COLORADO
Department of Health Care
Policy & Financing

Quarterly Report #6

Implementation of the American Rescue Plan Act of 2021, Section 9817

Enhancing Colorado's Home and Community-Based Services System through an Enhanced Federal Match

February 1, 2023

Submitted to: The Joint Budget Committee

Quarterly Report
October 2022- December 2022

Department of Health Care Policy & Financing
1570 Grant Street
Denver, CO 80203

February 1, 2023

The Honorable Rachel Zenzinger, Chair
Joint Budget Committee
200 East 14th Avenue, Third Floor
Denver, CO 80203

Dear Senator Zenzinger:

Enclosed please find the Department of Health Care Policy & Financing's (HCPFs) quarterly Implementation of the American Rescue Plan Act of 2021, Section 9817 report to the Joint Budget Committee.

Section 25.5-6-1804, C.R.S. requires the Department, commencing November 1, 2021 and occurring quarterly thereafter to report to the Joint Budget Committee concerning the status of expenditures pursuant to part 18. The report must include:

(a) The scope, intended impact, and amount of money disbursed from the money received pursuant to the "American Rescue Plan Act";

(b) A description of how the state department incorporated stakeholder feedback into plans for the disbursement of money; and

(c) An update as to the total amount of money disbursed from the money received pursuant to the "American Rescue Plan Act", the remaining amount of money, and the projected amount of anticipated federal financial participation.

HCPF submitted its initial proposal of American Rescue Plan Act (ARPA) Medicaid Home and Community-Based Services (HCBS) spending to the Centers for Medicare and Medicaid Services (CMS) on June 13, 2021. Since receiving Joint Budget Committee approval on September 21, 2021, Colorado also received conditional approval from CMS. Conditional approval simply entails the state's compliance with the applicable requirements set forth under section 9817 of the Act and fulfillment of the requirements as stated in State Medicaid Directors Letter # 21-003.

This report provides an update of current progress and continues a spirit of transparency for project operations. If you require further information or have additional questions, please contact the Department's Legislative Liaison, Jo Donlin, at Jo.Donlin@state.co.us or 720-610-7795.

Sincerely,

Kim Bimestefer
Executive Director

KB/JM

CC: Representative Shannon Bird, Vice Chair, Joint Budget Committee
        Representative Rod Bockenfeld, Joint Budget Committee
        Senator Jeff Bridges, Joint Budget Committee
        Senator Barbara Kirkmeyer, Joint Budget Committee
        Representative Emily Sirota, Joint Budget Committee
        Carolyn Kampman, Staff Director, JBC
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        Bettina Schneider, Finance Office Director, HCPF
        Bonnie Silva, Office of Community Living Director, HCPF
        Parrish Steinbrecher, Health Information Office Director, HCPF
        Jo Donlin, Legislative Liaison, HCPF

Colorado Spending Plan Quarterly Report to the Joint Budget Committee

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Key Takeaways

The Department continues to complete the milestones for implementation of our 63 initiatives outlined in our HCBS ARPA spending plan. This quarterly report provides a comprehensive update on our progress since the last report submission. All new content is colored in blue font. Since our last quarterly report, the Department has:

- Initiated close-out procedures for the first of 63 ARPA HCBS projects. This is in the final steps with full project closure anticipated by mid-January 2023;
- Been recognized by ADvancing States for our state's work on the ARPA HCBS initiatives. Colorado will receive technical assistance in the development of detailed sustainability plans for select initiatives;
- Engaged stakeholders by hosting two general webinars and 24 project-specific meetings, and published 3 newsletters to inform about, and gain input on, the Department's ARPA HCBS projects;
- Hired 58 of the 59 term-limited positions to support the work;
- Executed 45 contracts to assist with Phase 1-4 projects;
- Completed a risk assessment survey on all 63 ARPA projects as part of a risk assessment and monitoring process with an external vendor to ensure oversight, monitoring and compliance with federal and state regulations;
- Executed 24 grantee agreements with a contracted grant financial vendor who supports the implementation and oversight of nearly 10 large-scale grant initiatives.

Introduction

The Colorado Department of Health Care Policy & Financing (Department) continues to make significant progress towards implementation of the state's American Rescue Plan Act (ARPA) Medicaid Home and Community-Based Services (HCBS) spending plan. The Department remains focused on the goals laid out in our initial plan:

- To supercharge existing initiatives
- Support the COVID-19 response and recovery
- Foster innovation and long-term transformative change
- Increase quality and fiscal stewardship

The 64 projects the Department is supporting through these funds are focused on improving access to community-based services and supports, strengthening the provider network, and investing in the critical workforce providing the services. The initiatives will also improve access by expanding availability of services, streamlining

processes and enhancing quality for members and their families. These initiatives fall into the following eight categories:
1. Strengthen the Workforce & Enhance Rural Sustainability
2. Improve Crisis & Acute Services
3. Improve Access to HCBS For Underserved Populations
4. Support Post-COVID Recovery & HCBS Innovation
5. Strengthen Case Management Redesign
6. Invest in Tools & Technology
7. Expand Emergency Preparedness
8. Enhance Quality Outcomes

Since our last report, submitted on November 1, 2022, all of the 63 projects are actively underway and, with the exception of one, have finalized project plans which include detailed timelines and deliverables. One additional project has been added, moving the total number of initiatives to 64. Teams continue mapping out their stakeholder engagement plans, with many engagements underway. The ARPA project support team continues to develop resources and tools to support the project teams leading the work. The team is fully leveraging the project management software and uses dashboards to ensure consistent tracking of progress and monitoring for risks or issues.

Between October and December 2022, the Department hosted two stakeholder meetings attended by providers, advocates, members, and families to continue to keep them informed on the overall progress across our ARPA HCBS initiatives and to garner feedback and recommendations. In addition to these large stakeholder webinars, project-specific engagement continues. The Department also continues to leverage the ARPA HCBS webpage as a method of communication and transparency and has released three new ARPA Project Pulse Newsletters, a monthly update for stakeholders on the status of ARPA initiatives and upcoming engagement opportunities.

As a reminder, a [State Medicaid Director's Letter](#) was sent on June 3, 2022 by the Centers for Medicare and Medicaid Services announcing changes to the ARPA HCBS spending timeline and reporting requirements. CMS is allowing for a one-year extension for states to spend the 10% enhanced FMAP funds allowed under ARPA Section 9817. Spending now must conclude on or before March 31, 2025, instead of the previous end date of March 31, 2024. The Department is leveraging a portion of this additional time and will conclude all spending by December 31, 2024.

The Department utilized the established extension request process to review and approve individual projects that felt that they needed the additional time in order for their initiative to reach its full success. All project teams were encouraged to maintain their initial timeline and project schedule unless there were substantial risks to underspending or not successfully completing the project by the original deadline of March 31, 2024. To date, 28 projects (**table 1**) have requested and received approval to change their project completion date to December 31, 2024. A total of 3 projects have been approved to extend but with completion dates between March and December 2024. The scope of these projects is not changing, nor are the budgets, they are only extending their end date to ensure successful completion of project goals. We anticipate that a small number of additional projects may request to extend their timeline over the next several months. These additional extension requests would be made based on unexpected barriers that emerge that threaten the ability of the team to complete on the original timeline. In addition to the project timeline extension, teams were also able to request an extension of their term-limited staff from the original end date of March 2024. Of the 58.5 total term-limited FTEs supporting ARPA HCBS initiatives and efforts, 36.5 FTEs were approved to be extended beyond March 31, 2024. 34.5 FTEs will extend until December 31, 2024 and 2 will extend to earlier dates. These FTEs include those assigned to specific projects, as well as administrative staff, such as budget, accounting, procurement, and project management, all who will support the project and spending close-out. These requested staff extensions are included in the Department's supplemental budget request.

Table 1. Initiatives with Approved Extended Timelines

Project #	Project Name
1.05	Establish a Training Fund
1.06	Career Pathways
2.01	Behavioral Health Transition and Support Grants
2.02	Expand Behavioral Health Crisis Teams
3.04	HCBS Training for Members & Families
3.05	Translation of Case Management Material
3.06	Expand the Behavioral Health Safety Net
3.07	Wrap-Around Services

3.08	AI/AN Culturally Responsive Services Capacity Grants
4.02	Promote Single Occupancy
4.03	Child/Youth Step Down Options Program and Provider Recruitment
4.05	Pilot CAPABLE
4.10	Home Modification Enhancements
4.12	Community First Choice
5.01	Case Management Capacity Building
5.02	Improve & Expedite LTC Eligibility Processes
5.05	Case Management Agency Training Program
6.01	Home Health/PDN Acuity Tool
6.03	Member Facing Provider Finder Tool
6.06	Provider Digital Transformation & EHR Upgrades
6.08	Care & Case Management System Investments
6.10	Member Data Sharing
6.11	Centers for Excellence in Pain Management
6.12	Systems Infrastructure for Social Determinants of Health
6.16	Eligibility System Improvements
7.02	Member Emergency Preparedness
8.04	P4P for PACE
8.06	PACE Licensure

As a reminder, also included in the June 3, 2022 State Medicaid Directors letter, was a change to the ARPA HCBS reporting requirements. Both a budget and narrative report were required to be submitted 75 days before the start of the October 1, 2022 federal fiscal quarter (submitted to CMS on July 18, 2022). Following that summer submission, states are only required to submit a budget update to CMS on a quarterly basis and a narrative every other quarter. In the event that changes are requested to project scopes, or if new projects are proposed, then a narrative report should also be submitted in the off quarters. Given this change in reporting cadence, the

Department only submitted a budget report and abbreviated narrative report to the Joint Budget Committee on November 1, 2022. This will continue every other quarter to coincide with the new CMS reporting schedule. Full reports, such as the report provided herein, will be provided bi-annually, with the next full report provided August 1, 2023.

Included within this report is an update to Colorado's initially submitted ARPA HCBS Spending Plan. All new content added since our previous report, are in blue text for ease of identification. Detailed updates on each of our 64 (one new project has been added since our last report) are provided in the Appendix.

Budget Overview

The **'Supplemental Document 1-1-2023'** attached provides projected and actual spending amounts for each of Colorado's planned activities and significant updates including an updated forecast for expenditures and the identification of additional funds to reinvest.

Expenditure Overview
As shown in **table 2**, the Department estimates it has spent $11.9 million on projects that do not include rate increases, with a total of $40.5 million encumbered or allocated. Expenditures identified in this category include contracts, grants, administrative costs, etc. We have seen a significant ramp-up during the first half of this fiscal year with contracts being executed and grants awarded.

Additionally, the Department estimates that it has spent $84.6 million on rate increases through December 31, 2022. The Department has also estimated the remainder of these rate increases over the course of the fiscal year and anticipates an additional $158.1 million will be spent.

Table 2. HCBS Funding Overview

Project Area	Total Current Budget	Encumbered/ Allocated*	Estimated Amount Spent
Spending Plan Projects Excluding Rate Increases	$289.8M	$40.5M	$11.9M
Spending Plan Rate Increases	$262.5M	$158.1M	$84.6M
Total	**$552.3M**	**$198.6**	**$96.5M**

Encumbered/Allocated amounts do not include expended amounts; rather, they reflect executed contract amounts that have not yet been spent and rate increases that are built into the claims payment system through the allocated time period.

Additional Funds for Reinvestment and Revised Estimates

As previously shared, we have had lower than anticipated billing for our 2.11% retroactive rate increase. The Department stopped any additional billing of the 2.11% retroactive rate increase as of November 18, 2022, which aligned with timely filing requirements. Additionally, the rate increase for the $15/hr base wage has not been billed at the rate expected in the Department's initial forecasts. This low billing aligns with lower than projected overall use of Home & Community Based Services as providers and members continue to rebound following the COVID-19 pandemic. Because of this, we have shored up our state spending authority through our submitted S-8/BA-8 supplemental budget amendment.

As discussed in the last report, the Department has identified an additional $36.6 million available for reinvestment through the finalization of enhanced match projections and the opportunity to draw down a larger federal match on technology projects. The Department received an additional $7.2 million in the 10% FMAP bump on top of the previously projected based on actual expenditure through March 2022. The Department also plans to claim enhanced federal match for some ARPA technology projects which will result in an additional $16.4 million in federal funds that can be drawn down by including four projects in the Advanced Planning Document (APD) process. The Department also reduced the expected amount for the across-the-board rate increases by $13.0 million based on lower-than-expected billing. The Department has developed a reinvestment plan as outlined in the S-8, BA-8, BA-7, R-7, R-10, and R-13 and accounted for small adjustments in service expenditure in the R-1. More information about the reallocation of these funds is also outlined below.

Given these funding changes, the Department has revised the forecast. The Department's current forecast estimates $552.3 million in expenditure to support enhancing, expanding, and strengthening our HCBS system, including $316.9 million from state funds and $235.3 million from matching federal funds. The funding will be spread out over four fiscal years as shown in **table 3** below. With the recent extension allowed by CMS, the spending will now continue into FY2024-25, with all spending concluding in December 2024.

Table 3. Revised Planned Spending by Year

Total	FY 2021-22	FY 2022-23	FY 2023-24	FY 2024-25
$552.3 million	$86.8 million	$331.7 million	$124.9 million	$8.9 million

Budget Changes and New Funds Requested

As outlined above, a reinvestment plan was submitted through both the supplemental budget process and the FY23/24 budget request process. These requested budget changes are outlined in **table 4** below. In addition to the project-specific budget changes, the Department also reviewed all prior assumptions around projects that would be eligible for administrative match. As part of this process, the Department also consulted with an external vendor who also reviewed the previous designation and made recommendations for some changes. The projects listed in **table 5** were re-determined to not be eligible for the administrative match and thus their budgets were adjusted to remove the federal share and make up the difference with state funds. One project that was determined to not be eligible for the administrative match is considering whether they will need their full budget. If it is determined that they will not need the full budget, their overall budget will be decreased (project 7.02 shown in table 5). All outlined budget changes are subject to approval by the Colorado Joint Budget Committee (JBC) and Centers for Medicare and Medicaid Services (CMS). More detailed information about these changes can be found in **Appendix 1** under the associated project.

Table 4. Project Budget Adjustments (October-December 2022)

Project Number	Project Name	Budget Change	Description
1.01	Increase Payments to Providers & Workers	+$33,989,203	With the extended ARPA timeline, the Department will pay for the initial implementation of new rate increases for HCBS providers starting on July 1, 2023.
1.02	Direct Care Workforce Data Infrastructure	-$114,357	Contract came in under budget so funds were available to shift money to support the needs of project 8.09.
3.03	Community Transitions	+$5,868,935	Funding to support community transitions and the nursing facility

	Support*		diversion process.
4.09	Respite Rate Enhancements	-$55,000	Determination was made that a contractor was not needed for this project, so those funds were used to support additional needs of project 6.03.
4.10	Home Modifications	-$1,500,000	Home modification enhancement requests have been slower than anticipated; budget decreased to account for lower forecast.
4.12	Community First Choice	+$122,539	Through the ARPA extension, add funding to extend the administrative expenses associated with this project as well as utilize funds to implement the Wellness Benefit associated with the program.
5.01	Case Management Capacity Building	+$5,615,473	Funds to create a grant program to support the start-up of new contracts as a result of Case Management Redesign (CMRD).
5.04	Case/Care Management Best Practices	+$60,000	Additional funds to pay the maintenance fees for the Learning Management System that will be utilized to house the training developed through this project for the duration of the ARPA extension.
6.03	Member Facing Provider Finder Tool	+$55,000	Cost estimates for system changes were too low; additional funds moved from project 4.09.
6.08	Care & Case Management System Investments	+$250,000	With the extended timeline to implement ARPA, the Department will add three new areas for enhancements in implementing the Care & Case Management System.

8.09	Waiver Quality Expansion	+$114,357	Additional funding needed to support expansion of waiver satisfaction survey distribution and analysis; funds moved from project 1.02.
9.01	Admin	+$2,000,000	With many projects extending their implementation timeline, the Department is adding funds for additional administrative activities and needs.
9.01	Admin	+$3,808,320	The Department has moved any extra funds into the budget for this project so they can be easily allocated to other projects based on need.

*New project

Table 5. Projects Determined Not Eligible for Administrative Match and Transitioned to State Funds Only

Project Number	Project Name	Additional State Funds
1.03	Standardized Core Curriculum & Specialization	$21,250
1.04	Resource & Job Hub	$375,000
1.06	Career Pathways	$299,822
1.07	Public Awareness Campaign	$206,000
3.07	Wrap-Around Services, including Peer Supports for Members with Complex Needs	$1,350,000
4.01	Residential Innovation	$540,935
4.11	Hospital Community Investment Requirements	$150,000
6.05	Member Tech Literacy (device purchase costs)	$6,000
7.02	Member Emergency Preparedness	$4,223,376

Note: The additional state funds included in table 5 indicates a subsequent decrease in federal funds.

Project Overview

The Department continues to make significant progress towards executing the 63 initiatives to enhance, expand and strengthen Colorado's HCBS system. Additionally, as indicated above, the Department has added one new initiative, project 3.03 Community Transitions Support. A complete listing of projects by phase and category may be found in **Tables 7-10**.

There have been scope changes made to five projects since our last report. Additionally, the Department has added one new project included below. These projects, as well as those that have had a change in their budget, are included in **Appendix 1**. Information is provided in the project description and status update sections for each of these projects in the Appendix. All scope and budget changes are subject to approval by the Colorado JBC and CMS.

- **Project 1.01 "Rate Enhancements for HCBS Providers"** has added additional rate increases to the project scope. With the extended timeline to implement ARPA, the Department will leverage ARPA HCBS for the initial implementation of new rate increases for HCBS providers starting on July 1, 2023. Without this funding, the rate increases would not be able to begin with state funding until October 1, 2023. Specifically, these rate increases include: increased rates for Case Management Agencies based on a rate analysis previously conducted, an increase in transportation rates for Intellectual and Developmental Disability waiver providers to align with the other waivers, an increase to Group Residential Support Services to reduce the budget neutrality factor applied to the rate and alignment of respite rates for the Children's Habilitation Residential Program and Children's Extensive Services waivers.

- **Project 3.03 "Community Transitions Support"** is a newly added project. With the additional funding and time to implement projects, the Department will execute a number of initiatives to address federal Department of Justice findings related to community transitions and the nursing facility diversion process. These include: implementing In-Reach counseling which will provide information to members living in nursing facilities about their options to live in the community in both a group and individual setting; implementing diversion and rapid reintegration activities during the nursing facility Level of Care screening to provide information on community living and help individuals plan

to move back to the community when appropriate; provide case management and care coordination for members that are identified to be at risk of institutionalization; increase the number of units of transition coordination services a member can use to transition to the community; increase the maximum transition set up cost to adjust for inflation and higher costs of goods needed to furnish a member's home; create an eligibility escalation process through one of the Department's eligibility contractors for cases needing immediate financial eligibility determination; expand housing navigation services to members who are at risk of institutionalization to provide support in identifying units and negotiating leases; align the home modification maximum resets across all waivers.

- **Project 5.01 "Case Management Capacity Building"** has expanded its scope given the extended timeline. The Department will create a grant program to support the start-up of new contracts as a result of Case Management Redesign (CMRD). This program will allow new Case Management Agencies to apply for funding through a competitive grant program for retention payments to keep case managers on board through the transition and start up and transition costs needed to get the new CMAs online and able to serve members faster.

- **Project 6.08 "Care & Case Management System Investments"** has added three new areas for enhancements to the Care and Case Management System. These areas include an adjustment to the system to account for a new rate structure for CMAs, adjustments to accommodate data from the CCM into the Department's data management system and enhancements to accommodate the new Person-Centered Budget Algorithm.

- **Project 4.12 "Community First Choice"** will expand its scope to include the implementation of the new Wellness Benefit associated with the program. The Wellness Benefit will send HCBS members information on a monthly basis to support their overall healthcare.

- **Project 8.02 "Provider Oversight"** has added a new component to the project. The Colorado Department of Public Health and Environment (CDPHE) manages and operates the COHFI system, which is their provider portal. The project team will work with CDPHE to modify COHFI to allow providers to pull down information necessary to complete key aspects of HCPF's provider enrollment and revalidation.

Stakeholder Engagement

The Department continues to keep stakeholders at the center of this work. To provide timely information and updates to stakeholders, the Department has developed a series of opportunities for ongoing interaction. Since our last report, the following activities related to stakeholder engagement have been undertaken:

- Continued maintenance of the ARPA HCBS webpages, including the very popular "Grant Opportunities" page, which provides easy access to information about grant opportunities and direct links to open Requests for Applications.
  - Analytics from November 20, 2022 - December 19, 2022:
    - 4,150 Total Pageviews (4% increase from last quarter)
    - 2,903 Unique Pageviews
    - Top 5 Subpages (in order of most views):
      - ARPA Grant Opportunities
      - Project Directory
      - Workforce & Rural Sustainability Projects
      - Support Post-COVID Recovery & HCBS Innovation
      - Support Post-COVID Recovery & Innovation Projects
- Released three editions of our Project Pulse monthly ARPA HCBS newsletter to share updates, highlight successes, and provide information about upcoming engagement opportunities
  - September/October 2022 Newsletter
  - November 2022 Newsletter
  - December 2022 Newsletter
- Through December 2022, 1,090 individuals are signed up to receive the Project Pulse ARPA HCBS newsletter (+13% since last quarter)
- Hosted two quarterly ARPA HCBS webinars and continued project-specific stakeholder engagement for select projects
  - 153 stakeholders participated in two ARPA HCBS webinars
- Project-specific engagement: 24 meetings with 1,973 total participants
  - For stakeholder engagement related to ARPA HCBS to date, the Department has conducted 109 meetings with a total of 6,367 attendees

Administrative Status & Hiring

The project teams leading the ARPA HCBS projects continue to meet at a regular cadence to ensure projects move forward as planned. Key priorities for these teams are executing contracts and monitoring project activities and milestones. Teams continue to develop stakeholder engagement plans to clearly outline the role of stakeholders and the method and timeline for engagement efforts. All but two phase 4 initiatives have a baselined project plan, including a finalized project timeline,

milestones, deliverables, and resources defined. The two remaining projects to be baselined include 6.16 "Eligibility Systems Improvements" and the new project 3.03 "Community Transitions Support". The scope definition of project 6.16 is currently in discussion to determine if the original scope should be executed or if a change is necessary that aligns with priorities associated with the Care and Case management (CCM) initiatives. Efforts are in progress to finalize these decisions so that timelines can be finalized and baselined. The second project that has not yet been baselined is the brand-new project, 3.03 Community Transitions Support. We anticipate that both will have finalized, baselined project plans in the next quarter.

During the last update, we announced the execution of a process to support teams with developing and tracking ongoing project performance metrics. This process included the creation of a metric repository in the project management tool, PWA (Project Web Access). This information will fulfill the need to report on how the teams are progressing toward the defined goals of each project. At the writing of this report, the project teams have defined nearly all metrics across the ARPA HCBS projects, with only the new project, 3.03, needing to still develop finalized metrics. The established metrics are now being actively collected and entered into the PWA tool to fulfill reporting requirements.

The ARPA Support Team is also launching a new effort to further build out the sustainability plans for each of the initiatives. Colorado was one of five states selected by ADvancing States to receive technical assistance to support the development of detailed sustainability plans for select initiatives. This technical assistance will begin in January 2023 and will continue through the Spring as the sustainability plans are finalized.

