



OPERATIONAL MEMO

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SUPERSEDES NUMBER:	N/A
EFFECTIVE DATE:	APRIL 1, 2023
DIVISION AND OFFICE:	BENEFITS AND SERVICES MANAGEMENT DIVISION, OFFICE OF COMMUNITY LIVING
PROGRAM AREA:	HOME AND COMMUNITY-BASED SERVICES
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APPROVED BY: COLIN LAUGHLIN	

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Purpose and Audience:

The purpose of this Operational Memo is to inform Home and Community-Based Services (HCBS) providers and case management agencies (CMAs) how individual members may utilize the expanded Home Delivered Meals (HDM) service. The information in this memo and the attachments will provide information and direction.

Information:

The Department of Health Care Policy & Financing (HCPF) received authorization through the Long Bill HB 22-1329 to implement an HDM service for waiver participants post-hospitalization. The HDM service offers nutritional counseling, meal planning, preparation, and delivery of meals. This expansion allows waiver participants to access the HDM benefit for thirty (30) days post-discharge from a hospital and may be utilized twice in a one-year service period. The implementation for this service is April 1, 2023. Final adoption to the rule revision of the HDM benefit was held on Feb. 10, 2023. The final rule will be available at [10 CCR 2505-10 8.553](#) on March 31, 2023.

Eligibility for Service:

To be eligible for HDM post-hospital discharge, the member must meet the following criteria:

- Be currently enrolled on the HCBS Elderly, Blind, and Disabled (EBD), Community Mental Health Supports (CMHS), Brain Injury (BI), Complementary and Integrative Health (CIH), Developmental Disabilities (DD), or Supported Living Services (SLS) waivers.
- Have been discharged from a minimum 24-hour admittance to a hospital within the last 30 days.
- Are unable to prepare their own meals, **and/or** have limited or no outside assistance, **or** have dietary restrictions and/or specific nutritional needs.

The HCBS waiver member **does not** need to be actively receiving the HDM transition service to access the service post hospital discharge. The eligibility criteria in which a member must be transitioning from an institutional setting to a home and community-based setting, or from any change in life circumstance, is not applicable to the HDM post-hospital discharge service.

Applying the New Service:

HCPF will identify waiver members who may be eligible for the HDM post-hospital discharge service by utilizing Admit, Discharge and Transfer (ADT) data generated from the Colorado Regional Health Information Organization (CORHIO). HCPF will send a list of potential HCBS members who are discharging from a hospital to CMAs on a weekly basis through each CMA SharePoint Site. Hospital discharge coordinators may also choose to refer members for this program by directly contacting a member's case management agency (CMA). Members may also contact their CMA directly if interested in this benefit.

When a member is found to be eligible for HDM post-hospital discharge, and has expressed interest in receiving this service, the case manager will add the service to the Prior Authorization request (PAR), as outlined below, and will assist the member in locating an enrolled meals provider.

- There may be a delay between when a person is discharged from a hospital and when services are provided to a member. Members have 30 days after hospital discharge to begin receiving the service.

If the referral process for the HDM post-hospital discharge service creates a Critical Incident Report (CIR) or Event, the CMA will follow the timelines and the CIR process specified in [10 CCR 2505-10 8.393.2.G](#). Planned hospitalizations, surgeries, or other outpatient procedures do not create a Critical Incident Report or Event.

Updating the PAR and Billing for new Service:

Case managers will update the PAR to authorize the service for HDM post-hospital discharge in the HCPF-prescribed system. Procedure Code **S5170** will be utilized, with one of the following modifiers:

- The modifier, **TG**, has been assigned for member's using their first eligible 30-days of HDM services following a hospital discharge, in a service year. There is a 60-unit max for this modifier.
- The modifier, **TF**, has been assigned for member's using their second eligible 30-days of HDM services following a hospital discharge, in a service year. There is a 60-unit max for this modifier.
- HDM provided as a transition service will continue to be billed utilizing procedure code **S5170**. This benefit has a maximum of 730 units and may not be combined with units utilized for the Post-Hospital Discharge benefit
- One unit equals one meal.

Providers will continue to utilize procedure code **S5170** with either the **TG** or **TF** modifier, depending on the member's eligibility period, to properly bill HDM post-hospital discharge service. Reference to these codes may also be found in the [HCBS rate sheets](#).

Limitations and Exclusions:

HDM post-discharge may not be provided if any of the following apply:

- HDM post-hospital discharge may not be duplicative of other HCBS services, such as Homemaker, In-Home Support Services, or Consumer Directed Support Services. Home Delivered Meals Post-Hospital Discharge also may not be duplicative of items or services available under the State Plan.
- HDM post-hospital discharge are not available when the member resides in a provider-owned or controlled setting, as defined in [10 CCR 2505-10 8.484.2.J](#).

- Delivery of HDM post-hospital discharge must not constitute a full nutritional regimen; and includes no more than two meals per day or 14 meals per week.
- Meals and foods not identified in the Nutritional Meal Plan are excluded.
- Meal plans and meals are only available for the benefit the member. Services provided to someone other than the member are not reimbursable.

Attachment(s):

None

Department Contact:

[HCPF HCBS Questions@state.co.us](mailto:HCPF_HCBS_Questions@state.co.us)