



Case Management Redesign Rule Revision FAQ

December 2022

Q: Why are the rules changing?

A: Colorado's rules have needed an update for quite some time now. Due to Case Management Redesign (CMRD), almost all the rules need to be opened and updated for language around case management agency, Single Entry Point and Community Centered Board, as these definitions and roles are changing. Additionally, the Department of Health Care Policy and Financing (Department) needs to update the rules regarding case management guidelines and expectations to align with the commitments the Department has made to the community throughout the stakeholder engagement process for CMRD. Due to all these factors, the Department is choosing to take this opportunity to reorganize the rules to be simpler and more accessible for everyone.

Q: How do rules get changed in Colorado?

A: Rules go through an official promulgation process with the state's Medical Services Board (MSB). Typically, policy makers will open rules, make changes and then go through the public comment period with the MSB. The Office of Community Living wants to make sure that members have a voice in the rule-making process BEFORE they get to MSB Public Comment, which is why we are doing these rule review meetings.

Q: What is changing in the rules?

A: The major changes stakeholders will see in the rule are structural changes and language updates that are outdated. Additionally, case management requirements will change as we pull Colorado's case management system out of the silos and into one case management system.

Q: Are any services or eligibility requirements changing?

A: No service definitions or program eligibility requirements are changing because these require federal approvals. The focus of these rule changes is to restructure and be more cohesive for ease of use.

Q: How do I give feedback about rule changes?

A: The Department will go through the mandatory Medical Services Board process to promulgate rules. However, the Office of Community Living is committed to having stakeholder input throughout the process. So, we are conducting stakeholder engagement in addition to the requirements for MSB. All comments and questions will be recorded in one of two publicly posted listening logs where the Department will provide responses and updates in writing.

1. The first way to give feedback is to review materials posted on our website, attend the meetings as posted on the CMRD website and provide comments, questions, etc. either by unmuting yourself to express your concern or providing your input in the chat feature of the Zoom webinar.
2. The second way is to reach out to the Department CMRD staff directly. You may email Tiffani Domokos, CMRD Policy Advisor at tiffani.domokos@state.co.us or Nicolette Anderson, CMRD Community Liaison at nicolette.anderson@state.co.us

Q: What if a particular issue needs more discussion than the 2-hour meeting can provide?

A: The Department is committed to ensuring that stakeholders' concerns are addressed. Although the Department will not be able to incorporate all suggestions, Department staff will do their best to explain the process and reasons for the final decision. If multiple people (more than 5) are strongly requesting a deeper dive into a particular issue, the Department will schedule an ad hoc meeting for that specific issue.

Q: I heard Colorado is moving to a managed care system. Is that true?

A: No. Colorado is statutorily prohibited from creating a managed care system. Case management will continue to be paid through administrative claiming and targeted case management in the state Medicaid plan. Services are paid based on the public rate table available here:

Q: Is waiver eligibility changing?

A: No. Waiver eligibility has not and will not change with CMRD. Members will maintain their benefits throughout CMRD and the case management agency transitions.