ARPA Project Support Team
With all but two of the 64 projects now having fully approved and baselined project plans, the Project Support Administrators (PSAs) continue working with the project teams to ensure project progression and success. The PSAs help schedule meetings, set agendas and take notes, track milestones and deliverables, document risks, issues and decisions, and provide every other week status updates on progress. This support team also continues to develop processes, systems, and tools to support all of the ARPA HCBS Project Teams.

Specific highlights of the ARPA Support Team's work since the last report include the following:
- Further developed the ongoing management and reporting structure for project progress, including refining the reporting dashboards by initiating work on a

new dashboard designed to highlight potential risks associated with overdue tasks, and expired risks, issues, and decisions
- Worked closely with project teams to develop and finalize more than 100 metrics across the ARPA projects that will enable the Department to capture and report on the outcomes of these important initiatives
- Supported project leads and teams in tracking project schedules, milestones, deliverables, and metrics
  - Conducted a thorough review and clean-up of all project schedules, milestones, risks and issues
- Assisted teams with completing the Risk Assessment survey, including uploading supporting documentation and material to be reviewed and assessed by the external contractor conducting oversight and monitoring
- Tracked information requests and reporting requirements for each of the Department's primary sponsors: the JBC, the Governor's Office, CMS, and Department Leadership

Project Team Hiring
Project leads, in collaboration with the ARPA Project Support Team and the Human Resources (HR) staff, continue to work to complete initial hiring of all 59 term-limited FTEs to support the implementation of the ARPA HCBS projects. As shown in **figure 1** below, the Department is nearly complete with all initial hiring of the ARPA term-limited FTE. All positions have been hired except for one, which was on hold until the team could appropriately staff the full unit. That position is now moving forward with hiring and is in the interview stage.

We anticipate some ongoing turnover as we continue to move forward with implementation of our ARPA HCBS project. The team has begun tracking each position as it requires rehiring to ensure it is moving through the hiring process quickly. Since July 2022, seven term-limited ARPA HCBS staff members have moved out of their hired position resulting in a 12% turnover rate. Of these seven staff, five accepted full-time permanent positions within the Department, while two left the Department entirely. Considering only those that left the Department, the turnover rate is reduced to only 2%. The Department sees these term-limited positions as an opportunity for individuals to get a foot in the door and encourages these staff to watch for openings that allow them to move into permanent roles. We are happy to see that thus far, this has been successful. As these individuals move into their new roles, they continue to support their ARPA HCBS project until their previous position can be filled.

Additionally, in collaboration with human resources, the ARPA support team has been engaging in discussions around retention strategies for these term-limited positions, understanding that as the projects move towards closure over the next two-years, there will be natural attrition. At the writing of this report, the team has included a request in the Supplemental Budget submission that will help address the known challenges with staff retention. The proposal includes retention payments for term-limited staff who remain in their role until their final day of employment, as well as payment for permanent project lead staff who have taken on additional responsibilities related to ARPA HCBS above and beyond their normal responsibilities. A detailed policy and procedure related to these retention payments is being drafted and reviewed, with the goal of a release date in the coming quarter following formal approval of the supplemental budget request. The team will also be developing guidance for project leads to consider their options at the time of a position separation. In some cases, it may not make sense to rehire for a position with a limited tenure, thus leveraging a temporary employee or a staffing agency may be an alternative solution.

Figure 1. Hiring Progress, All ARPA HCBS Positions as of December 31, 2022 (N=59)
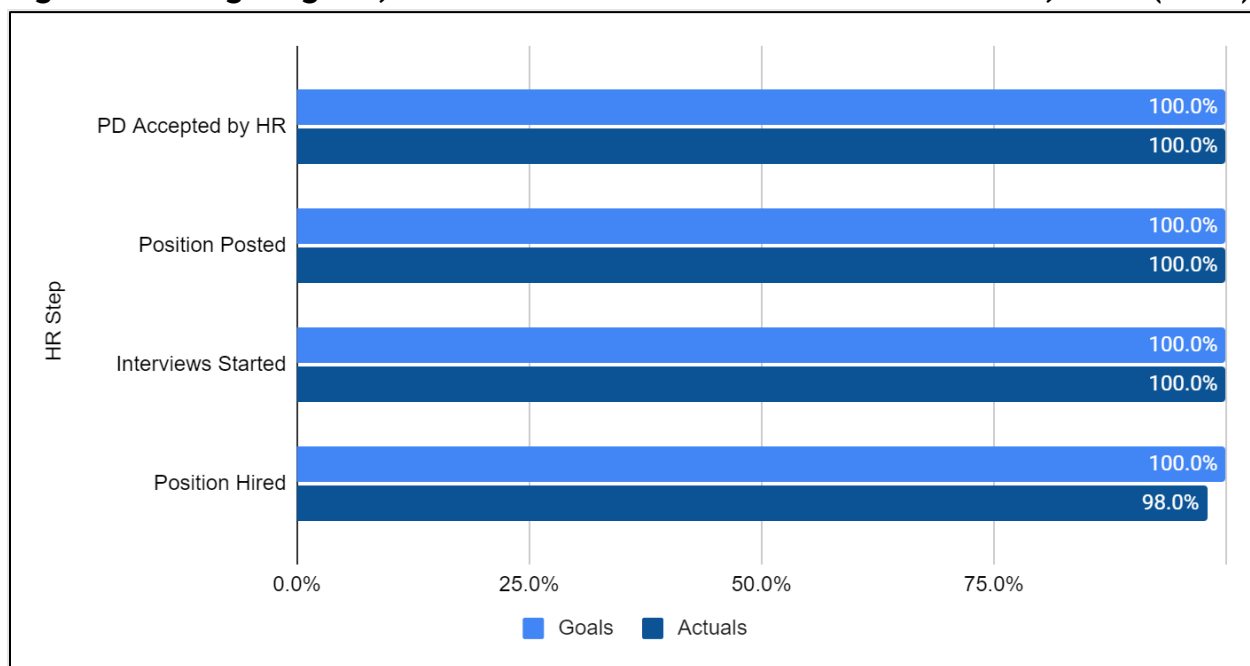
Procurement Status

The ARPA Project Teams have been working diligently to draft Statements of Work and move procurement processes along to ensure timely execution of needed contracts. 63 Scopes of Work (SOWs) have been submitted to procurement, of which

45 have executed contracts. This status is on track with our anticipated projections for progress related to procurement for projects.

Analytics & Project Tracking

The ARPA Project Support Team continues to refine the use of Microsoft Project, Project Web App (PWA) for all project planning. The team has also made updates and changes to Power BI dashboards for ease of internal management and oversight of project progress and as a reporting tool. In particular, the ARPA Support Team has further standardized the status update process to ensure consistency across project managers. Each project is provided with a narrative status update and an indicator of 'on track', 'watch', or 'needs help' in 8 areas every two weeks. The eight areas include: Overall Project, Budget, Schedule, Resources, Risks, Issues, Decisions, and Contract. A status matrix (**table 6**) was developed for project managers to follow to ensure uniformity across these updates. The PSA, in collaboration with the project team, assesses the project's status in the eight core areas shown in **table 6** under 'item'. For each item, the project is designated as being 'on track', 'watch', or 'needs help'. The PSA follows the description provided in the table to make that determination. For risks and issues, the PSA uses a risks and issues matrix and issues matrix to develop a score for the project's risks and issues. This score then informs the determination of the status. The standardization of this process provides assurance that the assessment of each project's progress is consistent across project managers, as well as gives leadership insight into various aspects of each of the 64 projects. The narratives, included with the project descriptions in **Appendix 1**, give context to the status and allow project teams to explain the current state of the project. Projects that are indicated to be in 'watch' or 'needs help' status for their overall project are required to develop an action plan which is presented to the ARPA leadership team and outlines how the project will quickly get back on track or what support is needed from leadership to push the project forward.

Table 6. Status Matrix

Item	On Track	Watch	Needs Help
Overall	Project or category is progressing according to plan. 2 (or less) project status categories (below) are Yellow.	Project or category is at risk, with a plan or opportunity to mitigate without impact. 3 (or more) project status categories (below) are Yellow.	Project or category is experiencing problems with impact; Leadership and/or management intervention is required. Any project status indicator (below) is Red.
Budget	Project budget is fully allocated or planned for AND Quarterly Cost Performance Index (CPI) is >= .90 and budget is on track as expected AND No anticipated budget adjustments needed	Project budget is fully allocated or planned for AND Quarterly CPI is .75 <> .90 OR Project may need budget adjustments (For example - estimated timeline changes, vendor cost differs from estimates, change in project need i.e. need a contract instead of system changes)	Project budget is not fully allocated or planned for OR Quarterly CPI is < .75 OR Project needs budget adjustment to move forward
Resource	Project is appropriately resourced by the Department	Department resources are constrained by other priorities (For example - Project lead leaves the Department, Project Lead is the lead for more than 2 projects without additional support, failed hiring, delayed solicitations)	Project does not have the resources necessary for success and needs support from HCPF leadership to resolve the resource constraint (For example - failed solicitation)
Schedule	Moderate, high, or significant task/schedule item overdue by <= 14 calendar days AND Project is set to be complete by approved end date	Moderate, high, or significant task/schedule item overdue by 15 - 29 days AND Project is set to be complete by approved end date	Moderate, high, or significant task/schedule item overdue by > 30 calendar days OR Project schedule pushes beyond approved end date
Contract	The Contractor communicates with the Department timely AND invoices are submitted appropriately AND Contractor resources are stable. AND Deliverables are submitted timely and are high quality	Contractor does not meet 1-2 of the items in the "On Track" category OR Contract does not meet more than 2 items in the "On Track" but concerns have been addressed with the contractor	Contract does not meet more than 2 items in the "On Track" category and requires Department intervention or action OR Contractor disputes contract
Decisions	Moderate, high, or significant decision overdue by <= 5 days	Moderate, high, or significant decision overdue by 5 - 10 days	Moderate, high, or significant decision overdue by > 10 days
Risks	No more than two Watch risks	3-4 Watch risks	Any Needs Help risks OR More than 4 Watch risks
Issues	No more than two Watch issues	3-4 Watch issues	Any Needs Help issues OR More than 4 Watch issues

The latest iteration of the Department's reporting dashboard is included below (**figure 2**). We anticipate this version will be modified as projects continue to advance in maturity.

Dashboard Guide:

The dashboards the Department is developing for this initiative includes the following functionality:

Section 1 displays a summary of the selected projects, providing a status of those projects as reported by the project manager. These statuses reflect the project's health from 'on track' to 'watch' to 'needs help'. Aggregate statuses of the selected projects are reported including Overall, Schedule, Resource, and Budget. For the project set selected, the project count and aggregate percentage complete are also displayed.

Section 2 displays information by project phase. As discussed in the report narrative, the project initiatives have been split into four different launch phases. This section displays the count and aggregate status of project health by phase. At the time of this writing, projects in phase 1 are underway, and phase 2 has recently launched.

Section 3 identifies the status of hiring by Tier over time. Specifically, this section tracks the PD posting date, the interview/recruiting process, and the offer and onboarding process.

Section 4 represents the individual project section from which aggregate data is drawn. It also shows a more detailed view of the individual project activity and the ability to access a more detailed project page.
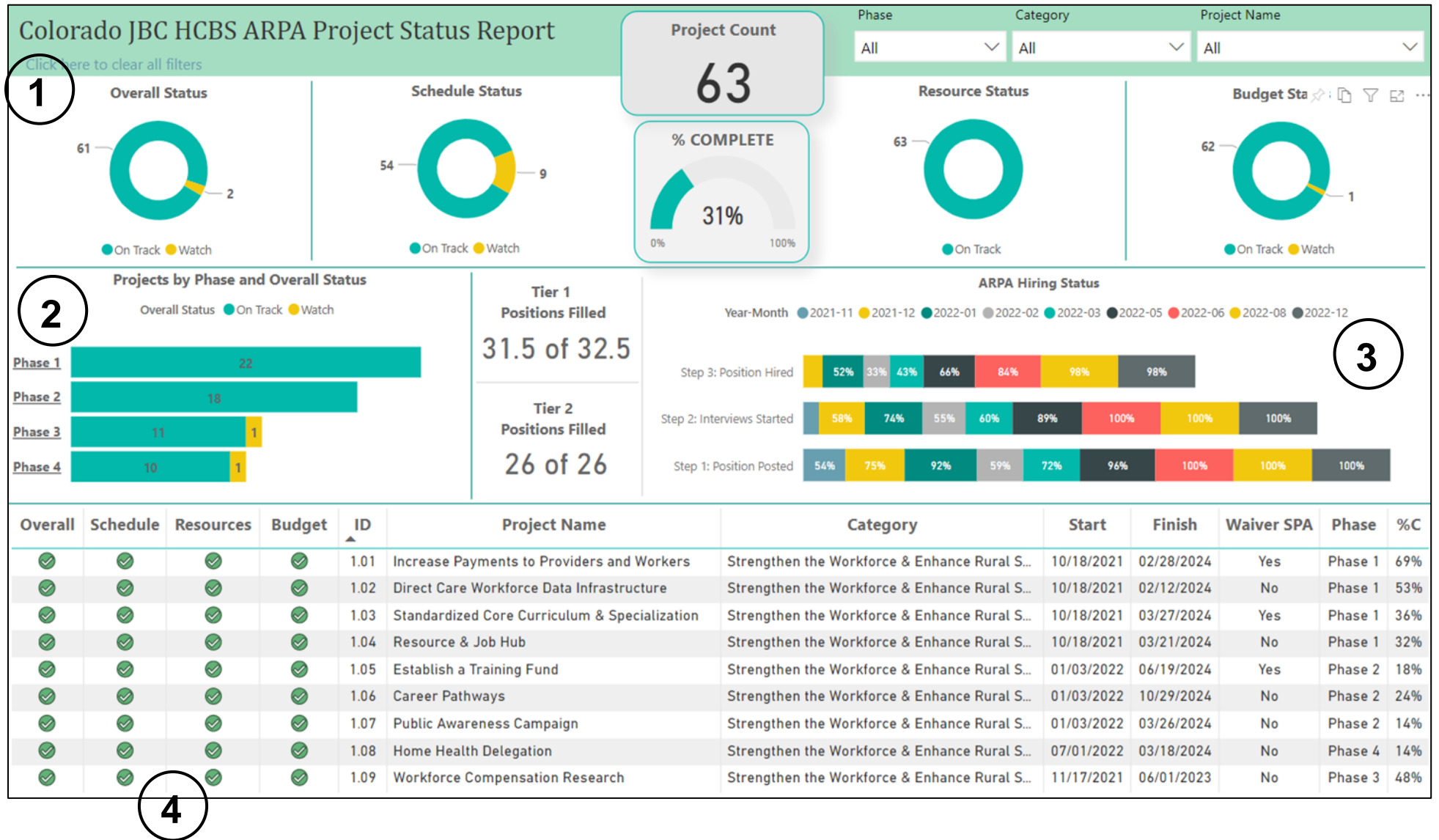
Figure 2. Dashboard: Project Reporting, page 1

Colorado JBC HCBS ARPA Project Status Report

Click here to clear all filters

Phase	Category	Project Name
All	All	All

Overall Status — 61 / 2 — On Track / Watch

Schedule Status — 54 / 9 — On Track / Watch

Project Count — 63

% COMPLETE — 31% (0% – 100%)

Resource Status — 63 — On Track

Budget Status — 62 / 1 — On Track / Watch

Projects by Phase and Overall Status

Overall Status ● On Track ● Watch

Phase 1	22
Phase 2	18
Phase 3	11	1
Phase 4	10	1

Tier 1 Positions Filled — 31.5 of 32.5

Tier 2 Positions Filled — 26 of 26

ARPA Hiring Status

Year-Month ● 2021-11 ● 2021-12 ● 2022-01 ● 2022-02 ● 2022-03 ● 2022-05 ● 2022-06 ● 2022-08 ● 2022-12

Step 3: Position Hired — 52% 33% 43% 66% 84% 98% 98%

Step 2: Interviews Started — 58% 74% 55% 60% 89% 100% 100% 100%

Step 1: Position Posted — 54% 75% 92% 59% 72% 96% 100% 100% 100%

Overall	Schedule	Resources	Budget	ID	Project Name	Category	Start	Finish	Waiver SPA	Phase	%C
✓	✓	✓	✓	1.01	Increase Payments to Providers and Workers	Strengthen the Workforce & Enhance Rural S...	10/18/2021	02/28/2024	Yes	Phase 1	69%
✓	✓	✓	✓	1.02	Direct Care Workforce Data Infrastructure	Strengthen the Workforce & Enhance Rural S...	10/18/2021	02/12/2024	No	Phase 1	53%
✓	✓	✓	✓	1.03	Standardized Core Curriculum & Specialization	Strengthen the Workforce & Enhance Rural S...	10/18/2021	03/27/2024	Yes	Phase 1	36%
✓	✓	✓	✓	1.04	Resource & Job Hub	Strengthen the Workforce & Enhance Rural S...	10/18/2021	03/21/2024	No	Phase 1	32%
✓	✓	✓	✓	1.05	Establish a Training Fund	Strengthen the Workforce & Enhance Rural S...	01/03/2022	06/19/2024	Yes	Phase 2	18%
✓	✓	✓	✓	1.06	Career Pathways	Strengthen the Workforce & Enhance Rural S...	01/03/2022	10/29/2024	No	Phase 2	24%
✓	✓	✓	✓	1.07	Public Awareness Campaign	Strengthen the Workforce & Enhance Rural S...	01/03/2022	03/26/2024	No	Phase 2	14%
✓	✓	✓	✓	1.08	Home Health Delegation	Strengthen the Workforce & Enhance Rural S...	07/01/2022	03/18/2024	No	Phase 4	14%
✓	✓	✓	✓	1.09	Workforce Compensation Research	Strengthen the Workforce & Enhance Rural S...	11/17/2021	06/01/2023	No	Phase 3	48%

Figure 2. Dashboard: Project Reporting, page 2

Colorado JBC HCBS ARPA Project Status Report (Page 2)

Overall	Schedule	Resources	Budget	ID	Project Name	Category	Start	Finish	Waiver SPA	Phase	%C
✓	⚠	✓	✓	1.10	Rural Sustainability Plan	Strengthen the Workforce & Enhance Rural ...	10/18/2021	01/03/2024	No	Phase 1	22%
✓	✓	✓	✓	2.01	Behavioral Health Transition Support Grants	Improve Crisis & Acute Services	01/03/2022	11/29/2024	No	Phase 2	31%
✓	✓	✓	✓	2.02	Expand Behavioral Health Crisis Teams	Improve Crisis & Acute Services	01/03/2022	11/26/2024	Yes	Phase 2	17%
✓	✓	✓	✓	2.03	IMD Exclusion, Risk Mitigation Policy	Improve Crisis & Acute Services	01/03/2022	01/22/2024	Yes	Phase 2	41%
✓	✓	✓	✓	3.01	Equity Study	Improve Access to HCBS for Underserved Po...	04/01/2022	01/03/2024	No	Phase 3	31%
✓	✓	✓	✓	3.02	Buy-In Analysis	Improve Access to HCBS for Underserved Po...	07/01/2022	10/06/2023	No	Phase 4	21%
✓	✓	✓	✓	3.04	HCBS Training for Members & Families	Improve Access to HCBS for Underserved Po...	11/17/2021	06/11/2024	No	Phase 3	29%
✓	✓	✓	✓	3.05	Translation of Case Management Material	Improve Access to HCBS for Underserved Po...	11/17/2021	10/25/2024	No	Phase 3	33%
✓	✓	✓	✓	3.06	Expand The Behavioral Health Safety Net	Improve Access to HCBS for Underserved Po...	10/18/2021	06/27/2024	Yes	Phase 1	38%
✓	✓	✓	✓	3.07	Wrap-Around Services, including Peer Supports ...	Improve Access to HCBS for Underserved Po...	10/18/2021	12/27/2024	Yes	Phase 1	20%
✓	✓	✓	✓	3.08	AI_AN Culturally Responsive Services Capacity ...	Improve Access to HCBS for Underserved Po...	04/01/2022	11/26/2024	No	Phase 3	8%
✓	✓	✓	✓	4.01	Residential Innovation	Support Post-COVID Recovery and HCBS Inn...	01/03/2022	03/29/2024	No	Phase 2	26%
✓	✓	✓	✓	4.02	Promote Single Occupancy	Support Post-COVID Recovery and HCBS Inn...	07/01/2022	12/16/2024	No	Phase 4	11%
✓	✓	✓	✓	4.03	Child Youth Step-Down Options Program and Pr...	Support Post-COVID Recovery and HCBS Inn...	10/18/2021	11/26/2024	Yes	Phase 1	19%
✓	✓	✓	✓	4.04	Tiered Residential Rates & Benefits	Support Post-COVID Recovery and HCBS Inn...	01/03/2022	11/07/2023	No	Phase 2	35%
✓	✓	✓	✓	4.05	Pilot CAPABLE	Support Post-COVID Recovery and HCBS Inn...	01/03/2022	11/25/2024	No	Phase 2	18%
✓	✓	✓	✓	4.06	Supported Employment Pilot Extension	Support Post-COVID Recovery and HCBS Inn...	10/18/2021	03/29/2024	No	Phase 1	32%
✓	✓	✓	✓	4.07	New Systems of Care	Support Post-COVID Recovery and HCBS Inn...	01/03/2022	03/26/2024	No	Phase 2	17%
✓	✓	✓	✓	4.08	Respite Grant Program	Support Post-COVID Recovery and HCBS Inn...	07/01/2022	03/29/2024	No	Phase 4	29%
✓	✓	✓	⚠	4.09	Respite Rate Enhancement	Support Post-COVID Recovery and HCBS Inn...	10/18/2021	07/18/2023	Yes	Phase 1	68%
✓	✓	✓	✓	4.10	Home Modification Budget Enhancements	Support Post-COVID Recovery and HCBS Inn...	10/18/2021	02/15/2024	Yes	Phase 1	47%
✓	✓	✓	✓	4.11	Hospital Community Investment Requirements	Support Post-COVID Recovery and HCBS Inn...	07/01/2022	03/29/2024	No	Phase 4	16%
✓	✓	✓	✓	4.12	Community First Choice	Support Post-COVID Recovery and HCBS Inn...	10/18/2021	11/13/2024	Yes	Phase 1	40%
✓	✓	✓	✓	5.01	Case Management Capacity Building	Strengthen Case Management Redesign	10/18/2021	03/28/2024	Yes	Phase 1	51%

Figure 2. Dashboard: Project Reporting, page 3

Colorado JBC HCBS ARPA Project Status Report (Page 3) (4)

