



COLORADO

Department of Health Care
Policy & Financing

Q2 2023 QUARTERLY REPORT

Colorado Spending Plan for 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*

October 18, 2022

Submitted to: The Centers for Medicare & Medicaid Services

Quarterly Report Submission to CMS
Q2 2023 Report
July 2022- September 2022



COLORADO
Department of Health Care
Policy & Financing

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

October 18, 2022

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop: S2-26-12
Baltimore, Maryland 21244-1850

To Whom it May Concern,

The Colorado Department of Health Care Policy & Financing is pleased to share the fifth Quarterly Progress Report in alignment with the CMS Medicaid Director Letter SMD 21-003 dated May 13, 2021 and subsequent guidance. In accordance with that request, this report includes the narrative for our key spending priorities, updates on project progress, and an updated spending plan. Per the State Medicaid Director's Letter sent on June 3, 2022, we acknowledge that the narrative component of the spending plan is only required every other quarter, though we have provided it this quarter because a number of projects have scope or budget changes that are being requested. We also assure CMS of the following:

- Colorado will use the federal funds attributable to the increased federal medical assistance percentage (FMAP) to supplement and not supplant existing state funds expended for Medicaid Home and Community-Based Services (HCBS) in effect as of April 1, 2021;
- Colorado will use the state funds equivalent to the amount of federal funds attributable to the increased FMAP to implement or supplement the implementation of one or more activities to enhance, expand, or strengthen HCBS under the Medicaid program;
- Colorado will not impose stricter eligibility standards, methodologies, or procedures for HCBS programs and services than were in place on April 1, 2021;
- Colorado will preserve covered HCBS, including the services themselves and the amount, duration, and scope of those services, in effect as of April 1, 2021; and
- Colorado will maintain HCBS provider payments at a rate no less than those in place as of April 1, 2021.

Please provide any response to me with a copy to Adela Flores-Brennan, Medicaid Director, at adela.flores-brennan@state.co.us and Kim Bimestefer, Department Executive Director, at Kim.Bimestefer@state.co.us.

Sincerely,

Bonnie Silva

Director, Office of Community Living

cc: Kim Bimestefer, Executive Director, Colorado Department of Health Care Policy & Financing;
Adela Flores-Brennan, Health Policy Office, Colorado Department of Health Care Policy & Financing

Colorado Spending Plan Quarterly Report

Table of Contents

Introduction	4
Budget Overview	7
Project Overview	9
Stakeholder Engagement	12
Analytics & Project Tracking	12
Oversight & Compliance	22
Timeline and Next Steps	28
Appendix 1: Project Descriptions & Updates	30
Strengthen the Workforce & Enhance Rural Sustainability	30
Improve Crisis & Acute Services	35
Improve Access to HCBS For Underserved Populations	36
Support Post-COVID Recovery & HCBS Innovation	38
Invest in Tools & Technology	41
Expand Emergency Preparedness	46
Enhance Quality Outcomes	48
Appendix 2: Project Initiatives Identified by Phase & Category	51
Appendix 3: Resources	55

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 63 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 July 18, 2022, the Department has launched our final Phase of projects, Phase 4 with 11 new initiatives. Across the projects launched to date, Phases 1-4, we have a total of 63 projects actively underway. Nearly all of these initiatives have finalized project plans which include detailed timelines and deliverables. All teams have hired and onboarded their term-limited staff who will support the successful implementation of the work. Teams continue mapping out their stakeholder engagement plans, with many engagements already 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 July and September 2022, the Department hosted two stakeholder meetings attended by providers, advocates, members, and families to continue to keep them

informed on progress and to garner feedback and recommendations. In addition to these large stakeholder webinars, project-specific engagement is now well underway. The Department has also continued to update the HCBS ARPA webpage and has released three new ARPA Project Pulse Newsletters, a monthly update for stakeholders on the status of ARPA initiatives and upcoming engagement opportunities.

We would like to again thank the Centers for Medicare and Medicaid Services for the one-year extension for states to spend the 10% enhanced FMAP funds allowed under ARPA Section 9817 outlined in the [State Medicaid Director's Letter](#) sent on June 3, 2022. We acknowledge that there are no additional funds provided through this extension, rather, an allowance of more time to spend current funds. We also accept that with this extension in time, a state must commit to continue to follow the Maintenance of Effort requirements outlined in the original [State Medicaid Director's Letter](#) sent on May 13, 2021 outlining ARPA HCBS requirements. The Department spent several months reviewing and analyzing the impact this extension could have on current efforts underway. Understanding that more time would improve the outcome for many of our more complex ARPA HCBS projects, while also weighing the impact of extending the MOE on current work, the Department has decided to leverage this time extension but only through December 31, 2024.

An extension request process has been established and is now being utilized to review and approve individual projects that would like to leverage the additional time. All project teams are being encouraged to maintain their initial timeline and project schedule unless there are substantial risks to underspending or not successfully completing the project by the original deadline of March 31, 2024. In those instances, the project team can request approval to extend their project timeline up to the new end date of December 31, 2024. To date, 13 projects ([table 1](#)) have requested and received approval to change their project completion date to December 31, 2024. We anticipate additional projects making a request to extend their timeline over the next several months. 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. These requested staff extensions will be included in the Department's upcoming supplemental budget request to the Colorado Joint Budget Committee and included in our January 16, 2023 Quarter Spending Plan. 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.

Table 1. Initiatives with Extended Timelines

Project #	Project Name
2.01	Behavioral Health Transition and Support Grants
2.02	Expand Behavioral Health Crisis Teams
3.06	Expand the Behavioral Health Safety Net
3.07	Wrap-Around Services
4.03	Child/Youth Step Down Options Program and Provider Recruitment
4.05	Pilot CAPABLE
4.12	Community First Choice
6.01	Home Health/PDN Acuity Tool
6.06	Provider Digital Transformation & EHR Upgrades
6.08	Care & Case Management System Investments
6.10	Member Data Sharing
6.12	Systems Infrastructure for Social Determinants of Health
7.02	Member Emergency Preparedness

Per the June 3, 2022 [State Medicaid Director's letter](#), this quarterly report only requires an HCBS Spending Plan. Because several projects have requested changes in scope and budget over the past quarter, we have also opted to include this abbreviated HCBS Spending Narrative report in our submission. A full narrative report, providing status updates for all 63 initiatives, will again be provided for our next quarterly report submission, on January 16, 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 red text for ease of identification. Only those projects that have had a change in scope or budget are included in the Appendix.

