

## Risk Adjustment 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 <u>risk adjustment</u> requirements for alternative payment models (APMs) for primary care services included in <u>Colorado Insurance Regulation 4-2-96</u>. 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:

- I. Provide a detailed description of the risk adjustment 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 to describe the methodology; b) a description of the data used in the methodology; and c) a description of adjustments made to the data in risk adjustment calculations;
- 2. Provide a description of how the risk adjustment methodology interacts with provider payments, including but not limited to: a) a clear description of any retrospective uses of provider data; and b) for risk adjustment methodologies that are applied at the end of a contract period, a clear explanation of how and when they are applied.

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

1.	What changes, if any, did you notice in relation to the implementation of the risk adjustment 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 <b>existing</b> requirements related to risk adjustment in primary care APMs?
4.	What <u>new</u> requirements, if any, should the Division consider related to risk adjustment in primary care APMs?
5.	Please provide any additional thoughts/comments related to risk adjustment in primary care APMs that the Division should take into consideration.
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