

INFORMATIONAL MEMO

INFORMATIONAL MEMO NUMBER: HCPF IM 18-002 TITLE: COLORADO CHOICE TRANSITIONS STAKEHOLDER UPDATE SUPERSEDES NUMBER: N/A ISSUE DATE: JANUARY 11, 2019 EFFECTIVE DATE: JANUARY 14, 2019 DIVISION AND OFFICE: POLICY, INNOVATION, & COMMUNITY ENGAGEMENT, DIVISION; OFFICE OF COMMUNITY LIVING PROGRAM AREA: PROGRAM DEVELOPMENT AND EVALUATION APPROVED BY: CANDACE BAILEY KEY WORDS: COLORADO CHOICE TRANSITIONS, CCT, RULEMAKING, HCBS SERVICES, HCBS WAIVERS, TRANSITION SERVICES, TRANSITIONS, MONEY FOLLOWS THE PERSON

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Purpose and Audience

The purpose of this Informational Memo is to provide an update to Colorado Choice Transitions stakeholders on the sustainability of the Colorado Choice Transitions (CCT) demonstration program and to notify stakeholders of additional upcoming engagement opportunities.

Information

House Bill (HB) 18-1326 was signed into law in April 2018, directing the Department of Health Care Policy & Financing (the Department) to seek the necessary state plan and waiver amendments to create sustainability for the Colorado Choice Transitions (CCT) demonstration program. From April to August 2018, the Department held stakeholder engagement meetings to ask for feedback on the implementation of demonstration services to the Medicaid program.

Initial rules were presented at the Medical Services Board (MSB) on October 12, 2018 and were postponed due to stakeholder feedback. The Department researched additional options to address stakeholder concerns and hosted two additional stakeholder meetings in November and December 2018 to present the research and alternative options for stakeholders to review and provide feedback.

As a result of these collaborative efforts, the Department presented emergency rules on December 14, 2018, to be effective January 1, 2019. The rules were unanimously passed by the MSB. Specifically, the rules:

- Created a benefit to provide Transition Coordination through Transition Coordination Agencies (TCAs). Included in this rule are the minimum qualifications and requirements for TCAs and Transition Coordinators, the establishment of pre-transition, post-transition and monitoring activities, and the limitations associated with the benefit. This rule will allow services to continue without interruption.
- Established a Transition Services rule comprised of the four most successful services from the demonstration. The four services are additional supports an individual may need to transition from an institutional setting to a community setting, or to maintain and thrive in a community setting following a change in life circumstances.
 - **Life Skills Training**: Previously named Transition-Independent Living Skills Training, this is training on skills for living in the community.
 - **Home Delivered Meals**: Access to nutritious meals for those with dietary needs, who are unable to prepare their own meals, and have limited or no outside assistance.
 - **Peer Mentorship**: Support from a peer with shared experience conducive to transitioning into the community.
 - **Transition Setup**: Provides the coordination and funds for setting up a basic living arrangement such as purchase, assembly, and delivery of items. Transition Setup is only available for members transitioning from an institution into a setting that is not provider-owned or -controlled.

Summary of Feedback and Changes for Transition Coordination

The following information reflects feedback the Department heard on the Transition Coordination benefit and corresponding actions.

- There would be a conflict of interest for TCAs to provide Home- and Community-Based Services (HCBS) case management as the TCA would not be able to both authorize HCBS waiver services and then provide those services for the same individual. This separation would be cumbersome, confusing, and inefficient for clients. Some stakeholders were also concerned about the dual role of advocating for clients and representing the Department in an appeal for denial/discontinuation of services.
 - Retained the Targeted Case Management structure, which allows the Department to serve the broadest base of members and ensure that they will have the supports they need before, during, and after a transition. However, the Department removed the requirement that TCAs also

provide HCBS case management. Service authorization and appeals will continue to be provided by an HCBS case management agency.

