

# INFORMATIONAL MEMO

<b>Title:</b> Update on Long Term Care and Buy-In Eligibility Extension	Topic: Eligibility Process	
Audience: Members, Case Management Agencies (CMAs), Advocates and Stakeholders	Sub-Topic: LTSS Stabilization	
Supersedes Number: N/A	<b>Division:</b> Strategic Outcomes Division	
Effective Date: Jan. 1, 2025	Office: Office of Community Living	
Expiration Date: Jan. 1, 2027	Program Area: LTC Eligibility	
<b>Key Words:</b> Long-Term Care, LTC, Eligibility, Level of Care, LOC, Long-Term Services and Supports, LTSS, LTSS Stabilization, Working Adults with Disability, WAwD, Children with Disability Buy-In, CBwD		
Legal Authority: N/A		
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Informational Memo Number: HCPF IM 24-035		
<b>Issue Date:</b> Dec. 17, 2024		
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## **Purpose and Audience:**

The purpose of this Informational Memo is to inform the Long-Term Services and Supports (LTSS) community that as of January 2025, HCPF will no longer use the manual process that has been in place since March 2024 to reinstate eligibility for all LTSS members when their eligibility is set to end.

#### Information:

#### **Background**

Over the past year, several issues emerged that impacted member eligibility and provider payments. The Department of Health Care Policy and Financing's (HCPF's) top priority has been to ensure ongoing coverage for LTSS members while mitigating payment delays for LTSS providers so members can access needed services. We have

identified and put in place short- and long-term solutions to address the most pressing issues.

### Update

Starting with September 2023 renewals, HCPF temporarily paused terminations for most reasons (unless the termination was for a member who moved out of state or passed away) for two months past the LTSS member's original termination date. In March 2024, HCPF began to temporarily manually reinstate eligibility for all LTSS members when their eligibility was set to end and prevented impacted members from being terminated from Medicaid. As the LTSS system stabilizes, HCPF is sunsetting these temporary protections.

- In January 2025, HCPF will no longer use this manual process that has been in place since March 2024.
  - The sunsetting of current protections in place will be phased in, starting with renewals in January 2025. This approach aims to support members and workers by managing smaller cohorts instead of sunsetting everyone at once.
- Effective January 1, 2025, HCPF will begin to implement terminations with a temporary pause for 60 days after the termination date for Long-Term Care (LTC), Buy-In Program for Working Adults with Disabilities (WAwD), and Buy-In Program for Children with Disabilities (CBwD).
- This 60-day extension will apply to most termination reasons, not just procedural ones, allowing members extra time to submit their renewal packets with supporting documents and to work with their eligibility technician to resolve any issues with their case. However, there are specific termination reasons that will not be eligible for this 60-day extension, which include:
  - Death
  - No longer a Colorado resident
  - Withdrawal from the program
  - Incarceration
- During this period, an initial letter will be sent to members informing them that their termination has been paused, explains the reasons for this pause, and what they need to do.
- Additionally, HCPF will automatically re-evaluate eligibility in the second month of the extension.
  - If a member meets all eligibility requirements and submits the necessary documentation, their ongoing eligibility will be approved.
  - If they do not meet the requirements or fail to provide the required information, their eligibility will terminate at the end of the 60 days.

- Before the end of the 60-day period, members will receive a formal Notice of Action that outlines whether they remain eligible or if their eligibility will end, along with information about their appeal rights.
- If the member is determined to no longer meet eligibility, they are entitled to a 90-day reconsideration period, which begins at the end of eligibility (after the end of the 60-day extension). During this 90-day reconsideration period, if the member is able to submit all of the required paperwork or work with their eligibility technician to resolve any issues with their case and is then deemed eligible, their eligibility will be reinstated for their original termination date.

### Resources

<u>Case managers</u> can help submit paperwork for HCBS programs to ensure Level of Care and other LTSS program requirements. Counties help determine eligibility based on financial program rules. If a member has been working with the case manager or county and having trouble, they may submit a state-level escalation or complaint regarding issues with County Department of Human/Social Services, Eligibility Sites, Case Management Agency, or other contractors or agencies that work with applicants and members.

If an LTSS Member is experiencing issues with their eligibility, <u>use this form to</u> ensure the most prompt resolution.

Future updates about the 60-day eligibility extension will be posted to the LTSS Stabilization webpage at hcpf.colorado.gov/stabilizing-LTSS.

Attach	nment(	(s):
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None

#### **HCPF Contact:**

For questions, please contact hcpf\_medicaid.eligibility@state.co.us.