



INFORMATIONAL MEMO

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Background:

Case management redesign (CMRD) refers to several initiatives aimed at simplifying access to long term services and supports, creating stability for the case management system, increasing and standardizing quality requirements, requiring accountability, and achieving federal compliance.

Purpose and Audience:

The purpose of this Informational Memo is to inform all stakeholders of the Colorado Department of Health Care Policy & Financing (Department) timeline for CMRD implementation as required by HB 21-1187. The Department conferred with stakeholders, which includes case management agencies (CMAs), advocacy partners, and members to garner feedback and ensure pertinent information was included in the timeline.

[Interactive Timeline](#)

[Text-only Timeline](#) (best for printing or use with screen readers)

Information:

This timeline addresses the key policy framework required to implement CMRD in compliance with HB 21-1187 but does not include all details regarding system changes (i.e. Care and Case Management System, new Assessment and Support Plan, etc.). The Department will keep this timeline up to date on the website as we continue to work through policy requirements with stakeholders. The timeline includes:

- Case management (CM) Rates Analysis,
- Case Management Agency (CMA) Quality Metric Development,
- CMA training and development,
- Federal Approvals,
- Rule and Regulation Changes,
- New CMA contracts, and
- Member communication.

Below are details regarding each of those components of the timeline.

Case Management Rates Analysis

The Department will contract with a vendor in 2022 to develop recommendations for a case management rate setting methodology based on case management requirements and national best practices. It is anticipated that engagement with Case Management Agencies will begin January 2022 and go through April 2022. The contractor will then utilize the information provided by the Department and stakeholders to complete the rate analysis from May 2022 to August 2022. Any rate methodology changes will be subject to federal approval and, if necessary, a legislative appropriation.

Case Management Agency Quality Metric Development

The Department will create quality metrics for case management agencies that will leverage data within in the new Care and Case Management System. The Department will work closely with stakeholders through ongoing communities of practice and through member/advocate meetings to develop language for quality measures and remediation processes that will be implemented in the contracts for new case management agencies no later than July 1, 2024. The Department will use this stakeholder process to develop scorecards for case management agencies in CMRD.

Case Management Agency Training and Development

The Department is in process of developing the training learning management system (LMS) for case management agencies to prepare for the Case Management Agency transitions in 2024. The Department's existing training is available to case managers on

the Department's website, but additional trainings will be available through the new LMS.

With the creation of case management agencies who serve all 10 waivers, training and support will be necessary for new case management agencies who are awarded the CMA contract no later than July 1, 2024. The Department will provide training support to CMAs for the purposes of smooth transitions for members in each catchment area and access to training(s) in the LMS will begin February 2022.

Federal Approvals

The Centers for Medicare and Medicaid Services (CMS) require approval for any change to the state plan or 1915(c) home and community-based services (HCBS) waivers. The Department will determine the necessary waiver and state plan changes during July 2022 to October 2022. The Department will publish the waiver and state plan amendment (SPA) for public comment November 2022 to end of December 2022 with final approvals at the Department happening no later than February 2023. The Department is partnering closely with CMS representatives now and will obtain official approvals through biannual waiver and state plan amendment (SPA) processes in early 2023. CMS is required to review and approve the changes to waiver and state plan to ensure Colorado is in compliance with federal and state requirements for CMRD.

Rule and Regulation Changes

The Department will work with stakeholders to outline the proposed framework for the rules and regulations needing updated language required for CMRD compliance and to come into alignment with the future state of case management in Colorado in July of 2024. These updates will take place in calendar year 2022 with official stakeholder input and comment period set for November to December of 2022. Rules will be effective July 1, 2024.

New Case Management Agency Contracts

The Department will develop a Request for Proposal (RFP) for interested parties to respond to for CMA work. The Department anticipates potential Offerors will have 8 calendar weeks between RFP posting and the proposal submission deadline. Procurement law requires a formal inquiry period as part of the RFP process, which is included in the 8-week timeline for RFP responses. Details of these timelines will be outlined in the RFP when it is released in December 2022. Contracts for agencies that are selected to serve as a CMA via the RFP process will be executed no later than July 1, 2024.

Member Updates

The Department is committed to transparency and member communication throughout the CMRD process. The Department intends to update statewide stakeholders quarterly between January 2022 and July of 2024 of progress with CMRD. Once CMA contractors are chosen, members will receive direct communication from outgoing and incoming agencies, in addition to communication from the Department. Members will be informed of the changes taking place along with how those changes impact them personally and how to get their needs met for necessary service provision.

Case Management Agency Transitions

The Department will work collaboratively with each catchment area community and its current and future agencies to facilitate a thoughtful transition to the new CMA contract with minimal impact to members and their services. Department staff will work with agencies in each catchment area to assess readiness for transition based on areas such as: Targeted Case Management provider enrollment status, conflict free status, and local preparedness. Once the readiness assessment is complete, the Department will assign agencies into three transition cohorts. This will allow Phase 1 Transitions to begin July 2023, Phase 2 will begin November 2023 and Phase 3 will begin February 2024 with all transitions complete July 1, 2024.

Incoming and outgoing CMAs in each catchment area will be closely supported by Department staff throughout the transition process to ensure a smooth transition. Before, during, and after CMA transitions, members will be notified of whom to contact in order to get their needs met for waiver case management services. Portability guidelines and expectations for members wanting to be served by agencies outside their catchment areas will be developed in collaboration with advocates and members and will be communicated by the Department prior to the CMA contract execution.

To stay engaged in this effort, interested members and families are encouraged to:

- Visit the Department's [Case Management Redesign webpage](#)
- [Sign up](#) for Constant Contact emails (which will include information about future meetings and engagement efforts)
- Regularly check the [Office of Community Living Stakeholder Engagement Calendar](#)

Attachment(s):

None

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