Case Management Redesign Policy Updates

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Agenda

- Welcome and Introductions: 9:00 a.m.

- Case Management Redesign Direction and Background: 9:05 a.m.

- Case Management Agency service areas & selection: 9:20 a.m.

- Member Portability and Grievances: 9:40 a.m.

- Community Centered Board Designation: 10:00 a.m.

- Organized Health Care Delivery System: 10:15 a.m.

- Human Rights Committee: 10:30 a.m.

- Quality Case Management, Training & Rates: 10:45 a.m.

- What does this mean for members?: 11:00 a.m.

Home and Community-Based Services (HCBS) Waivers

- Alternative to institutional care
  - ➢ Provide institutional level of care to individuals who prefer to live in their home or community

- Home and Community-Based Services (HCBS) Waivers allow states flexibility to:
  - ➢ Waive certain income/eligibility criteria
  - ➢ Provide specific services to target groups or geographic regions
  - ➢ Can have waiting lists or enrollment caps
  - ➢ Provide individuals more choice and independence
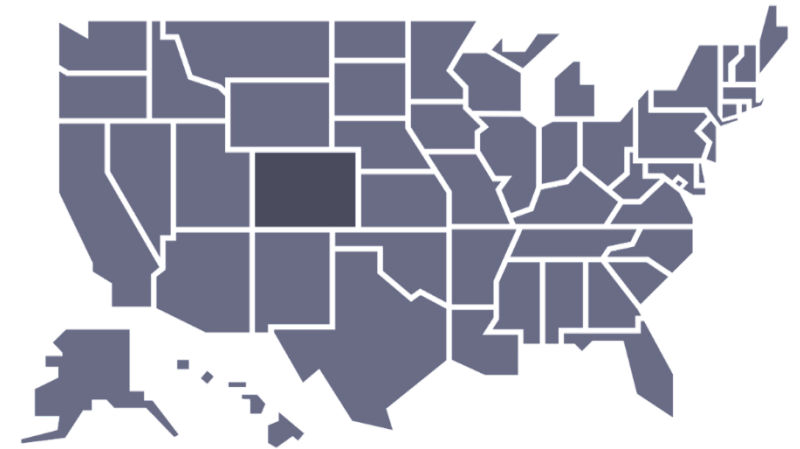
10 HCBS Waivers in Colorado

Adult Waivers
Brain Injury Waiver (BI)
Community Mental Health Supports Waiver (CMHS)
Complementary and Integrative Health Waiver (CIH)
Elderly, Blind and Disabled Waiver (EBD)
Developmental Disabilities Waiver (DD)
Supported Living Services Waiver (SLS)

Children's Waivers
Children's Extensive Support Waiver (CES)
Children's Home and Community Based Services Waiver (CHCBS)
Children's Habilitation Residential Program Waiver (CHRP)
Children with Life Limiting Illness Waiver (CLLI)

hcpf.colorado.gov/hcbs-waivers

HCBS Waivers and Case Management

Currently, the HCBS waiver a person chooses to pursue determines the type of case management agency they will go to.

Single Entry Point (SEP) Agency	Community Centered Board (CCB)	Private Case Management Agency
Serves waivers targeted to individuals **without** an IDD • Brain Injury Waiver (BI) • Children with Life Limiting Illness Waiver (CLLI) • Community Mental Health Supports Waiver (CMHS) • Complementary and Integrated Health Waiver (CIH formerly SCI) • Elderly, Blind and Disabled Waiver (EBD)	Serves waivers targeted to individuals **with** an IDD • Children's Extensive Support Waiver (CES) • Children's Habilitation Residential Program Waiver (CHRP) • Developmental Disabilities Waiver (DD) • Supported Living Services Waiver (SLS)	Serves children with significant medical needs • Children's Home and Community Based Services Waiver (CHCBS)

Bringing Change

- Executive Order and Community Living Advisory Group (CLAG)

- One place to go for all waivers

- Conflict-Free Case Management

- New Assessment and Person-Centered Support Plan Process

= Case Management Redesign

CMRD Direction

- How Did We Come to this CMRD Structure?
  - Did HCPF Consider other Options?
    - Uniquely Colorado
    - Stakeholder Engagement
    - Learning from other states
    - Vision
- Conflict Free Case Management required for further updates

Key Outcomes of Case Management Redesign

Intake, Eligibility, & Case Management Agency

Social Security Administration (SSA) Determines Disability → **County Determines Financial Eligibility**

