

# **OPERATIONAL MEMO**

TITLE:	UPDATED: DAY HABILITATION SERVICES IN
	RESPONSE TO COVID-19
SUPERSEDES NUMBER:	HCPF OM 20-100
EFFECTIVE DATE:	JANUARY 15, 2021
<b>DIVISION AND OFFICE:</b>	BENEFITS & SERVICES MANAGEMENT DIVISION,
	OFFICE OF COMMUNITY LIVING
PROGRAM AREA:	HOME AND COMMUNITY-BASED SERVICES
	(HCBS) WAIVERS
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## **Purpose and Audience:**

ISSUE DATE: DECEMBER 23, 2020 APPROVED BY: BONNIE SILVA

The purpose of this Operational Memo is to provide information to Home and Community-Based Services (HCBS) Day Habilitation provider agencies, Case Management Agencies (CMAs), members, and stakeholders on changes to Day Habilitation services. These changes include implementation of a 1:1 service delivery model for Specialized Habilitation (SH) and Supported Community Connections (SCC), and annual dollar caps only for members who choose to utilize the 1:1 option. This memorandum impacts the HCBS Developmental Disabilities (HCBS-DD) and Supported Living Services (HCBS-SLS) waivers.

#### Information:

The COVID-19 Public Health Emergency (PHE) has impacted the delivery of day program services that are traditionally provided in group and congregate settings. In response, the Department worked to implement changes to the day program services within the HCBS-DD and HCBS-SLS waivers to lessen the impacts on members, families, and providers.

The Department has been working with stakeholders for several months on changes to Day Habilitation services to ensure both members have their needs met and providers are able to render services in a way that is safe and meets people's needs during these unprecedented circumstances. Over the course of these meetings, the Department has worked closely with stakeholders to determine a policy that meet these needs, remains budget neutral, and creates additional flexibility.

As originally outlined in <u>Operational Memo 20-100</u>, **the Department is not operationalizing an annual dollar cap on SH and SCC for all members.** The Department heard feedback that the annual dollar cap would have a negative impact on many more members than was anticipated. Accordingly, the Department has explored alternative options to Day Habilitation services that can be delivered in a more flexible, person-centered way.

After listening to significant stakeholder feedback, the following policy for Day Habilitation services is scheduled for implementation on <u>January 15</u>, <u>2021</u>. The Department will be hosting a meeting Friday, January 8, 2021 from 1:00 p.m. - 2:30 p.m. to engage stakeholders and receive feedback on this policy prior to implementation. The Department has issued an Informational Memo 20-059 with the details of this upcoming meeting. (To see IM 20-059, visit the <u>Department's Memo Series webpage</u> and navigate to Informational Memos.)

- Members enrolled in either the HCBS-DD or the HCBS-SLS waivers will have the option to add the individualized service, offered one-on-one (1:1), to their service plan.
- Through the end of the Department's Appendix K approval, members can receive SH or SCC services virtually or in-person, utilizing the existing rate structure, based on the members' current Support Level. The Appendix K authority is approved through March 9, 2021.
- Any member wishing to receive individual SH and/or SCC may work with their case manager to add the service to their service plan.

Members adding 1:1 SH or SCC services will need to remain within their prepandemic Day Habilitation utilization dollar limits.

- In order to keep this change budget neutral, any member adding the individualized 1:1 service to their service plan must remain within their prior year's dollar utilization. This utilization will be based on the prior years' paid unit claims, multiplied by the *current* service rates. It would not be based on the units authorized in the current service plan.
- Members adding individualized 1:1 services may utilize the new service and the
  existing service in any way that works for their needs, up to their utilization levels
  in the year prior to the pandemic.

#### **Support Level 7**

- Current members receiving services at Support Level 7 will continue to receive services as usual and will not require the addition of a 1:1 option.
- Providers currently offering 1:1 SH or SCC services for members in the Support Level 7 may continue to do so at the current rate.

If a member is new to the HCBS-DD or HCBS-SLS waiver and would like to add 1:1 to their service plan, they would need to remain within the previous years' average utilization of their Support Level. The Department will work with Case Managers to define these numbers.

