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OPERATIONAL MEMO

Title: Monitoring Contacts in the Home and Community-Based Services Program	**Topic:** Case Management Monitoring Contacts
Audience: Case Management Agencies	**Sub-Topic:** HCBS
Supersedes Number: HCPF OM 24-066	**Division:** Case Management and Quality Performance
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Expiration Date: Feb. 6, 2027	**Program Area:** Case Management
Key Words: HCBS, Home and Community-Based Services, Monitoring Contact, Targeted Case Management, TCM, QM, Quarterly Monitoring	
Legal Authority: 10 CCR 2505-10 §8.057, §8.7001.C.4; §8.7202.K; §8.7202.R	
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Operational Memo Number: HCPF OM 25-007 **Issue Date:** Feb. 6, 2025 **Approved By:** Amanda Lofgren	

Purpose and Audience:

The purpose of this Operational Memo is to provide additional clarification regarding the operational process and requirements for Monitoring Contacts in the Home and Community-Based Services (HCBS) Program previously outlined in OM 24-066 to Case Management Agencies (CMAs). Additionally, this Operational Memo includes the full regulatory language omitted in OM 24-066.

Definition(s):

Monitoring – Oversight activities of the overall provision of authorized HCBS services and supports to ensure the rights, health, safety, and welfare of Members, quality services, and that service provision practices promote Member's ability to engage in self-determination, self-representation, and self-advocacy as set forth in 10 CCR 2505-10 §8.7202.K.

Monitoring-Scheduled – A Monitoring Contact that is scheduled prior to being conducted with the Member.

Monitoring-Unscheduled – A Monitoring Contact that was not previously scheduled and is conducted spontaneously with the Member.

Virtual Meeting Platform – A form of communication that enables individuals in different physical locations to use their mobile or internet connected devices to meet in the same virtual room.

Information:

Monitoring Contacts for HCBS Members are billed as a Targeted Case Management (TCM) activity. Historically, different requirements for Single Entry Points and Community Centered Boards as well as limited operational guidance relative to scheduling required Member Monitoring Contacts led to different practices across the state. When rules were promulgated for Case Management Redesign, Monitoring Contact requirements are now standardized for all CMAs and shall be completed quarterly based on the Member's certification period start and end dates (§8.7202.K.2(c)).

Following the Public Health Emergency, the Department of Health Care Policy and Financing (HCPF) promulgated rules to adopt permanent flexibilities regarding in-person Monitoring Contacts for Members receiving HCBS. This has allowed Case Managers to meet with Members either in person, on the phone, or through other technological modalities based on the Member's preference. "Other technological modalities" in regulation **does not** include email as email is an expressly prohibited communication modality for Monitoring Contacts (§8.7202.K.2(c)(vi)).

Action To Be Taken:

Monitoring Contacts includes a comprehensive review and engagement with the Member. Monitoring Contacts must be conducted directly with the Member, parent of a minor, and/or Legally Authorized Representative.

Monitoring Contacts are required to be completed four (4) times per year based on the Member's certification period start and end dates. At least one (1) Monitoring Contact must be conducted in person and in the Member's residence *or service location*. The remaining three (3) may be conducted in person, by telephone, or through a virtual meeting platform based on the Member's preference.

Communication in the form of letters, emails, or voicemails do not meet the Monitoring Contact requirements, even at the request of the Member, and are expressly prohibited in regulations (§8.7.7202.K.2(c)(vi).

Case Managers should review the LOC Screen and Person-Centered Support Plan (PCSP) with the Member to assess for changes in condition and/or needs. If there are changes in needs and/or the Member's needs are not being met, the Case Manager should discuss service options, provider changes, community resources, etc. to meet the needs of the Member.

Services should be delivered as outlined in the PCSP and on the Prior Authorization Request (PAR). If services are under or over utilized, Case Managers should discuss why this may be with the Member and complete revisions, as necessary.

Case Managers should ensure Rights Modifications are being implemented as outlined in the Rights Modification Informed Consent. In addition, Case Managers should observe the environment to ensure the Member's individual rights are being respected. Case Managers may refer to the HCBS Settings Final Rule Ongoing Monitoring Guide for instructions on escalating concerns related to potential HCBS Settings Final Rule violations and enforcement actions.

Case Managers should discuss any significant incidents to include reported incident reports, CIRs, and any unreported incidents not already discussed. Case Managers should also look for patterns in frequent incidents over the quarter. This should be discussed with the Member to determine if services and/or support changes that are needed.