PERSON CENTEREDNESS

Intake & Eligibility
- Initial & Continued Stay Review (CSR) Assessment
- Financial / Eligibility Assistance
- Determination = Developmental Disability (DD)/Delay
- Children's Extensive Support (CES) Application
- Resource Navigation

Ongoing Case Management Functions
- Service Planning
- Monitoring
- Revisions

Admin Functions
- Waiting List Management
- Operational Guide
- Human Rights Committee (HRC)
- Complaint Trends
- Appeals
- State Funded Programs
- Critical Incident Reporting (CIR)
- Supports Intensity Scale (SIS)
- Organized Healthcare Delivery System (OHCDS)

Outreach
- Regional Accountable Entity (RAE) Coordination & Engagement
- Community Advocates

Standardized Training

Individual Selects their Service Providers

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Case Management Redesign Framework

Policy Framework
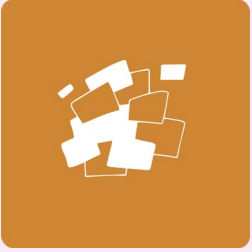
New Structure	Knowledge	Conflict-Free	Accountability
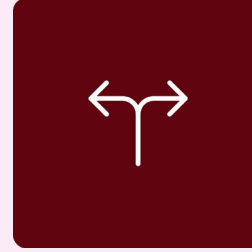
Assessment & Support Plan Framework

New Assessment Tool	New Person-Centered Budget Algorithm	New IT System

What is NOT changing?

- Access to services

- Waiver eligibility

- Person centered approach

- Required case management

- Local knowledge and expertise

= Milestone   *Updated: September 2022*

Timeline (Jan 22 – Jul 23)

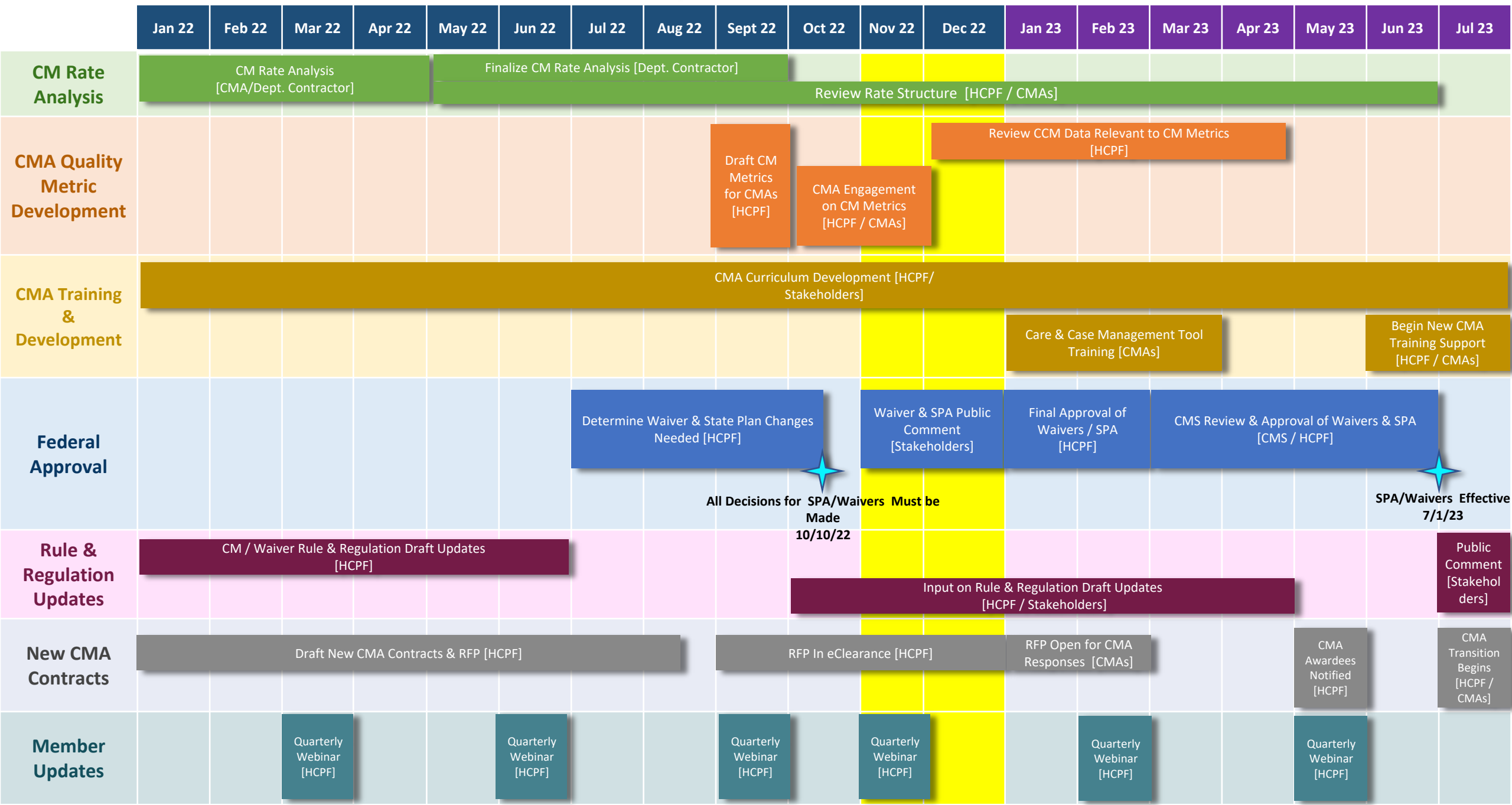**CM Rate Analysis**
- CM Rate Analysis [CMA/Dept. Contractor] (Jan 22 – Apr 22)
- Finalize CM Rate Analysis [Dept. Contractor] (May 22 – Oct 22)
- Review Rate Structure [HCPF / CMAs] (May 22 – Jun 23)

