



American Rescue Plan Act Funding Plan for Enhanced Federal Match for Home and Community-Based Services

Funding Plan Overview & Update

August 2021

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Agenda

- ❖ Recap: The American Rescue Plan Act
- ❖ Updates to Proposed Plan
- ❖ What We Are Working On Right Now
- ❖ When? - Implementation Timelines
- ❖ How? - Funding Mechanisms & Processes
- ❖ What's Next?

The American Rescue Plan Act

- The American Rescue Plan Act (ARPA) was passed by Congress on March 11, 2021
- Included funding to support a wide range of infrastructure programs and services, as well as direct payments to Americans
- Through ARPA, it is estimated that Colorado will receive **\$3.8 billion**

Section 9817 of ARPA

- There is a provision outlining funding to support **increased access to home and community-based services (HCBS)** for Medicaid beneficiaries
- HCBS are benefits which provide **older adults and individuals with disabilities** critical services in their homes and communities

Eligible Services

- 1915 (c) Home and Community-Based (HCBS) Waivers
- Personal Care
- Targeted Case Management
- Home Health Care
- Private Duty Nursing
- Program of All Inclusive Care for the Elderly (PACE)
- Behavioral Health

Potential Fiscal Impact

- The 10% enhanced match is only available for eligible services
- States may spend the funding on both services and administrative activities
- Enhanced match reinvested in eligible services may receive the enhanced match one additional time
- Funding is approximately \$500 million

North Star

- Supercharge existing initiatives, foster innovation and advance long-term transformative systems change
- Support the COVID-19 response and recovery
- Outcome driven - demand quality and good fiscal stewardship
- Recommendations do not create a funding cliff

Preparation Timeline May-September 2021

May 24-June 4: Engage stakeholders on proposed spending plan & incorporate feedback in narrative & budget estimates.

June 12: Submit proposed spending plan to CMS

July 12: CMS required response date

(July 23 actual response date - Partial Approval)

Present proposed spending plan to JBC for approval for before implementation

May

June

July

August

September

June 7-June 9: Seek Gov Office & OSPB Approval

~~July 18: First quarterly report due to CMS~~

August 2: Submitted response to CMS

Week of August 23: Host meetings for stakeholders after receiving CMS feedback



Recap: Stakeholder Engagement May 2021

- Discussed potential for these funds with advocacy, trade organizations & in ongoing stakeholder meetings
- Hosted 7 targeted stakeholder meetings attended by nearly 800 people
- Collected feedback and recommendations through email and webinar comments (received 375 in total)
- Collected 428 survey responses

UPDATES

Partial Approval update: Responses from HCPF

- HCPF responded on August 2nd
 - All projects meet the requirement of including services that are covered or could be covered as rehabilitative services and listed under Appendix B and can be found in Appendix C or D of the SMDL
 - None of Colorado's proposed activities include funds to support room and board

View the State Medicaid Director's Letter Here:

www.medicaid.gov/federal-policy-guidance/downloads/smd21003.pdf

Review of the Proposed Spending Plan

Priorities

**STRENGTHEN THE WORKFORCE & ENHANCE
RURAL SUSTAINABILITY**

IMPROVE CRISIS & ACUTE SERVICES

**IMPROVE ACCESS TO HCBS FOR UNDERSERVED
POPULATIONS**

**SUPPORT POST-COVID RECOVERY AND HCBS
INNOVATION**

STRENGTHEN CASE MANAGEMENT REDESIGN

INVEST IN TOOLS & TECHNOLOGY

ENHANCE QUALITY OUTCOMES

EXPAND EMERGENCY PREPAREDNESS

Reminders

- Waiting on full approval from CMS
- JBC submission & presentation in September
 - Likely to be changes during that approval process
 - All projects are currently only *proposed* & in draft format
- Once approved, we'll partner with stakeholders to move initiatives forward
 - Additional changes are likely as we move from planning to implementation
- Additionally, any changes to HCBS benefits will require further CMS approval

STRENGTHEN THE WORKFORCE & ENHANCE RURAL SUSTAINABILITY

Current Challenge: Significant direct care workforce (DCW) shortages are threatening provider sustainability & member access to care; financial & workforce challenges are especially prevalent among rural providers.

Anticipated Outcome: Increased recruitment & retention of DCWs, an expanded rural provider network, & ultimately improved access to care for members.

