Complementary and Integrative Health Waiver & Services

Training for HCBS Case Managers

November 2023



Intended Learning Outcomes

- Understand how to discuss with the member about acupuncture, chiropractic, and massage therapy and if they meet member's needs?
- Learn how to determine eligibility for the CIH Waiver
- How to complete the support planning process for Complementary and Integrative Health Services (CIH Services)

Training Guides and FAQs

- All training and guidance for the CIH Waiver and CIH Services can be found on the <u>Long-Term Supports and Services training</u> webpage under CIH
- The <u>CIH Provider List page</u> provides a list of enrolled acupuncture, chiropractic, and massage therapy providers
- The <u>CIH Waiver page</u> provides eligibility and information

Understanding the CIH Waiver

CIH Waiver Background

- Senate Bill SB 21-038 expanded the HCBS-SCI Waiver statewide and added additional qualifying diagnoses to the eligibility criteria related to traumatic and non-traumatic spinal cord and brain injury conditions
 - Spinal Cord Injury / Condition
 - Brain Injury / Condition
 - Muscular Dystrophy

- Spina Bifida
- Cerebral Palsy
- Multiple Sclerosis
- As of July 1, 2022, the expanded waiver is available for enrollment statewide with its new name the Complementary and Integrative Health Waiver
- The benefit name "HCBS-SCI" will be retained in CBMS

Success Stories

Many members utilize acupuncture, chiropractic and massage therapy. Of those members 77% reported less pain and increased mobility with 57% reporting decreased use of pain medication.

Access the full initial report from National Research Center Inc.

Watch a short clip about **Sherown's Story**

CIH Waiver Services

- The CIH waiver has acupuncture, chiropractic, and massage therapy in addition to Elderly, Blind, and Disabled (EBD) waiver Services
- Same support planning, monitoring and assessment
- Same prior authorization requirements and timelines
- Same eligibility process besides documenting the qualifying medical condition and assessing the inability to independently ambulate
- No Alternative Care Facilities (ACF) service on the CIH waiver

Case Manager Roles and Responsibilities for CIH Waiver

- Person-Center Support Planning with Member
- Complete assessment and document eligibility
- Communicate with and receive CIH Service Recommendation Form from providers
- Enter the CIH services and any additional services on the PAR and send PAR to providers



Questions?

Working with Members

- Person-Centered Support Planning Process
- CIH Waiver Eligibility Documentation

Person-Centered Support Planning

How to Identify Members that Could Use CIH Services

- Does your member need to help to walk? Do they experience paralysis or loss of function from a spinal cord or brain injury or disorder?
- Is the member experiencing pain from a spine or brain disorder?
- Make a note to remember to discuss that acupuncture, chiropractic, massage therapy may be available and may help their mobility and pain.

How to Support Plan for Members Using CIH Services

- Identify the goals and preferences of the member
- Discuss expected benefits of acupuncture, chiropractic and/or massage therapy and discuss if the services meet the needs and preferences of the member
- Confirm the member is eligible for CIH Waiver and CIH Services (Acupuncture, Chiropractic, and Massage Therapy)

How to Determine and Document CIH Waiver Eligibility

CIH Waiver Eligible Persons Targeting Criteria

- ✓ Qualifying Condition
- ✓ Inability for Independent Ambulation

What are the Qualifying Conditions?

- Spinal cord injury or disorder (any condition that injures the spinal cord whether it is traumatic or non-traumatic)
- Multiple sclerosis
- Brain injury (traumatic, non-traumatic, progressive)
- Spina bifida
- Muscular dystrophy
- Cerebral palsy

How To Document a Qualifying Condition?

- If a member's physician has documented an ICD diagnosis code that is related to a qualifying condition on the PMIP or one is in the CCM, then they meet this criteria for eligibility
- A list of broad diagnoses related to the qualifying conditions is available in the <u>CIH Eligibility Guide</u>
- There is no list of exact diagnosis codes because many of the qualifying conditions have many ICD diagnoses related to the qualifying conditions that may include rare diseases or diagnoses that may be acquired, traumatic, or non-traumatic

CIH Eligibility Guide



303 E. 17th Avenue Denver, CO 80203

Complementary and Integrative Health (HCBS-CIH) Waiver Eligibility Guide

This reference document is intended to assist case managers and medical providers in understanding eligibility targeting criteria and completing the <u>Professional Medical Information Page</u> (PMIP) for persons interested in the Home and Community Based Services Complementary and Integrative Health (HCBS-CIH) waiver.

Eligibility Targeting Criteria Rules: 10 CCR 2505-10 8.517.5.A. Eligible Persons

HCBS-CIH waiver services shall be offered only to individuals who meet all the following eligibility requirements:

How to determine the "Inability for Independent Ambulation?"

During the waiver targeting criteria section of the assessment process:

- Ask "Does this member require help to walk from a mobility device or person because of the qualifying diagnoses?" If the answer is yes, then they meet this CIH Waiver eligible person target criteria.
- ➤ Keep in mind that determining Level of Care and determining if someone meets Targeting Criteria can overlap but they are two distinct processes.

Documenting Targeting Criteria

1. Document in the ULTC 100.2 Mobility ADL section in the comment box if a member requires assistant to independently ambulate. For example: "The member requires assistance from a medical device or person to walk and their inability for independent ambulation directly results from their qualifying diagnosis."