- 2. 240 units for Transition Coordination is not enough to transition for some clients and may cause an unsafe transition.
 - Included an exception process for members who need more than 240 units of Transition Coordination based on documented health, welfare, and safety concerns.
- 3. Some of the minimum requirements are not appropriate for TCAs and are expensive or difficult to implement.
 - TCAs are required to employ Transition Coordinators; contractors are not allowable. This ensures the sustainability, consistency and quality of services. However, the Department created a modified set of minimum qualifications for TCAs and Transition Coordinators.
 - Agencies may substitute access to a line of credit equal to no less than one month of expenses in place of a financial reserve of one month of expenses.
 - Agencies may substitute an equivalent financial statement if they do not perform an annual financial audit.
 - Agencies performing Transition Coordination before December 31, 2018, are exempt from the agency minimum of two years of experience.
 - There is an exception process for Transition Coordinators that don't meet the minimum qualifications to be hired by a TCA. The TCA can request an exception, subject to Department approval, to employ a Transition Coordinator with a combination of education and experience, which may include lived experience.

Transition from Colorado Choice Transitions (CCT) Demonstration to Targeted Case Management

• Enrolled CCT members who transitioned prior to December 31, 2018, will continue to receive CCT Extended Transition Services (ETS), Independent Living Skills Training (ILST), Home Delivered Meals (HDM), and Peer Mentorship services up to 365 days post-discharge. They will also receive HCBS waiver and state Medicaid plan services during and past the 365 days post-discharge. If a member is re-institutionalized during the 365-day period, they would need to enroll in the state program upon discharge.

- A member who has signed a CCT Informed Consent Form and has been accepted by a TCA prior to December 31, 2018 but has not transitioned can continue the transition process with CCT Community Transition Services (CTS), Extended Transitions Services (ETS) and household set-up, even if the transition occurs after January 1, 2019. However, Life Skills Training, HDM, and Peer Mentorship would be received as needed through HCBS waivers under the emergency Transition Services rule. Members will also continue to receive other HCBS waiver and state Medicaid plan services.
- **Options counseling will continue to be provided after January 1, 2019.** The CCT Informed Consent Form will be discontinued. Members who complete options counseling and request referrals to transition to a home- or communitybased setting will be referred for Transition Coordination or put on the pending referral list for that service.
- Members who have signed a CCT Informed Consent Form and are on the CCT pending referral list on December 31, 2018, will be placed on the Transition Coordination pending referral list as of January 1, 2019.

Summary of Feedback and Changes for HCBS Waiver Services

The following information reflects feedback the Department heard on the four transition services being sustained in the ongoing Medicaid program through HCBS waivers. Services are available to members enrolling in the Persons with Developmental Disabilities (DD), Elderly, Blind and Disabled (EBD), Spinal Cord Injury (SCI), Brain Injury (BI), Supported Living Services (SLS), and Community Mental Health Services (CMHS) waivers.

1. Life Skills Training

- The Department received feedback that Lived Experience should be a minimum provider qualification, thus the Department added lived experience as a provider qualification.
- Stakeholders provided feedback that the Class A or B licensure medicalizes the service and was a cost and time burden for providers. While the Department must ensure the health, safety and welfare of the individual receiving Life Skills Training, the Department acknowledges the current licensure structure may not be ideal for this service. The Department removed the Class A or B licensure requirement for the time being and will work with the Colorado Department of Public Health and Environment (CDPHE) on an oversight solution as well as conduct stakeholder meetings around licensure and the finalization of the service.
- Stakeholders stated that training on Personal Care should not be included in the Service. While all options under the Life Skills Training benefits may not be needed by everyone, each one will be needed by someone. The services are designed to be flexible and customizable. The Department expanded the service from the demonstration to include training on

personal care. By expanding this service to include a personal care training component, the Department hopes to address the needs of all individuals during a transition or a change in circumstance that results in a need for these services. This service is an enhancement to the Personal Care service currently available in the waivers, which tends to be more custodial care. The training component involves more intensive teaching, cueing, and prompting within personal care to increase the members independence in their daily living skills.

2. Home Delivered Meals

• Stakeholders said the Older Americans Act language in this service was too restrictive. The Department removed the language referencing the Older Americans Act.

3. Transition Setup

- Stakeholders gave feedback that the pantry staples and personal effects amount needs to be higher. However, the Department had to remove personal effects and pantry staples altogether from the Transition Setup service per the Centers for Medicare and Medicaid Services (CMS) instructions.
- The Department heard feedback that providers should be reimbursed for the Transition Setup Coordination. The Department created a Transition Setup Coordination service. This is a new, direct service that was not reimbursed as a discrete service in the demonstration. The coordination of the setup will be reimbursed separately from the setup expenses.

