COLORADO
Department of Health Care Policy & Financing

OPERATIONAL MEMO

TITLE:	**UPDATED CARE COORDINATION AND CASE MANAGEMENT EXPECTATIONS FOR UTILIZATION MANAGEMENT DENIALS**
SUPERSEDES NUMBER:	**HCPF OM 21-059**
EFFECTIVE DATE:	**AUGUST 10, 2021**
DIVISION AND OFFICE:	**HEALTH PROGRAMS OFFICE AND THE OFFICE OF COMMUNITY LIVING**
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HCPF Memo Series and attachments can be accessed online:
https://www.colorado.gov/hcpf/memo-series

Purpose and Audience:

The purpose of this Operational Memo is to inform Regional Accountable Entities (RAEs), Managed Care Organizations (MCOs), Case Management Agencies (CMAs), and the Utilization Management (UM) Vendor of Department expectations regarding care coordination and case management for Health First Colorado members who received administrative approvals for private duty nursing and pediatric long-term home health benefits. Administrative approvals will be phased out beginning October 1, 2021 at the soonest.

Information:

Prior authorization requests (PARs) for private duty nursing (PDN) and pediatric long-term home health (PLTHH) benefits have been administratively approved through at least September 30, 2021 to accommodate the Department's work to revise the denial

notices and complete system changes. Beginning no sooner than October 1, 2021, the Department will begin instituting PARs for these services.

The Department is directing RAE/MCO care coordinators and CMAs to work together to assist families or guardians who may need to locate and access a more appropriate level of service for their pediatric or adult members.

Consistent with the Department's objective that members receive the right care, at the right time, in the right place, the Department will provide each RAE/MCO with a statewide list of home health agencies and specific CMA leadership contacts. Tools presented at the 2019 August RAE Learning Collaborative related to work flows have been provided (attached). RAE/MCOs and CMAs shall provide members and families support via intensive case management/care coordination.

RAE/MCO Care Coordination and Case Management Agency Process

A PAR Determination Report (PDR) will be sent to each RAE/MCO via the secure document transfer site. The report will include the name, Medicaid ID, provider, PAR details, clinical information and reason for the denial for members who have received a service denial notice. Beginning no sooner than October 1, 2021 RAE/MCO care coordinators shall begin contacting families and directing service providers to discuss the need for other service options with families. Families and RAE/MCO care coordinators shall discuss how each service applies, the level of support the member needs, and the frequency needed for each service. RAE/MCO care coordinators shall use the home health agency list provided and other resources to assist the family in locating appropriate providers for other service options. Those services may still require a PAR and be dependent on review and approval. The RAE/MCO shall assist families with the PAR process, as needed.

Members on the weekly PAR Determination Report (PDR) may wish to appeal service denial decisions. The RAE/MCO care coordinators shall assist families by providing accurate and up to date information about how to file an appeal, including the time limits for filing appeals. Additional information regarding the appeal process is posted in the frequently asked questions section of the PDN/PLTHH project webpage.

RAE/MCOs shall use the list of specific CMA leadership contacts to coordinate appropriate follow-up.

- For members on the PAR Determination Report that are not identified as currently receiving waiver services, the RAE/MCO shall contact the member to verify that they wish to have a referral made to the CMA for a functional needs assessment to determine their eligibility for accessing Long Term Care waiver benefits. RAE/MCOs will submit a referral to the CMA on behalf of the family, document the submission via standard practice, and notify the CMA leadership

contact of the referral. RAE/MCOs may complete the referral using the ULTC 100.2 – Initial Screening and Intake referral form (attached) or existing workflows. RAE/MCOs shall make three attempts via two different modalities to outreach members. If an initial outreach attempt via phone is unsuccessful the second attempt should be made at a different time of day.

- For members on the PAR Determination Report and active in a waiver, the RAE/MCO shall confirm with the corresponding CMA leadership that the member has received a service denial notice. CMA leadership will then ensure the CMA case manager for the member completes a contact to the member to determine if the denial of PDN or PLTHH services requires a waiver service plan revision to ensure that all of their needs are being met through available waiver services. CMA case managers shall complete an unscheduled review, if needed, and a service plan revision if it is determined additional waiver services can be provided to the member for an assessed need.

- If no action is required for the member by the RAE/MCO or the CMA, the RAE/MCO will document this information in their required reporting to the Department.

- All contact with members and between RAE/MCO and CMAs shall be documented by RAE/MCOs and CMAs in their respective documentation systems (ie. BUS for CMAs and care coordination platform for RAE/MCOs).

RAE/MCO care coordination staff and CMA case management staff should work collaboratively to ensure families are able to access all medically necessary services under the state plan or the HCBS waivers.

Ongoing Expectations

The Department will utilize reporting and forums to ensure member needs are addressed.

Beginning no sooner than October 1, 2021 RAE/MCOs shall provide member level updates to the Department and their ACC program specialist every two weeks. Updates will be submitted by completing a report template. The report will include the RAE/MCO's progress assisting children and youth or their families with access to other services. This report will indicate collaboration with CMAs, referrals for waiver assessments, status, and next steps.

RAE/MCOs will provide additional information to the Department quarterly via the existing Complex Care Quarterly Report. The report template will include updates to the narrative component and an additional tab in the spreadsheet component. The narrative will include RAE/MCO workflows and coordination with CMAs. The

spreadsheet will include the monthly number of members who received denials, were outreached, and received services.

The Department will host weekly meetings with the RAE/MCOs and CMAs to troubleshoot issues, share best practices, and refine processes.

The Department intends to decrease the frequency of all modes of reporting as workflows become more routine and the backlog of denials has been processed.

RAE/MCOs are required to keep the list of home health agencies up to date and share information across RAE/MCOs and other case management entities as needed or when requested by the Department or CMA case managers.

Accountable Care Collaborative and RAE/MCO Information:

https://hcpf.colorado.gov/accphase2

Long-Term Services and Supports and SEP/CCB Information:

https://hcpf.colorado.gov/long-term-services-and-supports-programs

https://hcpf.colorado.gov/community-centered-boards

https://hcpf.colorado.gov/single-entry-point-agencies

PDN and Pediatric LTHH Services Pre-Approval Project Information:

https://hcpf.colorado.gov/private-duty-nursing-and-pediatric-long-term-home-health-services-pre-approval-project

Attachment(s):

RAE and CMA Collaboration: Scenarios

Case Management Agencies and Regional Accountable Entities Collaboration Learning Collaborative Training

ULTC 100.2 – Initial Screening and Intake referral form

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