Budget Overview

The ‘**Supplemental Document 10-1-22**’ 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.

Revised Estimates

As previously shared, we have heard from providers that the retroactive billing of the 2.11% rate increases was burdensome. Though the Department has made every effort to assist providers in their efforts to bill, including hosting technical assistance webinars and issuing guidance, the drawdown of the retroactive rate increase remains lower than projected. For this reason, the Department will soon issue guidance notifying providers that they will no longer be able to bill the retroactive portion of the 2.11% rate increase as of November 18, 2022, which aligns with timely filing. At the same time that retroactive billing remains low, 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.

To adjust for the shortfalls in rate billing, the Department has revised the forecast which reduces the overall estimated expenditure when compared to the last report. The Department’s current forecast estimates \$511.2 million in expenditure to support enhancing, expanding, and strengthening our HCBS system, including \$286.6 million from state funds and \$224.6 million from matching federal funds. The funding will be spread out over three fiscal years as shown in **table 2** below. With the recent extension allowed by CMS, the spending will now continue into FY2024-25, with all spending concluding in December 2024. The budget will be updated with these new dates and provided in the January 2023 ARPA Spending Plan Quarterly Report. The Department is developing a plan to reinvest the under-expended dollars and will also include the reinvestment plan in the next quarterly report and in the Department’s Supplemental Budget Request.

Table 2. Revised Planned Spending by Year

Total	FY 2021-22	FY 2022-23	FY 2023-24
\$511.2 million	\$93.4 million	\$306.0 million	\$111.8 million

Additional Funds for Reinvestment Identified

In addition to the funds identified for reallocation through the reduction in the forecast, the Department had also identified an additional \$22.8 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 HCBS technology projects which will result in an additional \$15.6 million in federal funds that can be drawn down by including four projects in the Advanced Planning Document (APD) process. The Department is currently developing a reinvestment plan for the additional \$22.8 million and will include an update in the next quarterly ARPA Spending Plan Report.

Budget Changes

In addition to overall budget changes, since July 1, 2022, several project budgets have been adjusted to account for changes in scope or changes in project needs. See **table 3** below for more details.

Table 3. Project Budget Adjustments (July-September 2022)

Project Number	Project Name	Budget Change	Description
1.09	Workforce Compensation Research	+\$20,000	Contractor came in over budget; funds moved from project 1.07
1.07	Public Awareness Campaign	-\$20,000	Funds moved to 1.09 to support contractor needs
6.03	Member Facing Provider Finder Tool	+\$50,000	Estimates for required technical changes came out higher than anticipated; funds moved from project 1.03
1.03	Standardized Core Curriculum	-\$50,000	Decrease of funds to support 6.03 project needs
8.04 & 8.06	PACE Pay for Performance & PACE Licensure	+\$25,478	These two project budgets have been combined for ease of contracting; added additional funds for contractor needs; funds moved from project 4.01
4.01	Residential	-\$43,130	Contract came in under budget and

	Innovation		team determined there are no other immediate needs for the extra funds; budget decreased; funds supporting PACE request
7.01 & 7.02	Emergency Response Plans & Member Emergency Preparedness	No impact	These two project budgets have been combined for ease of contracting; no other changes made

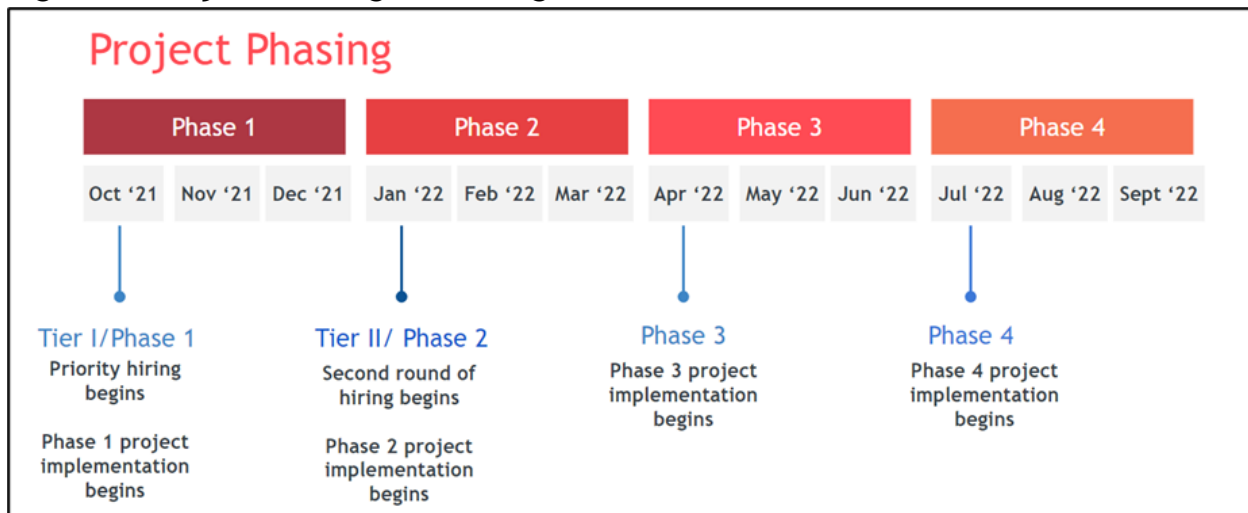
Additional Funding Requested

The Department is not requesting any additional funding in this reporting period. The Department will propose funding requests in the Supplemental Budget Request and through our January 2023 Quarterly Report after evaluating which projects to invest in with the additional funding available from the 10% FMAP savings, lower than anticipated rate increase expenditure, and additional federal funding for ARPA technology projects.

