

OPERATIONAL MEMO

TITLE:	CHANGES TO BENEFITS AND SERVICES RATES IN RESPONSE TO COVID-19			
SUPERSEDES NUMBER:	N/A			
EFFECTIVE DATE:	JANUARY 1, 2021			
DIVISION AND OFFICE:	BENEFITS AND SERVICES MANAGEMENT DIVISION, OFFICE OF COMMUNITY LIVING			
PROGRAM AREA:	PROVIDER AGENCIES, CASE MANAGEMENT			
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Purpose and Audience:

The purpose of this Operational Memo is to inform providers and case management agencies (CMAs) of temporary rate increases in response to the COVID-19 pandemic for some Home and Community-Based Services (HCBS) waiver benefits. The service, corresponding rate increase, and instructions on how to receive the increase are found below.

Please Note: It is the Department's expectation that during the COVID-19 Public Health Emergency providers use this additional funding to ensure continued service delivery that is in alignment with published infection prevention guidance.

Providers must continue to modify their operations to follow the most recent guidance from the <u>Centers for Disease Control (CDC)</u>, the <u>Colorado Department of Public Health</u> <u>and Environment (CDPHE)</u> and the <u>President's Coronavirus Guidelines for America</u>. The Department requires all providers to follow this guidance. The formal guidance can be found on CMS' website <u>here</u>.

Providers are encouraged to contact their local public health department when needed.

Information:

In response to the decreased utilization and increased costs associated with the COVID-19 pandemic, the Department is issuing a temporary rate increase for the services in the table below.

Below is information on the services to which the temporary rate increases apply, as well as instructions on how to bill.

These rate changes go into effect today, retroactive to January 1, 2021 and will go through March 31, 2021. However, the Department may downwardly adjust the rates back to the original fee schedule at its discretion.

Questions regarding this guidance can be sent to <u>HCPF_HCBS_Questions@state.co.us.</u>

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Home and Community-Based Service Waiver Benefits Temporary Rate Changes Effective January 01, 2021 through March 31, 2021

Service	Current Rate	% increase	New Temporary Rate Loaded on PAR	New Temporary Code or Impacted Code
Adult Day Services - Members enrolled in the Brain Injury (BI) Waiver	Tier 1 15-Minute Unit \$6.28 2+ Hours \$77.30	10	Tier 1 15-Minute Unit \$ 6.91 2+ Hours \$85.03	S5100, U6 S5102 U6
Adult Day Services - Members enrolled in the Community Mental Health Services (CMHS) Waiver	Tier 1 15-Minute Unit \$2.54 Basic \$31.31 Specialized \$42.85	10	Tier 1 15-Minute Unit \$ 2.79 Basic \$34.45 Specialized \$47.13	S5100 UA S5105 UA S5105 UA, TF
Adult Day Services - Members enrolled in the Elderly, Blind, or Disabled (EBD) Waiver	Tier 1 15-Minute Unit \$2.54 Basic \$31.31 Specialized \$42.85	10	Tier 1 15-Minute Unit \$ 2.79 Basic \$34.45 Specialized \$47.13	S5100 U1 S5105 U1 S5105 U1, TF
Adult Day Services - Members enrolled in the Spinal Cord Injury (SCI) Waiver	Tier 1 15-Minute Unit \$2.54 Basic \$31.31 Specialized \$42.85	10	Tier 1 15-Minute Unit \$ 2.79 Basic \$34.45 Specialized \$47.13	S5100 U1, SC S5105 U1, SC S5105 U1, SC, TF
Alternative Care Facility (ACF) - Members enrolled	\$64.89; this rate may vary based on individual	8	\$5.19 (For a full rate of \$70.08)	T2031, U1, TU