Overall	Schedule	Resources	Budget	ID	Project Name	Category	Start	Finish	Waiver SPA	Phase	%C
✓	✓	✓	✓	5.02	Improve & Expedite Long-Term Care Eligibility …	Strengthen Case Management Redesign	04/01/2022	04/24/2024	No	Phase 3	51%
✓	!	✓	✓	5.04	Case Care Management Best Practices	Strengthen Case Management Redesign	10/18/2021	03/29/2024	No	Phase 1	37%
✓	✓	✓	✓	5.05	Case Management Agency Training Program	Strengthen Case Management Redesign	10/18/2021	05/10/2024	No	Phase 1	37%
✓	!	✓	✓	6.01	Home Health and PDN Acuity Tool	Invest in Tools & Technology	10/18/2021	07/05/2024	No	Phase 1	17%
✓	✓	✓	✓	6.02	Specialty Search in Provider Specialty Tool	Invest in Tools & Technology	04/01/2022	12/06/2023	No	Phase 3	31%
✓	✓	✓	✓	6.03	Member-Facing Provider Finder Tool	Invest in Tools & Technology	01/03/2022	03/07/2024	No	Phase 2	54%
✓	✓	✓	✓	6.05	Member Tech Literacy	Invest in Tools & Technology	01/03/2022	07/12/2024	No	Phase 2	32%
✓	✓	✓	✓	6.06	HCBS Provider Digital Transformation & EHR En…	Invest in Tools & Technology	10/18/2021	03/03/2025	No	Phase 1	26%
✓	✓	✓	✓	6.06b	County Cybersecurity	Invest in Tools & Technology	05/31/2022	07/24/2024	No	Phase 1	41%
!	!	✓	✓	6.07	Innovative Tech Integration	Invest in Tools & Technology	04/01/2022	05/31/2024	No	Phase 3	11%
✓	✓	✓	✓	6.08	Care And Case Management System Investmen…	Invest in Tools & Technology	10/18/2021	10/15/2024	No	Phase 1	65%
✓	!	✓	✓	6.09	Updates to SalesForce Database	Invest in Tools & Technology	10/18/2021	03/15/2024	No	Phase 1	38%
✓	✓	✓	✓	6.10	Member Data Sharing	Invest in Tools & Technology	04/01/2022	03/28/2024	No	Phase 3	31%
✓	!	✓	✓	6.11	Centers for Excellence in Pain Management	Invest in Tools & Technology	01/03/2022	05/13/2024	No	Phase 2	35%
✓	✓	✓	✓	6.12	Systems Infrastructure for Social Determinants…	Invest in Tools & Technology	10/18/2021	12/27/2024	No	Phase 1	38%
✓	✓	✓	✓	6.13	Connect CMAs to ADT Data	Invest in Tools & Technology	01/03/2022	02/23/2024	No	Phase 2	54%
✓	✓	✓	✓	6.14	Data Sharing with the SUA	Invest in Tools & Technology	07/01/2022	03/28/2024	No	Phase 4	34%
✓	!	✓	✓	6.15	Systems Communication Improvements Trails	Invest in Tools & Technology	01/03/2022	03/11/2024	No	Phase 2	41%
!	!	✓	✓	6.16	Eligibility Systems Improvements	Invest in Tools & Technology	07/01/2022	12/31/2024	No	Phase 4	0%
✓	✓	✓	✓	7.01	Emergency Response Plans	Expand Emergency Preparedness	07/01/2022	03/29/2024	No	Phase 4	20%
✓	✓	✓	✓	7.02	Member Emergency Preparedness	Expand Emergency Preparedness	07/01/2022	12/26/2024	No	Phase 4	15%
✓	✓	✓	✓	8.02	Provider Oversight	Enhance Quality Outcomes	04/01/2022	03/14/2024	Yes	Phase 3	12%
✓	✓	✓	✓	8.04	Pay for Performance for PACE	Enhance Quality Outcomes	01/03/2022	12/26/2024	Yes	Phase 2	38%
✓	✓	✓	✓	8.05	Pay for Performance for Home Health & Reside…	Enhance Quality Outcomes	04/01/2022	02/29/2024	No	Phase 3	19%
✓	✓	✓	✓	8.06	PACE Licensure	Enhance Quality Outcomes	10/18/2021	12/19/2024	Yes	Phase 1	32%

Figure 2. Dashboard: Project Reporting, page 4

Colorado JBC HCBS ARPA Project Status Report (Page 4) ④

Overall	Schedule	Resources	Budget	ID	Project Name	Category	Start	Finish	Waiver SPA	Phase	%C
✔	⚠	✔	✔	8.07	eConsult to Improve Quality	Enhance Quality Outcomes	07/01/2022	09/26/2023	No	Phase 4	10%
✔	✔	✔	✔	8.08	HCBS Provider Quality Dashboard	Enhance Quality Outcomes	01/03/2022	10/03/2023	No	Phase 2	51%
✔	✔	✔	✔	8.09	Waiver Quality Expansion	Enhance Quality Outcomes	07/01/2022	02/19/2024	No	Phase 4	26%
✔	✔	✔	✔	8.10	Criminal Justice Partnership	Enhance Quality Outcomes	04/01/2022	03/29/2024	No	Phase 3	26%
✔	✔	✔	✔	8.11	EPSDT Benefits Training	Enhance Quality Outcomes	01/03/2022	03/29/2024	No	Phase 2	27%

Appendix 1 provides more detailed information on all 64 projects. The project descriptions remain as initially reported with all updates indicated with blue font. A full list of projects can be found in **tables 7-10** below.

Oversight & Compliance

As stated in our previous quarterly report, the Department has taken a multi-prong approach to ensuring compliance with ARPA Section 9817 and other state and federal regulations. Our goals are to provide sufficient guidance while maintaining oversight of the 64 projects to mitigate potential risks.

The Department, with support from a contractor, has developed guidance material and training for projects teams to ensure that project plans, contracts, and policies are developed within regulatory guidelines. A project lead toolkit includes guidance for leads on general ARPA HCBS overview, procurement, budget and accounting, project management guidance and expectations, stakeholder engagement and developing and administering grants. This toolkit is updated regularly as new questions emerge from project teams or new guidance is developed. Additionally, the ARPA Support Team facilitates a bi-weekly grant project community of practice and bi-monthly project lead meetings, to ensure regular and consistent communication with project teams.

The Department continues to focus on oversight and compliance across the 64 initiatives currently underway. Several strategies to mitigate risk and adopt standardization of practices have been adopted. One strategy is the use of a grant financial vendor that is assisting with streamlining our grant management across projects. In collaboration with the Department, the vendor is responsible for developing and executing all grant agreements with grantees, processing invoices, and monitoring deliverables. This consistency in review and oversight is helping mitigate potential risk. The contractor is also monitored closely by the compliance monitoring contractor mentioned below to further reduce compliance risk. After a rigorous application review process, the grant financial vendor contract was awarded and executed with Public Consulting Group (PCG) on October 6, 2022, to provide this service. Work is well underway with initial meetings conducted with all ten ARPA grant project teams who will leverage the support of the grant financial vendor. There has been significant progress across seven of the ten grant programs that they will help manage, with a total of 32 grant awards underway, 24 of which have executed grant agreements at the writing of this report. Within the next month, another three grant projects are anticipated to have made award decisions and enter

this grant execution stage. PCG will provide invoicing webinars and office hours for all grantees as well as technical assistance support.

The Department is also working with KPMG to assist with oversight, compliance, and monitoring of the Department's projects. KPMG has completed their initial guidance review and has provided the Department with recommendations for improvements. The Department has an action plan in place to quickly adjust where changes are needed. Over the last quarter, KPMG developed and conducted the project-specific risk assessment, gathering information from each project team to determine the project's risk score. These scores will help inform the monitoring plan. For projects that are determined to be higher risk for compliance issues, the contractor will sample and review payments to ensure work completed is within ARPA Section 9817 and other guidelines, including subrecipient guidance at 42 CFR Part 200.332. The contractor will also provide feedback on the materials developed by the project teams, as well as the grant financial vendor, to ensure compliance is addressed consistently across the project timeframe. The initial draft risk scores for each project and the draft monitoring plan are currently under review with an anticipated start date for monitoring in January/February of 2023.

Projects by Phase, Category, and Identification

Legend: Project Category Color

Workforce & Rural Sustainability		Access for Underserved	
Crisis & Acute Services		Recovery & Innovation	
Case Management		Emergency Preparedness	
Tools & Technology		Quality	

Table 7. Phase 1 Projects

Project ID	Project Name	Project Category
1.01	Increase Payments to Providers and Workers	Strengthen the Workforce & Enhance Rural Sustainability
1.02	Direct Care Workforce Data Infrastructure	Strengthen the Workforce & Enhance Rural Sustainability
1.03	Standardized Core Curriculum & Specialization	Strengthen the Workforce & Enhance Rural Sustainability
1.04	Resource & Job Hub	Strengthen the Workforce & Enhance Rural Sustainability
1.10	Rural Sustainability & Investment	Strengthen the Workforce & Enhance Rural Sustainability
3.06	Expand the Behavioral Health Safety Net	Improve Access to HCBS For Underserved Populations
3.07	Wrap-Around Services, including Peer Supports for Members with Complex Needs	Improve Access to HCBS For Underserved Populations
4.03	Child/Youth Step-down Options Program and Provider Recruitment	Support Post-COVID Recovery & HCBS Innovation
4.06	Supported Employment Pilot Extension	Support Post-COVID Recovery & HCBS Innovation
4.09	Respite Rate Enhancement	Support Post-COVID Recovery & HCBS Innovation
4.10	Home Modification Budget Enhancements	Support Post-COVID Recovery & HCBS Innovation
4.12	Community First Choice	Support Post-COVID Recovery & HCBS Innovation
5.01	Case Management Capacity Building	Strengthen Case Management Redesign
5.03	Case Management Rates	Strengthen Case Management Redesign
5.04	Case/Care Management Best Practices	Strengthen Case Management Redesign
5.05	Case Management Agency Training Program	Strengthen Case Management Redesign
6.01	Home Health/PDN Acuity Tool	Invest in Tools & Technology
6.06	Provider Digital Transformation & EHR Upgrades	Invest in Tools & Technology
6.08	Care & Case Management System Investments	Invest in Tools & Technology
6.09	Updates to SalesForce Database	Invest in Tools & Technology
6.12	Systems Infrastructure for Social Determinants of Health	Invest in Tools & Technology
8.06	PACE Licensure	Enhance Quality Outcomes

Table 8. Phase 2 Projects

Project ID	Project Name	Project Category
1.06	Career Pathways	Strengthen the Workforce & Enhance Rural Sustainability
1.07	Public Awareness Campaign	Strengthen the Workforce & Enhance Rural Sustainability
1.05	Establish a Training Fund	Strengthen the Workforce & Enhance Rural Sustainability
2.01	Behavioral Health Transition Support Grants	Improve Crisis & Acute Services
2.02	Expand Behavioral Health Crisis Teams	Improve Crisis & Acute Services
2.03	IMD Exclusion, Risk Mitigation Policy	Improve Crisis & Acute Services
4.07	New Systems of Care	Support Post-COVID Recovery & HCBS Innovation
4.01	Residential Innovation	Support Post-COVID Recovery & HCBS Innovation
4.04	Tiered Residential Rates & Benefits	Support Post-COVID Recovery & HCBS Innovation
4.05	Pilot CAPABLE	Support Post-COVID Recovery & HCBS Innovation
6.15	Improvements - System Communication [Interface with Trails]	Invest in Tools & Technology
6.11	Centers for Excellence in Pain Management	Invest in Tools & Technology
6.05	Member Tech Literacy	Invest in Tools & Technology
6.13	Connect CMAs to ADT Data	Invest in Tools & Technology
6.03	Member-Facing Provider Finder Tool Improvement	Invest in Tools & Technology
8.11	EPSDT Benefits Training	Enhance Quality Outcomes
8.04	Pay for Performance for PACE	Enhance Quality Outcomes
8.08	HCBS Provider Quality Dashboard	Enhance Quality Outcomes

Table 9. Phase 3 Projects

Project ID	Project Name	Project Category
5.02	Improve & Expedite Long-Term Care Eligibility Processes	Strengthen Case Management Redesign
8.05	Pay for Performance for HH & Residential HCBS	Enhance Quality Outcomes
8.10	Criminal Justice Partnership	Enhance Quality Outcomes
8.02	Provider Oversight	Enhance Quality Outcomes
6.07	Innovative Tech Integration	Invest in Tools & Technology
6.02	Specialty Search in Provider Specialty Tool	Invest in Tools & Technology
6.10	Member Data Sharing	Invest in Tools & Technology
3.08	AI/AN Culturally Responsive Services Capacity Grants	Improve Access to HCBS For Underserved Populations
3.01	Equity Study	Improve Access to HCBS For Underserved Populations
3.04	HCBS Training for Members & Families	Improve Access to HCBS For Underserved Populations
3.05	Translation of Case Management Material	Improve Access to HCBS For Underserved Populations
1.09	Workforce Compensation Research	Strengthen the Workforce & Enhance Rural Sustainability

Table 10. Phase 4 Projects

Project ID	Project Name	Project Category
1.08	Home Health Delegation	Strengthen the Workforce & Enhance Rural Sustainability
3.02	Buy-In Analysis	Improve Access to HCBS For Underserved Populations
3.03	Community Transitions Support	Improve Access to HCBS For Underserved Populations
4.02	Promote Single Occupancy	Support Post-COVID Recovery & HCBS Innovation
4.08	Respite Grant Program	Support Post-COVID Recovery & HCBS Innovation
4.11	Hospital Community Investment Requirements	Support Post-COVID Recovery & HCBS Innovation
6.14	Data Sharing with the SUA	Invest in Tools & Technology
6.16	Eligibility Systems Improvements	Invest in Tools & Technology
7.01	Emergency Response Plans	Expand Emergency Preparedness
7.02	Member Emergency Preparedness	Expand Emergency Preparedness
8.07	eConsult to Improve Quality	Enhance Quality Outcomes
8.09	Waiver Quality Expansion	Enhance Quality Outcomes

Timeline and Next Steps

The Department has made significant progress in the implementation efforts for all ARPA HCBS initiatives. Nearly all hiring has been complete, with only one position which has been on hold, still needing to be hired. Many of our project teams have been working on executing contracts and beginning work with external vendors. Over the past quarter, seven grant projects have opened and since closed their request for application process, with 34 grantees being formally selected and awarded funds. Project teams are also well underway with stakeholder engagement activities to actively gather feedback and suggestions on project execution. Now that phase 4 projects have successfully launched, all of our 64 initiatives are actively moving forward. Nearly all the phase 4 project teams have approved their initiative's timelines, deliverables, and outcomes. Finally, over the next 3 months the project support team, in addition to continuing to assist with ongoing project management, will be hyper focused on implementation and collection of project performance metrics. These may include the collection and reporting of process, output, outcome, and member, family, and provider experience data to inform the initiative's progress towards success. Additionally, project teams will collect information about best practices and lessons learned. We are eager to share the successes and impacts of these projects as they move fully into the execution phase. The project teams will also be initiating work on detailed sustainability plans for those initiatives that will or hope to continue past the ARPA HCBS end date. We look forward to working collaboratively with ADvancing States through the ARPA HCBS TA Collective on this new and exciting effort.

The Department has included indicators for projects which promote equity and/or address social determinants of health (SDOH). For ease of identifying these projects, we developed a key of symbols included below.

Key 1. Social Determinants of Health & Equity Symbols

	Healthcare Access & Quality		Equity
	Economic Stability		Neighborhood & Built Environment
	Education Access & Quality		Social & Community Context

Appendix 1: Project Descriptions & Updates

1.   Strengthen the Workforce & Enhance Rural Sustainability

<u>Initiative 1.01. Increase Payments to Providers and Workers - Phase 1</u>

At the heart of the ARPA is the call to support the recovery for those most impacted by the COVID-19 pandemic. Older adults and people with disabilities, their families, and those that support them have been devastatingly affected by this virus and the full extent of the impact has yet to be felt. As we emerge from the pandemic, stabilizing the direct care workforce is the most immediate priority. For that reason, as of January 1, 2022, the Department, in collaboration with the Polis-Primavera administration, implemented a $15/hour base wage for Colorado's Medicaid, HCBS direct care workers and a rate increase for provider agencies.

A rate increase to accommodate a new $15 per hour base wage requirement for frontline staff providing direct hands-on care implemented on January 1, 2022, through April 15, 2023. The services targeted for this increase include:

- Adult Day
- Alternative Care Facility
- Consumer-Directed Attendant Support Services (CDASS)
- Community Connector
- Day Habilitation
- Homemaker
- In-Home Support Services (IHSS)
- Mentorship
- Personal Care
- Prevocational Services
- Residential Habilitation
- Respite Care
- Supported Community Connections
- Supported Employment
- Supportive Living Program

The Department understands that direct care workers' wages vary considerably across geography, provider type, and internally, depending on experience and length of employment. For this reason, the expectation will be that all direct care workers currently employed receive at least $15 an hour. All new Home and Community-Based

Services direct care workers hired after January 1, 2022, must also have a wage of at least $15 per hour.

In addition to the rate increase for the new base wage, the Department has also increased provider rates for the services listed above except for Consumer-Directed Attendant Support Services (CDASS), and adding Non-Medical Transportation, by 2.11% retroactively to April 1, 2021, and going forward through July 31, 2022.

To ensure stability across the long-term services and support continuum, case management will be increased by 2.11% from April 1, 2022, through June 30, 2023, pending federal approval. Additional adjustments will be made for the Program for All Inclusive Care for the Elderly (PACE) providers due to common policy changes within HCBS as well as a rate increase next calendar year.

Rate Enhancements for HCBS Providers
With the extended timeline to implement ARPA, the Department plans to pay for the initial implementation of new rate increases for HCBS providers starting on July 1, 2023. Without this funding, the rate increases would not be able to begin with state funding until October 1, 2023. Specifically, these rate increases include: increased rates for Case Management Agencies based on a rate analysis previously conducted, an increase in transportation rates for Intellectual and Developmental Disability waiver providers to align with the other waivers, an increase to Group Residential Support Services to reduce the budget neutrality factor applied to the rate and alignment of respite rates for the Children's Habilitation Residential Program and Children's Extensive Services waivers.

State Plan Amendment and Waiver Information
The Department received approval for an Emergency Preparedness and Response Appendix K (Appendix K) amendment on October 19, 2021 to allow for the 2.11% rate increase. Approval for the $15 per hour base wage through a rate increase for HCBS direct care workers was approved through Colorado's Appendix K amendment on November 5, 2021. Colorado subsequently submitted, and received approval on March 31, 2022, to extend the rate increases for both the 2.11% and $15 per hour base wage. The 2.11% provider rate increase remained effective until July 1, 2022, and the $15 per hour base wage was approved until 6 months post the end of the Public Health Emergency. As Colorado's Appendix K amendment is effective until July 1, 2022, the Department plans to submit a 1915(c)-waiver amendment to ensure the $15 per hour base wage continues long-term.

Sustainability Plan

Understanding that the ARPA funds have an end date, we are committed to identifying funds to ensure long-term sustainability of this effort. Included within the Department's Fiscal Year 2023-24 budget requests, with approval, is funding to sustain the $15 per hour base wage increase for all direct care workers employed by HCBS providers.

Status Update

- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 69% complete. The project tasks, deliverables and milestones are progressing as planned and remain on schedule.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- There is no contractor currently utilized in this project.
- **Budget Status:** *On track*- The project team reallocated unspent funds for this project to other services directly benefiting providers. Included in this was an additional $33,989,203 added to the budget for the Department to pay for the initial implementation of new rate increases for HCBS providers starting on July 1, 2023.
- **General Project Update:** This project is proceeding on schedule and possesses adequate resources. This project remained under budget due to lack of retroactive billing by providers. The project team implemented several strategies to encourage providers to retroactively bill for the enhanced rate. After careful consideration and a continued lack of retroactive billing, the project team reallocated unspent funds for this project to other services, directly benefiting providers.

Initiative 1.02. Direct Care Workforce Data Infrastructure - Phase 1

Under this project, the Department will expand the data infrastructure to better understand the current supply and demand for direct care workers and to track the impact of each investment strategy on recruitment, retention, and turnover. The Department will develop two surveys for the direct care workforce. The first survey will be a staff stability survey for providers of long-term services and supports (LTSS) waiver services and will include data collection on the number of direct care workers (DCWs) providing care, turnover rates of DCWs, percentage of DCWs that are full-time or part-time, DCW vacancy rates, and hourly wages for all DCWs. The second survey will be for direct care workers rather than the employers to determine, at a

minimum, their satisfaction with compensation, benefits, career advancement, training, and their overall satisfaction with their employment. This survey will evaluate why there is a workforce crisis among direct care workers and what the Department can do to address it. The surveys will be administered multiple times to supply comparative data. This project will fund the development of the surveys, data collection, and analysis. These surveys will assist in strengthening the data infrastructure in the short and long-term to better understand the workforce and evaluate the strategies outlined in this plan.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
Maintaining currency in understanding of the environment and motivations for employment in the direct care workforce will be critical to alleviating the shortages in this field. Beyond the initial project efforts, the Department intends to continue use of the tools and data infrastructure developed under this initiative. Surveys will be updated and used to maintain baseline data intended to inform direct care workforce efforts, recruitment and retention policies, and even skills-based career latticing.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently at 51%. The project tasks, deliverables and milestones are progressing as planned and remain on schedule.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The contractor is consistently meeting deliverables and the quality of work meets expectations.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget. Due to contracts coming in under budget, $114,357 was reduced from this budget.
- **General Project Update:** Project is on track. The first of two surveys is currently live. Prior, there was a draft survey administered to refine the actual survey. The first survey is set to close mid-January 2023. The second survey is planned for June of 2023.

Initiative 1.03. Standardized Core Curriculum & Specialization - Phase 1

The Department will develop a standardized curriculum and training program for homemakers and personal care workers to establish quality standards, as well as increasing specialized qualifications tied to wage increases. The Department will develop a homemaker and personal care worker curriculum to include modules on specialized topics, such as Alzheimer's disease and related dementias and mental and behavioral health care and make the training available for free in-person through a train-the-trainer model and online. Initial work has already been completed via the Training Advisory Committee per SB 19-238, "Improve Wages and Accountability Home Care Workers."

These trainings will be developed using a 'universal worker' structure, designed for use by individuals working in a variety of settings and with different populations. The modules will be adaptable depending on the employer, client, and worker's needs, and training certificates will be transferable across employers. Funding will support training development, creation and launch of the online training platform, hosting statewide train-the-trainer sessions, and pilot testing and evaluating the new curriculum. These trainings will 'live' on the newly created Resource & Job Hub (initiative 1.04) for sustainability and ongoing management.

State Plan Amendment and Waiver Information
The Department will review and submit a waiver amendment after development efforts are complete should training be deemed a condition of provider qualification.

Sustainability Plan
The Department recognizes that maintaining worker relevance, building skill sets, and advancing opportunities for the direct care workforce is critical to addressing the shortfalls in this employment segment. Education is one of the keys to this transformation. Once the training modules and structure have been developed, the Department is committed to maintaining the currency of the materials through intermittent curriculum updates and workforce validation.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 36% complete. The project tasks, deliverables and milestones are progressing as planned and remain on schedule.
- **Resource Status:** *On track*- Resources allocated for this project are adequate to meet goals and deadlines of this initiative.

- **Contract Status:** *On track*- The contractor is consistently meeting deliverables and the quality of work meets expectations.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget. $21,250 in state funds were added to this project budget to offset ineligibility for administrative match of federal funds.
- **General Project Update:** The project remains on track. The curriculum development contractor is currently working to identify providers that can support the pilot testing of the new curriculum. The contractor has also been engaging with stakeholders to inform the module content.

Initiative 1.04. Resource & Job Hub - Phase 1

The Department will create a resource, job search, and employer matching hub for direct care workers to ease their entry into the job. This funding will support the development of a website for the direct care workforce where interested individuals can go to receive information and resources about direct care positions, access free training, and view job boards to quickly be placed in positions. The newly developed personal care/homemaker training will be accessible through this site, and individuals who completed the training would be entered into a database for easy tracking of certification. The Department is partnering with our internal health information office and the State's Office of Information Technology to ensure long-term sustainability of the site.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
The Department is enthusiastic about launching this new resource to expand and embolden opportunities for the direct care workforce. Increasing the ease of navigation to employment paired with standardized skills validation (Initiative 1.03) is seen as a critical component to maintaining a sufficient and successful workforce. While the Department recognizes the inherent competition of this endeavor, it is looking to develop complementary relationships with employment partners and exploring additional options for continued maintenance and operations of these efforts beyond the ARPA funding period.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 32% complete. The project schedule, milestones, deliverables, and resources have all been established and approved by the project team.