Project Overview

The Department continues to make significant progress towards executing the 63 initiatives to enhance, expand and strengthen Colorado’s HCBS system. As of July 1, 2022, the Department has launched all projects (phases 1-4) (see **figure 1**). The projects by phase include: 22 phase 1 projects, 18 phase 2 projects, 12 phase 3 projects and 11 phase 4 projects. This phased approach has allowed the Department to make project initiation more manageable for both our project teams and our ARPA project support staff. A complete listing of projects by phase and category may be found in **Tables 7-10**.

Figure 1. Project Phasing and Hiring Tiers



There have been scope changes made to seven projects since our last report. 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.

- **Project 1.06 “Career Pathways”** has changed its scope. The original project plan included interagency agreements (IAs) with three other state agencies to support career pathways for direct care workers. Two IAs have been signed to date. The final agency continues to have conversations and discussions with the Department about this opportunity but has not yet committed to participating. The team will leverage funds not spent due to the delay in the execution of the IA to work with Arapahoe Community College (ACC). Work with ACC will include the development of career pathway mapping with the lens of youth, apprenticeships, and alignment with currently available workforce and community programs.
- **Project 2.02 “Expand Behavioral Health Mobile Crisis Teams”** project team will be working collaboratively with the Behavioral Health Administration (BHA) to facilitate the awarding of the grants for this project. 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.

- **Project 3.08 “AI/AN Culturally Responsive Services Capacity Grants”** has clarified the eligible grantees. 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. In addition to the direct support provided to the tribal nations, the Department will be partnering with a local Urban Indian Health Program to fund the expansion of behavioral health and HCBS services.
- **Project 4.08 “Respite Grant Program”**: As communicated to CMS through a revised Q4 2021-2022 Quarterly Report submitted August 24, 2022, eligible recipients for the Respite Grant program have been clarified. For these state-only grants, the majority of funding must go to Health First Colorado members who are either a caregiver or a care recipient and would benefit from respite services. Grantees may also extend or expand their programs to target those who may or soon will be eligible for Medicaid, or siblings of Health First Colorado members.
- **Project 6.06 “HCBS Digital Transformation”** has changed its name and scope slightly. The name will now be “Provider Digital Transformation & EHR Upgrades” to align with a clarification of the provider types that are eligible to participate. Additional language has been added to the project description to better describe that HCBS and behavioral health providers, as well as Case Management Agencies, are eligible for the grants. The description has also been clarified to further specify the types of capital expenditures that will be allowable through the grant.
- **Project 6.05 “Member Tech Literacy”** has changed its scope. The project will now include a pilot of a new Member Technology Training. The goal of the pilot is to test and evaluate the curriculum. This new approach allows for member education beyond the ARPA period.
- **Project 6.13 “Connect Case Management Agencies (CMAs) to Admission, Discharge, and Transfer (ADT) Data”** has changed its scope to become an optional, grant-funded pilot program to provide participating CMAs with human readable, timely ADT data for their members. The funding provided through the grant will support the additional operational and policy development work required to execute the pilot. Additionally, by running this project as a pilot, CMAs will be able to provide structured feedback to support development of best practices around use of ADT in case management.

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 improvements and additions made to the [ARPA HCBS webpages](#), including the new “[Grant Opportunities](#)” page, which provides easy access to information about grant opportunities and direct links to open Requests for Applications
 - Analytics from August 21, 2022 - September 19, 2022:
 - 3,994 Total Pageviews (38.5% increase from last quarter)
 - 3,003 Unique Pageviews
 - Top 5 Subpages (in order of most views):
 - [ARPA Grant Opportunities](#)
 - [Support Post-COVID Recovery & Innovation Projects](#)
 - [Project Directory](#)
 - [Invest in Tools & Technology Projects](#)
 - [Workforce & Rural Sustainability Projects](#)
- Released three new editions of our Project Pulse monthly ARPA HCBS newsletter to share updates, highlight successes, and provide information about upcoming engagement opportunities
 - [July 2022 Newsletter](#)
 - [August 2022 Newsletter](#)
 - [September/October 2022 Newsletter](#)
- Through September 2022, 966 individuals are signed up to receive the Project Pulse ARPA HCBS newsletter
- Hosted two quarterly ARPA HCBS webinars and continued project-specific stakeholder engagement for select projects
 - 179 stakeholders participated in two ARPA HCBS webinars
 - 42 meetings with 832 total participants for project-specific engagement
- For stakeholder engagement related to ARPA HCBS to date, the Department has conducted 85 meetings with a total of 4,394 attendees

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 (**tables 4-6-7**) 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 4** under ‘item’. For each item, the project is designated as being ‘on track’, ‘watch’, or ‘needs help’. The PSA follows the description provided in **table 4** to make that determination. For risks and issues, the PSA uses the risk matrix (**table 5**) and issues matrix (**table 6**) 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 63 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 4. 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 $\geq .90$ 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 3/31/2024	Moderate, high, or significant task/schedule item overdue by 15 - 29 days AND Project is set to be complete by 3/31/2024	Moderate, high, or significant task/schedule item overdue by > 30 calendar days OR Project schedule pushes beyond 3/31/2024
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

Table 5. Risk Matrix

Probability	Severity				
	Very Low (1)	Low (2)	Medium (3)	High (4)	Very High (5)
Very Low (1)	1	2	3	4	5
Low (2)	2	4	6	8	10
Medium (3)	3	6	9	12	15
High (4)	4	8	12	16	20
Very High (5)	5	10	15	20	25

Table 6. Issue Matrix

Resolution	Severity				
	Very Low (1)	Low (2)	Medium (3)	High (4)	Very High (5)
Low effort and quick to resolve (1)	1	2	3	4	5
Moderate effort and quick timeline to resolve (2)	2	4	6	8	10
Moderate effort and moderate timeline to resolve (3)	3	6	9	12	15
Significant effort and moderate timeline to resolve (4)	4	8	12	16	20
Significant effort and will take a long time to Resolve (5)	5	10	15	20	25

All phase 1 through 4 project plans have been uploaded into PWA. 62 of the 63 project schedules have been baselined, or formally approved by the project team, and moved into management. One project, 6.16 Eligibility System Improvements is a Phase 4 project and has not yet been baselined. The capacity and scope of this project are influenced by the ability to synthesize PeakPro and the Department's new Care and Case Management (CCM) tool functionality to which timelines are being solidified. This project aims to close any resulting gaps before Go Live of the CCM tool. We anticipate that the project will be baselined once those timelines have been finalized.