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Service	Current Rate	% increase	New Temporary Rate Loaded on PAR	New Temporary Code or Impacted Code
in the Elderly, Blind, or Disabled (EBD) Waiver	member payment to the provider			
Alternative Care Facility (ACF) - Members enrolled in the Community Mental Health Services (CMHS) Waiver	\$64.89; this rate may vary based on individual member payment to the provider	8	\$5.19 (For a full rate of \$70.08)	T2031, UA, TU
Group Residential Services and Supports (GRSS)	Colorado Standard Rate - Level 1 - $$116.82$ Level 2 - $$140.71$ Level 3 - $$159.22$ Level 4 - $$181.66$ Level 5 - $$198.98$ Level 6 - $$231.12$ City and County of Denver - Level 1 - $$122.73$ Level 2 - $$148.24$ Level 3 - $$168.40$ Level 4 - $$192.96$ Level 5 - $$212.65$ Level 6 - $$248.70$	8	Colorado Standard Rate - Level 1 - $$126.17$ Level 2 - $$151.97$ Level 3 - $$171.96$ Level 4 - $$196.19$ Level 5 - $$214.90$ Level 6 - $$249.61$ City and County of Denver - Level 1 - $$132.55$ Level 2 - $$160.10$ Level 3 - $$181.87$ Level 4 - $$208.40$ Level 5 - $$229.66$ Level 6 - $$268.60$	Not applicable, bill procedure codes on approved PAR.
Group Residential Services and Supports (GRSS) –	Level 7 – Negotiated Rate	8	Per member increase will vary, providers must verify individual rate	T2016 U3 SC HQ TU

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Service	Current Rate	% increase	New Temporary Rate Loaded on PAR	New Temporary Code or Impacted Code
Members enrolled in the Developmental Disabilities (DD) Waiver			loaded on the Temporary Code.	
Non-Medical Transportation – Members enrolled in the Brain Injury (BI) Waiver	Adult Day Service NMT - Mobility Van Mileage Band 1 \$9.46 Mileage Band 2 \$17.44 Mileage Band 3 \$25.95 Adult Day Service NMT - Wheelchair Van Mileage Band 1 \$11.23 Mileage Band 2 \$21.02 Mileage Band 3 \$28.63 NMT - Mobility Van Mileage Band 1 \$9.46 Mileage Band 2 \$17.44 Mileage Band 3 \$25.95 NMT - Wheelchair Van Mileage Band 1 \$11.23 Mileage Band 1 \$11.23 Mileage Band 2 \$21.02	10	Adult Day Service NMT - Mobility Van Mileage Band 1 \$10.40 Mileage Band 2 \$19.18 Mileage Band 3 \$28.54 Adult Day Service NMT - Wheelchair Van Mileage Band 1 \$12.35 Mileage Band 2 \$23.12 Mileage Band 3 \$31.49 NMT - Mobility Van Mileage Band 1 \$10.40 Mileage Band 2 \$19.18 Mileage Band 3 \$28.54 NMT - Wheelchair Van Mileage Band 1 \$12.35 Mileage Band 1 \$12.35 Mileage Band 2 \$23.12	A0120 U6, HB A0120 U6, TT, HB A0120 U6, TN, HB A0130 U6, HB A0130 U6, TT, HB A0130 U6, TN, HB A0120 U6 A0120 U6, TT A0120 U6, TN A0130 U6, TT
	Mileage Band 3 \$28.63		Mileage Band 3 \$31.49	A0130 U6, TN