- **Resource Status:** *On track-* The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track-* The project team has selected a contractor and the contract is currently working through the internal eclearance process.
- **Budget Status:** *On track-* The project team has no current concerns related to the project budget. $375,000 in state funds were added to this project budget to offset ineligibility for administrative match of federal funds.
- **General Project Update:** The project is on track. The contract was a bit delayed but is now in the final stages of approval and should be fully executed soon. The contractor does not believe the delays in the contracting process will jeopardize the timeline and deliverables initially planned.

Initiative 1.05. Establish a Training Fund - Phase 2
Note: *As of December 2021, this project has incorporated project 3.03 Disability Cultural Competency Training for Behavioral Health Providers under the scope of its efforts.*

Providing more training opportunities and incentives for workers to gain higher level skills would promote greater retention within the workforce. The Department will establish a training fund targeted to high-demand jobs and to support specialization and advancement opportunities for the HCBS workforce, including the behavioral health workforce. Funds may be distributed directly to the prospective or current worker, to the employer to provide the training to their employees, or to a training provider. Additionally, funds may be used to expand standard training provider resources or trainer availability where gaps exist. This project will also develop a disability-specific, culturally competent curriculum that includes the different types of disabilities and incorporates people's lived experiences to help providers understand diverse populations' perspectives. The training will include information, examples, and skill-building activities on how best to serve the disability community. Following the approval of additional funds for this project in March 2022, the scope of the project has been expanded to provide further training opportunities for the behavioral health workforce, with a particular focus on skill building, upskilling, and peer support. The goal of this fund is to provide short-term funding to incentivize and expand training opportunities for the HCBS workforce with the goal of increasing recruitment and retention.

State Plan Amendment and Waiver Information
The Department will submit waiver amendment documentation in support of program changes upon completion of cultural competency curriculum development should training be determined to be a condition of provider enrollment.

Sustainability Plan
The Department recognizes that addressing HCBS workforce shortages requires a multifaceted approach. Depending on the outcomes of this project effort, the Department will review feasibility for continuing enhanced training efforts on an ongoing basis and look to define best practices from that which is developed.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 27% complete. The project tasks, deliverables and milestones are progressing as planned and remain on schedule. The project has been approved for an extension through 07/31/2024. The project team is working to revise the schedule to align with the new end date and will re-baseline the full schedule once complete.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The contractor is consistently meeting deliverables and the quality of work meets expectations.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.
- **General Project Update:** The project is on track. The project team has posted the request for proposals for grant funding, which will remain open on a rolling basis. The first round of the grant cycle resulted in eight awardees. The second cycle has begun and will remain open. The individual grant application process is in development and will open up for applicants in the new year.

Initiative 1.06. Career Pathways - Phase 2

The Department will establish income-based, affordable pathways to build career advancement opportunities for the healthcare workforce. The Department will partner with the Colorado Community College System, the Department of Higher Education, and the Department of Labor and Employment to work on career development pathways for direct care workers. Additionally, the Department will work with Arapahoe Community College (ACC), who will assist with mapping career pathways. ACC's mapping efforts will focus on opportunities for youth, with a particular eye towards apprenticeships. This project will leverage the existing work within our sister agencies and incorporate the deliverable into ongoing initiatives.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
ARPA funding is being utilized to enhance and enrich the existing overall structure for our direct care workforce. In such, this effort is solely intended as a catalyst to propel efforts forward and for the continuation of these efforts to be borne by our sister agencies and workforce partners. The Department will maintain partner engagement to ensure workforce advancement efforts continue.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 24% complete. The project schedule, milestones, deliverables, and resources have all been established and approved by the project team. The project has been approved for an extension through 10/31/2024 and the schedule has been updated and rebaselined reflecting the new end date.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The contractor to support this project has been selected by the Department and is beginning work.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget. $299,822 in state funds were added to this project budget to offset ineligibility for administrative match of federal funds.
- **General Project Update:** The project is on track. Minor delays in finalizing the interagency agreements and those agencies' hiring processes led the team to extend the project's deadline to 10/31/2024. Mapping of direct care worker career pathways has already begun for EMTs, Nurses, and phlebotomists.

Initiative 1.07. Public Awareness Campaign - Phase 2

The Department will launch a public awareness campaign about the value and importance of the direct care workforce, as well as use the campaign to promote careers in the field, including opportunities to move into other allied health roles. The campaign will garner workforce pride as well as greater respect and appreciation for these positions, which will ultimately help with recruiting and retaining individuals into the field.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan

Changing perceptions of the roles and importance of the direct care workforce is integral to overcoming the shortages growing in this workforce segment. The Department recognizes that awareness and outreach are critical components of achieving this transition. The Department will assess the outcomes of campaign efforts and determine the level of importance and the feasibility of continuing awareness and other campaigns. Additionally, the campaign will direct individuals to the newly established Resource & Job Hub (initiative 1.04) which will serve as an on-going site available for information and resources about direct care for those interested in pursuing a career in the field.

Status Update

- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 14% complete. The project schedule, milestones, deliverables, and resources are under review.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The contractor to support this project is currently moving through the procurement process, but is slightly behind schedule.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget. $206,000 in state funds were added to this project budget to offset ineligibility for administrative match of federal funds.
- **General Project Update:** The project is on track. There were some delays finalizing the contract, but the contract is now in its final stage.

Initiative 1.08. Home Health Delegation - Phase 4

One way to expand the workforce in the home health field is to ensure that all workers are working at the top of their licenses. For example, Registered Nurses (RNs) may delegate skilled tasks to a Certified Nurse Aide (CNA) that they otherwise would not be able to perform. An RN provides training to the CNA to perform the skilled task and the task is then delegated to them, allowing a CNA to practice to the top of their license and potentially increase their wages, leading to longer-term retention. The Department will explore opportunities for further developing the home health workforce. This includes an environmental scan to identify care deserts, a survey to understand barriers, and subsequently, implementing solutions to increase delegation to this workforce, thereby enabling increased wages, retention, and recruitment. In addition, the Department will

provide incentive payments to home health agencies that provide innovative models of care, such as increased delegation.

State Plan Amendment and Waiver Information
If identified solutions change scopes of service or reimbursement methodologies, the Department will submit a State Plan Amendment to support these efforts long term.

Sustainability Plan
This one-time policy analysis will allow the Department to develop a formal strategy for whether and how these efforts will continue.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 14% complete. The project tasks, deliverables and milestones are progressing as planned and remain on schedule.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The project team has selected a contractor and is working on finalizing contract requirements.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.
- **General Project Update:** The project is currently on track with all tasks, except for the very minor delay related to the contract. The vendor has been selected and the team is currently working through finalization of the statement of work. This project is proceeding on schedule and possesses adequate resources.

Initiative 1.09. Workforce Compensation Research - Phase 3

Wages are not the only consideration in someone's decision to work in a certain field. The Department will research innovative opportunities for increasing compensation for the HCBS workforce in other ways. The Department will identify ways to provide childcare for direct care workers; explore funding for shift differentials; and identify other practices that could better support low-income workers, such as hiring retention specialists or case managers within home care agencies whose job is to support the frontline workers.

State Plan Amendment and Waiver Information

There are no state plan amendments or waivers required for this project.

Sustainability Plan
The scope of this effort is limited to research efforts. At the time of project completion, the Department will have a suite of potential actionable offerings and will review the scope of implementation options available.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track-* The project is currently 58% complete. The project tasks, deliverables, and milestones are progressing as planned and remain on schedule.
- **Resource Status:** *On track-* The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track-* The contractor is consistently meeting deliverables and the quality of work meets expectations.
- **Budget Status:** *On track-* The project team has no current concerns related to the project budget.
- **General Project Update:** The project is on track. The vendor has been conducting stakeholder engagement meetings and state interviews to collect data for the final research report.

Initiative 1.10. Rural Sustainability and Investment - Phase 1
Investing in rural communities to strengthen care access is critical in Colorado. This initiative will include implementation of three key strategies to ensure the sustainability of providers in rural communities, with the focused aim of strengthening and enhancing Colorado's Medicaid and HCBS workforce. These initiatives are especially targeted at bolstering Colorado's rural Medicaid and HCBS infrastructure, providers, and members. These strategies include: Identifying Care Gaps, Developing Geographic Modifiers, and Creating Shared Systems in Rural Communities.

The first of these strategies is to expand the provider network in rural communities by identifying gaps and potential opportunities for expansion. A care desert, also known as a medical desert, exists mostly in rural places and inner cities and leads to inequalities in health care. The federal government now designates nearly 80 percent of rural America as 'medically underserved'. About 20% of the U.S. population live in rural areas, but only 10% of doctors and other health care professionals operate in those regions, and that ratio is worsening each year. Additionally, a higher proportion of rural populations are made up of those over the age of 65.

The Department first needs more data and analysis on where there are care deserts and potential solutions in those areas. The Department will complete an environmental scan of Colorado's current HCBS provider network via a GIS heatmap; create a tool for the Department to update and track progress on a statewide level; identify gaps by waiver, service, and provider type; find out which populations are the most impacted; and give recommendations for provider or service expansion and solutions in a final report.

One way to help prevent a care desert is to pay providers differently by region to account for differences in cost structure, which would encourage more people to work in direct care professions in areas that are currently underpaid. The Department will design rates by geographic region to account for the cost differential associated with different locations. Geographic modifiers are intended to improve the appropriateness of Medicaid rates to providers by accounting for the differences in prices for certain expenses, such as clinical and administrative staff salaries and benefits, rent, malpractice insurance, and other defined costs. The Department is dedicated to identifying ways for implementing these proposed geographic rates if found advantageous in the Sustainability Plan.

The workforce shortage is particularly concerning in rural areas. The Department will research ways to partner with hospitals and rural health clinics to identify opportunities to share resources and/or more efficiently and creatively offer services in rural areas. The goal of this initiative is to increase access to services by setting up partnerships across hospitals, clinics, and HCBS providers to share certain resources between them. This may include using a coordinated pool of workers, training, personal protective equipment, or other resources. The Department, in partnership with the Office of eHealth Innovation, will identify areas that would benefit from this approach and recommendations on how to pursue and implement it. The Department will then set up a pilot program by finding members and providers to test out the model. The Department will evaluate the pilot by analyzing whether the desired outcomes were achieved, interviewing participants, and providing final recommendations on next steps and sustainability.

State Plan Amendment and Waiver Information
Not at this time. Once the rate proposal is developed and pilot efforts completed, the Department will assess the need for programmatic changes and submit any appropriate administrative process documentation.
Sustainability Plan

Upon reviewing the outcomes of these sustainability efforts, the Department will identify and address any necessary administrative and operational measures to support program longevity.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *Watch*- The project is 22% complete. The project schedule, milestones, and deliverables are delayed. The project team is actively working to get the project back on track.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The contractor to support this project has been selected by the Department and is beginning work.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.
- **General Project Update:** The project is on track with all tasks, except for a delay in the first deliverable related to the logistics of data sharing. The project team is in close contact with the contractor and data team and resolution is expected within a few weeks.

2.   Improve Crisis & Acute Services

Initiative 2.01. Behavioral Health Transition Support Grants to Prevent Institutionalization - Phase 2

Under this project, the Department will offer short-term grant funding for behavioral health crises and transition services to support higher acuity members moving from an institution, hospital, or corrections to the community, specifically focusing on increasing capacity for community-based care. The Department has created grants for local communities, including providers, non-governmental organizations, and counties, to implement programs that are specific to their behavioral health capacity needs and geographic area. Grantees may request funding for implementation projects that improve service delivery options for crisis and transition programs or create pathways that improve care transitions. Grant funds supporting the purchase of equipment and costs associated with infrastructure to build capacity will be allowable under this project. The focus will be on complex populations, with a history of institutionalization, and support step-down services specifically to help move individuals from inpatient to community settings. This grant

would prioritize transition services that serve those that are disabled due to a mental health diagnosis.

Lessons learned from prior Department work transitioning members from long-term care institutions with the Colorado Choice Transitions Program will inform the design of the grant program, as will extensive stakeholder engagement. Providers may request funding for program improvements, infection control, staff training, best practice implementation costs, regulatory compliance, and community integration.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
The Department intends to review the grant program outcomes to determine the efficacy of specific efforts and determine feasibility of inclusion into program operations.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 31% complete. The project tasks, deliverables and milestones are progressing as planned and remain on schedule. The project has been approved for an extension through December 31, 2024. The project team is working to revise the schedule to align with the new end date and will re-baseline the full schedule once complete.
- **Resource Status:** *On track*- The project team currently has all the needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The project team has identified the awardees for grant funds and is in the process of completing grant agreements with grantees.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.
- **General Project Update:** This project is proceeding on schedule and possesses adequate resources. The grant program was developed and the request for application was released in October 2022. The Department has received and scored applications and released funding awards in December 2022.

Initiative 2.02. Expand Behavioral Health Mobile Crisis Teams - Phase 2

The Department will supercharge activities related to the mobile behavioral health crisis teams, which offer an alternative to police or Emergency Medical Services (EMS) transport for a person in a mental health or substance use disorder crisis. Currently in Colorado there are differing practices, pilots, and approaches to behavioral health crisis calls.

The Department will provide funding in the form of grants to support this effort. To facilitate the awarding of these grants, the Department will work with the newly formed Behavioral Health Administration (BHA). Through an interagency agreement, and in collaboration with the Department, the BHA will amend the Administrative Services Organizations (ASOs) contracts with local mobile crisis providers to bring their services to a new federally defined standard. The ASOs will complete a readiness assessment to determine each Grantee's funding need and award funding based on the identified needs. The BHA will be responsible for distributing funds and monitoring progress including providing grant management and oversight and grant closeout. Additionally, the BHA will conduct ongoing needs assessments with providers to ensure funding is being used in a supplementary manner with a robust emphasis on sustainability. Grantees could utilize funding to start a program or to come into compliance by using funds for required staff training, increasing their capacity for 24/7 response, equipment, vehicle or telehealth purchases and potential technology needs. Funds would also be available to create more culturally responsive mobile crisis services in Colorado.

State Plan Amendment and Waiver Information
The Department is developing and plans to submit a waiver to CMS to authorize a universal mobile crisis benefit for Medicaid members by Sept. 30, 2022, via an external workstream for CMS Grant 2I2CMS331818-01-00.

Sustainability Plan
This project initiative will afford the opportunity to develop and refine alternative approaches to addressing emergency behavioral health needs. Recognizing both the importance and impact these initiatives will have, the Department is developing a benefit program to authorize universal mobile crisis benefits for Medicaid members.

Status Update

- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is 17% complete. The project tasks, deliverables and milestones are progressing as planned and remain on schedule. The project has been approved for an extension through December 31, 2024. The project team is working to revise the schedule to align with the new end date and will re-baseline the full schedule once complete.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The project team has selected a contractor and is working on finalizing contract requirements.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.
- **General Project Update:** This project is proceeding on schedule and possesses adequate resources. The team has conducted extensive stakeholder engagement with current and prospective mobile crisis providers. In conjunction with the BHA, the team has developed and distributed a readiness assessment to ASOs that will be used to determine funding allocations.

Initiative 2.03. Institute for Mental Disease (IMD) Exclusion, Risk Mitigation Policy - Phase 2

As a complement to the crisis service grant programs, the Department will explore the detailed policy and licensing requirements of different provision types that are federally prescribed when serving persons experiencing behavioral health crises. Colorado currently has a network of different facilities that can be used to assist a person in crises including Acute Treatment Units (ATU), Crisis Stabilization Units (CSU), emergency rooms, and when needed, traditional hospitalization. Both emergency rooms and hospitals come at higher costs, may lack behavioral health expertise, and may experience capacity issues to serve persons with medical needs when supporting persons in crises.

By contrast, ATUs and CSUs are especially adapted to behavioral health crises. However, to ensure the State's new model of care from crisis response to crisis service delivery is successful, there needs to be compliance work completed with ATUs and CSUs. Crisis units must operate in compliance with federal Institutes for Mental Disease (IMD) regulations to receive Medicaid funding. Currently these crisis units are unable to serve and/or receive reimbursement for members who make up most of all calls to the statewide Crisis Services hotline.

ATU and CSU facilities were not folded into the Department's recent child serving policy revisions to address the risk of being considered IMDs. Through this project, the Department will work to review these facilities, including their programming and campus structure, from a lens of IMD standards to identify ways to address any IMD concerns. If they are considered IMDs, Medicaid funding is completely restricted. These facility types are providing critical crisis services so this project will explore ways to mitigate the risk of these providers meeting the IMD criteria and how we can maintain their services, which could include a waiver, policy recommendations or other mitigation efforts. The Department will generate recommendations on how to mitigate IMD risk as the state promotes the use of ATUs and CSUs in lieu of hospitalization or institutionalization, including the costs and benefits of the State seeking an 1115 waiver.

State Plan Amendment and Waiver Information
After consultation with CMS, The Department has affirmed an approach that will not require an 1115 waiver. The Department still plans to utilize the recommendations received through stakeholder feedback to determine if an 1115 demonstration waiver to mitigate the risk of the providers meeting the IMD criteria would be beneficial.

Sustainability Plan
This one-time policy analysis will allow the Department to identify any ongoing supportive activities.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is 41% complete. The project tasks, deliverables and milestones are progressing as planned and remain on schedule.
- **Resource Status:** *On track*- The project team has experienced turnover among its ARPA term-limited FTE. Given the current progress underway and the capacity of other staff, the team decided that they will not refill the position specific to this project. Instead, the position will be repurposed to another project team in need of additional support. The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The contractor is consistently meeting deliverables and the quality of work meets expectations.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.
- **General Project Update:** This project is proceeding on schedule and possesses adequate resources. The contractor has been onboarded and has completed

deliverables related to the initial research and stakeholder engagement. The project team has been in conversation with CMS who affirmed the intended approach would not require an 1115 waiver. The Department, in conjunction with the contractor, are adjusting future deliverables to be responsive to the request for a formal proposal to submit to CMS outlining the intended approach.

3. Improve Access to HCBS For Underserved Populations

Initiative 3.01. Equity Study - Phase 3
Individuals receiving HCBS in Colorado are more likely to be white and English-speaking than the overall state population and general Medicaid population. It is unclear what is driving the disparity or how to create more equity in HCBS. This project would aid in better understanding who receives HCBS in Colorado and what services they receive, where the gaps are, and target outreach to ensure HCBS services are provided to all Coloradans who are eligible.

The study will address the following:
- Internal data analysis: Identify disparities in HCBS by analyzing enrollment and utilization data by race, ethnicity, language, and geography; develop a snapshot report that identifies disparities across the system to be presented to stakeholders in the community.
- External stakeholder feedback and recommendations: Based on disparities identified, contract with a vendor to gather feedback from stakeholders and write up recommendations.
- Implementation planning: Once recommendations are gathered, an internal team will put together an implementation plan to begin creating more equity in HCBS.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
Upon completion of the Equity Study, the Department will consider the options to operationalize inclusion efforts.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 31% complete. The project tasks, deliverables, and milestones are progressing as planned and remain on schedule.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The contractor to support this project has been selected by the Department and is beginning work.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.
- **General Project Update:** This project is proceeding on schedule and possesses adequate resources. The equity findings data report is currently in the final stages of editing. The contractor has produced a stakeholder engagement with a timeline to launch engagement in early 2023. This engagement will include both in-person and virtual meetings, as well as a survey.

<u>Initiative 3.02. Buy-In Analysis - Phase 4</u>

Many people with disabilities are interested in working. Health insurance coverage can have an important relationship to employment for people with disabilities. For example, persons with disabilities on Medicaid may be concerned that they will lose their Medicaid coverage if they enter or return to the workforce. Commercial or employer-based health insurance might not provide coverage for services and supports that enable people with disabilities to work and live independently such as personal assistance services. The purpose of the Medicaid buy-in program is to allow persons with disabilities to purchase Medicaid coverage that helps enable them to work. Through this initiative, the Department will research strategies to improve equity outcomes by analyzing the financial, population size, and demographic impacts of using less restrictive eligibility income and resource methodologies for individuals with disabilities. This project will also include targeted outreach to ensure individuals know about the buy-in program for members with disabilities who are working and how they are able to qualify and retain their assets.

State Plan Amendment and Waiver Information
Per Colorado Senate Bill 20-033, the Department is updating our Elderly, Blind and Disabled, Community Mental Health Supports (CMHS), Spinal Cord Injury (SCI), Supported Living Services (SLS), and Brain Injury (BI) waivers for an effective date of July 1, 2022 to include Buy-In for individuals over the age of 65. Though not specific to this ARPA project, this effort was part of the catalyst to moving forward with

additional efforts, to enhance opportunities for access to services for those who are actively working. The ARPA project described above does not include any state plan amendments or waivers. Once the analysis is complete, the Department will pursue any programmatic or administrative changes necessary to implement a new approach.

Sustainability Plan
Upon completion of the Buy-In Analysis, the Department will explore the feasibility of implementing proposed solutions for encouraging employment among individuals with a disability on a long-term basis.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 26% complete. The project schedule, milestones, deliverables, and resources are in progress, and the timeline is on track.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The project team has selected a contractor and is working on finalizing contract requirements.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.
- **General Project Update:** The project is on track. Project team is working on the statement of work for a selected vendor.

Initiative 3.03. Community Transitions Support - Phase 4

Colorado currently offers a transition services program that supports members transitioning from institutional settings to living in the community. However, the Department would like to utilize ARPA funds to start a number of initiatives aimed to improve the transition process and support members living in the community to stay in the community if they so choose. These initiatives would also support the Department's efforts to address federal Department of Justice findings related to community transitions and the nursing facility diversion process. With state funding approval for ongoing costs, the initiatives the Department plans to start with ARPA and continue with General Fund afterwards include:
- Implement In-Reach counseling which will provide information to members living in nursing facilities about their options to live in the community in both a group and individual setting. To support this effort the Department will also create standardized materials and training;

- Implement diversion and rapid reintegration activities during the nursing facility Level of Care screening to provide information on community living and help individuals plan to move back to the community when appropriate;
- Provide case management and care coordination for members that are identified to be at risk of institutionalization;
- Increase the number of units of Transition Coordination services a member can use to transition to the community;
- Increase the maximum Transition Setup cost to adjust for inflation and higher costs of goods needed to furnish a member's home;
- Create a new eligibility escalation process through one of the Department's eligibility contractors for cases needing immediate financial eligibility determination;
- Expand housing navigation services to members who are at risk of institutionalization to provide support in identifying units and negotiating leases;
- Align the home modification maximum resets across all waivers. There is currently a lifetime limit on the home modification benefit for members enrolled in the waivers for individuals who do not have intellectual and developmental disabilities, whereas the limit resets every five years for members enrolled in the waivers for individuals who have intellectual and developmental disabilities.

State Plan Amendment and Waiver Information
The Department will need waiver amendments to implement this project and may require a State Plan Amendment as well.

Sustainability Plan
The Department requested ongoing funding to support these initiatives through the state legislative process. If that request is not approved, the scope of this project would be significantly adjusted or removed from the ARPA spending plan.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is new and the project plan is being developed.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The project team has identified contracts that will need to be amended to implement this project.

