



POLICY MEMO

TITLE:	UNWINDING APPENDIX K FLEXIBILITIES
SUPERSEDES NUMBER:	N/A
EFFECTIVE DATE:	MAY 11, 2023
DIVISION AND OFFICE:	BENEFITS AND SERVICES MANAGEMENT DIVISION, OFFICE OF COMMUNITY LIVING
PROGRAM AREA:	WAIVER ADMINISTRATION AND COMPLIANCE
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APPROVED BY: BONNIE SILVA	

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Purpose and Audience:

The purpose of this Policy Memo is to inform stakeholders of key dates related to the permanent adoption and end dates of certain Home and Community-Based Services (HCBS) flexibilities approved through the Appendix K Amendment.

Information:

Colorado has submitted and received approval for seventeen (17) Appendix K Amendments to our HCBS waivers. The Appendix K is the standalone appendix utilized by Colorado to request amendments to the approved HCBS waiver applications for necessary flexibilities during the Public Health Emergency (PHE). You can find all of Colorado's approved Appendix K Amendments at the Centers for Medicare and Medicaid Services (CMS) website [here](#).

Appendix K Amendments are intended to be a temporary response to an emergency. The Department of Health Care Policy & Financing (HCPF) received

approval from CMS to temporarily change many sections of our waiver programs for individuals impacted by the COVID-19 PHE. The end date for the Appendix K flexibilities will be six (6) months after the end of the PHE. The Biden Administration announced on January 30, 2023, that the PHE will be ending on May 11, 2023. Therefore, the flexibilities afforded in the Appendix K amendments will end November 11, 2023.

During the last 3 years, HCPF has made many of the Appendix K changes permanent through the waiver amendment process, which are outlined below. The temporary Appendix K flexibilities are also listed below with their subsequent end dates.

Flexibilities Approved for Permanent Adoption

- Service Added to the Waiver
 - Remote Support Technology assists individuals by facilitating service delivery when in-person options may not be available or are not needed or wanted. This service provides real-time support with tasks that do not require hands-on assistance and that would otherwise require an in-home visit by a provider (SLS, EBD, CMHS, CIH, and BI waivers)
- Modification of Provider Qualifications
 - The minimum age for an attendant has been amended from 18 to 16 in Consumer-Directed Attendant Support Services (CDASS) and In-Home Support Services (IHSS) (EBD, CMHS, BI, CIH, and SLS waivers)
- Modification of Incident Reporting Requirements
 - In the circumstance that an individual must evacuate their current setting, there are additional flexibilities in location and timeliness of reporting (All 10 waivers).
- Expand Settings where services may be provided to include a telehealth option
 - Life Skills Training (EBD, CMHS, CIH, and SLS)
 - Adult Day (CIH, EBD, CMHS, EBD)
 - Independent Life Skills Training (BI)
 - Supported Employment (DD and SLS)
 - Mentorship (SLS)
 - Movement Therapy (CES and CHRP)
 - Community Connector (CES)
 - Bereavement Counseling (CLLI)
 - Expressive Therapy (CLLI)

- Palliative Support Services (CLLI)
- Behavioral Services (CHRP, DD, SLS)
- Mental Health Counseling (BI)
- Substance Abuse Counseling (BI)
- Transition Support Services (CHRP)
- Peer Mentorship (SLS, EBD, DD, CMHS, CIH, and BI)
- Behavioral Management and Education (BI)
- Modification of Licensure Requirements
 - HCPF has removed the requirements that Adult Day Centers provide lunch and have showers located on the premises for those centers that offer this service virtually (EBD, CMHS, CIH).
- Modification for Level of Care Evaluations or Re-Evaluation
 - Effective September 10, 2021, the qualifications for case managers conducting the Level of Care evaluation was expanded to include relevant experience (all 10 waivers).
 - Excluding the Professional Medical Information Page (PMIP) from yearly reassessment evaluations (all 10 waivers).
 - Case managers may use phone or telehealth to engage in the development and monitoring of Person-Centered Service Plan when there is a documented safety risk to the case manager or member (All 10 waivers).
- Modification to Rate Structure
 - Modified Adult Day Service (ADS) to include 15-minute unit increments instead of the half-day unit. The 15-minute unit approach allows ADS providers to render services for up to 3 hours a day, at \$10.18/hour, for members who may be vulnerable and do not want to be in a group setting or a facility site (EBD, CMHS, CIH, BI).
 - Modified Specialized Habilitation and Supported Community Connector to include a tiered rate for flexible billing (DD and SLS).
- Increase in Payment Rates
 - HCPF implemented a base wage requirement of \$15/an hour through a rate increase for HCBS direct care workers (all 10 waivers)
- Addition of Virtual Case Management
 - Allow HCBS waiver participants to request virtual case management activities, except for level of care assessments and one monitoring contact, which will be done in person unless there is a documented health

and safety risk (i.e., pandemic, natural disaster) that necessitates virtual case management contact (all 10 waivers).

Flexibilities for Permanent Adoption Submitted in Waiver Amendments/Renewal

(Expected effective date: July 1, 2023)

- Expanded Settings where services may be provided to include a telehealth option
 - Day Habilitation (DD and SLS)
- Modification of Provider Qualifications
 - Home Delivered Meals providers do not need to have a physical presence within the state for delivering items (EBD, CMHS, BI, CIH, SLS, DD).
- Virtual Monitoring for Case Management
 - The case manager shall perform quarterly monitoring contacts with the member, as defined by the member's certification period start and end dates. An in-person monitoring contact is required at least one (1) time during the Person-Centered Support Plan certification period. The case manager shall perform three (3) additional monitoring contacts each certification period either in-person, on the phone, or through other technological modality based on the member's preference of engagement (All 10 Waivers).

Flexibilities Ending 6 Months post PHE (November 11, 2023)

- Expand Settings where services may be provided to include a telehealth option
 - Day Treatment (BI)
 - Prevocational Services (SLS and DD)
 - Behavioral Services - Line Staff (DD and SLS)
- Allow Payment for services Rendered by Family Caregivers or Legally Responsible Adults
 - Community Connector (CES and CHRP)
 - Homemaker (CES)
- Verbal Authorization of Signatures
 - Verbal authorization of a member signature will be revoked. Digital signatures will continue to be allowed (all 10 waivers).

- Virtual Case Management
 - Reinstate requirement for the Level of Care Screen and one monitoring contact to be performed in person (all 10 waivers).

Flexibilities Ending with ARPA Funding (December 31, 2024)

- Exceed Previous Service Limitations
 - A \$10,000 increase was implemented to the Home Modification and Home Accessibility Adaptations service limit (Elderly, Blind, & Disabled [EBD], Community Mental Health Supports [CMHS], Complementary & Integrative Health [CIH], Children’s Extensive Support Waiver [CES], Supported Living Service [SLS] waivers).
 - Approved in waiver applications with an end date of December 2024

Attachment(s):

None

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