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Service	Current Rate	% increase	New Temporary Rate Loaded on PAR	New Temporary Code or Impacted Code
Non-Medical	Adult Day Service NMT -	10	Adult Day Service NMT -	
Transportation –	Mobility Van		Mobility Van	
Members enrolled in the	Mileage Band 1 \$9.46		Mileage Band 1 \$10.40	A0120 UA, HB
Community Mental Health Services (CMHS) Waiver	Mileage Band 2 \$17.44 Mileage Band 3 \$25.95		Mileage Band 2 \$19.18 Mileage Band 3 \$28.54	A0120 UA, TT, HB A0120 UA, TN, HB
	Adult Day Service NMT -		Adult Day Service NMT -	
	Wheelchair Van		Wheelchair Van	
	Mileage Band 1 \$11.23		Mileage Band 1 \$12.35	A0130 UA, HB
	Mileage Band 2 \$21.02		Mileage Band 2 \$23.12	A0130 UA, TT, HB
	Mileage Band 3 \$28.63		Mileage Band 3 \$31.49	A0130 UA, TN, HB
	NMT - Mobility Van		NMT - Mobility Van	
	Mileage Band 1 \$9.46		Mileage Band 1 \$10.40	A0120 UA
	Mileage Band 2 \$17.44		Mileage Band 2 \$19.18	A0120 UA, TT
	Mileage Band 3 \$25.95		Mileage Band 3 \$28.54	A0120 UA, TN
	NMT - Wheelchair Van		NMT - Wheelchair Van	
	Mileage Band 1 \$11.23		Mileage Band 1 \$12.35	A0130 UA
	Mileage Band 2 \$21.02		Mileage Band 2 \$23.12	A0130 UA, TT
	Mileage Band 3 \$28.63		Mileage Band 3 \$31.49	A0130 UA, TN
Non-Medical	Mileage Band 1 \$6.58	10	Mileage Band 1 \$7.24	T2003 U3
Transportation –	Mileage Band 2 \$13.77		Mileage Band 2 \$15.15	T2003 U3, 22
Members enrolled in the	Mileage Band 3 \$20.97		Mileage Band 3 \$23.06	T2003 U3, TF
Developmental Disabilities (DD) Waiver				

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Service	Current Rate	% increase	New Temporary Rate Loaded on PAR	New Temporary Code or Impacted Code
Non-Medical Transportation – Members enrolled in the Elderly, Blind, or Disabled (EBD) Waiver	Adult Day Service NMT - Mobility Van Mileage Band 1 \$9.46 Mileage Band 2 \$17.44 Mileage Band 3 \$25.95	10	Adult Day Service NMT - Mobility Van Mileage Band 1 \$10.40 Mileage Band 2 \$19.18 Mileage Band 3 \$28.54	A0120 U1, HB A0120 U1, TT, HB A0120 U1, TN, HB
	Adult Day Service NMT - Wheelchair Van Mileage Band 1 \$11.23 Mileage Band 2 \$21.02 Mileage Band 3 \$28.63		Adult Day Service NMT - Wheelchair Van Mileage Band 1 \$12.35 Mileage Band 2 \$23.12 Mileage Band 3 \$31.49	A0130 U1, HB A0130 U1, TT, HB A0130 U1, TN, HB
	NMT - Mobility Van Mileage Band 1 \$9.46 Mileage Band 2 \$17.44 Mileage Band 3 \$25.95		NMT - Mobility Van Mileage Band 1 \$10.40 Mileage Band 2 \$19.18 Mileage Band 3 \$28.54	A0120 U1 A0120 U1, TT A0120 U1, TN
	NMT - Wheelchair Van Mileage Band 1 \$11.23 Mileage Band 2 \$21.02 Mileage Band 3 \$28.63		NMT - Wheelchair Van Mileage Band 1 \$12.35 Mileage Band 2 \$23.12 Mileage Band 3 \$31.49	A0130 U1 A0130 U1, TT A0130 U1, TN
Non-Medical Transportation – Members enrolled in the	Adult Day Service NMT - Mobility Van Mileage Band 1 \$9.46 Mileage Band 2 \$17.44	10	Adult Day Service NMT - Mobility Van Mileage Band 1 \$10.40 Mileage Band 2 \$19.18	A0120 U1, SC, HB A0120 U1, SC, TT, HB

