



## INFORMATIONAL MEMO

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<b>TITLE:</b>	<b>MEMBER CHOICE FOR ALL SERVICE PROVIDERS</b>
<b>SUPERSEDES NUMBER:</b>	N/A
<b>EFFECTIVE DATE:</b>	<b>JANUARY 29, 2021</b>
<b>DIVISION AND OFFICE:</b>	<b>BENEFITS AND SERVICES, OFFICE OF COMMUNITY LIVING</b>
<b>PROGRAM AREA:</b>	<b>HCBS BENEFITS</b>
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<b>APPROVED BY: COLIN LAUGHLIN</b>	

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### **Purpose and Audience:**

The purpose of this Informational Memo is to serve as a reminder that members must be afforded choice when selecting Home and Community-Based Services (HCBS) services or specified providers.

### **Information:**

The person-centered planning process, described in Final Rule 441.725(a)(2), ensures that members on HCBS waivers are sufficiently supported to direct their care process “to the maximum extent possible” and are “enabled to make informed choices and decisions.” This rule recognizes the importance of choice to the member’s well-being, as it relates to their individual care needs. The Code of Colorado Regulations, Section 8.602.4, Choice of Service Agencies for Support Services for an Individual, stipulates that “Persons and/or their guardian, as appropriate, and families who will be receiving support services shall have the freedom to choose providers from service agencies which have been selected or selected and approved in accordance with Sections 8.602.1 and 8.603, as applicable, and Section 8.609.1 and with concurrence of the support coordinating agency as defined in Section 8.600.4.”

A provider has every right to make business decisions for their agency, including not providing a certain service. However, a provider agency cannot place any conditions on receiving services, for instance, by requiring that a day program member be moved to their residential agency, at risk of losing existing services. Placing conditions on receiving services deprives the member of the right to self-direct their support planning process, as per regulations. Promoting individual choice regarding services and supports, as well as who provides them, remains a top priority to appropriately serve our members.

**Attachment(s):**

None

**Department Contact:**

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