, or large group health benefit plans in Colorado on or after January 1, 2025, are generally required to:

1. Provide a detailed description of the patient attribution methodology(ies) utilized in primary care APMs to all providers participating in the APM that must include, at a minimum: a) definitions of key terms used in the model; b) the processes used to attribute adult and pediatric members, including newborns and infants, to a provider; c) if and how geographic attribution is used; d) any other processes or methods, such as visit-based, that are utilized; and e) any members that are excluded from attribution;
2. Make available updated attribution lists, in a format that is easy to interpret and analyze, to providers no less frequently than on a quarterly basis; and
3. Establish and maintain a process for providers to submit requests for misattributed patients to be added or removed from their attribution list (i.e., reattributed). The process for submitting reattribution requests must be clearly communicated to the provider, and must include regular reviews (no less than quarterly) of patient attribution lists and provider attribution requests.

Please submit this completed form **no later than October 7, 2025**. *Note:* This form is specific to patient attribution - if you would like to provide comments on the other APM parameters included in Regulation 4-2-96 (risk adjustment, aligned core competencies, or aligned quality measures), those comment forms can be accessed on the Division's [HB22-1325 - Primary Care Alternative Payment Models](#) website.

**In addition**, the Division will be hosting a stakeholder meeting **on October 9, 2025, from 10- 11 am MT**, to obtain stakeholder feedback on patient attribution and the other APM parameters set forth in [Regulation 4-2-96](#). Registration for this meeting is available at the following link:

- ♦ <https://us06web.zoom.us/meeting/register/SWxWqpArQyqhHhByYe29og>



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1. What changes, if any, did you notice in relation to the implementation of the patient attribution requirements included in Regulation 4-2-96?
  
2. Would you classify these changes as overall positive or negative, and why?
  
3. What changes, if any, would you suggest to **existing** requirements related to patient attribution in primary care APMs?
  
4. What **new** requirements, if any, should the Division consider in relation to patient attribution in primary care APMs?
  
5. Please provide any additional thoughts/comments related to patient attribution in primary care APMs that the Division should take into consideration.

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