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Service	Current Rate	% increase	New Temporary Rate Loaded on PAR	New Temporary Code or Impacted Code
Spinal Cord Injury (SCI) Waiver	Mileage Band 3 \$25.95 Adult Day Service NMT - Wheelchair Van Mileage Band 1 \$11.23 Mileage Band 2 \$21.02 Mileage Band 3 \$28.63 NMT - Mobility Van Mileage Band 1 \$9.46 Mileage Band 2 \$17.44 Mileage Band 3 \$25.95 NMT - Wheelchair Van		Mileage Band 3 \$28.54 Adult Day Service NMT - Wheelchair Van Mileage Band 1 \$12.35 Mileage Band 2 \$23.12 Mileage Band 3 \$31.49 NMT - Mobility Van Mileage Band 1 \$10.40 Mileage Band 2 \$19.18 Mileage Band 3 \$28.54 NMT - Wheelchair Van	Code A0120 U1, SC, TN, HB A0130 U1, HB A0130 U1, TT, HB A0130 U1, TN, HB A0120 U1, SC A0120 U1, SC, TT A0120 U1, SC, TN
	Mileage Band 1 \$11.23 Mileage Band 2 \$21.02 Mileage Band 3 \$28.63		Mileage Band 1 \$12.35 Mileage Band 2 \$23.12 Mileage Band 3 \$31.49	A0130 U1, SC A0130 U1, SC, TT A0130 SC, U1, TN
Non-Medical Transportation – Members enrolled in the Supported Living Services (SLS) Waiver	Mileage Band 1 \$6.58 Mileage Band 2 \$13.77 Mileage Band 3 \$20.97	10	Mileage Band 1 \$7.24 Mileage Band 2 \$15.15 Mileage Band 3 \$23.06	T2003 U8 T2003 U8, 22 T2003 U8, TF
Specialized Habilitation – Members enrolled in the	Level 1 – \$2.57 Level 2 – \$2.83 Level 3 – \$3.15	10	Level 1 – \$ 2.83 Level 2 – \$ 3.11 Level 3 – \$3.46	T2021 U3, HQ T2021 U3, 22, HQ T2021 U3, TF, HQ

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Service	Current Rate	% increase	New Temporary Rate Loaded on PAR	New Temporary Code or Impacted Code
Developmental Disabilities (DD) Waiver	Level 4 – \$ 3.71 Level 5 – \$4.59 Level 6 – \$6.59 Level 7 – \$10.38 1:1 Individualized Service \$5.36 For all Support Levels		Level 4 – \$ 4.08 Level 5 – \$5.05 Level 6 – \$ 7.25 Level 7 – \$11.42 1:1 Individualized Service \$5.90 For all Support Levels <i>Effective 1/15/20</i>	T2021 U3, TF, 22, HQ T2021 U3, TG, HQ T2021 U3, TG, 22, HQ T2021 U3, HQ S5100 U3
Specialized Habilitation – Members enrolled in the Supported Living Services (SLS) Waiver	Level $1 - 2.57 Level $2 - 2.83 Level $3 - 3.15 Level $4 - 3.71 Level $5 - 4.59 Level $6 - 6.59 1:1 Individualized Service \$5.36 For all Support	10	Level $1 - 2.83 Level $2 - 3.11 Level $3 - 3.46 Level $4 - 4.08 Level $5 - 5.05 Level $6 - 7.25 1:1 Individualized Service \$5.90 For all Support	T2021 U8, HQ T2021 U8, 22, HQ T2021 U8, TF, HQ T2021 U8, TF, 22, HQ T2021 U8, TG, HQ T2021 U8, TG, 22, HQ S5100 U8
Supported Community Connections (SCC) – Members enrolled in the Developmental Disabilities (DD) Waiver	Levels Level 1 - \$3.13 Level 2 - \$3.42 Level 3 - \$3.87 Level 4 - \$4.44 Level 5 - \$5.35 Level 6 - \$7.03 Level 7 - \$10.38	10	Levels <i>Effective 1/15/20</i> Level 1 – \$ 3.44 Level 2 – \$ 3.76 Level 3 – \$4.26 Level 4 – \$ 4.88 Level 5 – \$5.88 Level 6 – \$ 7.73 Level 7 – \$11.42	T2021 U3 T2021 U3, 22 T2021 U3, TF T2021 U3, TF, 22 T2021 U3, TG T2021 U3, TG, 22 T2021 U3, SC