STRENGTHEN THE WORKFORCE & ENHANCE RURAL SUSTAINABILITY

- ❖ Implement recovery payments, wage pass-throughs, & incentive payments to support the direct care workforce
- ❖ Expand the data infrastructure to better understand the current supply & demand for direct care workers
- ❖ Invest in the skills, advancement, awareness for DCWs
- ❖ Establish a training fund to support the expansion of training opportunities

STRENGTHEN THE WORKFORCE & ENHANCE RURAL SUSTAINABILITY

- ❖ Explore opportunities for increasing compensation for the HCBS workforce
- ❖ Explore & reward additional opportunities to expand delegation in home health
- ❖ Identify gaps & invest in opportunities to expand the provider network in rural communities

IMPROVE CRISIS & ACUTE SERVICES

Current Challenge: Crisis situations can lead individuals who reside in the community to seek treatment or care in a hospital or institutional settings, often becoming the cause for long-term placement in these settings.

Anticipated Outcome: Expanded access to culturally competent community-based crisis and transition care for the HCBS population resulting in reduced use of inpatient and institutional care including readmissions, increased wellbeing, and potential for decreased medical costs.

IMPROVE CRISIS & ACUTE SERVICES

- ❖ Grants to support placement in the right level of care & transitions back to the community
- ❖ Expand behavioral health mobile crisis teams
- ❖ Support Acute Treatment Units (ATU) & Crisis Stabilization Units (CSU)



IMPROVE ACCESS TO HCBS FOR UNDERSERVED POPULATIONS

Current Challenge: Many Coloradans are currently underserved in HCBS programs, including individuals with disabilities living on tribal lands, those who identify as Black, Indigenous, and People of Color (BIPOC), and individuals with behavioral health needs.

Anticipated Outcome: Create more equitable program access through enhancing culturally informed program education materials and culturally competent care.

IMPROVE ACCESS TO HCBS FOR UNDERSERVED POPULATIONS

Equity

Equity in HCBS study

BUY-IN Analysis

Culturally Responsive

Provider Training

- Working with persons with IDD

Member Focused Initiatives

- Translated materials
- Waiver specific training

Fill the Gaps

- HCBS Buy-in Outreach & Ed

- Pilot for Members experiencing Homelessness

- Expand the BH safety net

SUPPORT POST-COVID RECOVERY & HCBS INNOVATION

Current Challenge: The pandemic has had a disproportionate impact on individuals residing in congregate care settings.

Anticipated Outcome: While ARPA funding may not be used for nursing facilities, it may be used to transform community-based residential care settings. Reimagining Colorado's residential settings is required to support member health, safety, and overall well-being, as well as to create the long-term care system of the future. This can be achieved through increased provider sustainability and access to residential services for all members that supports choice and the continuum of care.

SUPPORT POST-COVID RECOVERY & HCBS INNOVATION

- ❖ Research, develop & pilot innovative residential models of care, including promoting single-occupancy
- ❖ Develop child/youth step-down programs, including recruiting providers
- ❖ Develop tiered rate methodology for Alternative Care Facilities
- ❖ Pilot the Community Aging in Place - Advancing Better Living for Elders (CAPABLE) program
- ❖ Extend & expand the Supported Employment Pilot

SUPPORT POST-COVID RECOVERY & HCBS INNOVATION

- ❖ Identify & pilot innovative systems of care that leverage the needs & capabilities of various populations
- ❖ Create a grant program to increase access to respite & provide a temporary targeted rate increase for providers
- ❖ Expand home modification service limits
- ❖ Leverage hospital community investment requirements to support transformative efforts within communities
- ❖ Develop Community First Choice

STRENGTHEN CASE MANAGEMENT REDESIGN

Current Challenge: Colorado is the second fastest growing state for older adults, which is driving increased demand for HCBS services. As the case management system adapts and transforms in preparation, growing pains could be minimized if case management agencies were better prepared.

Anticipated Outcome: Improved outcomes for members with complex needs, improved member experience navigating the system, decreased length of time from eligibility determination to enrollment, and improved quality of case management service delivery.