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 number of projects requiring either an amendment to the State Plan or Waiver Program and the status of this activity. For those initiatives known to require an amendment, the process status of the effort is displayed. Per guidance from CMS on a Technical Assistance call, 'TBD' has been removed as an option on the dashboard. Previously, this referred to those projects which were in the process of evaluating a new benefit or service or exploring a change which may in the future require a SPA or waiver amendment. Because these Amendments are likely to occur outside of the ARPA HCBS time period, this status was removed. Moving forward, only projects requiring an Amendment during ARPA HCBS will be identified.

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. CMS Dashboard: Project Reporting, page 1

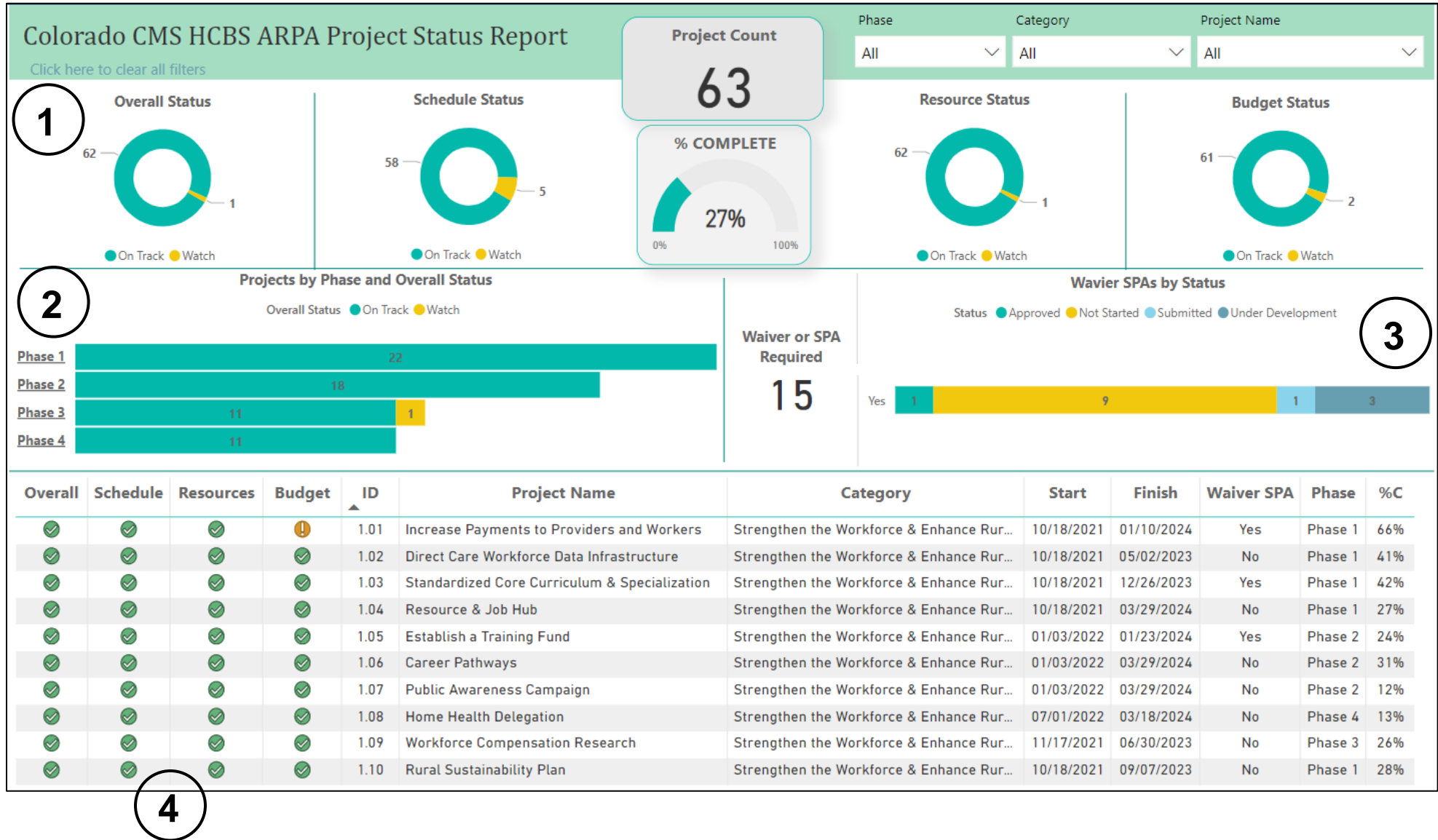


Figure 2. CMS Dashboard: Project Reporting, page 2

Colorado CMS HCBS ARPA Project Status Report (Page 2)												
Overall	Schedule	Resources	Budget	ID	Project Name	Category	Start	Finish	Waiver SPA	Phase	%C	
✓	✓	✓	✓	2.01	Behavioral Health Transition Support Grants	Improve Crisis & Acute Services	01/03/2022	04/10/2024	No	Phase 2	37%	
✓	✓	✓	✓	2.02	Expand Behavioral Health Crisis Teams	Improve Crisis & Acute Services	01/03/2022	10/25/2024	Yes	Phase 2	30%	
✓	✓	✓	✓	2.03	IMD Exclusion, Risk Mitigation Policy	Improve Crisis & Acute Services	01/03/2022	12/13/2023	Yes	Phase 2	26%	
✓	✓	✓	✓	3.01	Equity Study	Improve Access to HCBS for Underserve...	04/01/2022	11/09/2023	No	Phase 3	29%	
✓	✓	✓	✓	3.02	Buy-In Analysis	Improve Access to HCBS for Underserve...	07/01/2022	09/04/2023	No	Phase 4	18%	
✓	✓	✓	✓	3.04	HCBS Training for Members & Families	Improve Access to HCBS for Underserve...	11/17/2021	03/28/2024	No	Phase 3	24%	
✓	✓	✓	✓	3.05	Translation of Case Management Material	Improve Access to HCBS for Underserve...	11/17/2021	03/29/2024	No	Phase 3	10%	
✓	⚠	✓	✓	3.06	Expand The Behavioral Health Safety Net	Improve Access to HCBS for Underserve...	10/18/2021	03/11/2024	Yes	Phase 1	23%	
✓	✓	✓	✓	3.07	Wrap-Around Services, including Peer Supports...	Improve Access to HCBS for Underserve...	10/18/2021	10/31/2024	Yes	Phase 1	13%	
✓	✓	✓	✓	3.08	AI_AN Culturally Responsive Services Capacity ...	Improve Access to HCBS for Underserve...	04/01/2022	03/04/2024	No	Phase 3	20%	
✓	✓	✓	✓	4.01	Residential Innovation	Support Post-COVID Recovery and HCBS...	01/03/2022	04/20/2023	No	Phase 2	43%	
✓	✓	✓	✓	4.02	Promote Single Occupancy	Support Post-COVID Recovery and HCBS...	07/01/2022	07/13/2023	No	Phase 4	28%	
✓	✓	✓	✓	4.03	Child Youth Step-Down Options Program and Pr...	Support Post-COVID Recovery and HCBS...	10/18/2021	11/27/2024	Yes	Phase 1	15%	
✓	✓	✓	✓	4.04	Tiered Residential Rates & Benefits	Support Post-COVID Recovery and HCBS...	01/03/2022	09/29/2023	No	Phase 2	27%	
✓	✓	✓	✓	4.05	Pilot CAPABLE	Support Post-COVID Recovery and HCBS...	01/03/2022	04/03/2024	No	Phase 2	7%	
✓	✓	✓	✓	4.06	Supported Employment Pilot Extension	Support Post-COVID Recovery and HCBS...	10/18/2021	03/28/2024	No	Phase 1	20%	
✓	✓	✓	✓	4.07	New Systems of Care	Support Post-COVID Recovery and HCBS...	01/03/2022	03/29/2024	No	Phase 2	24%	
✓	✓	✓	✓	4.08	Respite Grant Program	Support Post-COVID Recovery and HCBS...	07/01/2022	03/18/2024	No	Phase 4	6%	
✓	✓	✓	⚠	4.09	Respite Rate Enhancement	Support Post-COVID Recovery and HCBS...	10/18/2021	06/26/2023	No	Phase 1	72%	
✓	✓	✓	✓	4.10	Home Modification Budget Enhancements	Support Post-COVID Recovery and HCBS...	10/18/2021	02/15/2024	Yes	Phase 1	30%	