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Service	Current Rate	% increase	New Temporary Rate Loaded on PAR	New Temporary Code or Impacted Code
	1:1 Individualized Service \$7.03 For all Support Levels		1:1 Individualized Service \$7.73 For all Support Levels <i>Effective 1/15/20</i>	S5100 U3, HB
Supported Community Connections (SCC) – Members enrolled in the Supported Living Services (SLS) Waiver	Level 1 – \$3.13 Level 2 – \$3.42 Level 3 – \$3.87 Level 4 – \$4.44 Level 5 – \$5.35 Level 6 – \$7.03 1:1 Individualized Service \$7.03 For all Support Levels	10	Level 1 – \$ 3.44 Level 2 – \$ 3.76 Level 3 – \$4.26 Level 4 – \$ 4.88 Level 5 – \$5.88 Level 6 – \$ 7.73 1:1 Individualized Service \$7.73 For all Support Levels <i>Effective</i> $1/15/20$	T2021 U8 T2021 U8, 22 T2021 U8, TF T2021 U8, TF, 22 T2021 U8, TG T2021 U8, TG, 22 T2021 U8, SC S5100 U8, HB
Supported Employment – Members enrolled in the Developmental Disabilities (DD) Waiver	Job Coaching – Group Level 1 – $$3.44$ Level 2 – $$3.78$ Level 3 – $$4.20$ Level 4 – $$4.86$ Level 5 – $$5.79$ Level 6 – $$7.57$ Job Coaching- Individual \$14.20 Job Development – Group \$4.53	10	Job Coaching – Group Level 1 – \$3.78 Level 2 – \$4.16 Level 3 – \$4.62 Level 4 – \$5.35 Level 5 – \$6.37 Level 6 – \$ 8.33 Job Coaching- Individual \$15.62 Job Development – Group \$4.98	T2019 U3, HQ T2019 U3, 22, HQ T2021 U3, TF, HQ T2021 U3, TF, 22, HQ T2021 U3, TG, HQ T2021 U3, TG, 22, HQ T2019 U3, SC H2023 U3, HQ

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Service	Current Rate	% increase	New Temporary Rate Loaded on PAR	New Temporary Code or Impacted Code
	Job Development, Individual-Levels 1-2 \$14.20 Job Development, Individual-Levels 3-4 \$14.20 Job Development, Individual-Levels 5-6 \$14.20		Job Development, Individual-Levels 1-2 \$15.62 Job Development, Individual-Levels 3-4 \$15.62 Job Development, Individual-Levels 5-6 \$ 15.62	H2023 U3 H2023 U3, 22 H2023 U3, TF
Supported Employment – Members enrolled in the Supported Living Services (SLS) Waiver	Job Coaching – Group Level 1 – \$3.44 Level 2 – \$3.78 Level 3 – \$4.20 Level 4 – \$4.86 Level 5 – \$5.79 Level 6 – \$ 7.57 Job Coaching- Individual \$14.20 Job Development – Group \$4.53	10	Job Coaching – Group Level 1 – \$3.78 Level 2 – \$4.16 Level 3 – \$4.62 Level 4 – \$5.35 Level 5 – \$6.37 Level 6 – \$ 8.33 Job Coaching- Individual \$15.62 Job Development – Group \$4.98	T2019 U8, HQ T2019 U8, 22, HQ T2021 U8, TF, HQ T2021 U8, TF, 22, HQ T2021 U8, TG, HQ T2021 U8, TG, 22, HQ T2019 U8, SC H2023 U8, HQ
				H2023 U8

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Service	Current Rate	% increase	New Temporary Rate Loaded on PAR	New Temporary Code or Impacted Code
	Job Development, Individual-Levels 1-2 \$14.20 Job Development, Individual-Levels 3-4 \$14.20 Job Development, Individual-Levels 5-6 \$14.20		Job Development, Individual-Levels 1-2 \$15.62 Job Development, Individual-Levels 3-4 \$15.62 Job Development, Individual-Levels 5-6 \$ 15.62	H2023 U8, 22 H2023 U8, TF
Supported Living Program (SLP) – Members enrolled in the Brain Injury (BI) Waiver	Tier 1 – \$197.91 Tier 2 – \$229.62 Tier 3 – \$255.14 Tier 4 – \$304.12 Tier 5 – \$333.96 Tier 6 – \$369.67	8	Tier 1 – \$213.74 Tier 2 – \$247.99 Tier 3 – \$275.55 Tier 4 – \$328.45 Tier 5 – \$360.67 Tier 6 – \$399.24	T2033 U6 TU T2033 U6 HB TU T2033 U6 HE TU T2033 U6 HK TU T2033 U6 HB HE TU T2033 U6 HB HE TU T2033 U6 HB HK TU

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Billing Procedures for services with established rates:

Claims Paid to Date:

 Providers who deliver the following services will need to adjust claims submitted and paid with Dates of Service on or after January 1, 2021. Claims do not need to be voided, just adjusted to the new rate. <u>Follow this link</u> to the Quick Sheet on how to Copy, Adjust, or Void a Claim.