- **Budget Status:** *On track*- The project team is waiting on state funding approval of $5,868,935 to ensure sustainability after the ARPA project end date.
- **General Project Update:** As a new project, this project is on track. The team is working to build project plans and baseline schedules. Plans are in place to secure funding and necessary approvals.

Initiative 3.04. HCBS Training for Members & Families - Phase 3

In addition to providing training for providers, the Department will develop and make available culturally competent training and resources for members and their families to assist with navigating the HCBS system. This will include providing education and support to family caregivers. The training project will provide information to members to help educate them on all waivers, navigate through the different waivers, and explain members' right to choose between service providers. The training would be member-focused, person-centered and in plain language for ease of use.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
The suite of developed training materials will be incorporated into the Department's currently available training resources for ongoing management and oversight.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 29% complete. The project schedule, milestones, deliverables, and resources have all been established and approved by the project team. The project has been approved for an extension through December 31, 2024. The project team is working to revise the schedule to align with the new end date and will re-baseline the full schedule once complete.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The project team has selected a contractor and is working on finalizing contract requirements.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.
- **General Project Update:** This project is proceeding on schedule and possesses adequate resources. The project team is working to identify materials to be

created and designing a successful dissemination strategy. This project consistently remains on track with resources utilized from other projects as well.

Initiative 3.05. Translation of Case Management Material - Phase 3

The Department does not currently have member-facing case management material translated into all necessary languages. The Department will translate public facing case management materials, such as waiver charts, waiver flow charts, specialized behavioral health programs and benefits, and other basic information about waivers and other long-term services and support programs, into multiple languages for members and caretakers to understand in their own language. This work would also take into consideration other accessibility needs such as hearing and vision impairments.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan

Recognizing the importance of inclusion for all programs, the Department is committed to ensuring developed materials are maintained and accessible beyond the ARPA funding period.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- This project is currently 33% complete. The project schedule, milestones, deliverables, and resources have all been established and approved by the project team. The project has been approved for an extension through December 31, 2024. The project team is working to revise the schedule to align with the new end date and will re-baseline the full schedule once complete.
- **Resource Status:** *On Track*- This project is staffed with adequate resources to complete by the projected timeline.
- **Contract Status:** *On track*- The contractor to support this project has been selected by the Department and is beginning work.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.
- **General Project Update:** This project is proceeding on schedule and possesses adequate resources. The project team is working through the finalized list of the first phase of materials to be translated and disseminated accordingly.

 <u>Initiative 3.06. Expand the Behavioral Health Safety Net - Phase 1</u>

 The Department has an opportunity with these funds to strengthen and expand the behavioral health safety net through provider training, workforce development, enhanced standards, high-intensity outpatient services, and value-based pay for performance models supporting whole-person care.

Over the past two years, the Department, in partnership with the RAEs, have aligned on a definition for high intensity outpatient services through a collaborative stakeholder engagement process. The safety net expansion effort will build upon and implement this definition through the following four projects:

- Conduct a gap analysis for high intensity outpatient services: The Department needs to assess the extent to which its current delivery system provides adequate high intensity outpatient services and to identify any needed improvements.
- Develop training and technical assistance to build capacity with providers and health plans: Providers will need technical assistance and other support to improve their capacity to deliver high intensity outpatient services.
- Develop value-based payment framework for high intensity services and whole person care: Providers will also need alternative financing models that better support whole person care and reward improved outcomes. The Department will create a new value-based reimbursement model to support the implementation of high intensity outpatient services and to improve capacity of the service networks.
- Assess and review regulatory foundations for high intensity outpatient services: To build adequate networks for high intensity outpatient services and to financially support these networks, the Department, working with the Office of Behavioral Health, needs to review and align their credentialing and contracting policies with the safety net framework. The Department will assess and revise critical regulations concerning high intensity outpatient services.

Following approval in March 2022 by the JBC, the project scope was expanded to include helping Community Mental Health Centers (CMHCs) to improve their financial reporting to include more information to support analysis of cost and efficiency.

State Plan Amendment and Waiver Information
It is likely that the Department will require a State Plan Amendment to address modifications to existing program administration based on the outcome of this work.

Sustainability Plan

The final stage of this project, regulatory and legislative review, speaks to the interest in longevity of the initiative. The Department is committed to implementing advanced strategies for transformation in delivery of high intensity outpatient services. Shifting from a pay for service to a performance compensation model is intended to change the focus of care to a person-centric model. As such, the Department will continue the initiative through programmatic changes and continue to monitor the progress of change implemented under the ARPA funding.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 38% complete. Project tasks, deliverables and milestones are on track and progressing according to the revised schedule. The project has been approved for an extension through December 31, 2024. The project team is working to revise the schedule to align with the new end date and will re-baseline the full schedule once complete.
- **Resource Status:** *On track*- The project team has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The value-based payment methodology implementation contractor is consistently meeting deliverables and the quality of work meets expectations. The procurement for the incentive payments with the Regional Accountable Entities (RAEs) was split into two phases with the phase 1 contract amendment currently being executed. The team will begin work on the phase 2 contract amendment in the next quarter. Additional procurements for rule promulgation, a gap analysis, and technical assistance provider are moving through the process.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.
- **General Project Update:** This project is proceeding on schedule and possesses adequate resources. Several procurements to secure contract resources for this project continue moving through the process. The team continues stakeholder engagement for the value-based payment model. The Regional Accountable Entities have begun expansion of high-intensity outpatient services throughout the state and the project team is working to identify a technical assistance contractor to build capacity with providers.

<u>Initiative 3.07. Wrap-Around Services, including Peer Supports, for Members with Complex Needs - Phase 1</u>

The Department will fund and develop a sustainability strategy for wrap-around services, including housing support services and community-based peer support, for recipients of complex social service benefits such as housing vouchers and supportive housing services. This will be focused on individuals with serious mental illness and a history of homelessness and repeat hospitalizations and will not include any funding for room and board.

Specifically, the Department will implement a pilot program to provide supportive services, including peer support, behavioral health services, and supportive housing services, for at least 500 Medicaid members. Participating members will receive housing vouchers from the Colorado Department of Local Affairs (DOLA). This initiative is modeled on the evidence-based social impact bond project in Denver and targets individuals who have serious mental illness and have a history of homelessness and emergency care. The Department has also been awarded a technical assistance program by the National Academy for State Health Policy about how to best integrate services across state agencies to expand housing options to their shared clients who are unhoused.

With the support of the NASHP technical assistance grant, the Department would conduct an analysis of funding mechanisms and payment models and develop recommendations on how to improve support models of care for individuals with extensive history of complex social and behavioral health needs.

For providers, this would create options for them to expand their business models, increasing their solvency and the populations they are able to serve. It would build provider capacity, including housing service providers, and sustainability in rural areas where traditional care models are becoming more difficult to provide due to changing economic and population needs. It also aligns with Colorado's broader behavioral health safety net initiative in that it expands the network and financing of behavioral health specialty providers.

State Plan Amendment and Waiver Information
The Department may submit a waiver or state plan amendment to build out the benefit package identified through the pilot program and subsequent evaluation.

Sustainability Plan

Over the pilot period, the Department will collaborate with DOLA and the Colorado Department of Human Services (CDHS) to build a sustainability model for these housing supports by identifying which services are billable as wraparound Medicaid benefits and which are fundable through CDHS or DOLA. It is expected that this program model will be self-sustaining and, once ARPA funded efforts are completed, the Department may modify an existing waiver or establish a new waiver program to continue efforts into the foreseeable future.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is 20% complete. The project tasks, deliverables and milestones are progressing as planned and remain on schedule. The project has been approved for an extension through December 31, 2024. The project team is working to revise the schedule to align with the new end date and will re-baseline the full schedule once complete.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The contractors to support this project have been selected by the Department and are beginning work. The project management/technical assistance contractor is consistently meeting deliverables and the quality of work meets expectations. The grant agreements have been signed by 13 cohort 1 service providers and enrollment of participants is beginning. The statement of work for the evaluator is in final negotiations and is expected to be executed in the next quarter. The project team is developing the grant guidelines, allowable expenditures and eligible applicants for the peer support grants and anticipates the release of the Request for Applications in January 2023. The team is also working to contract with a project management/TA contractor to provide assistance and oversight to the peer support grantees.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget. $1,350,000 in state funds were added to this project budget to offset ineligibility for administrative match of federal funds.
- **General Project Update:** This project is proceeding on schedule and possesses adequate resources. The project team has completed the contracting process for 13 cohort 1 service providers and is beginning the enrollment of participants. An initial data match was completed with the approved eligibility criteria and the housing partners. The cohort 2 and 3 providers are expected to be under contract in the next quarter. The evaluation partner contracting process is moving forward and is anticipated to be onboarded in the next

quarter. The team is finalizing the needed data sharing agreement to share program data across partners for this project. The internal workgroup continues to meet to provide oversight and collaboration toward project objectives.

Initiative 3.08. AI/AN Culturally Responsive Services Capacity Grants - Phase 3

Note: As of June 2022, this project has been renamed AI/AN Culturally Responsive Services Capacity Grants (previously titled Behavioral Health Capacity Grants), to better reflect the scope and goals of the project.

To finalize the suite of projects to expand the behavioral health safety net in Colorado, the Department will complete a final project focused on community identified service gaps that members of the American Indian and Alaska Native populations experience when seeking behavioral health services. The Department will work alongside two tribes, the Ute Mountain Ute and Southern Ute, in Colorado to co-design a menu of services and supports to meet the needs of the populations and expand access to behavioral health and HCBS services. The Department has begun an extensive stakeholder engagement process and completed formal tribal consultation with one of the tribal councils. This work is happening in conjunction with the tribal liaisons at The Department and is focused on ensuring the needs as identified by the tribal partners remain at the forefront of the work.

In addition to the direct support provided to the tribal nations, The Department recognizes the large portion of Members who are a part of the Urban Indian population. To ensure expansion of services to meet the needs of this population, The Department will be partnering with a local Urban Indian Health Program to fund the expansion of behavioral health and HCBS services. Funds will be used for evidence-based practices mitigating care deserts to better serve the Colorado American Indian/Alaskan Native (AI/AN) population. This funding will prioritize programs that are improving their ability to serve individuals with disabilities on a HCBS waiver, who also have co-occurring behavioral health (SUD and MH) needs with a focus on lower acuity services and smaller community-based providers compared to the previously mentioned initiatives. This includes Behavioral Health Services provided through Colorado's 1915(b)3 waiver.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan

ARPA funding provides a one-time capacity building opportunity to local communities, allowing the Department to maintain a high level of service delivery across all member populations.

Status Update

- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track-* The project is 8% complete. The project tasks, deliverables and milestones are progressing as planned and remain on schedule. The project has been approved for an extension through December 31, 2024. The project team is working to revise the schedule to align with the new end date and will re-baseline the full schedule once complete.
- **Resource Status:** *On track-* The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track-* The timeliness of working with tribal entities continues to be a risk for this project.
- **Budget Status:** *On track-* The project team has no current concerns related to the project budget.
- **General Project Update:** This project is proceeding on schedule and possesses adequate resources. The team participated in formal tribal council with one of the tribal partners and is working to identify needs to expand access to behavioral health and HCBS services. The team has also been in consultation with the other tribal partner and urban population provider and anticipates having needs identified to execute funding over the next quarter.

4.   Support Post-COVID Recovery & HCBS Innovation

<u>Initiative 4.01. Residential Innovation - Phase 2</u>

Under this project, the Department will develop and pilot continuum models of care that incent the creation of financially viable small residential programs that are person-centered, with a focus on rural communities. This would be accomplished by completing an analysis and pilot program:

- Models of Care Analysis: The Department will conduct an analysis of funding mechanisms and feasibility on how to improve transitions of care for people transitioning from nursing facilities and other institutional settings and potential new models of care for investment and innovation.

- Pilot Program: The Department will award 2 grants to develop pilots to develop, design and/or implement a re-envisioned holistic community that combines natural/community supports, residential homes, and existing services across systems to support older adults and people with disabilities to live as they would like to in a safe, supportive community environment. Learnings from the pilot program will be used to scale the model to other communities and to provide best practice recommendations for further development of new, innovative models. The Department will hold at the forefront the HCBS Settings Final Rule, including CMS guidance and requirements for integration of persons residing in community placements, when researching, planning, and implementing this pilot program. It is the intent of this project to determine whether a fully integrated, planned community can be one method for providing services to individuals with disabilities. This project may include an investment into the development of new models of care, including the Department obtaining intellectual property rights to these models and/or the funding the purchase of land or construction of the new residential homes.

State Plan Amendment and Waiver Information
The Department recognizes the potential need for waiver amendments to support programmatic changes and will submit such requests once the scope of desired change is identified.

Sustainability Plan
The Department will closely examine the success and viability of supported communities and based on the outcomes, formally develop any necessary administrative documentation and other avenues for the ongoing support of such efforts.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 26% complete. The project tasks, deliverables and milestones are progressing as planned and remain on schedule
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The project team has drafted stipulations for the grantees under this project.

- **Budget Status:** *On track*- The project team has no current concerns related to the project budget. $540,935 in state funds were added to this project budget to offset ineligibility for administrative match of federal funds.
- **General Project Update:** The project team continues to timely complete tasks associated with this project. The project team accepted and reviewed grant applications for this project. The project team is awarding two grants for this project. Each grantee will develop an innovative model to provide community services for Medicaid members, with a focus on HCBS and older adults.

Initiative 4.02. Promote Single Occupancy - Phase 4

This project will focus on supporting assisted living facilities and group homes in creating more single occupancy rooms, which would help prevent the spread of diseases and promote greater independence among residents. The Department will research current practice and what it would take for these providers to offer more single occupancy rooms. The Department will offer incentive payments with state-only funding for providers to convert more space to single occupancy rooms.

State Plan Amendment and Waiver Information
Any changes in rate methodology would be supported by the appropriate rate setting structure and the submission of a waiver amendment.

Sustainability Plan
The pandemic has brought to light shortcomings in the current occupancy rates and impacts on disease transmission. The Department is exploring options for both improving quality of life and managing transmissibility in assisted living and other settings of concentrated care. Sustainability funding for these efforts is being reviewed for long-term viability.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 11% complete. The project schedule, milestones, deliverables, and resources are in progress, timeline is on track. The project has been approved for an extension through December 31, 2024. The project team is working to revise the schedule to align with the new end date and will re-baseline the full schedule once complete.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.

- **Contract Status:** *On track*- The project team has selected a contractor and is working on finalizing contract requirements.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget
- **General Project Update:** The project is on track. The end date for this project was extended to allow more time for residential settings to take advantage of this opportunity.

Initiative 4.03. Child/Youth Step-down Options Program and Provider Recruitment - Phase 1

The Department will focus on those areas in which there are currently gaps in services and treatment programs for children and youth. These include members with Autism Spectrum Disorder, intellectual and developmental disabilities, severe emotional disturbance, as well as those with dual behavioral health and physical or developmental diagnosis.

The Department will work with several providers to develop a viable step-down treatment program, to create models of care that are financially viable and person-centered, with a focus on those children and youth who are currently being sent out of state for services. This project will also look at the creation or expansion of a step-down service between hospitals and a short-term residential placement. Funding in the form of grants will be available to support the infrastructure and equipment costs associated with this expanded level of care.

State Plan Amendment and Waiver Information
The Department anticipates needing to submit a State Plan Amendment for program and service changes that are identified during the implementation of this project.

Sustainability Plan
The Department is committed to improving programs for child/youth, the capacity of the State to provide services to this population and managing program cost. The Department is committed to exploring outcomes from this effort to better provide services in this area.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 19% complete. The project tasks, deliverables and milestones are progressing as planned and remain on schedule. The project has been approved for an

extension through December 31, 2024. The project team is working to revise the schedule to align with the new end date and will re-baseline the full schedule once complete.

- **Resource Status:** *On track-* The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track-* The team remains on track to release the grant request for applications in early 2023.
- **Budget Status:** *On track-* The project team has no current concerns related to the project budget.
- **General Project Update:** This project is proceeding on schedule and possesses adequate resources. The team conducted stakeholder engagement to gather input on the proposed model. The project team has gained consensus related to building out the child/youth step-down model. The team is working to develop the funding requirements and anticipates the release of the request for applications during the next quarter.

Initiative 4.04. Tiered Residential Rates & Benefits - Phase 2
Note: As of March 2022, this project has been renamed Tiered Residential Rates & Benefits (previously titled Alternative Care Facility Tiered Rates & Benefit), to reflect the expansion in scope.

The Department currently pays one per diem rate for all members served in an Alternative Care Facility (ACF), regardless of the level of setting. The Department will develop a tiered rate methodology for setting levels, with an emphasis on secured settings, for the ACF benefit. This initiative will provide insight on how the Department could create multiple level settings for the ACF program that would limit placement into a skilled nursing facility. As of March 2022, the project scope was expanded to include an additional setting type, Qualified Residential Treatment Programs (QRTPs). Additional funds were added to the project and approved by the JBC for this purpose.

The Department will also analyze other states that utilize a tiered rate for HCBS residential services, and their member assessment processes for assignment to the appropriate tier. The Department will provide recommendations related to services incorporated at each level to limit nursing facility placement and analyze whether Colorado's assessment tools would be sufficient to determine an appropriate tier. A new assessment tool will be developed, if appropriate.

In a previous report, the Department inadvertently used historical state licensing language, stating that Residential Child Care Facilities (RCCF) would be included in

this project. The RCCF provider type has sunsetted as an allowable provider to bill Medicaid and therefore will not be included in this project. The intent of this initiative is to explore tiered rates that vary based on the individual in need of services, to ensure non-institutional and least restrictive settings are fully equipped to meet the needs of children and youth with complex needs. The expanded scope of this project will focus on residential settings that serve youth and children with complex needs, which must have 16 beds or less and submit an attestation that they meet criteria, which requires that these providers do their due diligence to ensure that they are not IMDs. This currently only includes QRTPs in compliance with the Family First Prevention Services Act (FFPSA). These settings provide services covered in Appendix B of the State Medicaid Director's Letter dated May 13, 2021, specifically Colorado's 1915 (b)(3) waiver and state plan behavioral health clinical and rehabilitative services.

State Plan Amendment and Waiver Information
Any changes in rate methodology would be supported by the appropriate rate setting structure and the submission of a waiver amendment.

Sustainability Plan
The Department is committed to developing programmatic incentives to manage costs and improve quality of care. Stakeholders will be engaged both during the rate structure development process and for feedback on programmatic changes. Once program recommendations are created, the Department will pursue all appropriate administrative efforts to implement program and rate changes.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track-* The project is currently at 35% complete. The project tasks, deliverables, and milestones are progressing as planned and remain on schedule.
- **Resource Status:** *On track-* The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track-* The contractor is consistently meeting deliverables and the quality of work meets expectations.
- **Budget Status:** *On track-* The project team has no current concerns related to the project budget.
- **General Project Update:** The project is on track with all tasks. The contractor is working to tailor deliverables to meet the needs of the project team.

Initiative 4.05. Pilot CAPABLE - Phase 2

The Department will pilot and evaluate the innovative Community Aging in Place - Advancing Better Living for Elders (CAPABLE) program to support HCBS members to remain at home. The Department will pilot the CAPABLE program in three to four locations across the State with the goal of enrolling 400 people. Though the program has been rigorously evaluated, the Department will implement a pilot with an evaluation to ensure it results in the same outcomes, including cost savings, when implemented with a diverse group of members, including individuals of younger ages and those living in rural communities.

State Plan Amendment and Waiver Information
The Department will utilize the ARPA HCBS funding and time period to pilot test the CAPABLE model in Colorado. The project team will review the evaluation outcomes and determine whether the Department should consider adding CAPABLE as an additional benefit available to our waiver participants based on program success. At that time, post ARHA HCBS, a waiver amendment will be pursued if considered feasible.

Sustainability Plan
The Department embraces opportunities for improving member experience and managing program costs. The CAPABLE program is one such alternative care model that has demonstrated inroads to achieving these goals. The Department is committed to the continued support of that vision and is reviewing options for continuing efforts in the longer term.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently18% complete. The project schedule, milestones, deliverables, and resources are in progress, timeline is on track. The project has been approved for an extension through December 31, 2024. The project team is working to revise the schedule to align with the new end date and will re-baseline the full schedule once complete.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The two pilot sites have been selected by the Department and are beginning work. The project team has selected an evaluation contractor and are moving through the procurement process.

- **Budget Status:** *On track-* The project team has no current concerns related to the project budget.
- **General Project Update:** The project is on track. Contracts for both affiliated vendors have been executed. A grantee orientation meeting was held on November 22, 2022. The team is currently working to finalize a contract with the selected evaluation contractor. The project end date was extended to December 2024 to allow for potential new CAPABLE providers to have time for training with Johns Hopkins University, in addition to having time to enroll and provide services.

Initiative 4.06. Supported Employment Pilot Extension - Phase 1

In recent years, the Department has received State funding to conduct a Supported Employment pilot program to incentivize outcomes where people achieve and maintain employment. Funding for this project is expiring on June 30, 2022. The Department will extend and expand the current pilot program to allow for increased participation, additional data collection, and to determine if expanding incentive-based payments for Supported Employment services within the waivers is cost effective and produces positive outcomes.

State Plan Amendment and Waiver Information

There are no state plan amendments or waivers presently planned for this project. However, if the program achieves successful outcomes, the Department will explore permanently implementing value-based payments for Supported Employment Services into the Home and Community Based Services (HCBS) Developmental Disabilities (DD) and HCBS Supported Living Services (SLS) waivers, which would require amendments to both waivers.

Sustainability Plan

The Department is committed to creating environments of inclusion and employment opportunities for people with disabilities. It is believed that this program will prove to be self-supporting, and the Department plans to explore partnerships with sister agencies and other options to support long-term implementation of this program.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track-* The project is currently 32% complete. The project schedule, milestones, deliverables, and resources have all been established and approved by the project team.

- **Resource Status:** *On track-* The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track-* The contractors are consistently meeting deliverables and the quality of work meets expectations.
- **Budget Status:** *On track-* The project team has no current concerns related to the project budget
- **General Project Update:** This project is proceeding on schedule and possesses adequate resources. The contract extensions for FY 22-23 are proceeding and providers continue to provide supported employment services.

Initiative 4.07. New Systems of Care - Phase 2

The Department has an opportunity to identify and pilot innovative systems of care that recognize and leverage the needs and capabilities of various populations. Under this project, the Department will study successful initiatives implemented by other states and nations while also developing pilot programs that:

- Leverage creative solutions to provide low/no cost childcare to home and personal care workers, which helps address low wage concerns by expanding "total compensation"
- Pair older adults with college students who need affordable housing
- Create college credits and increase the workforce by employing college students to provide respite, homemaker, and personal care services to our growing older adult population, as well as the general HCBS population.

The Department will create a grant program with state-only funding to support innovative models of care. The Department will conduct an environmental scan of evidence-based practices that could be used and to create an innovative model to address "total compensation" for direct support professionals.

As of March 2022, following approval from the JBC, the project scope was expanded to include an additional component. This new activity will include mapping core competencies for Regional Accountable Entities (RAEs) to improve care for the LTSS population and better coordinate activities between RAEs and Case Management Agencies (CMAs).