CMA Quality Metric Development
- Draft CM Metrics for CMAs [HCPF] (Sept 22 – Oct 22)
- CMA Engagement on CM Metrics [HCPF / CMAs] (Sept 22 – Oct 22)
- Review CCM Data Relevant to CM Metrics [HCPF] (Dec 22 – Mar 23)

CMA Training & Development
- CMA Curriculum Development [HCPF/ Stakeholders] (Jan 22 – Mar 23)
- Care & Case Management Tool Training [CMAs] (Feb 23 – Mar 23)
- Begin New CMA Training Support [HCPF / CMAs] (Jul 23)

Federal Approval
- Determine Waiver & State Plan Changes Needed [HCPF] (Aug 22 – Oct 22)
- Waiver & SPA Public Comment [Stakeholders] (Nov 22 – Dec 22)
- Final Approval of Waivers / SPA [HCPF] (Jan 23 – Feb 23)
- CMS Review & Approval of Waivers & SPA [CMS / HCPF] (Mar 23 – Jun 23)
- ★ All Decisions for SPA/Waivers Must be Made 10/10/22
- ★ SPA/Waivers Effective 7/1/23

Rule & Regulation Updates
- CM / Waiver Rule & Regulation Draft Updates [HCPF] (Jan 22 – Sept 22)
- Input on Rule & Regulation Draft Updates [HCPF / Stakeholders] (Oct 22 – Mar 23)
- Public Comment [Stakeholders] (Jul 23)

New CMA Contracts
- Draft New CMA Contracts & RFP [HCPF] (Jan 22 – Sept 22)
- RFP In eClearance [HCPF] (Oct 22 – Dec 22)
- RFP Open for CMA Responses [CMAs] (Jan 23 – Feb 23)
- CMA Awardees Notified [HCPF] (May 23)
- CMA Transition Begins [HCPF / CMAs] (Jul 23)

Member Updates
- Quarterly Webinar [HCPF] (Mar 22)
- Quarterly Webinar [HCPF] (Jun 22)
- Quarterly Webinar [HCPF] (Sept 22)
- Quarterly Webinar [HCPF] (Nov 22)
- Quarterly Webinar [HCPF] (Feb 23)
- Quarterly Webinar [HCPF] (May 23)

Questions

Defined Service Areas

Formerly known as: Catchment Areas

Case Management Agency Regional Map

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Case Management Agency (CMA) Selection Process

- Competitive Request for Proposal process

- Current CMAs and New CMAs

- Unbiased panel selected to review proposals

- Panel selects CMA for each area

Request for Proposal (RFP) Process Overview

- RFP is Posted/Made Public

- Offeror Inquiry Period

- Department Inquiry Response

- No Additional Inquiries

- Proposals Due

- Evaluation Period

- Notification of Award

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Stakeholder Involvement with CMA criteria

- Hear from members and stakeholders what is most important to them in a CMA

- Survey to go out the day after RFP is made public

- Will be open until January 18, 2023

- Feedback will be incorporated into criteria for RFP panel to select CMA

- Department will advertise via direct emails, social media and newsletters

Questions

Portability: Current

- Portability is: moving between CMA service areas and maintaining current CM/CMA