✓	✓	✓	✓	4.11	Hospital Community Investment Requirements	Support Post-COVID Recovery and HCBS...	07/01/2022	12/13/2023	No	Phase 4	14%	
✓	✓	✓	✓	4.12	Community First Choice	Support Post-COVID Recovery and HCBS...	10/18/2021	03/29/2024	Yes	Phase 1	28%	
✓	✓	✓	✓	5.01	Case Management Capacity Building	Strengthen Case Management Redesign	10/18/2021	03/28/2024	Yes	Phase 1	46%	
✓	✓	✓	✓	5.02	Improve & Expedite Long-Term Care Eligibility ...	Strengthen Case Management Redesign	04/01/2022	03/22/2024	No	Phase 3	17%	

4

Figure 2. CMS Dashboard: Project Reporting, page 3

Colorado CMS HCBS ARPA Project Status Report (Page 3)												
Overall	Schedule	Resources	Budget	ID	Project Name	Category	Start	Finish	Waiver SPA	Phase	%C	
✓	✓	✓	✓	5.03	Case Management Rates	Strengthen Case Management Redesign	10/18/2021	10/04/2022	No	Phase 1	98%	
✓	✓	✓	✓	5.04	Case Care Management Best Practices	Strengthen Case Management Redesign	10/18/2021	03/29/2024	No	Phase 1	30%	
✓	✓	✓	✓	5.05	Case Management Agency Training Program	Strengthen Case Management Redesign	10/18/2021	05/10/2024	No	Phase 1	47%	
✓	✓	✓	✓	6.01	Home Health and PDN Acuity Tool	Invest in Tools & Technology	10/18/2021	07/05/2024	No	Phase 1	15%	
✓	✓	✓	✓	6.02	Specialty Search in Provider Specialty Tool	Invest in Tools & Technology	04/01/2022	10/27/2023	No	Phase 3	17%	
✓	✓	✓	✓	6.03	Member-Facing Provider Finder Tool	Invest in Tools & Technology	01/03/2022	03/07/2024	No	Phase 2	41%	
✓	⚠	✓	✓	6.05	Member Tech Literacy	Invest in Tools & Technology	01/03/2022	03/12/2024	No	Phase 2	25%	
✓	✓	✓	✓	6.06	HCBS Provider Digital Transformation & EHR E...	Invest in Tools & Technology	10/18/2021	10/14/2024	No	Phase 1	18%	
✓	✓	⚠	✓	6.07	Innovative Tech Integration	Invest in Tools & Technology	04/01/2022	03/15/2024	No	Phase 3	4%	
✓	✓	✓	✓	6.08	Care And Case Management System Investme...	Invest in Tools & Technology	10/18/2021	10/15/2024	No	Phase 1	55%	
✓	✓	✓	✓	6.09	Updates to Salesforce Database	Invest in Tools & Technology	10/18/2021	02/29/2024	No	Phase 1	27%	
✓	✓	✓	✓	6.10	Member Data Sharing	Invest in Tools & Technology	04/01/2022	03/25/2024	No	Phase 3	21%	
✓	✓	✓	✓	6.11	Centers for Excellence in Pain Management	Invest in Tools & Technology	01/03/2022	07/15/2024	No	Phase 2	42%	
✓	✓	✓	✓	6.12	Systems Infrastructure for Social Determinant...	Invest in Tools & Technology	10/18/2021	10/21/2024	No	Phase 1	31%	
✓	✓	✓	✓	6.13	Connect CMAs to ADT Data	Invest in Tools & Technology	01/03/2022	04/05/2024	No	Phase 2	50%	
✓	✓	✓	✓	6.14	Data Sharing with the SUA	Invest in Tools & Technology	07/01/2022	03/28/2024	No	Phase 4	26%	
✓	⚠	✓	✓	6.15	Systems Communication Improvements Trails	Invest in Tools & Technology	01/03/2022	02/22/2024	No	Phase 2	23%	
✓	⚠	✓	✓	6.16	Eligibility Systems Improvements	Invest in Tools & Technology	07/01/2022	04/01/2024	Yes	Phase 4	0%	
✓	✓	✓	✓	7.01	Emergency Response Plans	Expand Emergency Preparedness	07/01/2022	03/26/2024	No	Phase 4	12%	
✓	✓	✓	✓	7.02	Member Emergency Preparedness	Expand Emergency Preparedness	07/01/2022	12/26/2024	No	Phase 4	8%	
✓	✓	✓	✓	8.02	Provider Oversight	Enhance Quality Outcomes	04/01/2022	02/15/2024	Yes	Phase 3	13%	
✓	✓	✓	✓	8.04	Pay for Performance for PACE	Enhance Quality Outcomes	01/03/2022	09/01/2023	Yes	Phase 2	32%	
⚠	⚠	✓	✓	8.05	Pay for Performance for Home Health & Reside...	Enhance Quality Outcomes	04/01/2022	01/03/2024	No	Phase 3	12%	
✓	✓	✓	✓	8.06	PACE Licensure	Enhance Quality Outcomes	10/18/2021	01/15/2024	Yes	Phase 1	30%	
✓	✓	✓	✓	8.07	eConsult to Improve Quality	Enhance Quality Outcomes	07/01/2022	07/11/2023	No	Phase 4	5%	