4. Peer Mentorship

- Stakeholders said the Peer Mentorship Manual requirement would limit providers from developing and adapting their own training programs and is too stringent. The Department created core competencies instead of the Manual requirement.
- Stakeholders believe lived experience should be a minimum provider qualification. The Department more clearly articulated this qualification in the Provider Qualifications section.
- **5. Overall**, the Department heard that rates and unit limitations are too low for some of the services.
 - The rates and unit limitations were based on the average utilization of the demonstration's rates and unit limitations. The legislation did not include

an appropriation for rates and unit limitations above those in the demonstration. However, part of the November 1, 2018 Governor's Budget included targeted rate increases for several of the transition services, subject to legislative and CMS approval.

Next Steps: Provider Training and Enrollment

In the coming months, the Department will begin training on billing and future enrollment processes. Training on billing will include how to bill for all services, how to interpret Prior Authorization Requests (PARs), and how to troubleshoot billing issues with HCBS services and Targeted Case Management. The Department will address the new enrollment processes after the initial transition is finished.

Training for transition to the Targeted Case Management benefit will be provided to all current Transition Coordinators. Options Counseling and Targeted Case Management benefit trainings will be offered on the following dates:

Wednesday, January 23, 2019 9:00 a.m. – 3:00 p.m.

Wednesday, January 30, 2019 9:00 a.m. – 3:00 p.m.

Wednesday, February 6, 2019 9:00 a.m. – 3:00 p.m.

In-Person Option (all meetings):

303 E. 17th Ave., Denver CO 80203 Conference Room: 10A

Call-In Option (all meetings):

1-877-820-7831 Participant code 123401#

Webinar Option:

Wednesday, January 23, 2019 https://cohcpf.adobeconnect.com/e8rh7ol6th1g/event/event_info.html

Wednesday, January 30, 2019 https://cohcpf.adobeconnect.com/e2fjmkr4l36b/event/event_info.html

Wednesday, February 6, 2019 https://cohcpf.adobeconnect.com/e8ffcczlk5up/event/event_info.html

The same information will be provided at each of these training sessions. **Attendance is required for Options Counselors and Transition Coordinators at one of**

these training sessions. Training invitations and agendas will be sent to current providers.

Next Steps: Stakeholder Engagement

Part of the emergency rule process will be to hold a series of stakeholder meetings in January and February to solidify the service design for Life Skills Training and the appropriate oversight. This meeting series is progressive in nature and each meeting covers a different topic as listed below. The meetings are scheduled as follows:

Service Design and Definitions Tuesday, January 15, 2019 10:00 a.m. – 12:00 p.m.

In-Person Option: 303 E. 17th Ave., Denver CO 80203 Conference Room: 7ABC Call-In Option: Local: 720-279-0026, Toll Free: 1-877-820-7831 Participant Code: 516148# Adobe Connect: https://cohcpf.adobeconnect.com/cct/

Provider Qualifications and Oversight

Tuesday, January 29, 2019 11:00 a.m. – 1:00 p.m. **In-Person Option:** 303 E. 17th Ave., Denver CO 80203 Conference Room 11ABC **Call-In Option:** Local: 720-279-0026, Toll Free: 1-877-820-7831 Participant Code: 982280# Adobe Connect: https://cohcpf.adobeconnect.com/cct/

Finalization of Path Forward for Rule Content

Tuesday, February 12, 2019 10:00 a.m. – 12:00 p.m. **In-Person Option:** 303 E. 17th Ave., Denver CO 80203 Conference Room 7ABC **Call-In Option:** Local: 720-279-0026, Toll Free: 1-877-820-7831 Participant Code: 982280# Adobe Connect: <u>https://cohcpf.adobeconnect.com/cct/</u>

Next Steps: Medical Services Board (MSB)

Public Rule Review Meeting

Tuesday, February 19, 2019 9:00 a.m. – 10:00 a.m. **In-Person Option:** 303 E. 17th Ave., Denver CO 80203 Conference Room 7A

MSB Meeting – Final Adoption of Rule

Friday, March 8, 2019 9:00 a.m. – 12:00 p.m. **In-Person Option:** 303 E. 17th Ave., Denver CO 80203 Conference Room 11ABC

Reasonable accommodations will be provided upon request for individuals with disabilities. Please notify John Barry at (303) 866-3173 or John.R.Barry@state.co.us or the Department's 504/ADA Coordinator at <u>hcpf504ada@state.co.us</u> at least one week prior to the meeting.

Attachments:

None

Department Contact:

CCT@state.co.us