STRENGTHEN CASE MANAGEMENT REDESIGN

- ❖ Case management capacity building to support change management
- ❖ Identify solutions to barriers to physical & financial long-term care eligibility
- ❖ Identify & implement care/case management best practices, including rate structures & models of care management
- ❖ Develop & implement a comprehensive training for case management agencies

INVEST IN TOOLS & TECHNOLOGY

Current Challenge: The HCBS system is complex with several technology systems and an enormous data infrastructure which need continual maintenance and updates. The tools and technologies the Department uses not only impact our administrative functions, but are integral to providers' ability to perform their contractual obligations and to care for our members. Technological advancement is necessary to support our members and their families who rely on our systems to access services, seek resources, and gauge provider quality.

Anticipated Outcome: Expedited eligibility processing, upgraded systems for LTSS providers, members and providers reporting greater ease of access to Medicaid systems, and improvements in access-to-care measures

INVEST IN TOOLS & TECHNOLOGY

Changes Impacting Members

- ❖ Create, pilot, a new Long-Term Home Health & adult & pediatric Private Duty Nursing acuity tool
- ❖ Improve the member-facing provider finder tool
- ❖ Offer member digital literacy training
- ❖ Develop a mechanism for members to access data through a consumer-facing portal

INVEST IN TOOLS & TECHNOLOGY

Changes for Providers

- ❖ Integrate technology that improves diagnoses, services access, health outcomes, & program delivery
- ❖ Develop a provider specialty search tool
- ❖ Systems work to support new care & case management redesign
- ❖ Implement a system to centralize quality care complaints
- ❖ Provide funding to HCBS providers to digitally transform their care delivery
- ❖ Invest in upgrading, implementing, & enhancing electronic health record systems for HCBS providers

INVEST IN TOOLS & TECHNOLOGY

Changes to Enhance Infrastructure

- ❖ Pilot a pain management consultation service for chronic pain patients for mental health or substance use disorder treatment
- ❖ Build social determinants of health information into the prescriber tool
- ❖ Expand data sharing across entities, including state agencies, to improve member services
- ❖ Improve eligibility systems to hasten application processing, improve determination accuracy, & provide real-time provider eligibility status insights

ENHANCE QUALITY OUTCOMES

Current Challenge: A primary responsibility of the Department is ensuring the health, wellness, and safety of our members. As such, we must continually implement and refine standards and maintain strict oversight of provider agencies.

Anticipated Outcome: Through direct member feedback, greater satisfaction of services provided and increased ability to access services needed

ENHANCE QUALITY OUTCOMES

- ❖ Establish metrics and develop public-facing provider scorecards
- ❖ In collaboration with CDPHE, improve and streamline provider oversight
- ❖ Develop pay-for-performance rate methodologies for HCBS, PACE, and Home Health
- ❖ Establish a PACE licensure type to ensure appropriate oversight and compliance

ENHANCE QUALITY OUTCOMES

- ❖ Expand eConsult system to connect primary care providers with specialists
- ❖ Expand waiver quality surveys & metrics
- ❖ Expand post-release supports to members who were recently released from incarceration, on parole or probation
- ❖ Develop training on quality performance measures

EXPAND EMERGENCY PREPAREDNESS

Current Challenge: The pandemic has illustrated how crisis preparation and a swift response can dramatically change the outcome in the wake of an emergency. Individuals with disabilities, who live in the community, may not have the support or resources needed to be adequately prepared for an emergency, putting them at increased risk when a crisis arises. Building the capacity for both emergency preparedness and rapid response in the face of disasters, such as fires, floods, or a pandemic, will ensure Coloradans living with disabilities are protected.

Anticipated Outcome: Reduced injury and mortality for older members and members with disabilities in the event of a disaster

EXPAND EMERGENCY PREPAREDNESS

- ❖ Support providers to develop emergency preparedness & response plans
- ❖ Assist members with disabilities & those with mental health needs to be prepared for potential emergencies by providing resources, supplies, or education

TIMELINES

The “When”?

