



POLICY MEMO

Title: Health Maintenance Activities (HMA) Documentation Requirements	Topic: Benefits
Audience: Members, Families, Authorized Representatives (ARs), Providers, Advocates, IHSS Agencies, and those who interact with Participant-Directed Programs, Case Managers, Case Management Agencies	Sub-Topic: N/A
Supersedes Number: N/A	Division: Benefits and Services
Effective Date: Dec. 22, 2025	Office: Office of Community Living
Expiration Date: Dec. 22, 2028	Program Area: Participant-Directed Programs
Key Words: Health Maintenance Activities (HMA), Documentation Requirements, HMA Checklist, Participant-Directed Programs, Consumer-Directed Attendant Support Services (CDASS), In-Home Support Services (IHSS), Self Direction, Community First Choice (CFC)	
Legal Authority: N/A	
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Policy Memo Number: HCPF PM 26-001	
Issue Date: Jan. 5, 2026	
Approved By: Bonnie Silva	

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Purpose and Audience:

The purpose of this Policy Memo is to clarify the regulatory documentation requirements for Health Maintenance Activities (HMA) through Consumer-Directed Attendant Support Services (CDASS) and In-Home Support Services (IHSS). It provides operational instructions to Case Managers and introduces updated tools intended to improve consistency, accuracy, and transparency in HMA assessments and authorizations.

Background:

In the transition to Community First Choice (CFC), the Colorado Department of Health Care Policy & Financing (HCPF) has identified frequent gaps in required HMA documentation. Missing or outdated documents limit a Case Manager's ability to verify skilled care needs and to authorize services appropriately within the Person-Centered Support Plan (PCSP). To address these issues and support stakeholder compliance, HCPF has developed a new HMA Member Checklist and updated the CFC HMA Documentation Guide.

Members self-directing their services through CDASS or IHSS must provide supporting medical documentation for HMA tasks to their Case Manager in preparation for their Level of Care (LOC) Screen. Case Managers must collect and retain this information in the member's record (10 CCR 2505-10 Section 8.7528.l.5.c.).

Information:

All Stakeholders

Members or their representatives must provide medical documentation to the Case Manager in preparation for the LOC Screen. The HMA Member Checklist lists the documentation requirements by task.

- The member or their representative's verbal report or description of their skilled care needs should align with medical documentation from a member's Licensed Medical Professional.
 - Documentation must be current, within the last 1 year for children and within 3 years for adults. It should include the Licensed Medical Professional's name, contact information, and date.
 - If a treatment plan is more than one year old for children or more than three (3) years old for adults old, it can be provided but must have a recent review date (i.e., reviewed/updated 07/2025 with the provider's information).
- Case Managers must follow directions in the CFC HMA Documentation Guide to ensure needs are accurately incorporated in the LOC Screen.
- Members and Case Managers are advised to use the CFC HMA Documentation Guide and HMA Documentation Checklist as part of the intake, enrollment, and PCSP processes. These tools are intended to strengthen consistency, accuracy, and transparency across assessments and authorizations statewide.

Case Managers

Effective immediately:

- The updated CFC HMA Documentation Guide replaces all prior versions and should be used by Case Managers during the PCSP process.
 - Each HMA task has documentation expectations, detailed rule references, and special considerations to assist Case Managers in evaluating if care is skilled.
- Case Managers must provide the HMA Member Documentation Checklist to individuals seeking or receiving HMA services prior to the LOC Screen.
- All HMA documentation should be uploaded in the Care and Case Management (CCM) system.
 - Documentation should be uploaded in the member record in the Document Center under the “Medical Care Related Attachment”
 - Case Managers should use the following naming convention: First Name_Last Name_Document Name_MM.DD.YY (document date).
 - In the event that an HMA task cannot be supported by recent or relevant documentation, it cannot be approved as HMA. However, the task may be approved as Personal Care if applicable.

For new members without previously authorized HMA:

- Documentation must be provided before any HMA services are authorized.

For members with current HMA services:

- Service authorizations remain valid until the last day of the certification period or until a revision resulting from a change in service needs is requested, whichever occurs first.
- Existing services may be carried over into the new certification period prior authorization for up to 30 calendar days while HMA documentation is obtained.
- For any new HMA services requested as part of a revision, all required documentation must be provided prior to the authorized service start date.
- If documentation to support HMA tasks fails to meet the standards necessary for determining or supporting HMA authorization, Case Managers shall complete a Long-Term Care Notice of Action (LTC NOA) for a denial or reduction in services.

Applicants and Members

Members play an important role in providing medical documentation to ensure that HMA services accurately reflect their current care needs. To support this process, members/member representatives should take the following steps:

- Review the HMA Member Documentation Checklist provided by your Case Manager.
- Gather relevant documentation as outlined in the checklist.

- Submit your documentation to your Case Manager in preparation for your LOC Screen. You may also provide the information at the time of the LOC or after, if additional documentation is requested.
- Communicate any changes in your health status or care needs as soon as they occur, ensuring your PCSP remains accurate and up to date.
- Retain copies of submitted documents for your personal records and reference during future assessment and service planning activities.

Provider Agencies

IHSS Provider Agencies are encouraged to support members in gathering documentation if requested. The IHSS Agency Care Plan and Documentation should be shared with the Case Manager during the annual LOC Screen and PCSP process.

Resource Updates:

The [CFC HMA Documentation Guide](#) was developed with stakeholders in 2021 to help outline regulatory requirements, case management responsibilities, and options for how members can document their requests for skilled care. It has been updated as of December 2025 to reflect the launch of CFC; formatting has been adjusted, and task criteria language has been aligned with regulations in 10 CCR 2505-10 Section 8.7523.

HCPF has developed a new resource to help individuals gather information in preparation for their LOC Screen. The [HMA Member Documentation Checklist](#) provides examples of acceptable documents and helps ensure all relevant materials are provided to the Case Manager. Proper documentation helps ensure accurate recommendations for HMA service hours and supports alignment with program rules outlined in 10 CCR 2505-10 Section 8.7523.

Definition(s):

Health Maintenance Activities means routine and repetitive health related tasks furnished to an eligible member in the community or in the member's home, which are necessary for health and normal bodily functioning that a person with a disability is unable to physically carry out. Health Maintenance Activities are skilled care.

Level of Care (LOC) Screen means a comprehensive evaluation with the individual and appropriate support persons (such as family members, friends, and/or caregivers) to determine an individual's eligibility for Long-Term Services and Supports based on their need for institutional Level of Care as determined using the Department's prescribed assessment instrument as outlined in Section 8.7202.E.

Licensed Medical Professional means a medical care provider of the member, who possesses one of the following licenses: Physician (MD/DO), Physician Assistant (PA), and Advanced Practice Nurse (APN).

Person-Centered Support Planning means the process of working with the member and people chosen by the individual to identify goals, needed services, individual choices and preferences, and appropriate service providers based on the individual seeking or receiving services' assessment and knowledge of the individual and of community resources. Support Planning informs the individual seeking or receiving services of their rights and responsibilities.

Attachment(s):

CFC HMA Documentation Guide

HMA Member Documentation Checklist

HCPF Contact:

Participant Directed Programs

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