The Department also realizes that some members have stopped working due to the risk of COVID-19 exposure and are no longer receiving Supported Employment. **Those members who wish to substitute Supported Employment with Day Habilitation services may do so.** In these situations, a members' pre-pandemic utilization dollar amounts will include their Supported Employment utilization.

During this period, the Department requires providers to follow all county and Colorado Department of Public Health and Environment <u>guidelines</u> on in-person gatherings and congregate settings. Further, the Department strongly suggests that services be provided virtually whenever possible.

Regardless if a revision occurs, members must continue to stay within the existing unit limitations for each of the HCBS-DD and HCBS-SLS Waivers outlined below.

- HCBS-DD Annual Limits
  - Maximum of 4,800 combined units of SH, SCC & Prevocational Services
  - Maximum of 7,112 combined units of SH, SCC, Prevocational Services & Supported Employment
- HCBS-SLS Annual Limits

 Maximum of 7,112 combined units of SH, SCC, Prevocational Services & Supported Employment

### <u>Virtual Options for SH and SCC Until the End of the Appendix K approval</u>

Services provided virtually, should be billed for using the traditional rate structure based on Support Level. **Providers should enter "Place of Service 02" on the claim when services are provided virtually.** 

Traditional small group, in-person, centered-based services can continue to be provided and must follow both state and local guidance to ensure member and staff safety.

Providers may also use the new 1:1 service to provide and bill for individual SH and SCC services. The individual rate for SCC will temporarily be lower than the finalized <u>rate</u> through the end of the approved Appendix K. This *temporary approach* allows the flexibility for providers to continue providing virtual services, as well as traditional small group, center-based services, at the traditional rate, while also providing a new individual service.

## Applying the New Model

# Under the new approach, HCBS waiver members have a choice about how they would like to receive services, based on their needs and preferences.

Waiver members may now receive SH and SCC services using a combination of virtual delivery methods, returning to traditional group-based SH and SCC services, or they can receive services 1:1. For example, a waiver member could attend in-person, group-based SH for a few days a week, and receive 1:1 SCC services another day of the week. Waiver members can receive any combination of virtual, traditional, or individual services for both SH and SCC services, based on their needs and preferences.

# Billing under the New Model

Providers must bill according to the Prior Authorization Request (PAR) with the corresponding procedure codes and modifiers.

# Providers billing under 1:1 SH must use the following procedure codes, modifiers and rates based on the member's waiver:

- HCBS-DD Waiver S5100 U3
- HCBS-SLS Waiver S5100 U8
- \$5.36 all for all support Levels, per 15-minute unit

# Providers billing under 1:1 SCC must use the following procedure codes, modifiers, and rates based on the member's waiver:

- HCBS-DD Waiver S5100 U3, HB
- HCBS-SLS Waiver S5100 U8, HB
- \$7.03 for all Support Levels, per 15-minute unit

Until the end of the Appendix K approval, both SH and SCC services provided either virtually or in-person should be billed for using the appropriate traditional billing codes and modifiers, based on the member's Support Level. Providers must continue to document services rendered, regardless of the format of service being provided.

### Case Management Service Plan Changes

Case managers should contact members to determine who would like to receive individual services and revise their PAR accordingly. **If a member does not request or wish to add 1:1 services, no revisions are necessary.** In order to ensure that any member who is adding 1:1 stays within the previous years' utilization, the Department will be providing utilization reports to each case management agency. This will include if a member substitutes Day Habilitation for Supported Employment services. When the reports are sent to the case management agency, it will include information on how to utilize the reports. The case manager can then check the report sent by the Department to ensure the revisions do not exceed the prior years' utilization.

#### Prevocational and Supported Employment Services

Prevocational and Supported Employment services are not being modified and are not included in this memo. Members must continue to remain within the unit limitations for Day Habilitation and Employment services. However, those members who wish to substitute Supported Employment with Day Habilitation services may do so.

#### Attachment(s):

None

#### **Department Contact:**

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