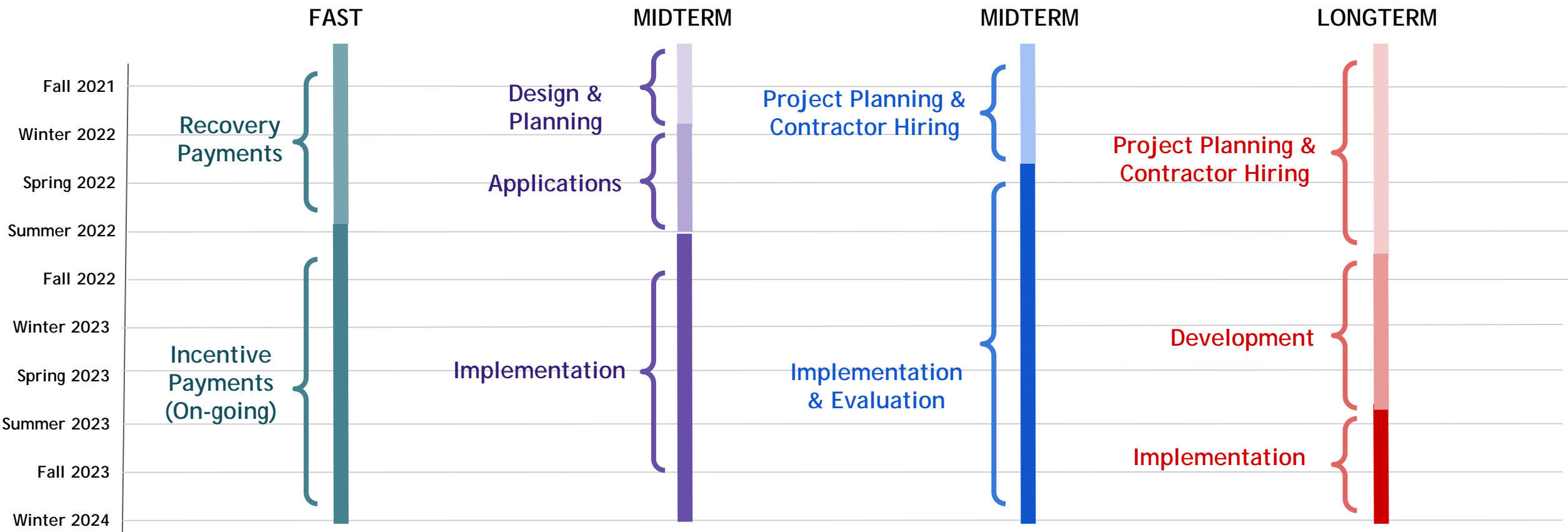


Recovery & Incentive Payments

Grants

Benefit Changes & Program Pilots

Technology & System Advancement



FUNDING AND ROLLOUT

The “How”?



Recovery & Incentive Payments

- Utilize existing structure for payments
- Mirror previously implemented processes & reporting structure for wage pass-throughs
- Develop process for reporting worker eligibility for incentive payments; payments made through employers

Grants

- Design eligibility and qualification requirements per project
- Each grant will have an application process, deliverables and reporting requirements
- All requirements will be based on project-specific focus

Benefit Changes & Program Pilots

- Internal Department policy changes to improve or expand benefits
- Pilots for new or innovative opportunities - Expertise focused partnerships for pilot implementation

Technology & System Advancement

- Enhance existing systems & leverage current technology vendors
- Invest in new technology to enhance member/provider experience
- Projects include primarily internal resources or system/tech vendors

NEXT STEPS

Approvals

- Awaiting final CMS approval - expected any day
- Seeking Joint Budget Committee Approval
 - Submit budget and narrative on September 7, 2021
 - Present to the JBC on September 21, 2021
 - Respond to questions and requests for more information as necessary

2021

AUGUST

SEPTEMBER

OCTOBER

Key Efforts

Project-Level Planning

- Finalize Project Plans & Budgets
- Hire Key Staff
- Contract with Vendors
- Develop & Launch Project-Level Stakeholder Engagement

Initiative-Level Planning

- Submit Plan & Present to the JBC
- Develop Tracking Mechanisms
- Develop Reporting Processes
- Finalize Stakeholder Engagement Plan



COLORADO

Department of Health Care
Policy & Financing

Discussion

- If you would like to offer verbal comment:
 - Please raise your hand and we will call your name and unmute your line
 - If you are on the phone, we will give you the opportunity to share comments
- If you would like to offer written comment:
 - Please submit your comments in the Q&A box

Please submit [the survey](#) to rate the priorities!

Engagement

Continue to visit the HCPF ARPA Webpage for updated information and announcements

hcpf.colorado.gov/arpa

We will also utilize our constant contact communication to share updates

[Sign-Up for our Email List](#)

Thank you!