Figure 2. CMS Dashboard: Project Reporting, page 4

Colorado CMS HCBS ARPA Project Status Report (Page 4)												
Overall	Schedule	Resources	Budget	ID	Project Name	Category	Start	Finish	Waiver SPA	Phase	%C	
✓	✓	✓	✓	8.08	HCBS Provider Quality Dashboard	Enhance Quality Outcomes	01/03/2022	01/27/2023	No	Phase 2	54%	
✓	✓	✓	✓	8.09	Waiver Quality Expansion	Enhance Quality Outcomes	07/01/2022	02/19/2024	No	Phase 4	2%	
✓	✓	✓	✓	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	03/19/2024	No	Phase 2	22%	

4

Appendix 1 provides more detailed information for the 16 projects that have had either a scope or budget change over the past quarter (between July 1, 2022 and September 30, 2022). The project descriptions remain as initially reported with all updates indicated with red 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 63 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 new 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. We also have launched a new bi-weekly grant project community of practice, and bi-monthly project lead meetings, to ensure regular and consistent communication with project teams.

The Department has been particularly focused on oversight and compliance across the 63 initiatives currently underway. We've adopted several strategies to mitigate risk and adopt standardization of practices. One approach is the use of a grant financial vendor that will assist in streamlining our grant management across projects. In collaboration with the Department, the vendor will be responsible for developing and executing all grant agreements with grantees, processing invoices, and monitoring deliverables. This consistency in review and oversight will help mitigate potential risk. The contractor will also be monitored closely by the compliance monitoring contractor mentioned below to further reduce compliance risk. The Request for Proposal for the grant financial vendor closed on June 3, 2022. The Department conducted a rigorous application review process and has awarded the contract to Public Consulting Group (PCG). Eight projects will begin working with PCG this fall and winter to begin developing grant contract language, deliverable monitoring, and invoicing processes.

Finally, the Department has an executed contract with a separate vendor to assist with oversight, compliance, and monitoring of the Department's projects. KPMG has been awarded this contract and will support the Department by assessing risks of each

initiative and developing a compliance and monitoring plan. KPMG has completed their initial guidance review and has provided the Department with draft recommendations for improvements. The Department will put in place an action plan to quickly adjust where changes are needed. Over the next month, the project-specific risk assessment will commence. KPMG will gather information from individual project teams to determine a project 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.

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
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 moving towards implementation for the projects. 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 drafting statements of work for contracting, as well as working through the contracting process in the first half of 2022. We are now seeing the impact of those efforts with 38 executed contracts. Over the past quarter, five requests for applications for ARPA HCBS grant projects have opened. Two have closed, with 15 grantees selected.

We expect that many of our grant project's request for application processes will launch shortly, moving us closer to getting funds out into the community. Project teams are also well underway with stakeholder engagement activities to actively gather feedback and suggestions on project execution. With the recent launch of phase 4 projects, all of our 63 initiatives are now actively moving forward. The phase 4 project teams will be further refining their initiative's timelines, deliverables, and outcomes over the next quarter. 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 development and implementation 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 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

 <p>Healthcare Access & Quality</p>	 <p>Equity</p>
 <p>Economic Stability</p>	 <p>Neighborhood & Built Environment</p>
 <p>Education Access & Quality</p>	 <p>Social & Community Context</p>

Appendix 1: Project Descriptions & Updates

1. Strengthen the Workforce & Enhance Rural Sustainability



Initiative 1.01. Increase Payments to Providers and Workers - Phase 1



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 Jan. 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 Jan. 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 supports 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.

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 increases. 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 will now be effective until July 1, 2022, and the \$15 per hour base wage is 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 2022-23 budget requests, with initial approval, is funding to sustain the \$15/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 37% complete.
- **Resource Status:** *On track*- Resources allocated for this project are adequate to meet goals and deadlines of this initiative.

- **Contract Status: *On track***- The contract is currently with the vendor for final review and signature.
- **Budget Status: *On track***- The project team has no current concerns related to the project budget. The budget was decreased slightly to support another project's budget needs.
- **General Project Update:** The project is on track. The project team has procured a vendor that will soon start to develop the standardized curriculums. The Department and vendor will leverage existing stakeholder groups, including the Training & Career Advancement Action Group of the Direct Care Workforce Collaborative, to assist and provide feedback on the training development.