Unbilled Claims:

- For claims for services that have not yet been billed, providers will need to submit new claims at the higher rates.
 - Group Residential Supports and Services (GRSS), except Level 7

Billing Procedures for services with member-specific rates:

- The Department will calculate the rate increase for these services, and load the new, temporary code onto each member's HCBS Prior Authorization.
- Providers should start checking for the existence of this temporary code the week of February 1, 2021.
- The temporary codes will be added to PARs on an ongoing basis by the Department.
- The earliest Date of Service for which these codes can be billed is January 1, 2021.
- Providers should use the Gainwell Provider Web Portal to obtain the rate for the code on the Prior Authorization or contact Gainwell's Provider Services Call Center to inquire about the new daily rate.

Claims Paid to Date:

- Providers for the following services will *not* need to adjust past claims in order to get the rate increase.
 - Alternative Care Facilities
 - Supported Living Program (SLP)
 - GRSS Level 7 Residential Services
- Providers will need to submit a claim that contains the new, temporary code for each service, which will reimburse the provider for the percentage increase of the rate.
- The earliest Date of Service for which these codes can be billed is January 1, 2021.

• Providers should use the Gainwell Provider Web Portal to obtain the rate on the code on the Prior Authorization, or contact Gainwell's Provider Call Center to inquire about the new daily rate or member allocation.

Unbilled Claims:

- Providers will need to bill two codes to get paid in full: one code for the existing, daily rate (entered on the PAR by case managers) and one code in order to get the temporary rate increase (entered on the PAR by the Department).
 - Alternative Care Facilities
 - Supported Living Program (SLP)
 - GRSS Level 7 Residential Services

Case Managers: Procedures for services with member-specific rates

- Temporary codes will be added to active, current HCBS PARs by the Department by February 1, 2021. No changes will be applied the PETI worksheet.
- The Department will continue to add temporary codes to HCBS Prior Authorizations not created by February 1, 2021 with service start dates before March 31, 2021.
- Case managers need not take action with respect to these temporary codes, and should not revise or edit the added lines so as to ensure proper provider reimbursement.
- This guidance applies to all PARs with these services on lines that are effective between January 1, 2021 and March 31, 2021.
- If case managers have questions about the appearance of lines on a PAR or how to perform revisions, they should contact <u>CCMHelpdesk@DXC.com</u>.

Additional References for this Document & Resource Links

- <u>Recommendations for Long-Term Care Facilities</u> (CDC)
- <u>Steps Healthcare Facilities Can Take Now to Prepare for Coronavirus</u> <u>Disease 2019 (COVID-19)</u> (CDC)
- FAQS for Healthcare Providers Regarding Medicare
 Billing and Payment (CMS)
- <u>Coronavirus Preparation and Response Toolkit</u> (Argentum)
- Interim Health Care Infection Prevention and Control Recommendations for Patients Under Investigation for Coronavirus Disease 2019 (COVID-19) (CDC)
- Handwashing Video (Ecolab)

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- <u>Information Regarding COVID-19</u> AHCA/NCAL (American Health Care Association / National Center for Assisted Living)
- <u>Handwashing 101</u> (ServSafe)

Follow the <u>CDC website</u> to keep up with the general trends and what's happening. Communicating with your <u>state health department</u> and watching local news will help you with specifics.

Attachment(s):

None

Department Contact:

HCPF_HCBS_Questions@state.co.us

Department COVID-19 Webpage:

https://www.colorado.gov/pacific/hcpf/COVID

For specific information, please call the CDPHE Call Center at 303-692-2700. For general questions about COVID-19: Call CO-Help at 303-389-1687 or 1-877-462-2911 or email COHELP@RMPDC.org, for answers in English and Spanish (Español), Mandarin (普通), and more.