Member satisfaction includes evaluating and discussing with the Member if services are promoting self-determination, self-representation, and self-advocacy. Case Managers should also discuss if service delivery is person-centered.

Case Managers must take action to resolve any risks identified during the Monitoring Contact. This can include, but is not limited to:

- discussing possible changes in and/or additional services and supports,
- providing community resources,
- reporting to law enforcement,
- reporting to Child or Adult Protective Services,
- and following up with the Member Identified Team when a Member's rights are not being respected.

In addition, it is best practice for Case Managers to capture any upcoming changes and/or transitions that may affect the Member, such as moving, surgeries, employment, graduation or youth transitions, etc.

CMAs cannot bill the same activity for both PM/PM and a Monitoring Contact as they are paid separately; during the month a Monitoring Contact is completed, the Case Manager must also complete a PM/PM and document both activities separately in the Care and Case Management (CCM) system.

Case Managers are responsible for being familiar with regulations, contract requirements, and billing procedures related to Monitoring Contacts. CMAs continue to be required to complete Monitoring Contacts for all HCBS Members as outlined in §8.7202.K.

Billing and Documentation

CMAs shall not bill TCM for Monitoring Contacts on the same day as they bill for a Level of Care (LOC) Reassessment for the same Member, nor shall they bill for more than one (1) Monitoring Contact per quarter[1] for each Member. In addition, Case Managers shall document Monitoring Contacts in the CCM system as outlined in the Report and Data Entry Guide for CCM Based Contract Payments and TCM Billing located on their CMA's SharePoint site, including labeling Activity Logs as:

- TCM=Yes (Optional, can be used for better tracking of TCM in CCM reporting)
- Method of Contact=Face to Face, Virtual, or Telephone
- Type of Contact=Monitoring Contact-Scheduled or Monitoring Contact-Unscheduled

Completion Timeline and Monitoring Modalities

Case Managers shall complete Monitoring Contacts based on the Member's certification period start and end dates (§8.7202.K.2(c)) as outlined below:

Cert Period Start Date	Q1	Q2	Q3	Q4
January	Jan/Feb/Mar	Apr/May/Jun	Jul/Aug/Sep	Oct/Nov/Dec
February	Feb/Mar/Apr	May/Jun/Jul	Aug/Sep/Oct	Nov/Dec/Jan
March	Mar/Apr/May	Jun/Jul/Aug	Sept/Oct/Nov	Dec/Jan/Feb

April	Apr/May/Jun	Jul/Aug/Sep	Oct/Nov/Dec	Jan/Feb/Mar
May	May/Jun/Jul	Aug/Sep/Oct	Nov/Dec/Jan	Feb/Mar/Apr
June	Jun/Jul/Aug	Sep/Oct/Nov	Dec/Jan/Feb	Mar/Apr/May
July	Jul/Aug/Sep	Oct/Nov/Dec	Jan/Feb/Mar	Apr/May/Jun
August	Aug/Sep/Oct	Nov/Dec/Jan	Feb/Mar/Apr	May/Jun/Jul
September	Sep/Oct/Nov	Dec/Jan/Feb	Mar/Apr/May	Jun/Jul/Aug
October	Oct/Nov/Dec	Jan/Feb/Mar	Apr/May/Jun	Jul/Aug/Sep
November	Nov/Dec/Jan	Feb/Mar/Apr	May/Jun/Jul	Aug/Sep/Oct
December	Dec/Jan/Feb	Mar/Apr/May	Jun/Jul/Aug	Sept/Oct/Nov

When conducting Monitoring Contacts for initial truncated enrollment years, the first Monitoring Contact shall be based on the Member's certification period start and end dates and be completed in the first quarter that the Member has an active benefit plan and after the start date of the PCSP and PAR, which may mean fewer than four (4) Monitoring Contacts may be billed for the first year.

"Technological modalities" means a virtual meeting platform. Case Managers shall not document emails, or other means of contact otherwise excluded by §8.7202.K.(c)(vi), to or from Members or their Legally Authorized Representatives, as Monitoring-Scheduled or Monitoring-Unscheduled in the Care and Case Management (CCM) system. CMAs shall not bill emails, or other means of contact otherwise prohibited by §8.7202.K.(c)(vi), as TCM-Monitoring.

Attachment(s):

None

Links:

[HCBS Settings Final Rule Ongoing Monitoring Guide](#)

HCPF Contact:

[HCPF_HCBS_Questions@state.co.us](#)