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
The lessons learned from the identification and piloting of innovative systems of care and what has been successful in other states will inform future budget requests, programs, and policies.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track-* The project is currently 17% complete. The project schedule, milestones, deliverables, and resources have all been established and approved by the project team.
- **Contract Status:** *On track-* The project team has selected a contractor and is working on finalizing contract requirements to conduct an environmental scan. The project team plans to launch the grants for this project in Spring 2023 and will leverage the grant financial vendor.
- **Budget Status:** *On track-* The project team has no current concerns related to the project budget.
- **General Project Update:** This project continues to proceed according to the schedule. There are no concerns with the resources, budget or ability to complete this project. The project team plans to use the grant contractor to oversee the grants associated with this project and expects to launch the grant application in the Spring of 2023. The project team is currently working with the grant contractor to draft the grant requirements and application.

<u>Initiative 4.08. Respite Grant Program - Phase 4</u>

Expanding respite services was one of the most frequently cited items by Colorado stakeholders for consideration in the ARPA spending plan. Respite services provide temporary relief for the members' primary caregiver, which is necessary to support caregivers and helps prevent members moving to institutional settings.

The Department will create a state-only grant program with two components: to expand providers' ability to provide respite services, or to extend funding for respite care supports (such as a voucher program). The extension opportunity allows providers to develop unique and creative ways to deliver respite services, thinking outside of the box of the current delivery method. For instance, if offering a voucher program, grant recipients could offer vouchers for respite services, where members or caregivers can 'purchase' respite that suits their needs. No funds or direct payments will be made to individuals. In the expansion/extension of the program, the majority (75% or more) of funding must go to Health First Colorado members who are either a caregiver or care recipient and would benefit from respite services. Thus, no more

than 25% of service recipients will be non-Medicaid individuals, though, the department will allow applicants to extend/expand programs to target those who may or soon will be eligible for Medicaid, or siblings of Health first Colorado members. The goal is to provide respite services for the caregiver, even when they have multiple children. For example, a respite provider may host a parent's night out, allowing not only the member/child to attend, but the members' siblings as well. Additionally, adult siblings providing care would be eligible through this grant program to receive respite.

Eligible applicants include existing enrolled Medicaid providers who deliver respite services as outlined in Appendix B of the [State Medicaid Director's Letter](), May 13, 2021. Applicants may also be current Medicaid providers that are not currently providing respite services but are hoping to expand their services.

Additionally, the Department will identify the landscape of respite availability across Colorado through a study and create a report identifying the gaps in respite care availability. Through lessons learned through the grant program and the study, the Department hopes to make future improvements in how respite services are delivered in Colorado.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan

The deliverables for this project - the report identifying gaps in respite care and the subsequent grant program - will be the foundation for future programs, policies, and budget requests. As the grant program is being established and provided in direct response to the impacts of COVID-19, it will not be continued post March 2024. But the respite benefit will continue as this is a critical service for our members and their families.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track-* The project is currently 29% complete. The project tasks, deliverables and milestones are progressing as planned and remain on schedule.
- **Resource Status:** *On track-* The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track-* The contractor to support this project has been selected by the Department and is beginning work.

- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.
- **General Project Update:** The project is currently on track with all tasks, except for a slight delay with onboarding grantees. This delay will not impact the overall project timeline but will shorten the estimated active grant period by approximately 30 days. At the writing of this update, 10 of the 12 grantees have executed contracts. The respite study is progressing as expected with the first two contract deliverables to be completed by the end of 2022.

Initiative 4.09. Respite Rate Enhancement - Phase 1

The Department has provided a temporary targeted rate increase to incentivize additional respite providers to serve HCBS adult and child members, with a focus on home-based services. The rate increase also applies to respite services provided under the DHS' crisis services program. In addition, the Department will identify innovative ways that can be taken to incentivize respite provision by meeting with providers and other Colorado respite programs to gather information about barriers for enrollment and service provision.

State Plan Amendment and Waiver Information
The Department received approval through an Appendix K Amendment on November 5, 2021 to implement a temporary 25% rate increase for HCBS Respite providers.

Sustainability Plan

The aspects of this program that will extend in the future relate to that which the Department learns through its meetings with providers and respite program providers to better understand the barriers for enrollment and service provision. The expectation is that these learnings will inform future budget requests, programs, and policies.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 68% complete. The project tasks, deliverables and milestones are progressing as planned and remain on schedule.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- This project will not utilize a contractor.
- **Budget Status:** *Watch*- The team determined a contractor was not needed for this project. This allowed for $55,000 in funds to be moved to project 6.03.

- **General Project Update:** The project remains on schedule. The project team continues outreach efforts to individual providers in an effort to address lack of retroactive billing for the enhanced rate. If all funds for this project are not spent, unused funds will be reallocated to other projects.

Initiative 4.10. Home Modification Budget Enhancements - Phase 1

The Department identified enhancements to the Home Modification benefit as a need for our members, based on stakeholder feedback over the growing need to ensure members could continue to live and receive care in their homes, as opposed to congregate care settings, in response to the COVID-19 PHE. One way to help members continue to live in their homes is by funding specific modifications, adaptations, and improvements to their existing home setting. The Department will provide additional funding above the current service limitations for home modifications in response to members needing multiple adaptations to their homes for accessibility and the increasing costs related to construction and materials. The home modification budget enhancements will be available for all waivers in which this benefit already exists.

State Plan Amendment and Waiver Information
The Department will identify funding and pursue a waiver amendment once the complete scope of program changes is identified. The Department received approval through an Appendix K Amendment on January 4, 2022 to temporarily increase the Home Modification and Home Accessibility Adaptation benefit by $10,000 to help members continue to live in their home and community. On March 10, 2022 the Department submitted HCBS waiver amendments for the affected waivers, to include language that specifies during the Public Health Emergency (PHE), some individuals on the waiver may exceed the $10,000 or $14,000 cap to help them continue to live in their homes and the community. The Department is awaiting approval from CMS for this change. In addition, the Department will submit a waiver amendment in the fall of 2022 to allow the continuation of this temporary benefit through March 31, 2024.

Sustainability Plan
The Department recognizes that addressing the increasing costs associated with home modifications requires a long-term plan and funding strategy. The enhancement funding that ARPA is providing will provide meaningful insights into cost challenges and will put the Department on better footing to ensure future budgets for this program consider increasing labor and materials costs.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 47% complete. The project tasks, deliverables and milestones are progressing as planned and remain on schedule. The project has been approved for an extension through December 31, 2024. The project team is working to revise the schedule to align with the new end date and will re-baseline the full schedule once complete.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The contractor to support this project has been selected by the Department and is beginning work.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget. The project's budget was decreased by $1.5M to account for a lower forecast in spending. This is due to a slower than anticipated number of enhanced home modification requests.
- **General Project Update:** Project is on track. Home modifications have been occurring. It was determined that to use the allotted money, and to allow more time for modifications to take place, that the project's end date be extended to December 31, 2024.

Initiative 4.11. Hospital Community Investment Requirements - Phase 4

Under this project, the Department will research and develop recommendations for how to leverage hospital community investment requirements to support transformative efforts within their communities. The Department will develop minimum guidelines for community benefit spending and reporting values to hold hospitals accountable to meet community needs as determined by the community itself and align with statewide health priorities. These guidelines should allow for more consistent reporting and determination of what is a community health need as well as better evaluate the impact of community benefit programs.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
The Department recognizes that providing guidance to hospitals regarding community investment requirements and best practices is important to ensuring that those contributions result in relevant and sustainable community change and improvement in community health needs and health care outcomes. Once the guidelines have been

developed, the Department is committed to both maintaining the hospital community investment guidelines and working with hospital systems to evaluate the impact of their community benefit efforts.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track-* The project is currently 16% complete. The project schedule, milestones, deliverables, and resources have all been established and approved by the project team.
- **Resource Status:** *On track-* The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track-* The contractor to support this project has been selected by the Department and is beginning work.
- **Budget Status:** *On track-* The project team has no current concerns related to the project budget. $150,000 in state funds were added to this project budget to offset ineligibility for administrative match of federal funds.
- **General Project Update:** The project is on track. The contract has recently been executed and work is beginning.

Initiative 4.12. Community First Choice - Phase 1

Community First Choice (CFC) was established by the Affordable Care Act in 2010 and allows the Department to offer attendant care services, including consumer directed options, on a state-wide basis to eligible members of all ages, instead of only those who meet criteria for a 1915(c) waiver. The Department will use funding to cover the administrative costs associated with the development and implementation of CFC, including system costs, stakeholder engagement, staff, and a new Wellness Education Benefit. The goal is to implement CFC by July 2025. Once implemented, the state would qualify for a 6% ongoing federal enhanced match on certain HCBS services.

To develop and implement CFC, the Department will need the following:
- System changes: System changes will be required to add the existing HCBS benefits into the State Plan which necessitates changes to the provider subsystem, financial subsystem, prior authorization subsystem, the prior authorization system, provider subsystem, and care and case management product. This work will include ongoing testing and maintenance to ensure the changes made were accurate and operating correctly.

- Wellness Education Benefit: The Department will utilize a contractor to develop and manage the Wellness and Education Benefit. The cost of this benefit will be absorbed by the Department once CFC cost savings are realized.

CFC Admin Extension and Wellness Benefit
Through the ARPA extension and additional funding, the Department will add funding to the CFC project to extend the administrative expenses associated with this project as well as utilize funds to implement the Wellness Benefit associated with the program. The Wellness Benefit will send HCBS members information on a monthly basis to support their overall healthcare.

State Plan Amendment and Waiver Information
The Department will submit an amendment to the State Plan allowing for the implementation of the Community First Choice 1915(k) federal authority. Waiver amendments will be required for the Department's 1915(c) waivers to remove services provided under the 1915(k). Amendments will also be required to gain approval for the new Wellness Education Benefit.

Sustainability Plan
The ability to leverage the ARPA funds to allow the State to pursue CFC is a high priority of the Department. The funding accelerates investments in key information systems and with relevant stakeholders to ensure that the State's design, development, and implementation of CFC is informed by stakeholder feedback and aligns with best practices.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 39% complete and the project has been approved for an extension through December 31, 2024, the project team is working to revise the schedule to align with the new end date and will re-baseline the full schedule once complete.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The project team has selected a contractor and is working on finalizing contract requirements
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget. With the ARPA extension, $122,539 was added to extend the administrative expenses associated with this project as well as utilize funds to implement the Wellness Benefit associated with the program.

- **General Project Update:** The project is on track. The project team has successfully completed a series of Stakeholder Engagement meetings in the last 6 months. This activity will be continued. The team has spent significant time working with internal system staff to define system change requirements. The contractors for the Wellness Education Benefit have been selected. The next step will be onboarding the vendors and ensuring the execution and deliverable of the contracts will meet our requirements.

5.   Strengthen Case Management Redesign

Initiative 5.01. Case Management Capacity Building - Phase 1

Case management redesign is an overhaul of the current and traditional processes utilized by case management agencies to ensure conflict free case management services are provided to members. While the long-term effects are necessary and invaluable, there will be substantial changes in those processes. This project provides resources to help limit disruptions to members during that process. The Department will support case management redesign efforts in the community by developing a framework to support the change management requirements to ensure successful transition from the current system to implementation of a redesign that mitigates the negative impact on members. The Department will work with Case Management Agencies (CMAs), local area organizations, and stakeholders to plan and prepare for Case Management Redesign (CMRD). It will provide support to CMAs to implement CMRD policy changes, transition, legal and corporate structures, change management, strategic and organizational planning, capacity and ensuring member access to a CMA, including developing an infrastructure for a learning collaborative so that CMAs have access to individual resources relevant to their change management needs.

CMA Retention Payments Start Up and Transition Costs
With the extended timeline to implement ARPA, the Department plans to create a grant program to support the start-up of new contracts as a result of Case Management Redesign (CMRD). This program would allow new Case Management Agencies to apply for funding through a competitive grant program for retention payments to keep case managers onboard through the transition and start up and transition costs needed to get the new CMAs online and able to serve members faster.

State Plan Amendment and Waiver Information
A state plan amendment and Appendix K amendment was submitted to CMS and approved for the case manager retention payment component of this project with approval effective January 1, 2023.

Sustainability Plan
The Department recognizes that expanding the capacity of the case managers who serve the HCBS population by designing an end-to-end case management paradigm is essential to ensuring that all members have access to care and have a positive experience with the healthcare system. Once CMRD has been implemented, the Department is committed to continuing that vision both in the near- and long-term.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- This project is 51% complete. The project schedule, milestones, deliverables, and resources have all been established and approved by the project team. The project has been approved for an extension through December 31, 2024. The project team is working to revise the schedule to align with the new end date and will re-baseline the full schedule once complete.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The contractor is consistently meeting deliverables and the quality of work meets expectations with direct oversight from the Department.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget. An additional $5,615,473 in funds was added to this budget to create a grant program to support the start-up of new contracts as a result of Case Management Redesign (CMRD).
- **General Project Update:** This project is currently on track with all tasks. The Department has been working with the contractor to complete deliverables and ensure that CMAs remain fully supported throughout redesign. The project team is working with the grant financial vendor to support disbursement of funds to CMAs to encourage retention.

Initiative 5.02. Improve and Expedite Long-Term Care Eligibility Processes - Phase 3

Under this project, the Department will work with stakeholders to identify solutions to barriers to long term care eligibility, both from a physical

eligibility and financial eligibility perspective. Any changes will result in the need for system enhancements as well as training to counties, Medical Assistance sites, and case managers on eligibility requirements for waiver programs and other long-term care programs.

The Department will research and determine appropriate solutions for expedited eligibility processes and manage projects. These changes will require extensive stakeholder feedback and engagement.

State Plan Amendment and Waiver Information
It is not anticipated that a State Plan Amendment or a Waiver Amendment will be needed for this project.

Sustainability Plan
Depending on the outcomes of this project effort and feedback from stakeholders, the Department will prioritize resulting system enhancements and training needs in this area.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On Track*- The project is currently 51% complete. The project has been approved for an extension through December 31, 2024. The project team is working to revise the schedule to align with the new end date and will re-baseline the full schedule once complete.
- **Resource Status:** *On Track*- This project is staffed with adequate resources to complete the project by the expected timeline.
- **Contract Status:** *On track*- No current progress on the contract to report at this time.
- **Budget Status:** *On track*- The project team has no concerns related to the project budget.
- **General Project Update:** This project is proceeding on schedule and possesses adequate resources. The project team is reviewing and analyzing research to inform future policy and process recommendations at the agreed upon timeline.

Initiative 5.03. Case Management Rates - Phase 1

The Department transitioned to a new rate structure for case management agencies (CMAs) in FY 2020-21. The Department will evaluate and identify best practice approaches for rate methodology in case management to ensure they are appropriate

for the activities expected of CMAs and then develop a proposed rate structure for these activities and services, including identifying options for tiered rates for supporting members with complex care needs. The Department will also work in coordination with the CMAs to facilitate stakeholder engagement on methodology.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
The Department recognizes that providing guidance and promoting best practices for rate methodology in case management is critical to developing the case management infrastructure that it is trying to create and support. Sharing promising practices and information is one of the keys to this transformation. Once the case management methodology has been developed, the Department is committed to maintaining the currency of the methodology as part of its overall goal of achieving a strong case management infrastructure statewide.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project plan is 100% complete.
- **Resource Status:** *On track*- This project is adequately resourced.
- **Contract Status:** *On track*- The vendor has completed project deliverables.
- **Budget Status:** *On track*- The project team has no concerns related to budget.
- **General Project Update:** The vendor has completed all project deliverables. The vendor has created a draft workbook of rate recommendations. The close-out report is in the final stages of approval. This project is anticipated to be fully closed out by the first quarter of 2023.

Initiative 5.04. Case Management Best Practices- Phase 1

Person-centered case management and care coordination requires adapting outreach strategies and support services to the needs of the population and of individuals, which may be different depending on the disability. The Department will research national best practices and develop and pilot these practices through models of care coordination that meet the unique needs of a variety of member profiles such as complex care coordination for those with dual or poly diagnoses. The Department will develop a training plan, including developing appropriate materials for Case Management Agency (CMA) and Regional Accountable Entity (RAE) staff on their various roles and responsibilities, collaborative roles

between the systems, and effective care collaboration across the continuum of care, especially for members with complex needs.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
The Department recognizes that creating models of care and identifying best practices for individuals with disabilities is critical to developing the case management infrastructure that the State is establishing and supporting. Sharing promising practices and information is one of the keys to this transformation. Once the training materials for best practices have been developed, the Department is committed to maintaining the currency of the information and to spread the information via case managers and RAE personnel.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track-* The project is currently 37% complete. The project schedule, milestones, deliverables, and resources are under review. Once changes are approved and implemented by the project team, the project will be back on track.
- **Contract Status:** *On track-* The project team has selected a contractor and is working on finalizing contract requirements.
- **Budget Status:** *On track-* The project team has no current concerns related to the project budget. $60,000 in additional funds were added to this budget to pay the maintenance fees for the Learning Management System that will be utilized to house the training developed through this project through the duration of the ARPA extension.
- **General Project Update:** The project is currently on track with all tasks except for those relating to the project schedule due to contract deliverables changing, requiring a rework of the project schedule. Once the project plan is approved by the team, the project will be back on track.

Initiative 5.05. Case Management Agency Training Program - Phase 1

The Department will develop and implement comprehensive training for case management agencies to improve quality and consistency statewide. The Department will develop a robust training program for CMAs, RAEs and MCOs for all waiver programs and services, as well as behavioral health services, State Plan benefits, benefits counseling, and CFC. All the training will be incorporated into a

Learning Management System allowing the Department to assign and monitor training completion. The Department will also update all existing training materials for content updates and upload them to LMS software to establish competency-based performance requirements of case managers. Any changes to program participation requirements will be supported by the submission of a waiver amendment once training documentation is completed.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
The Department recognizes that maintaining worker relevance, building skill sets, and advancing opportunities for case management professionals is critical to addressing the shortfalls in this employment segment. Education is one of the keys to this transformation. Once the training modules and structure have been developed, the Department is committed to maintaining the currency of the materials through intermittent curriculum updates and workforce validation.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- This project is currently 37% complete. The project schedule, milestones, deliverables, and resources have all been established and approved by the project team. The project has been approved for an extension through December 31, 2024. The project team is working to revise the schedule to align with the new end date and will re-baseline the full schedule once complete.
- **Resource Status:** *On track*- The project team is re-hiring the term-limited staff member to assist with this project after the previously hired staff member took a permanent position within the Department.
- **Contract Status:** *On track*- The contractor is consistently meeting deliverables and the quality of work meets expectations.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.
- **General Project Update:** This project is currently on track with all tasks, except for resources. The term-limited position associated with this project has accepted a full time position with the Department leaving a vacancy for the term-limited position. The position is currently moving through the hiring process.

6.   Invest in Tools & Technology

Initiative 6.01. Home Health/PDN Acuity Tool - Phase 1

The Department will design and develop an adult Long-Term Home Health (LTHH) acuity tool and two Private Duty Nursing (PDN) tools for adult and pediatric members to better determine the appropriate medically necessary level of care and associated nursing hours for members. These tools will streamline the benefit delivery and ultimately provide long-term savings to the State by providing an additional basis with which to determine appropriate service needs for members.

The Department received funding to implement a LTHH acuity tool in FY 2019-20 through R-9, "Long Term Home Health/Private Duty Nursing Acuity Tool." The Department used this funding to conduct an environmental scan in FY 2020-21 of other state approaches but was unable to identify an appropriate tool, concluding that the Department must build one from the ground up. There was not adequate funding to build and implement a tool with the funding from that request.

The Department will create, pilot, and validate an LTHH as well as pediatric and adult PDN acuity tools tailored to Colorado home health policies. The Department will conduct both a policy and systems crosswalk of the proposed variables required for the LTHH acuity tool with the long-term services and supports (LTSS) assessment tool that determines nursing facility and/or hospital level of care for members seeking LTSS services. This will help determine opportunities for alignment of the tools to ensure that as members' needs change, they do not have barriers to accessing other State Plan or waiver benefits, nor is there duplication of services. A crosswalk has already been completed for PDN tools.

Once the acuity tools are developed, the Department will integrate the developed tools as a module within the Care and Case Management System. The utilization management vendor will either access the CCM tool directly or through a workflow that will allow them to perform the necessary medical necessity prior authorization determinations for PDN and LTHH benefits. The goal of this project is to develop the new assessment tools, but the tools will not be implemented until after the ARPA HCBS spending period.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan

The improvements to the tools will be integrated into the existing systems/platforms (HCBS assessment tool and CCM), both of which will be available to users beyond the terms of the ARPA grant.

Status Update

- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *Watch*- The project is currently 17% complete. The project schedule, milestones, deliverables, and resources are under review. Once changes are approved and implemented by the project team, the project will be re-baselined. The project has been approved for an extension through December 31, 2024. The project team is working to revise the schedule to align with the new end date and will re-baseline the full schedule once complete.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The project team has selected a contractor and is working on finalizing contract requirements.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.
- **General Project Update:** This project is proceeding on schedule and possesses adequate resources. The team completed a request for proposal process to contract a vendor to develop valid and reliable adult home health and adult and pediatric private duty nursing acuity tools. The team has selected its top bidder and is in the process of contract negotiation. In July of 2022, the team brought on a new Home Health Specialist who is fully integrated into the project.

Initiative 6.02. Specialty Search in Provider Specialty Tool - Phase 3

HCBS providers struggle to identify which specialty they qualify for and which one to select when using the MMIS online enrollment module. As a result, providers either spend a lot of time researching provider specialties on the Department's website or select specialties in the MMIS for which they are not qualified or do not wish to enroll.

The Department will develop an optional "specialty finder" tool that will, through a series of questions, help providers identify which specialty or specialties they would like to enroll in, as well as the HCBS population they would like to serve. The tool will also provide guidance on other enrollment requirements that may be necessary to

enroll and point to non-HCBS provider types they may be eligible for. Once an algorithm is developed, it will be integrated into the Department's website. This tool will allow providers to quickly understand which specialties they are eligible for, understand the steps necessary to enroll, and cut down on questions to MMIS staff and staff across the Department and the Department of Public Health and Environment.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
ARPA funding provides an important one-time investment in the provider infrastructure by allowing providers to easily enroll in their area of expertise online.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project at 31% complete with a few late tasks related to a decision to either engage a vendor or keep the work internal. The project schedule, milestones, deliverables, and resources have all been established and approved by the team.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The project team is working to determine if a vendor is needed though one has been selected in the event they are required.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.
- **General Project Update:** The project is on track. A decision has been logged regarding the use of a vendor or keeping work internal. A decision is expected to be made in early 2023.

Initiative 6.03. Member Facing Provider Finder Tool Improvement - Phase 2

The Department administers a "Find A Doctor" provider search tool on the Department's website that identifies health care providers based on certain search criteria selected by the user. The Department is currently working to add additional functionality to the tool, including the ability to search by practitioner location, practitioner associations, and provider specialties.

