Updated: 4/10/25



Reinsurance Care Management Protocol Assessment

Eligible Carriers must submit written responses to the following questions. Responses should address all bulleted items below each question.

(Limit: 1500 words, not including attachments or supporting materials)

Carrier Name:	
NAIC Number:	
Carrier Reinsurance Point of Contact (POC) Name:	
Carrier POC Email:	
Carrier POC Phone:	

- 1) Provide an overview of the carrier's care management strategy for members whose annual claims costs are expected to exceed the Reinsurance Program Attachment Point.
 - Describe how the carrier supports the provision of care management through its provider contracts and how it uses care management to promote cost-effective health care.
 - State the carrier's financial and care delivery goals related to care management.
 - Describe how the carrier identifies members whose claims may be eligible for reinsurance.
 - Describe any ways the carrier includes social determinants of health in its member risk stratification model, as well as any efforts to address health equity issues among reinsuranceeligible members.
 - Note any significant geographic differences in the carrier's care management strategy or services performed by geographic region.

- 2) State the carrier's requirements for contracted providers or other entities regarding patient care management for members whose claims may be eligible for reinsurance.
 - Which members receive care management? How, when, and by whom are these members identified? How are members notified regarding care management?
 - State the care management activities or services that providers are required to offer. What is the typical frequency and duration of these services?
 - Who performs care management activities (e.g. physicians, non-physician practitioners, care coordinators, patient navigators, etc.)? Does the carrier contract with any care management companies to provide services? If so, which one(s)?
 - Approximately how many FTEs does the carrier expect providers to allocate per patient for care management?

3) Describe how the carrier tracks care management services and activities performed by contracted health care providers or other entities.

- Does the carrier require contracted providers to report on the care management services and activities they perform? If yes, describe the reporting requirements.
- To what extent does the carrier use claims data to track care management? Does the carrier have specific billing codes for care management?
- Does the carrier require providers to report particular quality measures (MIPS, NQF, etc.) related to care management or care coordination? If yes, list the measures.
- Describe any data validation or auditing processes the carrier uses to verify care management data from providers.
- Describe any penalties the carrier imposes in cases where providers do not meet care management requirements.

4) manage	Describe any claims-based or non-claims-based payments the carrier provides for care ement activities and services.
•	Does the carrier provide per-member-per-month or other regularly scheduled payments for

state the activities and services it covers.

member care management? If yes, describe the amount and frequency of the payment, and

5)	Estimate the savings to the Colorado Reinsurance Program the carrier expects its Care
Manag	ement Protocols to generate.

- Savings are generally defined as the difference between a carrier's estimated total reinsurance payment amount with Care Management Protocols implemented, and the estimated reinsurance payment amount without them.
- Savings should be represented by average annual claims reductions per enrollee for enrollees whose claims are eligible for reinsurance, along with aggregate savings across all eligible enrollees.
- NEW: Estimate the per member per month premium savings resulting from the implementation of Care Management Protocols.
- Describe how the carrier's Care Management Protocols generate savings (if applicable).

6) Attach any contracts (e.g. participation agreements, provider agreements, etc.), actuarial analysis or data, and other documentation supporting the responses above. List attachments here: