

COVID-19 Updates

Colorado Department of
Health Care Policy & Financing

November 13, 2020

Overview

Health Care Policy & Financing (HCPF) Update

- Kim Bimestefer, Executive Director, HCPF
- Tracy Johnson, Medicaid Director, HCPF
- Bonnie Silva, Office of Community Living Director, HCPF

Colorado Cross-Disability Coalition (CCDC) Update

- Julie Reiskin, Executive Director, CCDC

2021-2022 Budget Basics

- State Budget: \$35.4B Total Funds, \$13.6B General Funds
- State Totals Cuts:
 - \$422M Total Funds and \$272M General Fund
- HCPF Total Cuts
 - \$165M Total Funds and \$146M General Funds
- HCPF will account for 37.6% of TF and 29% GF (is 34%, 26%)
- HCPF budget will be \$12.4B TF and 3.5B GF
- Increase of \$1.7B TF (15.6% from 2019-2020)
- Increase of \$557.3M GF (18.9% from 2019-2020)

Revenue Insights

- Improving 2020-2021 budget outlook
- Colorado is still the #1 economy in the nation, but 672k Coloradans have filed for Unemployment Insurance (22% of working population)
- Longer-term budget outlook is still out-of-balance and uncertain
 - \$1.6B revenue shortfall for FY 2021-2022 (released budget)
 - \$2.2B revenue shortfall projection for FY 2022-2023
- Governor's budget includes \$1.28B in 2020-2021 stimulus
 - to boost economic growth since the Fed is not acting
 - makes immediate investments in Colorado businesses, families

HCPF Stimulus - Decision Items

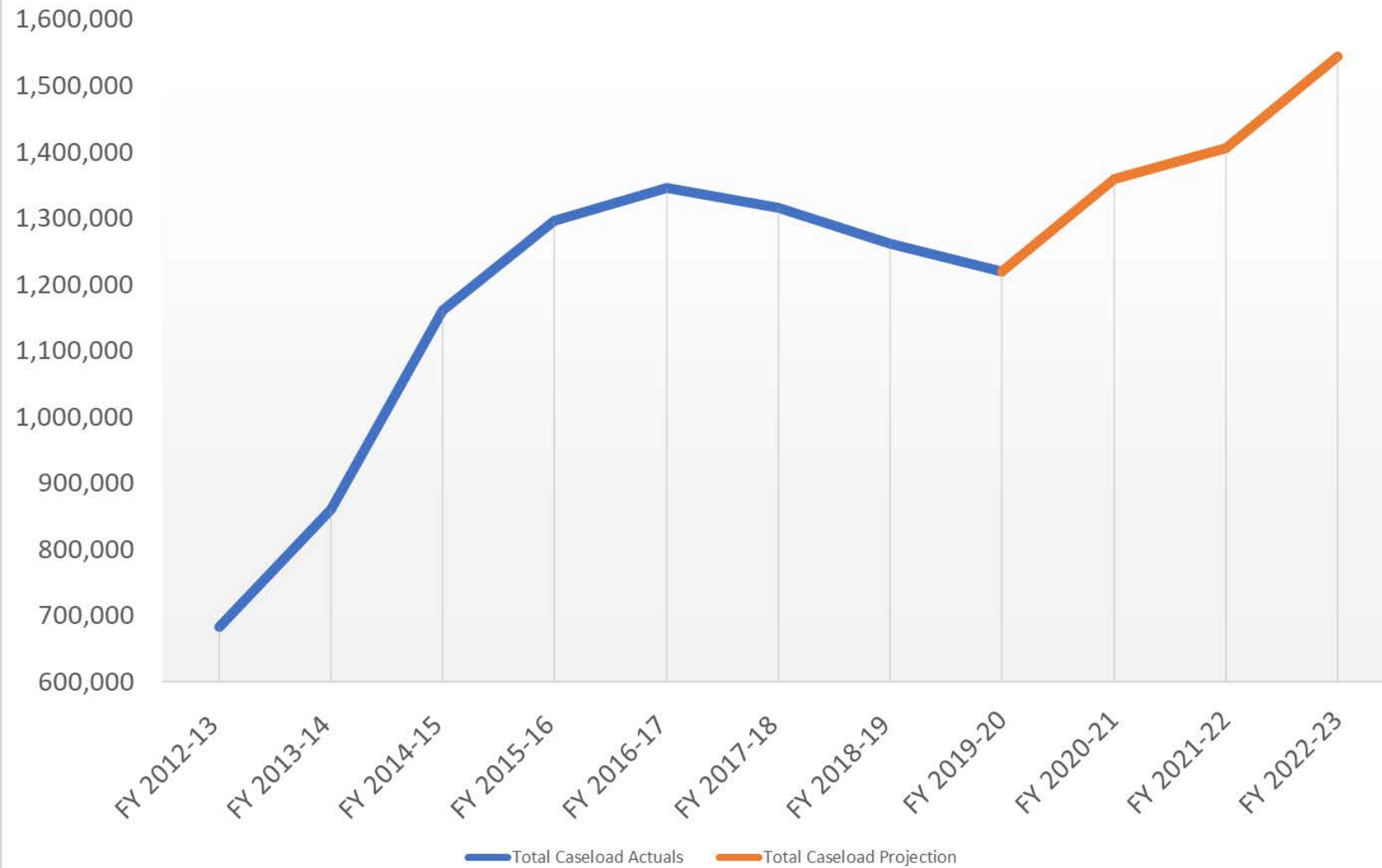
The one-time stimulus \$\$ directly impacting HCPF:

- **Behavioral Health Task Force Acceleration** - Shared Eligibility/Intake, Claims Processing and Reporting – 75 non-Medicaid programs to be administered by HCPF tools (PEAK, MMIS DXC payments, reporting).
- **Addressing Health Care Disparities** - investments in data collection by Medicaid and carriers in the eligibility intake and capture process, including info like race, age, gender, LGBTQ, zip code, income, disability status. This will help us identify disparities, which is critical to addressing them.

HCPF Budget Year to Year & Drivers

| | | Total Funds | General Fund | |
|--------------|------------------------------|----------------|----------------|---|
| FY 2020-21 | Appropriation | \$12,034 M | \$3,185 M | |
| | | | | |
| FY 2021-2022 | Caseload Requests | \$297 M | \$248 M | Continuous Coverage Recession impact |
| | Decision Items | \$20 M | \$10 M | |
| | Budget Reductions | (\$165 M) | (\$146 M) | |
| | | | | |
| FY 2021-22 | Budget Request | \$12,336 M | \$3,511 M | |
| | <i>Year-over-year Change</i> | <i>\$302 M</i> | <i>\$327 M</i> | |
| | <i>Percent Change</i> | <i>2.5%</i> | <i>10.3%</i> | |

Total Caseload



Temporary Budget Reductions

Temporary budget reductions: \$95.4M TF, \$115.8M GF

“Temporary” means that the reductions create savings in the current year, but not in future years.

- \$80M GF transfer from the Healthcare Affordability and Sustainability Fee (hospital provider fee)
- \$10M GF transfer from the Primary Care Fund
- Reduction to Inpatient SUD Budget based on lower-than-expected projected costs (not a benefit or reimbursement change)
- Savings from federal funds associated with enhanced FMAP

Permanent Budget Reductions

Permanent budget reductions: \$69.5M TF, \$29.9M GF

“Permanent” means that the reductions will not be restored until the General Assembly takes new action

- Negotiated enrollment in PACE
- Reducing BH incentive payments (25%)
- Targeted rate and benefit reductions

| Item | Total Funds | FTE | General Fund |
|--|----------------|-----|----------------|
| Anesthesia Rate Reduction | (\$5,959,562) | 0.0 | (\$1,904,319) |
| Allergy Testing Rate Reduction | (\$694,456) | 0.0 | (\$161,298) |
| Benchmark Certain Rates to Medicare | (\$1,360,741) | 0.0 | (\$546,717) |
| Repricing Pulse Oximeter | (\$458,993) | 0.0 | (\$184,413) |
| Lab Testing Code Rate Reduction | (\$12,587,595) | 0.0 | (\$2,923,654) |
| Outpatient Hospital Physician Administered Drugs | (\$6,546,978) | 0.0 | (\$1,805,502) |
| Remove Nursing Facility Rate Growth Limit | (\$13,741,537) | 0.0 | (\$6,870,769) |
| Cash Fund Transfer to Offset the General Fund | \$0 | 0.0 | (\$1,354,330) |
| Total Request | (\$41,349,862) | 0.0 | (\$15,751,002) |

No across-the-board provider rate reductions

Enhanced Federal Funding

The Families First Coronavirus Response Act increased the federal match rate for most Medicaid services for all states while the Public Health Emergency is in effect.

- Colorado's federal medical assistance percentage (FMAP) went from 50% to 56.2%
- So far, the enhanced federal funds have created **\$565 million** of General Fund relief

Decision Items

Total impact: \$20M TF, \$9.5M GF increase

Key requests include:

- Convert contractor resources to FTE
- Restoring reductions to Family Medicine Residency Training Programs
- Nurse Advice Line
- HCBS Remote Supports benefit
- Supported Living Services Flexibility

Next Steps

Joint Budget Committee Briefing and Hearing:

- Briefing: December 10, 2020
- Hearing: January 7, 2021
- Figure Setting: March 2021

Next revenue forecast: December 18, 2020

Start of the Legislative Session: January 13, 2021

Budget

- www.colorado.gov/hcpf/budget-1
- www.colorado.gov/governor/office-state-planning-budgeting

COVID Update - Colorado

- Coloradans Tested: 1,387,268
- Coloradans Positive: 142,402 (10%)
- Coloradan Deaths among COVID: 2,443 (1.7%)
- Coloradans Deaths due to COVID: 2,134 (1.5%)

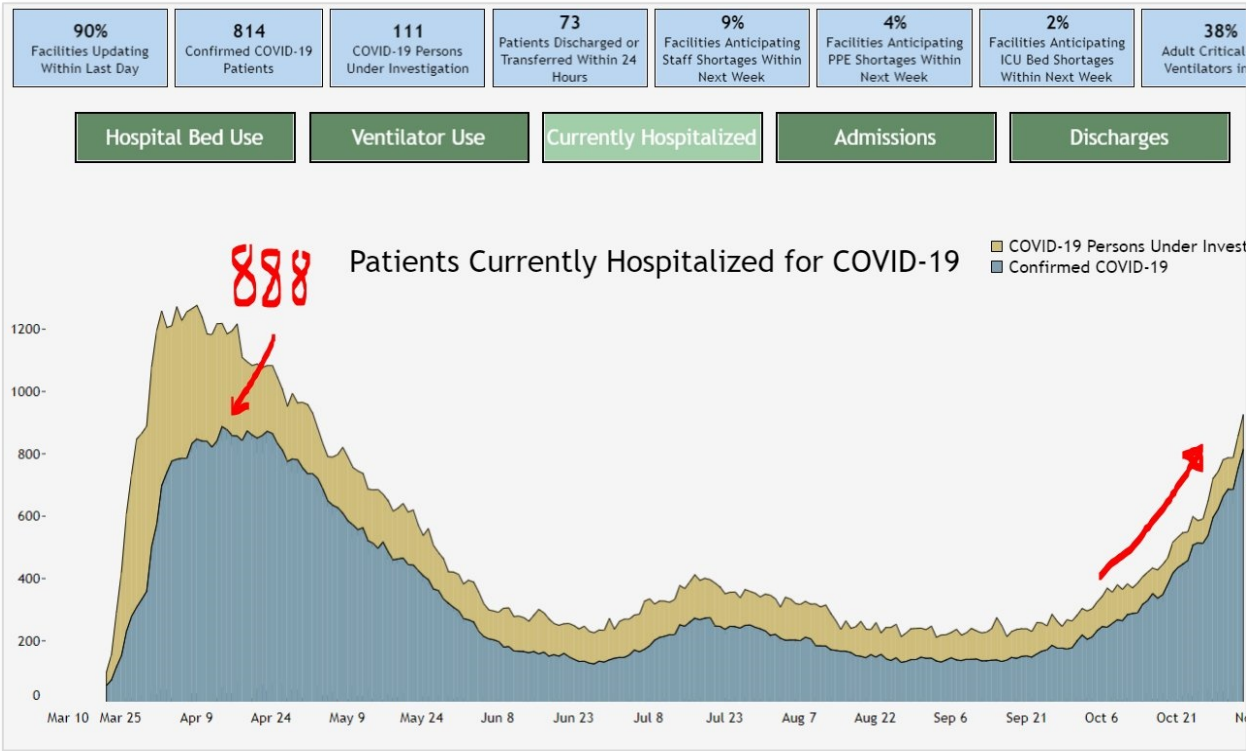
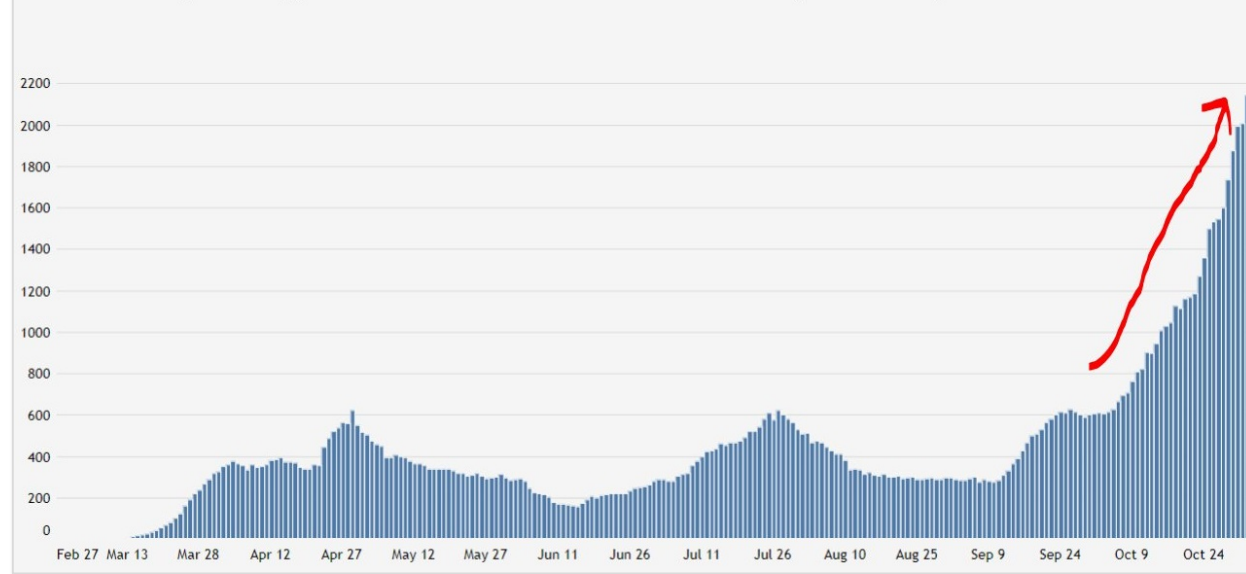
As of November 12, 2020

Flu 2018-2019 Season: 35M Americans, 34k deaths 0.1% = 1 in every 1000
Kids 1 in 10k and 50-64 y/o is 6 in 10k

COVID Cases and Hospitalizations

- Continuing to see numbers move in the wrong direction
- Cases are at record highs, positivity rates are near 10%, and hospitalizations could surpass capacity

7-Day Average of COVID-19 Cases in Colorado by Date Reported to the State





CO Exposure Notifications

- A phone-based exposure notification (EN) system is now available to Coloradans!
 - CO Exposure Notifications is a free and voluntary service developed in partnership with Google and Apple that can notify users of possible exposure to COVID-19
- For the system to be effective, at least 10% of the population needs to opt in
 - Furthermore, if 10-15% of Coloradans opt in, we will likely see ~10% increase in the State's contact tracing capacity
- Visit covid19.colorado.gov/Exposure-Notifications for FAQ's and videos on how to setup the notifications on your iPhone or Android phone
 - Android users can download CO Exposure Notifications on the Google Play store
 - iPhone users can enable CO Exposure Notifications in their phone settings by finding Settings > Exposure Notifications > United States > Colorado

ACA – could bring new challenges to address

11/10 ACA Supreme Court Hearing – Justice questions and comments

Just Some of the ACA Provisions:

- Medicaid expansion up to 133% of FPL
- Marketplace exchange subsidies up to 400% of FPL
- Young adults up to age 26
- Employer sponsored coverage mandate for > 50 employees
- Consumer protections of caps on ins coverage, cancelling coverage, pre-existing conditions
- Other

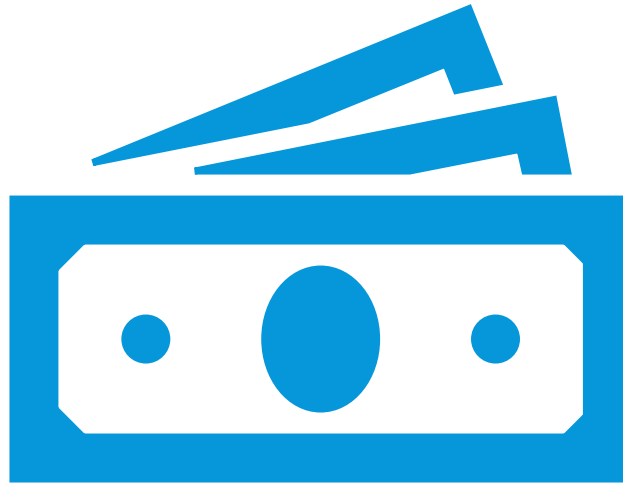


Senate outcome. Contingency planning. Communications.

Colorado Cross-Disability Coalition

www.ccdonline.org
covid@ccdonline.org

Weekly Webinars and chat spaces
Opportunities for engagement
Individual Advocacy including appeals



Budget Perspective



Social Isolation

Telemedicine Update

Tracy Johnson, PhD, Colorado Medicaid Director

Telemedicine Policy Goals

The Department is committed to developing a comprehensive telemedicine policy that:

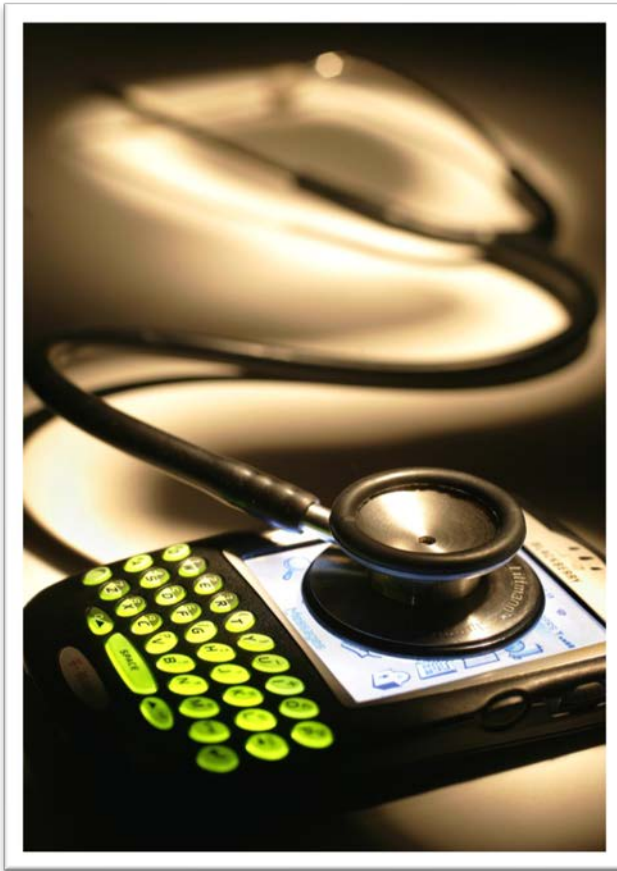
- improves access to high-quality services
- promotes health equity
- integrates with medical home & neighborhood
- prods innovation thru aligned payment policy
- ensures value for the taxpayer dollar

Telemedicine Current State

- **SB20-212 made emergency rules permanent**
 - Federal (CMS) approval received 9/4/20
 - Requires reimbursement = in-person services (payment parity)
 - Telephone-only modality for certain services (and live chat)
 - Federally Qualified Health Centers, Rural Health Clinics, Indian Health Services, and Community Mental Health Centers
 - Therapy providers (PT/OT/Speech, home health, hospice, pediatric behavioral health therapy)



Research & Data



- ☐ Literature Review
- ☐ Commissioned Research
- ☐ Stakeholder Conversations
- ☐ Member Survey Analysis
- ☐ Utilization Data Analysis
- ☐ Cost & Budget Modeling
- ☐ Collaboratives



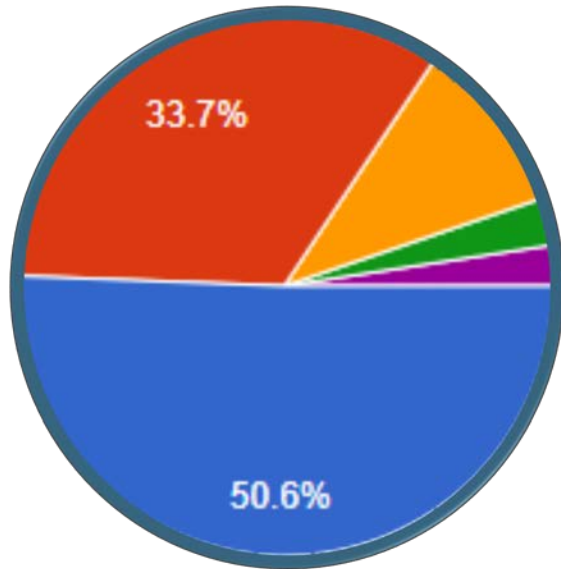
Research & Data

Member research

340 respondents

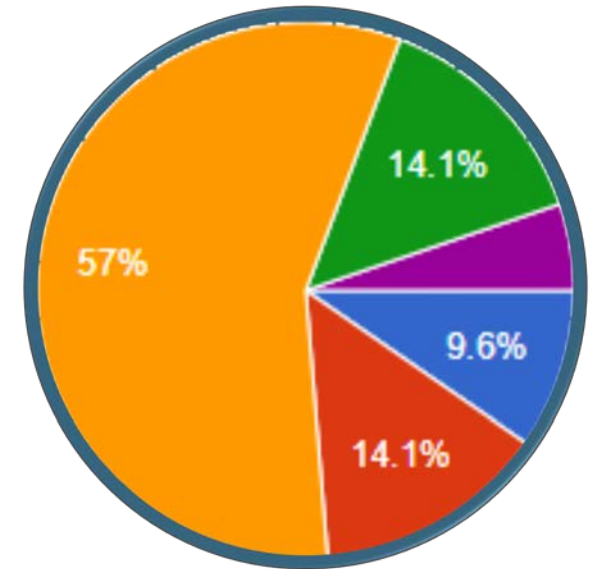
249 telemedicine visits

Positive experience



Met Need?

- Completely met my needs
- Mostly met my needs
- Met only some of my needs
- Did not meet my needs at all
- Don't know/not sure



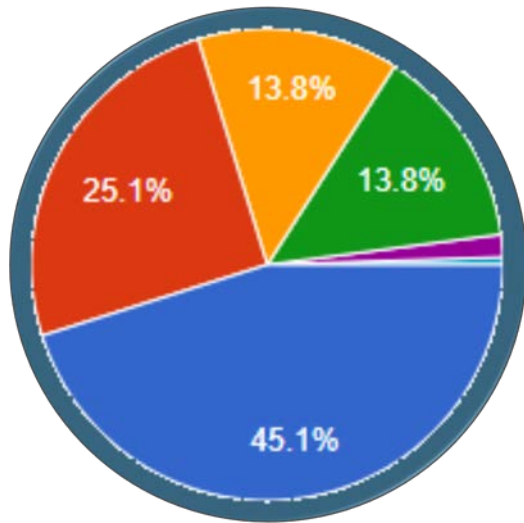
Compared to in-person care?

- Much better than in-person care
- Better than in-person care
- About the same as in-person care
- Worse than in-person care
- Much worse than in-person care



Research & Data

195 Member visits
with known providers

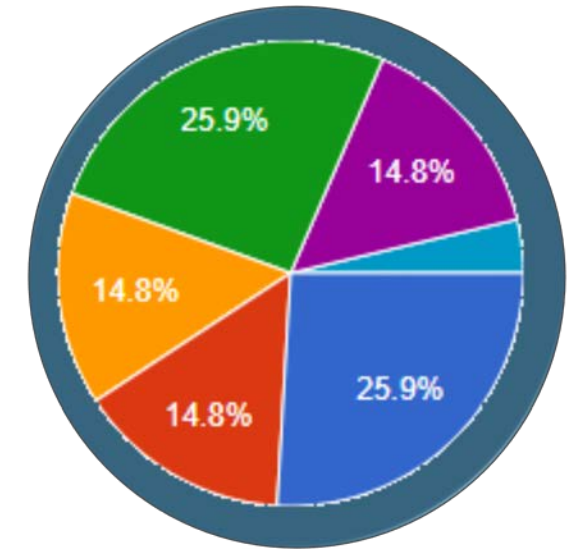


Importance of
meeting with
known provider

- Extremely important
- Very important
- Important
- Kind of important / Moderately important
- Not very important / Slightly important
- Not at all important

Importance of knowing the provider

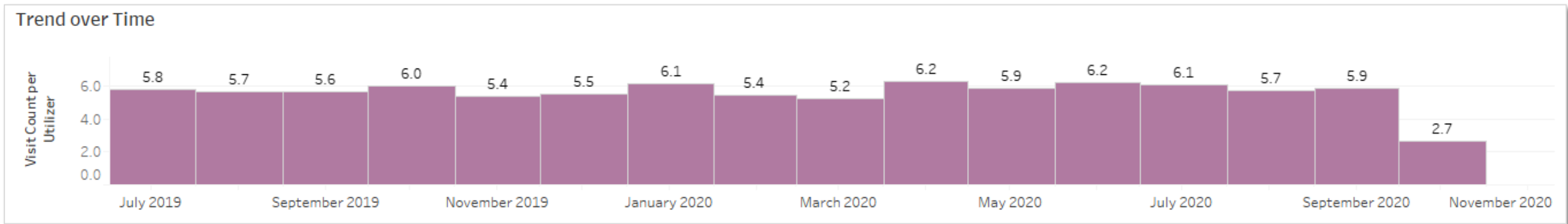
54 Member visits
with new providers



Importance of
meeting with
known provider for
future visits

- Extremely important
- Very important
- Important
- Moderately important
- Not very important
- Not at all important

Care Model Changes: More Intensity? PT/OT/ST Home Health - Per Person Visits

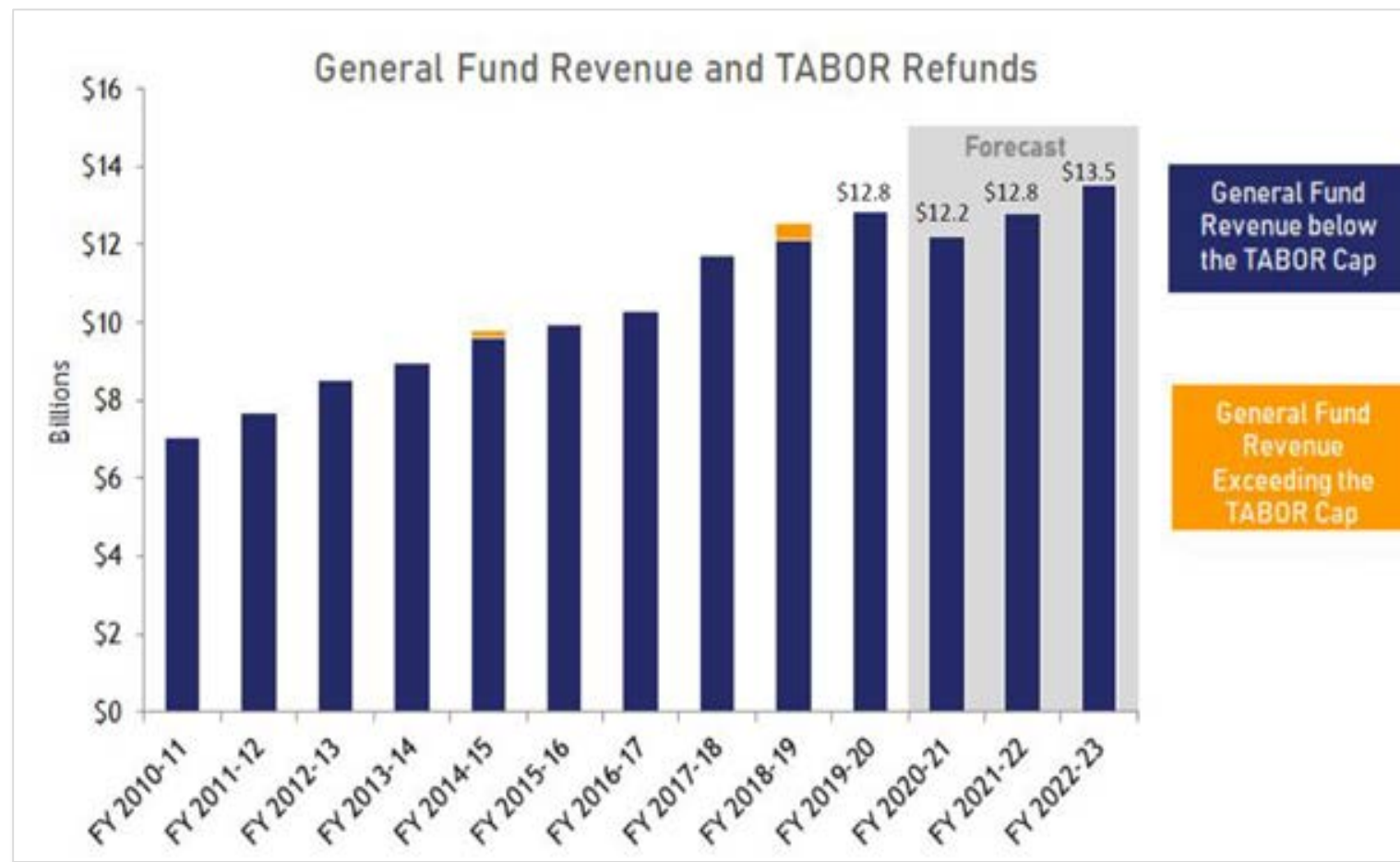


Budget Implications

Projected Telemedicine Spend

FY20-21: \$210m

FY20-22: \$253m





Policy Proposals

- Create emergency-only policies
- Retain medical home model integrity
- Establish aligned & flexible payment policy
- Build eConsult capability



Policy Proposals: Integrate with Medical Home

- Use FFS policy to reinforce medical homes for established patients (relax for PHE)
- Implement alternative payment models for additional flexibility
- Integrate virtual-only providers into medical neighborhood
- Consider co-pay policy post-pandemic

Key Program Updates

Telehealth in Home and Community Based Services (HCBS)

- Separate initiative from Telemedicine
- SB 20 - 212 does not include HCBS
- OCL is looking to use research and resources where appropriate, from Telemedicine work
- Positive outcomes and increased flexibility of service use during the PHE, have driven the OCL to look to how to sustain Telehealth
- OCL is working towards permanent Telehealth Policy implementation by the expiration of the Appendix K

Telehealth in Home and Community Based Services (HCBS)

- OCL has hosted a series of five stakeholder engagement opportunities, topics including: regulation and policy development; rate setting and methodology
- OCL, with stakeholder input, have identified 17 services for Telehealth inclusion based on service integrity being maintained using Telehealth
- Of these 17 services, 11 services will have no change to the Telehealth rate from the current in person rate

Telehealth in Home and Community Based Services (HCBS)

- OCL will continue to collect input from stakeholders and intends to present draft regulation in January, to the Medical Services Board (MSB)
- Please visit: www.colorado.gov/hcpf/OCL-stakeholder-engagement for recordings of stakeholder meetings
- Please send any comments or questions to: HCPF_HCBSWaivers@state.co.us

Public Comment Opportunity

- The Department invites the public to comment on proposed waiver amendments for the BI, CMHS, DD, EBD, SCI, and SLS waivers.
- Comments will be accepted from November 12 - December 11, 2020.
- The proposed waiver amendments will give the Department, if agreed upon with stakeholders, the ability to include changes to Day Habilitation Services.
- www.colorado.gov/hcpf/hcbs-waiver-transition

Approved HCBS Amendments

- CMS approved amendments to all ten (10) HCBS waivers effective January 1, 2021.
- Notable changes for all waivers include:
 - Addition of Virtual Case Management when there is a safety risk to the case manager or client.
 - Removal of Professional Medical Information Page (PMIP) in reassessment processes.
 - Digital Signatures on all documents (including Consumer-Directed Attendant Support Services forms).

Proposed Amendment Changes

- New 3-tiered structure for Adult Day service for CMHS, EBD, SCI and new 2-tiered structure for BI.
- New 3-tiered structure for Specialized Habilitation and Supported Community Connector for DD and SLS.
- Annual cap on spending for Specialized Habilitation and Supported Community for DD and SLS.
- Update budget projections for new tiers for BI, CMHS, DD, EBD, SCI, and SLS.

Strike Team Updates

PHO 20-20

[Public Health Order 20-20](#) updated on November 10, 2020

- Requires at least weekly surveillance testing of staff and residents who have left the building + outbreak testing by November 20, 2020
- Group homes are now included in the Public Health Order

Surveillance Testing Requirements

- Weekly surveillance testing for all staff
- Weekly surveillance testing for all residents who have left the facility premises to interact with individuals outside of the facility in the last 14 days.
- Twice weekly required if county the facility is located in reaches a two-week test positivity rate of 10% or greater, using the Colorado COVID-19 dashboard
 - Continues until the county is below 10% for 2 consecutive weeks

[NEW TESTING REQUIREMENT GUIDANCE DOCUMENT](#)

Curative

- To ensure compliance with the updated Public Health Order, the State of Colorado has partnered with [Curative](#), a national leader in COVID-19 testing
- Through Curative, the State will be providing test kits to all residential care facilities at no cost

Key Details About Curative:

- Saliva-based testing (with the alternate option for nasal if needed using same kits)
- Self-administered
- Results within 36 hours on average
- Sophisticated tracking, shipping logistics, and reporting system
- Comprehensive training materials and virtual trainings

HCBS Provider Testing Letter

- [Residential Care Strike Team letter dated Nov. 9, 2020](#)
- We highly recommend **weekly** tests for direct care staff
- The state is providing **free** testing for all home care and day program direct care providers
- Please register in advance with our testing partner at www.primarybio.com/l/cdphe (offers nine sites)
- Four additional community-based sites are also available
- No requirements for referrals, insurance, or proof of job

Connect to Care Jobs Site: V3 Launch

Eligible Providers: Licensed Nursing Facilities, Assisted Living Residences, Group Homes, Intermediate Care Facilities, Day Programs, and Home Care and Home Health Agencies

| New Features | |
|---|--------------------------|
| One organization can register multiple facility locations | Additional documentation |
| Multiple zip code matching | Enhanced reporting |
| Travel for job placement | |



New Questions?

Stay Engaged

Memos, Webinar Info, and FAQs - Updated Regularly

www.colorado.gov/hcpf/long-term-services-and-supports-covid-19-response

Email us

HCPF_HCBS_Questions@state.co.us

Subscribe to Future Updates

[Click here to subscribe](#)

Previous COVID-19 Guidance

Case Management Agencies

Operational Changes

- [OM 20-049](#)
- [OM 20-027](#)
- [OM 20-037](#)
- [OM 20-045](#)
- [OM 20-075](#)

PASRR Changes

- [OM 20-043](#)

Level of Care Changes

- [OM 20-053](#)

Transition Coordination

- [OM 20-056](#)

In-Person & Travel Add-On

- [OM 20-076](#)

Critical Incident Reporting for COVID-19

- [OM 20-080](#)

Updated Statement of Agreement

- [OM 20-092](#)

Facilities and PACE

Infection Control And Prevention in NHs (CMS)

- [CMS QSO-20-14-NH](#)

Telemedicine in Nursing Facilities

- [OM 20-032](#)

Training & Certification

- [OM 20-038](#)

Rate Increase

- [OM 20-050](#)

Options Counseling

- [OM 20-054](#)

Stimulus Payments

- [OM 20-059](#)

Civil Money Penalty (CMP)

- [IM 20-021](#)

HCBS Providers

HCBS Therapy Services

- [OM 20-020](#)

Guidance for Class B Providers

- [OM 20-023](#)

Changes to Benefits & Services (Table)

- [OM 20-046](#)

Telemedicine

- [Temporary Policy](#)

Host Home Inspections

- [OM 20-036](#)

CDASS Sick Time

- [OM 20-047](#)

Changes to Benefits & Services Rates (Table)

- [OM 20-048](#)

Flexibility in Hiring

- [IM 20-019](#)

CC & SCC Clarifications

- [OM 20-060](#)

Additional Provider Relief Funds

- [IM 20-024](#)

Non-Medical Transportation

- [OM 20-063](#)

Retainer Payments Ending

- [OM 20-069](#)

Guidance for Reopening or Expanding Day Programs

- [OM 20-070](#)

CDPHE TA for IRSS

- [IM 20-031](#)

Updated Residential Guidance

- [OM 20-072](#)

Day Hab Svcs in Response to COVID-19

- [OM 20-083](#)

Reporting COVID-19 Supplemental Payments on the MED-13

- [OM 20-086](#)

Billing Guidance for HCBS Providers When Using Telehealth

- [OM 20-090](#)

Adult Day Svcs in Response to COVID-19

- [OM 20-091](#)

Removing Travel Time from PARS for Homemaker and PC

- [OM 20-093](#)

NMT MCT Permit Requirements

- [IM 20-048](#)

Denver Based Rate Increase

- [OM 20-089](#)

Other Resources

Added a “COVID-19
Resources for LTSS”
document to our webpage:

www.colorado.gov/hcpf/long-term-services-and-supports-covid-19-response



LTSS COVID-19 Webinars and Training

LTSS stakeholders and providers are invited to participate in an informational session to discuss the implications for service delivery, case management, payment, operational

+ [Upcoming Webinars](#)

+ [Webinar Recordings and Materials](#)

+ [COVID-19 Training for Frontline Staff](#)

+ [COVID-19 Toolkit](#)

- [Other Resources](#)

- [COVID-19 Resources for LTSS](#) - Updated September 11, 2020
- [Supporting You, Supporting Us Poster](#) - September 2020
- [Have You Changed Poster](#) - September 2020
- [Your Guide to Wearing PPE Video](#) - September 2020

Reminder: Personal Protective Equipment

If you or your organization are experiencing a shortage or outage of personal protective equipment (masks, gloves, gowns, etc.) to conduct essential or life saving functions during this crisis, please reach out to your **local emergency manager** or **local public health department**.

[Find Your Local Community Emergency Manager](#)
[Find Your Local Public Health Department](#)

To report issues in
obtaining PPE please
notify:

Sadie Martinez
Access and Functional Needs
Coordinator
Office of Emergency Management
720.610.1691
sadie.martinez@state.co.us

More Information



www.cdc.gov/coronavirus/2019-ncov/



www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page



covid19.colorado.gov



Local Public Health Agencies

www.colorado.gov/cdphe/find-your-local-public-health-agency



www.colorado.gov/hcpf/COVID



Residential Care Strike Team -
www.colorado.gov/cdphe/residential-care-strike-team



COLORADO

Department of Health Care
Policy & Financing

Next Steps

Upcoming Webinars

Break for Joint Budget Committee and Holidays

SEE YOU IN 2021!

Dates and Times TBD

Stay up to date on other meeting dates and times at:

www.colorado.gov/hcpf/long-term-services-and-supports-covid-19-response

Upcoming Meeting

Person-Centered Budget Algorithm Statewide Meeting II

Monday, November 16, 2020

- Two options to attend
 - 9:30 – 11:00 a.m. and 5:00 – 6:30 p.m.
 - Webinar Link: <https://cohcpf.adobeconnect.com/pcba/>
 - Phone: 1-877-820-7831; Participant Code: 982280#

Thank You!