Under this project, the Department will add the critical criteria of "Cultural Competency" to the search tool. Cultural competence in health care is broadly defined as the ability of providers and organizations to understand and integrate

these factors into the delivery and structure of the health care system. The goal of culturally competent health care services is to provide the highest quality of care to every patient, regardless of race, ethnicity, cultural background, English proficiency, or literacy. Through this project, the Department will add cultural competence search criteria to the tool. This could include criteria such as: woman or minority owned/operated, cultural and ethnic subgroups, etc.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
The State of Colorado and the Department hold equity and cultural competency among the provider community and health care systems at the forefront. This project is proceeding on schedule and possesses adequate resources. The project team is implementing strategies to address cross-departmental efforts to execute the activities and tasks related to this project. The Department and the contractor have scheduled a kickoff meeting for early January.t of importance for service delivery. Upon completion of the member-facing provider tool enhancements, the Department will monitor the use of the cultural competence queries and results to inform future investments, programs, and policies to promote equity and culturally competent care.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- This project is currently 54% complete. The project schedule, milestones, deliverables, and resources have all been established and approved by the project team. The project has been approved for an extension through December 31, 2024. The project team is working to revise the schedule to align with the new end date and will re-baseline the full schedule once complete.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The project team is discussing vendor options and contractual requirements.
- **Budget Status:** *On track*- Due to the original cost estimates being too low, an additional $55,000 was approved to support this project. These funds will be utilized by the contractor to complete deliverables.
- **General Project Update:** This project is proceeding on schedule and possesses adequate resources. The project team is implementing strategies to address cross-departmental efforts to execute the activities and tasks related to this

project. The Department and the contractor have scheduled a kickoff meeting for early January.

<u>Initiative 6.05. Member Tech Literacy - Phase 2</u>

Like HCBS providers, many HCBS-enrolled members could benefit from greater access to electronic systems. Under this project, the Department will develop two curricula; a program for members providing digital literacy training and a train-the-trainer program for community supports (case managers, providers, and family) that will be delivered to members. HCBS-enrolled members who participate in this project will receive an iPad to support training and improve access beyond project time period.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
This is an upfront investment in the training modules and structure. The project is on track and scheduled tasks are falling into line. The Department will absorb maintenance and updating of materials through existing workflows.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is 36% complete. The project tasks, deliverables, and milestones are progressing as planned.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The contractor to support this project has been selected by the Department and is beginning work.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget. $6,000 in state funds were added to this project budget to offset ineligibility for administrative match of federal funds.
- **General Project Update:** The project is on track and scheduled tasks are falling into line. The contractor is expected to begin stakeholder engagement in early 2023.

Initiative 6.06. Provider Digital Transformation & EHR Upgrades- Phase 1

Note: *As of November 2021, this project has incorporated project 6.04 HCBS Provider Electronic Health Record System Upgrades under the scope of its efforts.*
Note: *As of September 2022, this project has been renamed Provider Digital Transformation & EHR Upgrades (previously titled HCBS Provider Digital Transformation), to better reflect the project's intent.*

The purpose of this project is to provide funding to home and community-based services (HCBS) providers, behavioral health providers, and Case Management Agencies to digitally transform their care or service delivery. Funding will include investments in upgrading, enhancing, or implementing electronic health record (EHR) systems to be able to better coordinate care, access real-time information through health information exchanges (HIEs), and the purchase of tools necessary for the delivery of virtual services. These tools may include, but are not limited to, laptops, tablets, and modems. Ongoing internet connectivity costs are not included within the project scope. This project will leverage lessons and processes from the Department's Electronic Health Record incentive program and the Office of eHealth Innovation's telemedicine projects, with a focus on inclusive and equitable approaches and solutions. These funds will be provided through a competitive grant program that is aligned with other developing efforts, such as HB 21-1289, "Funding for Broadband Deployment." The primary features of this project, Electronic Health Record enhancement and expanding provider's capacity to offer telehealth services, both have the potential to positively impact members either by improving access to care or improving communication.

The scope of this project was expanded following the approval of the additional funds in March 2022. The project has added 6.06b Cybersecurity Workstream, which will support technology security enhancements for the County Departments of Human Services and Single-Entry Points, who make eligibility determinations. These funds will focus on ensuring cybersecurity measures are in place to protect member information, including case file scanning and possibly the purchase of tools to support physical security such as badge access readers and security monitoring cameras. This component of the project will be led by the Department's Health Information Office.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
ARPA funding provides one-time seed funding for providers across the state. Lessons learned will be shared with future tech upgrade workflows.

Status Update - 6.06a Grants for Digital Transformation & EHR Upgrades
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track-* The project is currently 26% complete. The project schedule, milestones, deliverables, and resources have all been established and approved by the project team. This project has been approved for extension through December 31, 2024, and the schedule has been updated and re-baselined reflecting the new end date.
- **Resource Status:** *On track-* The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track-* The contractor is consistently meeting deliverables and the quality of work meets expectations. The project team is establishing a grant review team in preparation for the closing of the request for application process.
- **Budget Status:** *On track-* The project team has no current concerns related to the project budget.
- **General Project Update:** The project is on track. The grant application closes early 2023 and the team is preparing to review and make awards.

Status Update - 6.06b Cybersecurity Workstream
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track-* The project is currently at 41% completion. The project schedule, milestones, deliverables, and resources have all been established and approved by the project team.
- **Resource Status:** *On track-* The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track-* The project team has selected pilot sites for work along with vendors (one contracting through CDHS) and another with HCPF.
- **Budget Status:** *On track-* The project team has no current concerns related to the project budget.
- **General Project Update:** The project is on track. Work is underway determining solutions for business processes like document indexing, storage, and better understanding the overall expense to digitize records. The project team is considering a grant process to fund physical security, badge readers, and cameras, to address the varied needs at each county.

Initiative 6.07. Innovative Tech Integration - Phase 3

Technology changes rapidly, including in the healthcare field. The Department will explore innovative technology that will improve diagnoses, services access, health outcomes, and program delivery for medical, behavioral, and HCBS services provided

to HCBS members. The Department will research potential innovative models for diagnoses, access, outcomes, and delivery, as well as evaluate whether those technologies would work in Colorado practices. Recommendations, including implementation steps, for pursuing these forms of technology will be developed.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.
Sustainability Plan
This one-time policy analysis will allow the Department to be positioned to identify innovative projects to its healthcare technology roadmap and implement these new solutions well into the future.

Status Update
- **Overall Project Status:** *Watch*
- **Project Plan & Schedule Status:** *Watch*- The project is 11% complete. Several tasks related to the scope decision are behind schedule. The project schedule, milestones, deliverables, and resources are under review. Once changes are approved and implemented by the project team, the project will be back on track.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *Watch*- The statement of work has been drafted though contractor selection is paused until final scope determination is complete.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.
- **General Project Update:** The following areas are in watch status: schedule, scope, and contract. The project team is vetting potential pilot options that incorporate software as a service tool.

Initiative 6.08. Care & Case Management System Investments - Phase 1

The Department will fund investments in system changes, software, and hardware to support the new care and case management system. These initiatives will support data sharing in ways that support person-centered, timely provision of care, improving the member experience. The Department is reviewing investments in system changes, software, and hardware to support the new care and case management system. These initiatives will support data sharing in ways that support person-centered, timely provision of care, improving the member experience.

Device Costs

The Department will provide one-time funding for CMAs to purchase laptops or other mobile devices compatible with the new case management IT solution, the Care and Case Management (CCM) system. These devices will be used to support agencies in utilizing the new CCM system to perform case management functions during their regular business operations. Case managers will have the IT technology necessary to leverage the capabilities of the new CCM tool, including accessing the log notes offline, perform assessments in the home, or upload assessments with the latest technology. Members will be able to be assessed quickly in their homes and provide signatures in real time.

System Costs

Funding will also be used to implement policy change requirements and enhancements that were not captured with the implementation of the CCM system. For example, the CCM system does not include remote signature capability of support plans by all stakeholders; this has been identified as an opportunity for future enhancements. Another potential enhancement is to allow providers to upload incident reports directly to the member record for the case manager to review and identify whether a critical incident occurred. This is highly encouraged by CMS to ensure incidents are tracked, mitigated, and trended prior to becoming a critical incident. Further, the Department will create bidirectional data feeds between providers and the CCM, building on existing statewide data sharing strategies in development or in place regarding EHRs.

Additional funds, approved by the JBC in March 2022, expanded the scope of this project to include enhancements to the care and case management system to allow for automation of Consumer Directed Attendant Support Services (CDASS) prior authorization request revisions. Funds will also be used to build an interface between the interchange system and the Financial Management Services (FMS) vendor portals to allow real-time updates for the vendors.

The Department intends to create a regional advisory board to support improvements to provider IT sophistication and interoperability, to include the development of data dictionaries of key elements needed by providers.

With the extended timeline to implement ARPA, the Department plans to add three new areas for enhancements in implementing the CCM. These areas include an adjustment to the system to account for a new rate structure for CMAs, adjustments to accommodate data from the CCM into the Department's data management system and enhancements to the Person-Centered Budget Algorithm.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
The State has made a multi-year investment in the planning, development, and deployment of the CCM system, and the funds provided via this project will go to advance the deployment and optimization of the system by users statewide. Once the system changes have been deployed and mobile devices provisioned, the Department is committed to working with CCM users to ensure these capabilities continue into the future.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 65% complete. The project has been approved for an extension through December 31, 2024. The project team is working to revise the schedule to align with the new end date and will re-baseline the full schedule once complete.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project.
- **Contract Status:** *On track*- The contractor is consistently meeting deliverables and the quality of work meets expectations.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget. With the extended timeline to implement ARPA, the Department will add three new areas for enhancements in implementing the Care & Case Management System. $250,000 was added to this budget to fund the new work.
- **General Project Update:** This project is proceeding on schedule and possesses adequate resources. The project team is working across office and at a Department-wide level to implement the activities and tasks related to the investments underway for the CCM system.

Initiative 6.09. Updates to SalesForce Database - Phase 1

As part of this technology project, the Department will implement a system where complaints, issues, grievances, clinical documentation, and quality care complaints are compiled and centralized. This will include updates to the Salesforce system to allow for clinical review and time tracking for staff as well as tracking for creative solutions and complex solution calls to allow for tracking of diagnosis, services, and length of time it takes to locate a solution for the case.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
The ability to centralize complaints, issues, and grievances will allow the Department to better diagnose issues and, as noted above, provides the opportunity to identify and spread best practices statewide.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *Watch*- The project is 38% complete. The project schedule, milestones, or deliverables are delayed. The team is working to determine the next statement of work and a decision has been logged. The project has been approved for an extension through December 31, 2024. The project team is working to revise the schedule to align with the new end date and will re-baseline the full schedule once complete.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The project team is working to finalize contract requirements for phase two of the project.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.
- **General Project Update:** The project is on track with some work delays related to vetting future changes with internal stakeholders. The project team is actively working to resolve this concern and a decision item has been logged.

Initiative 6.10. Member Data Sharing - Phase 3

Through the CMS Interoperability Rule, which is a part of the 21st Century Cures Act, the Department received funding from its FY 2021-22 R-9 "Patient Access and Interoperability Rule Compliance" decision item to develop an agreed upon, consensus-based approach regarding compliance with the Interoperability Rule. Compliance is based on the creation of an open framework that will allow data to be stored, shared, and pulled into consumer-chosen, consumer-facing applications, vetted through a federally mandated review process.

The Department will use funding to integrate key data points from the CCM tool into a data set that meets federal technical requirements. This data could include member assessments, case management log notes, and critical incidents. The data will be

available for members to access through consumer-facing applications or other Electronic Health Record (EHR) applications, leveraging recommendations from the Testing and Experience and Functional Tools (TEFT) Grant, in consultation with the Governor's Office of eHealth Innovation. The implemented solution would be a way for members to access data collected by and maintained in the CCM tool, as well as information about qualified providers as maintained in the BIDM, and could include functionality like secure, in-app texting/reminders that could occur between Health First Colorado members and their care team or teams. The Department will design a Long-Term Services and Supports-focused application or other point of access. Any solution will include functionality that is compliant with the Americans with Disabilities (ADA) Act.

Members will be able to access their CCM-related data through the application of their choice, using a device of their choosing. Members will have a seamless experience with their CCM-related health data, irrespective of payer or provider or originating IT source, and be able to access that information using technology of their choosing. This solution builds on existing work done statewide to provide access to health care data.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
Compliance with federal regulations regarding information sharing and interoperability by creating patient-facing applications that allow access to their medical record information is among the highest priorities of the Department and the Office of eHealth Innovation. The ARPA funding provides an important investment in moving the State further along in implementing its interoperability strategies and creating a statewide patient engagement strategy.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- This project is currently 30% complete. The project schedule, milestones, deliverables, and resources have all been established and approved by the project team. The project has been approved for an extension through December 31, 2024. The project team is working to revise the schedule to align with the new end date and will re-baseline the full schedule once complete.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.

- **Contract Status:** *On track*- The project team has selected a contractor and is working on finalizing contract requirements.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.
- **General Project Update:** This project is proceeding on schedule and possesses adequate resources. The project team is working to draft and finalize policy documentation so they may begin working with the selected vendor on deliverables.

Initiative 6.11. Centers of Excellence in Pain Management - Phase 2

Many HCBS members deal with chronic pain and are unsure how to navigate the system to providers that are best equipped to help them manage their pain and thrive. The Department will pilot a program in which a contractor team consisting of a physician, pharmacist and a licensed clinical social worker will assess the needs of chronic pain patients for mental health or substance use disorder treatment. The team will coordinate appropriate referrals to mental health, SUD, or Centers of Excellence for Chronic Pain providers primarily via telemedicine using best practices for appropriate pain management. This team will also coordinate with RAEs to offer training and support to further expand the program and meet the needs of all members seeking treatment for chronic pain.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
The ARPA funds will support a first-time demonstration project and the subsequent learnings will inform future budget requests, policies, and programs.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *Watch*- The project is 35% complete. The project schedule, milestones, and deliverables are delayed. The project team is actively working to get the project back on track. The project has been approved for an extension through May 31, 2024. The project team is working to revise the schedule to align with the new end date and will re-baseline the full schedule once complete.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.

- **Contract Status:** *On track-* The contractor to support this project is currently moving through the procurement process and is behind schedule.
- **Budget Status:** *On track-* The project team has no current concerns related to the project budget.
- **General Project Update:** The project is on track, though the schedule and contract are in watch status related to contract execution delays. The project team is working to aid regional accountable entities with navigation issues as they await a signed contract.

Initiative 6.12. Systems Infrastructure for Social Determinants of Health - Phase 1

The Department, in partnership with the Office of eHealth Innovation, will expand the infrastructure for a Social Health Information Exchange (SHIE) which provides case management agencies, RAEs, care coordinators, and health care providers with real-time connections to resources like food, energy assistance, wellness programs, and more. This will be part of a broader social health information exchange ecosystem being developed by the Office of eHealth Innovation. In addition, the Department will distribute funding in the form of state-only community grants to help connect small non-clinical agencies that specialize in and serve the HCBS population to the health information exchange and access the functionality.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
Beyond the initial project efforts, the Department intends to continue use of the tools and data infrastructure developed under this initiative. Lessons learned regarding the technology implementation and related challenges, as well as the needs and opportunities of partnering with organizations that provide non-medical services will inform future social determinants of health-related projects, programs, and policies initiated by the Department.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track-* The project is 38% complete. The project schedule, milestones, and deliverables have been established and approved by the project team. The project has been approved for an extension

through December 31, 2024, and the schedule has been updated and re-baselined reflecting the new end date.

- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The project team posted the Social Health Information Exchange invitation to negotiate on December 13, 2022.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.
- **General Project Update:** The project is on track. The invitation to negotiate has been posted and the team is in place. The timeframe has been extended to accommodate the system build.

Initiative 6.13. Connect Case Management Agencies to ADT Data- Phase 2
Note: As of June 2022, this project has been renamed Connect Care Management Agencies to ADT Data (previously titled Connect Case Management Agencies to CORHIO), to reflect a change in approach.

The Department will connect Case Management Agencies (CMAs) to Admission, Discharge and Transfer (ADT) data to obtain hospital admission data in real-time. While ADT data from hospitals is transmitted from the BIDM to the CCM system, there is a significant lag, which prevents it from being actionable. This project offers optional grant funding for CMAs to pilot test access to this data in a human-readable form. Grant funding will support the added operational demands associated with incorporating this process into the CMA's workstream. The Department expects that grantees will collaborate with the Department to develop policy and procedures for utilizing this new data as a part of current practices, as well as support the development of best practices and lessons learned from the pilot.

Case managers will benefit from knowing when members have been hospitalized, alerting them to possible changes in functional needs and services and supports, as well as possible critical incidents. Case managers will be able to better coordinate care and participate in discharge planning with access to this information.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
The ARPA investment for this project will focus on providing CMA users access to ADT data already being acquired by the Department. CMA users will have the ability to receive ADTs in a much timelier manner and be more proactive in facilitating

transitions of care. This access and the new workflows that result will be relevant and available to CMA users beyond the life of the ARPA grant.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track-* The project is currently 50% complete. The project schedule, milestones, deliverables, and resources have all been established and approved by the project team.
- **Resource Status:** *On track-* The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track-* The project has selected a contractor and is working on finalizing contract requirements.
- **Budget Status:** *On track-* The project team has no current concerns related to the project budget.
- **General Project Update:** The project is proceeding on schedule and possesses adequate resources. The request for application process has closed and the project team has selected and awarded seven grantees. The project team is working with the grant financial vendor to complete deliverables and requirements for grant recipients.

Initiative 6.14. Data Sharing with the State Unit on Aging - Phase 4

The Department suspects that many LTSS older adult members are receiving services through their local community, including the Area Agencies on Aging. These individuals may not be accessing the care that they need and are eligible for through Medicaid. Understanding who these individuals are and what services they are relying on from community-based organizations will help the Department to better target services. Additionally, if the Department can improve access to Medicaid services for these individuals, it would free up resources for older adults who are not eligible for Medicaid LTSS.

In this project, the Department will work with the Office of Aging and Adult Services within the Department of Human Services to conduct a system mapping of program and IT systems to determine a mechanism to share data and information across offices. The goal will be to implement a technology solution to access the Area Agencies on Aging data to identify and better track Medicaid LTSS members who are receiving services. Current efforts are underway through Colorado's Health IT Roadmap led by the Office of eHealth Innovation to accelerate the sharing of information and establish infrastructure, governance, and policy that enable the

broader health IT ecosystem and State agencies to support care delivery and quality measurement.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
The collaboration fostered between the Office of Aging and Adult Services and the Department's Medicaid Office addresses alignment with people, process, and technology to better track Medicaid LTSS members who are receiving services. The technology implementation funded by the ARPA grant will create new opportunities to more efficiently and effectively serve these members well into the future.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- This project is currently 34% complete. The project schedule, milestones, deliverables, and resources have all been established and approved by the project team.
- **Resource Status:** *On track*- This project is staffed with adequate resources to complete activities and tasks by the projected end date.
- **Contract Status:** *On track*- The project team has selected a contractor and is working on finalizing contract requirements.
- **Budget Status:** *On track*- The project team has no concerns related to the budget.
- **General Project Update:** This project is currently on track with all tasks. The project team is working to secure a contractor to complete identified deliverables.

Initiative 6.15. Interface with Trails - Phase 2

The Department will implement system changes to connect Trails, the State's child welfare system, with the MMIS to allow counties to improve quality and reduce duplicate cases. This will improve the eligibility determination process for LTSS utilizers. The interface will allow county staff to determine if a child who is going to be entered in Trails already has an open case in another system. This will be accomplished in three phases including: training for county DHS workers, the ability for cross-referencing across the two systems and allowing Trails and the MMIS to communicate in real time. The project team will leverage an interagency agreement with the Department of Human Services, who will identify and contract with the vendor who will make changes within the Trails System.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
The technical redesign proposed with this project will improve the process of administering LTSS services and reducing duplicative efforts at the County level. These process improvements will extend beyond the lifecycle of the ARPA grant.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *Watch*- The project is currently 41% complete. The project tasks related to the long-term solution are still slightly behind schedule. The project team is actively working to get the project back on track.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *Watch* The contractor to support this project is currently moving through the procurement process and is behind schedule.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.
- **General Project Update:** The project is currently on track with all tasks, except for the minor delay related to the long-term solution to remove SIDMOD from the Mainframe. The following areas are in Watch status: Schedule and Contract. The team has received a timeline for completion of the work by the Office of Information and Technology and has engaged ARPA Leadership to ensure tasks continue moving forward. All other areas are progressing as planned. The training desk manuals are in final clearance and will be released shortly. The mid-term solution to add the ability for real-time verification of records is moving through the change orders process and technical specification review.

Initiative 6.16. Eligibility Systems Improvements - Phase 4

The Department will improve eligibility systems to hasten application processing, improve determination accuracy, and provide real-time provider eligibility status insights. To do this, the Department will streamline eligibility processing for HCBS members. This will include system enhancements, policy requirements, modifications, and training to address barriers to long-term care eligibility. Part of the project will be to create a bidirectional interface between CBMS and the CCM.

These changes will further automate the exchange of information between case managers and county technicians and eliminate the need to maintain a third system acting as a go-between for the entities, increasing operational efficiency and improving the member experience.

State Plan Amendment and Waiver Information
Changes to long-term care eligibility addressed with these system improvements may require waiver and/or State Plan Amendment amendments. The specific provisions of the waiver or State Plan Amendments will be determined once the CCM system, which is scheduled to launch in April 2022, is stabilized post-deployment and that these new enhancements/capabilities can be introduced.

Sustainability Plan
The new capabilities and workflows supported by this project will enhance application processing well beyond the life cycle of the ARPA grant. In addition, the funding will help identify gaps in the current long-term care eligibility process and workflows, which will be filled and mitigated with new programs or policies. Finally, the bi-directional interface between CMBS and CCM and the elimination of the third system that acts as an interface today, will introduce efficiencies that will extend beyond the grant period.

Status Update
- **Overall Project Status:** *Watch*
- **Project Plan & Schedule Status:** *Watch*- The project is currently 11% complete. The project schedule, milestones, deliverables, and resources are under review. Once changes are approved and implemented by the project team, the project will be back on track. The project has been approved for an extension through December 31, 2024. The project team is working to revise the schedule to align with the new end date and will re-baseline the full schedule once complete.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *Watch*- The assignment of a contractor to support this project is in review at this time. The ARPA team is working to gain clarity on that assignment and if it provides the support this project requires.
- **Budget Status:** *On track*- The project team has no concerns related to the budget for this project.
- **General Project Update:** The project schedule, milestones, deliverables, and resources are behind. The ARPA support team is working with the project lead

to get the project fully launched and on track. The project team has discussed a change in scope, but this will require a presentation to ARPA Leadership to gain approval for this change. Staffing capacity concerns have been elevated and cross-departmental leaders are working on a solution to that challenge. Because of these capacity concerns and the potential scope change, the project is behind schedule.

7.   Expand Emergency Preparedness

Initiative 7.01. Emergency Response Plans - Phase 4

One initiative to support future emergency preparedness is developing provider emergency preparedness and response plans. These will be resources that outline how providers will assist members with preparedness, and in the event of an emergency, how they will provide direct support. A Contractor will research national standards for emergency preparedness for various provider types. Based on that research, the Contractor will develop tools and resources for providers in developing emergency preparedness and response plans. These resources will be made readily available for current and new providers.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
This project will support providers with tangible plans, skills, and materials to continue operations in the event of an emergency. The Department is confident that these assets will benefit these providers long into the future and well beyond the ARPA grant period.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 22% complete. The project tasks, deliverables and milestones are progressing as planned and remain on schedule.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The contractor to support this project has been selected by the Department and is beginning work.

- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.
- **General Project Update:** This project is proceeding on schedule and possesses adequate resources. The project team is onboarding the contractor who will begin work on the design of the tools and resources for providers.