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 30% complete.
- **Resource Status: *On track***- Resources allocated for this project are adequate to meet goals and deadlines of this project.

- **Contract Status: *On track***- Two of the three contracts are complete: with the Colorado Department of Labor and Employment and the Colorado Community College System. Both have begun work though have struggled to fulfill staffing needs. The Department of Higher Education (DHE), the third vendor, is going to fulfill the contract by working through Arapahoe Community College. DHE's contract should be complete in the coming weeks.
- **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 is working with three vendors, two of which have already started their work, to complete this project.



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 11% complete.

- **Resource Status:** *On track*- Resources allocated for this project are adequate to meet goals and deadlines of this project.
- **Contract Status:** *On track*- A contract is being drafted.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget. The overall project budget was decreased due to the contractor quote coming in under budget.
- **General Project Update:** The project is on track. The initial contractor selected to work on this project had to back out due to unexpected complications. Another contractor has been selected and the contract is currently being drafted. The project team expects to start the onboarding process in early October.



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 22% complete.
- **Resource Status:** *On track*- This project does not require any additional FTEs. Resources allocated for this project are adequate to meet the goals and deadlines of this project.
- **Contract Status:** *On track*- The contract has been executed.

- **Budget Status: *On track***- An additional \$20,000 was added to the project budget due to the contractor’s quote coming in above what was originally budgeted. Funds have been allocated from another project.
- **General Project Update:** This project is on track. The project team’s next steps will be onboarding the vendor so they can begin the initial stakeholder engagement.

2. Improve Crisis & Acute Services



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 212CMS331818-01-00.

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 benefit for Medicaid members.

Status Update

- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is 30% 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 Interagency Agreement (IA) with the Behavioral Health Administration (BHA) is in the final stages of being approved internally and then will be submitted to procurement.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.
- **General Project Update:** The team continues work to design the grant program. The IA with the BHA to transfer the grant funds for grant management has been drafted and is working its way through the procurement process. The project team has identified project metrics and a reporting schedule to show progress toward meeting project deliverables.

3. Improve Access to HCBS For Underserved Populations



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 11% complete. The project schedule, milestones, deliverables, and resources have all been established and approved by the project team. The project title was updated to accurately reflect the scope and purpose of the work.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The team continues internal conversations on grant program structure and the best way to distribute the funds.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.
- **General Project Update:** The final project resource was onboarded in June 2022. The project team continues work to build out the AI/AN grant program in conjunction with the Department's tribal liaisons.

4. Support Post-COVID Recovery & HCBS Innovation



Initiative 4.01. Residential Innovation - Phase 2



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 develop a pilot 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*- This project is on schedule and tasks are being completed in a timely manner. This project is 43% complete.
- **Resource Status:** *On track*- This project is currently adequately staffed and resourced.
- **Contract Status:** *On track*- The grant application to provide funds to carry out this project is currently open and closes next month. The project team is drafting a scope of work for a contractor to evaluate the success of this project.
- **Budget Status:** *On track*- The budget for this project has been decreased due to a contract coming in under budget.
- **General Project Update:** The project team is fully staffed and continues to timely complete tasks associated with this project. The grant application to provide funds to carry out this project has opened for submissions on the ARPA HCBS website and closes next month.



Initiative 4.08. Respite Grant Program - Phase 4

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 6% complete. This will increase considerably when the study statement of work (SOW) is finalized, and the vendor timeline is incorporated into the project schedule. The project team will re-baseline that portion of the schedule at that time.
- **Resource Status:** *On track*- The project team currently has all needed resources to complete this project on schedule.
- **Contract Status:** *On track*- The contractor has reviewed the final SOW and it has been moved into eClearance for final approval.
- **Budget Status:** *On track*- The project team has no current concerns related to the project budget.

- **General Project Update:** The project is proceeding as planned. The grant application process is currently live and taking applications through the end of September 2022. The procurement process for the study phase is behind but now in eClearance and expected to be approved soon. Due to the flexibility in the study timeline, this will not be an issue for success of the overall project.

6. Invest in Tools & Technology



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 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*- The project is currently 34% 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*- Estimates from the potential vendor came back higher than anticipated, thus an additional \$50,000 has been approved to be added to the project budget.
- **General Project Update:** The project is currently on track with contracting moving forward. The interagency amendment has been drafted and is being reviewed by the Office of Information and Technology. The Order of Magnitude estimate (for CBMS project) is approved and moving forward.



Initiative 6.05. Member Tech Literacy - Phase 2



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.



Funding will not support internet connectivity required for participants in this project. However, Department staff and contractors will refer any individuals interested in participating in the project who have internet connectivity needs to other existing state initiatives, such as the [Colorado Office of Information Technology's Broadband Office](#), which can help find and fund high speed internet.

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 Department will absorb maintenance and updating of materials through existing workflows.

Status Update

- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *Watch*- The project remains at 17% completion up from 11% at last update. Project schedule has been updated to reflect the scope change from a grant to a pilot format. The schedule is delayed related to completing the interagency agreement. The project team is actively working to get the schedule back on track. The project schedule, milestones, deliverables, and resources have been agreed upon 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 vendor 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. HCPF and the contractor are currently in discussions and anticipate finalizing the scope of work for the Interagency Agreement in the next several weeks. Because of the delay in execution of the contract, the project schedule will remain in ‘watch’ status until it is fully executed.

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. 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 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

- **Overall Project Status:** *On track*
- **Project Plan & Schedule Status:** *On track*- The project is currently 28% complete, up from 21% at last update. 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 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. There are two workstreams underway: 6.06a incorporates the digital transformation and EHR grants to providers, and 6.06b is comprised of cybersecurity activities related to County case file digitization and physical security. For project 6.06a, the Advisory Board is meeting every other week to review project documents and prepare for the release of the grant request for applications. The intent to apply forms will be available in early October 2022 for providers interested in pursuing a grant. The teams report no risks, issues, or decisions.



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 43% 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***- The project team has no current concerns related to the project budget.
- **General Project Update:** This project is on track and the grant for this has been posted. The project team remains active and involved in the grant process.

