

INFORMATIONAL MEMO

Title: Long-Term Services and Supports (LTSS) Over Cost Containment Threshold Changes	Topic: LTSS
Audience: Members, Case Management Agencies (CMAs), Providers, Stakeholders	Sub-Topic: Over Cost Containment
Supersedes Number: HCPF IM 19-069	Division: Benefits and Services Management
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Expiration Date: Sept. 1, 2025	Program Area: Over Cost Containment
Key Words: Long-term services and supports, LTSS, Home and Community Based Services, HCBS, Over Cost Containment, OCC, Elderly, Blind, and Disabled (EBD), Brain Injury (BI), Community Mental Health Supports (CMHS), Complementary and Integrative Health (CIH)	
Legal Authority: N/A	
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Approved By: Cassandra Keller	

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Purpose and Audience:

The purpose of this Informational Memo is to inform Case Management Agencies (CMAs), providers, and stakeholders of the increased average daily cost threshold that requires the Department of Health Care Policy and Financing (HCPF) review within Over Cost Containment (OCC). This is applicable for Members enrolled on the following on the Home and Community-Based Services (HCBS) waivers:

- Elderly, Blind and Disabled (EBD)
- Brain Injury (BI)

- Community Mental Health Supports (CMHS)
- Complementary and Integrative Health (CIH)

Information:

OCC is a review of requested HCBS and Long-Term Home Health (LTHH) services. HCPF utilizes a contracted vendor to conduct Utilization Review/Utilization Management (UR/UM) reviews. This includes UR/UM OCC requests. Currently, Telligen acts as the contracted UR/UM reviewer.

A review is required for the HCBS EBD, BI, CMHS, and CIH waivers. The review is conducted to ensure there is no duplication of services and the services requested reflect the needs identified in the ULTC 100.2 assessment. All OCC requests are reviewed and considered. Cost Containment rules can be found in 10 CCR 2505-10, Section 8.7100.A and 10 CCR 2505-10, Section 8.7100.D. Rules around Cost Effectiveness can be found in 10 CCR 2505-10, Section 8.7100.G. The Code of Colorado Regulations may be accessed by visiting this website link.

Effective Sept. 1, 2024, the threshold for average daily cost that will require a UR/UM OCC review will increase from \$314.99 per day to \$329.99 per day. All average daily costs over this threshold require a UR/UM review. The average daily cost that requires CMA supervisor approval will not change. Any OCC requests submitted before September 1, 2024, will be reviewed utilizing the previous threshold amounts.

Actions to be taken by Case Managers

Case Managers shall submit a Prior Authorization Request (PAR) for review regardless of the average daily cost and should not deny services based on average daily cost. Case Managers shall not use OCC reviews as a deterrent to identify necessary services and supports through the service planning process. Additionally, Case Managers shall inform Members that the necessity for an OCC review does not require a Member to go into an institutional setting (for example, a nursing facility).

When submitting an OCC review request, the Case Manager must submit a copy of the PAR, including the service line items and units requested. Case Managers can review all UR/UM process by utilizing the Training Materials found in the <u>UR/UM webpage</u>. A copy of the Bridge Service Plan is not sufficient. Incomplete information may lead to a request for more information or denial and extended review time. In addition to a copy of the PAR, the Case Manager shall include the below additional information for the following areas:

- Consumer-Directed Attendant Support Services (CDASS)
 - PAR
 - o Task worksheet and explanation of allocated time
 - Allocation worksheet
 - Doctor orders, and any other supporting documentation
- In-Home Support Services (IHSS)
 - o PAR
 - o Agency care plan
 - IHSS calculator
 - Doctor orders, and any other supporting documentation
- LTHH
 - Signed and completed LTHH PAR
 - o Agency 485 and plan of care
 - Physician Orders

Once an outcome letter has been received from HCPF's UR/UM contractor, Case Managers should attach this letter to the PAR in the Bridge. All OCC PARs will automatically 'pend for state review' in the Bridge. Case Managers may send an email to ltssocc@state.co.us to request PAR review and approval. PAR reviews will be completed within 5 to 10 business days.

Attachment(s):

None

HCPF Contact:

For questions, please contact hcpf_hcbs_questions@state.co.us.