- Members with Community Centered Boards (CCBs) have the option to request to stay with current CCB
  - Not always able to accommodate
  - Up to CCB discretion

- Members with Single Entry Points (SEPs) transition to the CMA in the new region

Portability: Future

- Members moving to contiguous CMA service area may request to continue with current CMA

- CMAs must have policy and procedure

- Department oversight of CMA policies to ensure consistency

Current Grievance Process

- Vague requirements in rule

- Unclear how members make requests or file complaints from member perspective

- Annual report to Department

CMA Grievances in CMRD

- CMAs required to have transparent grievance process

- Community Advisory Council

- Report to the Department

- Requirements to resolve conflicts and grievances

- Exceptions to CMA assignments if no resolution possible

- Requirement to allow for new CM request

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Questions

CCB Designation

- Designation separated from CMA
- Preserving Local Funding
- CCB areas will stay the same
- 10 year designation
  - No state funding attached to designation

Organized Health Care Delivery System (OHCDS)

- Options for services to be paid through the CMA
- Great for areas of the state where fewer providers
- Great for services with low provider availability
- Proposed for all waivers with below services
- Proposed list of OHCDS services
  - Assistive Technology
  - Specialized Medical Equipment and Supplies
  - Vehicle Modification
  - Vision
  - Recreational fees/passes

Human Rights Committee (HRC): Current

- Facilitated/managed by CCB

- 3rd party group to safeguard legal rights of members with I/DD in HCBS
  - informed consent reviews
  - monitoring rights modifications
  - monitoring behavioral development programs
  - monitoring psychotropic medication
  - review investigations of Mistreatment, Abuse, Neglect and Exploitation (MANE)

- Community members and required behavioral staff

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Human Rights Committee: Future

- Goals: consistency across the state, dignity of risk and privacy for members

- Update rules regarding roles and responsibilities of CMA, HRC, and members

- Require utilization of Universal Documents

- No changes in statute

- Focus on ensuring informed consents are done accurately

Questions

Quality CM - Current

- ## Quality Improvement Strategies (QIS)
  - An annual review of case management performance across the 10 Home and Community Based Services (HCBS) Waivers
  - Sample size is based on the total waiver population and is not a specific sample per case management agency

- ## National Core Indicators (NCI)
  - Member Satisfaction surveys

- ## Programmatic Reviews
  - Targeted reviews of case management agency performance
  - Content of review may vary based on specific concerns identified

- ## Financial Reviews
  - Review of case management activities and associated payment

Quality CM - Future

Oversight of case management activities on a statistically valid sample size

- Continuous Quality Improvement
  - An annual review of case management performance using a statistically valid sample size per case management agency.
  - Utilize performance measures from our HCBS waivers and additional metrics (including NCI member satisfaction survey data) to assess case management quality performance
  - Publish a scorecard of case management agency performance on each performance measure/metric.

- Financial Reviews
  - Review of case management activities and associated payment

Training

- **CMA Training Goals**
  - Interactive training housed in a Learning Management System
  - Person-Centeredness to guide the training materials to focus on helping the members feel like they are heard and are in control of their story
  - Empower Case Managers with consistent training materials
  - Efficient and meaningful training
  - Competency-based training assessments to determine learner comprehension
  - Accessible training to all case managers

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CMA Rates

Goal: Lower case load size to increase case management quality.

- Moving to a Single Ongoing Case Management rate for all members to allow CMAs flexibility to provide more person-centered support
  - Requesting an 8% increase to the Case Management appropriation, infusing nearly $8 million a year to bolster the ongoing case management rate
  - Ongoing Case Management proposed rate of $117.35

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Questions

What does this mean for members?

- Approved services will continue (no break in services)
- Same case management activities, improved case management quality
- CHCBS waiver members will no longer have to transfer when age into adult programs
- Case Management Agency *might* change
- Contact information for new agency provided throughout transition

Department Communication with Members

- Member Communication Goals

- What we have been doing:
  - [CMRD Website](#)
  - [OCL Monthly Webinars](#)
  - Provide CMA's Talking Points and Information

- What we have in the works:
  - Member Materials & Trainings
  - Annual Listening Sessions (ongoing)
  - Post RFP Award Snail Mail notice
  - CMA communication with members about CMA changes

Photo by Marko Subotin from Noun Project

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Open Discussion

Thank you!