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. The Department will research national standards for emergency preparedness for various provider types. Based on that research, the Department 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 9% 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 vendor and is working on finalizing contract requirements.

- **Budget Status: *On track***- The project team has no current concerns related to the project budget. The project budget has been approved for combination with project 7.02 and the team is working to identify the resource needs for the contractor.
- **General Project Update:** The project team has selected a vendor and is working through the procurement process to bring them onboard. The project tasks, milestones and deliverables have been solidified and the project plan has been baselined. The project team has identified metrics and a reporting schedule to ensure the completion of project objectives.



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 8% 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 vendor and is working on finalizing contract requirements.
- **Budget Status: *On track***- The project team has no current concerns related to the project budget. The project budget has been approved for combination

with project 7.01 and the team is working to identify the resource needs for the contractor.

- **General Project Update:** The project team has selected a vendor and is working through the procurement process to bring them onboard. The project tasks, milestones and deliverables have been solidified and the project plan has been baselined. The project team has identified metrics and a reporting schedule to ensure the completion of project objectives.

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 8.04. 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. 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 for this pay-for-performance project will be clarified by Q1 2023.

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 tasks are being completed according to the project schedule. This project is 32% complete.

- **Resource Status: *On track***- This project has the necessary resources to complete all tasks and is fully staffed.
- **Contract Status: *On track***- The contract extension for FY 22-23 is in the final stages of e-clearance.
- **Budget Status: *On track***- Since an increase in funds for this project has been approved, the budget for this project is adequate to complete all tasks associated with this project. The budget for this project has been combined with project 8.06 as both projects are working with the same contractor.
- **General Project Update:** The project team is timely completing all tasks associated with this project and the contract for this project is in the final stages of e-clearance.



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***- All project tasks are on schedule at the current time. This project is 30% complete.

- **Resource Status:** *On track*- This project is fully staffed and has adequate resources to complete the tasks associated with this project.
- **Contract Status:** *On track*- The contract is in the final stages of e-clearance.
- **Budget Status:** *On track*- The current budget is adequate to complete the project. The budget for this project has been combined with project 8.04 as both projects are working with the same contractor.
- **General Project Update:** The project team is timely completing all tasks and the project is proceeding on schedule.

Appendix 2: Project Initiatives Identified by Phase & Category

Project Title	Category							
PHASE 1 PROJECTS	Workforce & Rural Sustainability	Crisis & Acute Services	Access for Underserved	Recovery & Innovation	Case Management	Tools & Technology	Emergency Preparedness	Quality
Case Management Rates					x			
Case Management Agency Training Program					x			
Case/Care Management Best Practices					x			
Case Management Capacity Building					x			
PACE Licensure								x
Supported Employment Pilot Extension				x				
Child/Youth Step-down Options Program and Provider Recruitment				x				
Community First Choice				x				
Respite Rate Enhancement				x				
Home Mod Budget Enhancements				x				
Updates to Salesforce Database						x		
HCBS Provider Digital Transformation						x		
Care & Case Management System Investments						x		
Systems Infrastructure for Social Determinants of Health						x		
Home Health/PDN Acuity Tool						x		

Wrap-Around Services, including Peer Supports for Members with Complex Needs			x					
Expand the Behavioral Health Safety Net			x					
Increase Payments to Providers and Workers	x							
Resource & Job Hub	x							
Direct Care Workforce Data Infrastructure	x							
Standardized Core Curriculum & Specialization	x							
Rural Sustainability & Investment	x							

Project Title	Category							
	Workforce & Rural Sustainability	Crisis & Acute Services	Access for Underserved	Recovery & Innovation	Case Management	Tools & Technology	Emergency Preparedness	Quality
PHASE 2 PROJECTS								
Behavioral Health Transition Support Grants		x						
Expand Behavioral Health Crisis Teams		x						
IMD Exclusion, Risk Mitigation Policy		x						
EPSDT Benefits Training								x
P4P for PACE								x
HCBS Provider Quality Dashboard								x
Tiered Residential Rates & Benefit				x				
Residential Innovation				x				
New Systems of Care				x				
Pilot CAPABLE				x				

Connect CMAs to ADT Data						x		
Centers for Excellence in Pain Management						x		
Member Tech Literacy						x		
Member-Facing Provider Finder Tool Improvement						x		
Improvements - System Communication [Interface with Trails]						x		
Public Awareness Campaign	x							
Establish a Training Fund	x							
Career Pathways	x							

Project Title	Category							
	Workforce & Rural Sustainability	Crisis & Acute Services	Access for Underserved	Recovery & Innovation	Case Management	Tools & Technology	Emergency Preparedness	Quality
PHASE 3 PROJECTS								
Improve & Expedite Long-Term Care Eligibility Processes					x			
P4P for HH & Residential HCBS Waivers								x
Criminal Justice Partnership								x
Provider Oversight								x
Innovative Tech Integration						x		
Specialty Search in Provider Specialty Tool						x		
Member Data Sharing						x		
Equity Study			x					
HCBS Training for Members & Families			x					

Translation of Case Management Material			x					
AI/AN Culturally Responsive Services Capacity Grants			x					
Workforce Compensation Research	x							

Project Title	Category							
	Workforce & Rural Sustainability	Crisis & Acute Services	Access for Underserved	Recovery & Innovation	Case Management	Tools & Technology	Emergency Preparedness	Quality
PHASE 4 PROJECTS								
Member Emergency Preparedness							x	
Emergency Response Plans							x	
Waiver Quality Expansion								x
eConsult to Improve Quality								x
Respite Grant Program				x				
Hospital Community Investment Requirements				x				
Promote Single Occupancy				x				
Data Sharing with the SUA						x		
Eligibility Systems Improvements						x		
Buy-In Analysis			x					
Home Health Delegation	x							

Appendix 3: 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>
 - Appendix:

<https://hcpf.colorado.gov/sites/hcpf/files/Supplemental%20Document%2005-01-2022.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>
 - Appendix:
<https://hcpf.colorado.gov/sites/hcpf/files/Supplemental%20Document%2008-01-2022.pdf>

Joint Budget Committee (JBC) 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>
JBC
 - 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>

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>