And

2. Check the member has a documented diagnosis code relating to a qualifying condition in the Care and Case Management System.

Best Practices for Waiver Transition to the CIH Waiver

- Add start date to begin 45 to 60 days in the future
- Work with county to flag waiver to waiver transitions
- Include note to remind them that SCI and CIH are the same
- Follow up with county within 15 to 30 days to confirm application is in the workflow

While the Member is Waiting For Enrolled in the CIH Waiver

- Begin assisting in finding and meeting with potential acupuncture, chiropractic and/or massage therapy providers
- Member information for <u>CIH Services Provider</u>
 <u>Recommendation</u> form may need to be sent to a provider
- Each member on the CIH Waiver is eligible for 408 total
 15-minute units of CIH services during a year
- If a PAR goes over cost containment; it will follow the same procedures as the Elderly, Blind, and Disabled (EBD) waiver

Other Considerations

- Discuss and determine if transportation through the waiver is needed and available
 - Non-Medical Transportation (NMT) is the only transportation available for HCBS members to transport to and from a CIH appointment
- Discuss if additional personal care support is needed during a CIH service visit
 - Plan for additional support if determined available, nonduplicative, and necessary

Andy

- Meets level of care and financial requirements
- 26-year-old male living with spina bifida
- Needs mobility aid outside of the home and at least touch assistance in all settings

Eligible

Care and Case Management Tool

- The new LOC Screen and CCM tool training will provide further information on any changes in this process as the different phases and features roll out
- Until then, follow what you have been doing for all other waivers and supplemented by this training with the ULTC 100.2 documentation and PMIP
- SCI and CIH will be used interchangeably until CBMS fully updates

Jose

- 29-year-old male; experienced a car accident when he was 19 after which he was diagnosed with a brain injury
- After that he often experiences instability with walking and requires "touch" or "stand by" support
- He needs support to work and behavioral counseling.

Eligible

Deborah

- 63-year-old female; living with type 1 diabetes
- Left foot amputation from diabetic condition needs mobility aid for independent ambulation

Not Eligible

Learning Checkpoint 1

Take a moment to review these checkpoint questions

Question	True	False
Documenting the use of a mobility device and/or needing at least touch assistance to ambulate along with having a qualifying medical condition document on the PMIP is required to demonstrate a member is eligible for the CIH Waiver?	True	
The inability for the independent ambulation on the CIH Waiver requires the use of a mobility aid?		False
The eligible qualifying conditions for the expanded CIH Waiver include a spinal cord injury, multiple sclerosis, spina bifida, cerebral palsy, brain injury or muscular dystrophy?	True	
The SCI Waiver and the CIH Waiver are the same, just with statewide eligibility?		False



General Questions?

How to Find and Work with Providers

How Do Case Managers Support Members in Finding Providers

- The <u>CIH Provider List page</u> provides a searchable list of enrolled acupuncture, chiropractic, and massage therapy CIH providers
- If Non-Medical Transportation (NMT) is not available or if members are too far from these providers, please notify HCPF so we can track provider gaps
- For provider questions for the HCBS-CIH Waiver, please have providers email Kacey.Wardle@state.co.us

What is the CIH Services Provider Recommendations

- The purpose of the <u>CIH Services Provider Recommendation Form</u> is to guide the case manager and member's person-centered support planning for acupuncture, chiropractic, and massage therapy (CIH Services)
- All CIH Service providers must submit a CIH service provider recommendation form to the member's case manager before services can be submitted for prior authorization
- CIH Provider Recommendation and PARs do not need to match
- Members, with the help of case managers, decide the services and frequency based on the providers' recommendations (not to exceed the provider's recommendations or service limits)

Once a Provider Recommendation is Received

- Determine the services and amount recommended by the providers
- Establish the CIH services frequency, scope and duration required in accordance with the member's assessed needs and the providers' CIH services recommendation
- Confirm with member that they approve and will be able to go to their CIH services appointments
- Submit a PAR with CIH services and additional transportation or personal care support as needed and available

Entering CIH Services into PAR

Case managers are responsible for entering acupuncture, chiropractic and massage therapy into the PAR (up to 4 units of a single modality a session, 204 units a year per modality, 408 combined CIHS per year)

Acupuncture (97810, U1, SC)
Chiropractic (98942, U1, SC)
Massage Therapy (97124, U1, SC)

View current provider rates

View billing manuals

Once the PAR is Approved

- Send PAR to CIH Service Providers
- Member can begin these health services!
- Follow up with member at quarterly monitoring appointments
- At the end of the certification period, work with CIH Service provider(s) to get their recommendation for CIH Services 30-60 days before the end of the authorization period

Learning Checkpoint 2

Take a moment to review these checkpoint questions.

Question	True	False
Each eligible member may receive up to 204 units or 51 weeks of an hour massage therapy session a year.	True	
For CIH Services a provider recommendation must be submitted by the provider providing service before a service is added to a member's PAR.	True	
CIH services do not need to be submitted on a PAR.		False
The Department is actively recruiting providers.	True	



Provider Questions?

Contact Info

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Kacey.Wardle@state.co.us

Complementary and Integrative Health Webpage

CIH Provider List (Acupuncture, Chiropractic, and Massage Therapists)

Thank you!