Initiative 7.02. Member Emergency Preparedness - Phase 4

In addition to providing resources for providers, the Department will assist members with disabilities and those with mental health needs who live independently in the community to be prepared for potential emergencies by providing resources, supplies, and/or education. The Department will develop and execute a strategic plan to prepare members with disabilities, including behavioral health needs, for emergencies. The plan will address educational efforts, individual emergency plan development, and the distribution of resources and supplies, such as generators.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
This project will provide members with disabilities and those with mental health needs tangible plans, skills, and materials to continue living independently in an emergency situation. The Department is confident that these assets will benefit these members long into the future and well beyond the ARPA grant period.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 15% complete. The project tasks, deliverables and milestones are progressing as planned and remain on schedule. The project has been approved for an extension through December 31, 2024, and the schedule has been updated and re-baselined reflecting the new end date.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The contractor to support this project has been selected by the Department and is beginning work.
- **Budget Status:** *On track*- Following an in-depth evaluation of projects eligible for an administrative match, it was determined that this project would move to state-only. Thus, the project's budget was reduced to remove the federal share.

- **General Project Update:** This project is proceeding on schedule and possesses adequate resources. The team is onboarding the contractor who will outreach members who may benefit from the creation of emergency preparedness plans and the distribution of generators.

Capital Expenditures
We are currently reviewing this initiative to determine whether it will involve capital expenditures as identified under 2 CFR 200.439 and 2 CFR 200.1.

8.   Enhance Quality Outcomes

Initiative 8.02. Provider Oversight - Phase 3

The Department operates ten waivers to provide HCBS to our members. To do this, the Department contracts with the Colorado Department of Public Health and Environment (CDPHE) to certify providers, demonstrating they meet state and federal requirements regarding the safety and well-being of consumers. The certification process involves an initial survey when the provider enrolls in Medicaid and unannounced re-certification surveys periodically thereafter, in most cases every three years. Through onsite visits, surveyors capture comprehensive information on policies and procedures, consumer experience and satisfaction with services, staff perspectives on care quality, alignment between care plans and service delivery, and, in the case of residential settings, facility safety and cleanliness.

The Department has identified challenges with the certification processes, including lack of standardization across provider types and an increasingly complex process and workload. In addition, The Department does not have the tools necessary to analyze information on certification outcomes and hold providers to higher standards of quality of care.

The Department will finalize and implement work started in 2016 to address these challenges and to streamline the CDPHE oversight and application process. Specifically, the following work will be accomplished:
- Confirm prior decision points made on where the process could be simplified, or unnecessary steps could be eliminated entirely with the goal of reducing the time it takes a provider to become enrolled
- Implement a 3-tier system for all waiver services based on risk for fraud and abuse

- Facilitate and support break-out cross-Department groups in making necessary changes
- Provide support to streamline and align the certification processes across survey types
- Make recommendations to improve data collection and sharing, so data is actionable
- Create an action plan and timeline to implement recommendations from 2016 such as:
  - Allow deeming based on accreditation,
  - Streamline and align current survey certification processes,
  - Emphasize Quality Management Programs,
  - Enhance remediation strategies, and
  - Create a comprehensive picture of provider quality.
- Create recommendations to integrate the surveying and provider enrollment processes more fully across CDPHE, HCPF, and its vendors, such as:
  - An electronic workflow that would allow a warm handoff from CDPHE to HCPF for enrollment to bill for services once survey work is completed, and
  - Creation of an identification method for the shared tracking of providers across the two agencies.
- Make updates to the COHFI system, the provider portal used with our sister agency, CDPHE. The project will modify COHFI to allow providers to pull down information necessary to complete key aspects of HCPF's provider enrollment and revalidation process.

State Plan Amendment and Waiver Information

It is likely that the extensive review of our existing provider-focused waivers will require modifications to some if not many existing waivers. While the Department is just beginning the process of creating project plans for the Phase 2 projects at the time of this writing, it is likely that the specifics of the waiver changes for this project will not be available until Q1 2023.

Sustainability Plan

As noted above, provider oversight and certification has been a priority for the Department and the State for a number of years, and the ARPA funds provide an important investment and catalyst for needed changes and improvements.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 12% complete. The project tasks, deliverables and milestones are progressing as planned and remain on schedule.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The contractor is consistently meeting deliverables and the quality of work meets expectations.
- **Budget Status:** *On track*- $100,000 in additional funds were approved to be added to the project's budget. These funds will be utilized to support new system changes.
- **General Project Update:** The project is on track. The key informant interviews have been conducted and we have received the first draft of the deliverable. The project was approved for a scope change to add a new component to the project. The project will now also support modification of CDPHE's provider portal called COHFI. The changes to COHFI will allow providers to pull down information necessary to complete key aspects of HCPF's provider enrollment and revalidation process, saving Department staff and providers' considerable time.

Initiative 8.04. Pay-for-Performance for PACE - Phase 2

The Department will identify key performance measures to incorporate into a pay-for-performance methodology within the PACE capitation payments. The percentage for each performance measure will be identified and the monitoring processes and reporting requirements will be outlined. The appeals process and contractual language will also be developed.

State Plan Amendment and Waiver Information
It is likely that a waiver will be needed to support these changes if the Department decides to implement a pay for performance for PACE services. Once the Department acquires additional information as this project proceeds, the Department will evaluate whether to implement these changes.

Sustainability Plan
The Department anticipates that the creation of pay-for-performance methodologies for PACE and the process of creating monitoring and reporting requirements around that methodology will sustain the impacts of the initial project investment.

Status Update

- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 38% complete. The project tasks, deliverables and milestones are progressing as planned and remain on schedule. The project has been approved for an extension through December 31, 2024. The project team is working to revise the schedule to align with the new end date and will re-baseline the full schedule once complete.
- **Contract Status:** *On track*- The contractor is consistently meeting deliverables and the quality of work meets expectations.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget. The project budget for this project has been combined with 8.06 since both projects are working with the same contractor.
- **General Project Update:** This project is proceeding on schedule and possesses adequate resources. The contractor is currently examining pay for performance models in other states and timely providing all deliverables as required.

Initiative 8.05. Pay-for-Performance for Home Health and Residential HCBS - Phase 3
Note: As of June 2022, this project has incorporated project 6.03 Pay-for-Performance for HCBS under the scope of its efforts.

The Department will develop a pay-for-performance methodology for Long Term Home Health services. The changes will embrace the guidance in the proposed federal rule that accelerates the shift from paying for home health services based on volume, to a system that incentivizes value and quality. The proposed changes address challenges facing Americans with Medicare who receive health care at home. The proposed rule also outlines nationwide expansion of the Home Health Value-Based Purchasing (HHVBP) Model to incentivize quality of care improvements without denying or limiting coverage or provision of Medicare benefits for all Medicare consumers, and updates to payment rates and policies. The Department will look to this new proposed rule to design and develop methodologies and models to select the best value-based payment options for the Colorado Medicaid program.

Additionally, as part of this project, the Department will also develop a pay-for-performance methodology for HCBS residential settings. The Department currently pays for these services under a fee-for-service methodology, which rewards for volume of services rather than the quality of the care provided. The Department will shift to pay-for-performance programs within a few program areas. Recommendations will be developed on performance benchmarks, bonus pay amounts, and per diem.

State Plan Amendment and Waiver Information
These new models are not anticipated to be implemented until after the ARPA HCBS timeframe, thus no state plan amendment or waiver amendments will be pursued at this time. But it is likely that a SPA and/or waiver amendment will be needed to support these changes once the methodology is ready for implementation.

Sustainability Plan
The Department anticipates that the creation of pay-for-performance methodologies for the Long Term Home Health services and HCBS residential settings and the process of creating monitoring and reporting requirements around that methodology will sustain the impacts of the initial project investment. The Department is confident that this model will position the State as a nationwide leader in this area for the future.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 19% complete. The project tasks, deliverables and milestones are progressing as planned and remain on schedule.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The contractor to support this project has been selected by the Department and is beginning work.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.
- **General Project Update:** The staff member associated with this project started with the team in July 2022 and is fully integrated into the project. The team has executed a contract with an external vendor to conduct policy analyses, which will be complete by summer 2024. The team will work to engage a variety of stakeholders to review proposed measures for pay-for - performance measures in both Home Health and HCBS services.

Initiative 8.06. PACE Licensure - Phase 1

Within the PACE program, the Department will develop quality standards by establishing a PACE licensure type to ensure appropriate oversight and compliance. The Department will establish a PACE audit structure including fee cost, resource needs, timeline, survey elements, corrective action plan templates, reporting requirements, valid sample size, appeal process, performance measures, and

interview questions. The Department will also develop a system to record and capture incident reviews, complaints, survey results, and reports. This will require the Department to submit amendments to the State Plan and Program Agreements with each PACE Organization.

State Plan Amendment and Waiver Information
This project will require the Department to submit amendments to the State Plan and Program Agreements with each PACE Organization. The project anticipates developing the proposed audit structure in 2022, with the expectation of identifying specific state plan amendment requirements shortly thereafter, in early 2023.

Sustainability Plan
The PACE audit paradigm that this project will support will launch toward the end of the project period and will be implemented well beyond the early 2024 end date of the ARPA funding.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 32% complete. The project tasks, deliverables and milestones are progressing as planned and remain on schedule. The project has been approved for an extension through December 31, 24. The project team is working to revise the schedule to align with the new end date and will re-baseline the full schedule once complete.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The contractor is consistently meeting deliverables and the quality of work meets expectations.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget. The budget for this project has been combined with 8.04 since both projects are using the same contractor.
- **General Project Update:** This project is proceeding on schedule and possesses adequate resources. The contractor is currently examining possible PACE licensure models.

Initiative 8.07 eConsult to Improve Quality - Phase 4

The Department is implementing an eConsult system in FY 2021-22 to increase the capacity and capability of primary care providers, to reduce unnecessary specialist visits, and to connect appropriate specialist referrals to higher performing specialist

providers. The Department will research whether it is feasible to expand the eConsult program to include a broader array of specialists, such as providers that have expertise and good outcomes working with individuals with disabilities. The Department will adjust the overall eConsult design in accordance with federal feedback.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
This one-time policy analysis will inform future funding options that may expand access to eConsults to patients with disabilities and behavioral health needs.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *Watch*- The schedule is 10% complete. The project schedule, milestones, deliverables, and resources have all been established and approved by the project team. A decision was added regarding the need for a contractor, which will resolve late tasks.
- **Resource Status:** *On track*- The project team has all needed resources to complete this project on schedule.
- **Contract Status:** *Watch*- The contractor to support this project has not yet been selected.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.
- **General Project Update:** The project is on track despite the contractor and schedule status in watch. The project team is working to make a decision about contractor needs.

Initiative 8.08. HCBS Provider Quality Dashboard - Phase 2
Note: As of June 2022, this project has incorporated project 8.01 Provider Scorecards under the scope of its efforts and has been renamed HCBS Provider Quality Dashboard (previously titled CMS Quality Metrics).

The purpose of this project is to develop metrics to gather insight into gaps in care with the goal of improving services and supports. To have robust data, with particular attention to CMS quality metrics, which can be stratified by disability and SMI status, the Department will invest in data repositories that enable more robust insights into gaps in care as well as the providers and services with positive outcomes, supports, and programs for individuals receiving HCBS. The Department will share this data with

the RAEs and CMAs to help them connect members with the highest-performing providers. This information may also be leveraged by the above-described eConsult system. The Department will use the funding for systems investments to create clear data linkages necessary for dashboards to be operational.

Additionally, to support quality performance, the Department will develop public-facing provider scorecards. Scorecards can be used to identify providers that may need more intense oversight and to help consumers and their families make choices about their care. Providers with continuously low scores could face additional corrective action. The Department will create provider and CMA scorecards and will add the scorecards to the public-facing provider search tool. Applicable performance measures will also be included in the scorecard. The Department will develop metrics and a weighting algorithm incorporating provider input. Providers should understand metrics and underlying data sources and believe that scores accurately and meaningfully represent care quality. Provider input and buy-in can help the Department develop a better methodology, promote higher quality data collection, and encourage providers to improve performance based on findings. The Department will continue to update these scorecards moving forward.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
The data analysis anticipated with this project will inform policy, program, and project implementation in the future. In addition, establishing dashboards with more robust data will open opportunities to identify and share information about thriving programs, initiatives, and workflows in the administration of HCBS services. Additionally, the metrics and scorecard development will inform provider oversight and improve performance in the future.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project at 51% complete. The project tasks, deliverables, and milestones are progressing as planned and remain on schedule.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The contractor to support this project has been selected by the Department and is beginning work.

- **Budget Status:** *On track*- The project has no current concerns related to the project budget.
- **General Project Update:** The project is on track. The work with the contractor has recently launched and the first deliverable is expected in early 2023.

Initiative 8.09. Waiver Quality Expansion - Phase 4

To better understand where there are quality gaps in the HCBS waiver programs, the Department will expand waiver quality surveys and metrics. This will provide insights into member experience, member satisfaction, and whether members received care that they reported needing. The Department will utilize the data to recommend changes to waiver programs.

The Department will research and recommend the most appropriate member surveys to determine member experience, health outcomes, satisfaction, and quality outcome analysis measures. The Department will design and/or procure the surveys and implement member outreach, engagement, and survey completion. Waiver amendments may be required if modifications to performance measures are made as part of this initiative.

State Plan Amendment and Waiver Information
Waiver amendments may be required if modifications to performance measures are made as a part of this initiative.

Sustainability Plan
The surveys, outreach, and engagement supported by this project, as well as any waiver amendments that occur as a result, will inform HCBS policy in Colorado beyond the life of the ARPA grant.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 26% complete. The project tasks, deliverables and milestones are progressing as planned and remain on schedule.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The contractor is consistently meeting deliverables and the quality of work meets expectations.

- **Budget Status:** *On track*- The project team has no current concerns related to the project budget. The budget was increased by $114,357 to support the expansion of waiver satisfaction survey distribution and analysis.
- **General Project Update:** *On track*- This project is proceeding on schedule and possesses adequate resources. Case Management Items - Vital has closed the Survey. 580 total responses. Next steps: Download data, begin analysis, send comments to HCPF, define the type of analysis preferred. Child Waiver Satisfaction items - Conducted 4 focus groups with 4-6 parents/guardians and members. Analyzed focus group data. Focus group summary report drafted and sent to HCPF for feedback.

Initiative 8.10. Criminal Justice Partnership - Phase 3
Note: As of November 2021, this project has been renamed Criminal Justice Partnership (previously titled Department of Corrections Partnership), to reflect the engagement of the entire criminal justice system.

The Department has engaged with the Colorado Department of Corrections to address behavioral health services engagement as individuals are released from prison. This project will expand post-release support to members who are transitioning or may have already transitioned back into the community. The Department will address the following action items:

- Identification of best practices of engaging justice-involved members,
- Review and improve eligibility processes for waiver services prior to release,
- Identify most prevalent needs from these members and work with stakeholders to implement best practices,
- Collaborate with justice systems at each level (released from incarceration, parole and probation) to implement best practices,
- Work with state and local government and community-based organizations to identify solutions, develop meaningful metrics and build lasting support systems for individuals involved with the justice system,
- Partner with the Regional Accountability Entities to create member-reported information about the need for justice-specific care coordination. Provide training materials and education to RAEs, and
- Identify data system opportunities to monitor member enrollments in multiple systems and develop strategies to ensure data system connections are in place to improve coordination activities.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan

ARPA provides seed funding to create cross-agency connections both at an organizational and technical level to support an enterprise-wide paradigm shift in addressing behavioral health needs of individuals leaving the justice system.

Status Update

- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track-* The project is currently 26% complete. Project tasks, deliverables and milestones are progressing as planned.
- **Resource Status:** *On track-* The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On Track-* There is no contract associated with this project.
- **Budget Status:** *On track-* The project team has no current concerns related to the project budget.
- **General Project Update:** This project is proceeding on schedule and possesses adequate resources. The project team is conducting extensive stakeholder engagement with all parts of the criminal justice system to better understand gaps and resource needs. The team anticipates utilizing surveys and focus groups to develop best practice resources.

Initiative 8.11. EPSDT Benefits Training - Phase 2
Note*: As of March 2022, this project has been renamed EPSDT Benefits Training (previously titled Quality Measures & Benefits Training), to better reflect the scope and goals of the project.*

To ensure the best use of services potentially available to the HCBS population, the Department will develop training on quality performance measures with a focus on Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) benefit metrics. The team will use an analysis of EPSDT to illuminate current gaps in the HCBS program. The analysis will be used to create training materials that will include specific learning objectives on how and when to use EPSDT and how and when to use HCBS services. To the extent this analysis exposes policy gaps, this information would be used to inform policy and program adjustments. These trainings will also be used to assist the state to meet the federal requirement of an intersection of EPSDT and waiver services as outlined in the CMS Part V Manual.

To complete this project, the Department will provide a standard, adult learning training on EPSDT benefit and performance metrics. The final product will be posted

on Department websites and updated regularly as a sustainability mechanism. The training is expected to be 4-6 separate training modules.

State Plan Amendment and Waiver Information
There are no state plan amendments or waivers required for this project.

Sustainability Plan
Future updates to the training will be absorbed into regular Department training workflows. Additionally, the policy and program adjustments that are revealed as a component of the EPSDT gap analysis will help set the stage for future work in this area, beyond the life of the ARPA grant.

Status Update
- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 27% complete. The project tasks, deliverables and milestones are progressing as planned and remain on schedule.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The project team has selected a contractor and is working on finalizing contract requirements.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.
- **General Project Update:** This project is proceeding on schedule and possesses adequate resources. The contractor for this project is in the process of being onboarded and work will begin on the development of the training modules.

Appendix 2: Resources

Colorado Department of Health Care Policy & Financing HCBS ARPA Links
- HCPF ARPA Webpage:
  https://hcpf.colorado.gov/arpa
  - ARPA Project Pulse Newsletters:
    https://hcpf.colorado.gov/arpa/newsletter
  - ARPA Grant Opportunities:
    https://hcpf.colorado.gov/arpa/arpa-grant-opportunities

Center for Medicare & Medicaid Services (CMS) HCBS ARPA Links
- HCPF Spending Plan Submitted to CMS:
  https://hcpf.colorado.gov/sites/hcpf/files/CO%20State%20Spending%20Plan%20for%20Implementing%20Section%209817%20of%20ARPA%2C%20June%202021_Acc.pdf
  - Appendix:
    https://hcpf.colorado.gov/sites/hcpf/files/American%20Rescue%20Plan%20Act%20-%20Project%20Cost%20Estimate_Acc.pdf
- Initial CMS Partial Approval Letter:
  https://hcpf.colorado.gov/sites/hcpf/files/Colorado%209817%20Approval.pdf
- HCPF Response to Partial Approval:
  https://hcpf.colorado.gov/sites/hcpf/files/CMS%20ARP.Response%20Letter8.2.21.pdf
- CMS Conditional Approval Letter:
  https://hcpf.colorado.gov/sites/hcpf/files/CO%20CMS%20ARPA%20Conditional%20Approval%209-21-2021.pdf

Quarterly Reports to CMS:
- CMS Quarterly Report #1 (submitted November 1, 2021):
  https://hcpf.colorado.gov/sites/hcpf/files/ARPA%20Spending%20Plan%20Quarterly%20Report%201%20to%20CMS-Nov.%201%2C%202021.pdf
- CMS Quarterly Report #2 (submitted February 1, 2022):
  https://hcpf.colorado.gov/sites/hcpf/files/CO%20ARPA%20HCBS%20Spending%20Plan%20Quarterly%20Report%202%20to%20CMS-%20February%201%2C%202022.pdf
- CMS Quarterly Report #3 (submitted April 18, 2022):
  https://hcpf.colorado.gov/sites/hcpf/files/ARPA%20HCBS%20Spending%20Plan%20Quarterly%20Report%203%20to%20the%20JBC%20May%202%2C%202022.pdf
- CMS Quarterly Report #4 (originally submitted July 18, 2022; resubmitted August 24, 2022):

https://hcpf.colorado.gov/sites/hcpf/files/ARPA%20Spending%20Plan%20Narrative%20Q1%202023%20to%20CMS-%20July%2018%2C%202022-%20Revised%208.24.22.pdf
- CMS Quarterly Report #5 (originally submitted October 18, 2022; resubmitted October 28, 2022): https://hcpf.colorado.gov/sites/hcpf/files/ARPA%20Spending%20Plan%20Narrative%20Q2%202023%20to%20CMS-%20October%2018%2C%202022-%20Revised%2010.28.22.pdf

Joint Budget Committee ARPA HCBS Links
- Senate Bill 21-286: http://leg.colorado.gov/sites/default/files/2021a_286_signed.pdf
- HCPF Spending Plan Submitted to the JBC: https://hcpf.colorado.gov/sites/hcpf/files/FY%202022-23%20ARPA%20Spending%20Plan.pdf
  - Appendix: https://hcpf.colorado.gov/sites/hcpf/files/FY%202022-23%20ARPA%20Spending%20Plan%20Appendix%20A.pdf
- Presentation to the Joint Budget Committee: https://hcpf.colorado.gov/sites/hcpf/files/ARPA%20JBC%20Presentation%209.21.pdf

Quarterly Reports to the JBC:
- JBC Quarterly Report #1 (submitted November 1, 2021): https://hcpf.colorado.gov/sites/hcpf/files/ARPA%20Spending%20Plan%20Quarterly%20Report%201%20to%20the%20JBC-%20Nov.%201%2C%202021.pdf
  - Appendix: https://hcpf.colorado.gov/sites/hcpf/files/ARPA%20Quarterly%20Report%201%20-%20Appendix%20A.pdf
- JBC Quarterly Report #2 (submitted February 1, 2022): https://hcpf.colorado.gov/sites/hcpf/files/ARPA%20HCBS%20Spending%20Plan%20Quarterly%20Report%202%20to%20the%20JBC-%20February%201%2C%202022.pdf
  - Appendix: https://hcpf.colorado.gov/sites/hcpf/files/Supplemental%20Document%202-1-22.pdf
- JBC Quarterly Report #3 (submitted May 2, 2022): https://hcpf.colorado.gov/sites/hcpf/files/ARPA%20HCBS%20Spending%20Plan%20Quarterly%20Report%203%20to%20the%20JBC%20May%202%2C%202022.pdf
  - Appendix:

https://hcpf.colorado.gov/sites/hcpf/files/Supplemental%20Document%2005-01-2022.pdf

- JBC Quarterly Report #4 (submitted August 1, 2022): https://hcpf.colorado.gov/sites/hcpf/files/Final%20ARPA%20HCBS%20Spending%20Plan%20Quarterly%20Report%204%20to%20the%20JBC%20Aug%201%202022.pdf
  - Appendix: https://hcpf.colorado.gov/sites/hcpf/files/Supplemental%20Document%2008-01-2022.pdf
- JBC Quarterly Report #5 (submitted November 1, 2022): https://hcpf.colorado.gov/sites/hcpf/files/ARPA%20HCBS%20Spending%20Plan%20Quarterly%20Report%205%20to%20the%20JBC%20Nov%201%202022.pdf
  - Appendix: https://hcpf.colorado.gov/sites/hcpf/files/Supplemental%20Document%20-%20%20October%202022.pdf

Federal HCBS ARPA Links
- ARPA Legislation: https://www.congress.gov/bill/117th-congress/house-bill/1319/text
- Home & Community Based Services Section of ARPA: https://www.congress.gov/bill/117th-congress/house-bill/1319/text#toc-H04B309FDB3FA4109B306C6622D55C4D8
- CMS ARPA Guidance: https://www.medicaid.gov/federal-policy-guidance/downloads/smd21003.pdf