

MINUTES OF THE MEETING OF THE MEDICAL SERVICES BOARD

303 E. 17th Avenue, 11th Floor Conference Room, Denver, CO 80203

March 14, 2025

Call to Order

Dr. Martin called the meeting to order at 9:02 a.m.

Roll Call

The Board Coordinator called the roll. There were sufficient members for a quorum with seven members participating.

A. Members Present

Cecile Fraley, Simon Hambidge, Morgan Honea, Barry Martin, James McLaughlin, Christina Mulkey, and David Pump.

B. Members Excused

Laura Carroll, Vincent Scott, and William Kinnard

C. Staff Present

Kim Bimestefer, Executive Director; Cristen Bates, Deputy Medicaid Director; Jennifer Weaver, Attorney General; and Chris Sykes, Board Administrator

Announcements

Dr. Martin announced the next Medical Services Board Meeting will be held at 3885 Upham Street, Suite 100, Wheat Ridge, CO, 80033 on Friday, April 11, 2025 at 9:00 a.m.

It is the policy of this Board and the Department to remind everyone in attendance that this facility is private property. Please do not block the doors or stand around the edges of the room. Please silence cell phones while in the meeting room.

Executive Director Minute

Approval of Minutes

Mr. McLaughlin moved for the approval of the February minutes. Dr. Fraley seconded the motion. The minutes were approved, 7:0.

Rules

A. Final Adoption by Consent

Document 01, MSB 24-10-30-B, Revision to the Medical Assistance Act Rule concerning Durable Medical Equipment Billing Clarification, Section 8.590; Document 02, MSB 24-11-12-A, Revision to the Medical Assistance Act Rule concerning Out-of-State Hospital and Physician Services Rate Negotiation, Section 8.013 and Document 03, MSB 24-07-08-B, Revision to the Medical Assistance Eligibility Rules Concerning the Medicaid Buy-In Program for Children with Disabilities, Section 8.100.5.

Dr. Hambidge moved for the final adoption of Documents 01, 02 and 03. Dr. Mulkey seconded the motion.

The Board voted on the final adoption of Documents 01, 02 and 03, 7:0.

B. Initial Approval

Document 04, MSB 24-11-05-A, Revision to Medical Assistance Act Concerning Managed Care Grievance Resolution Timeline, Section 8.209

Rachel Larson, from the Policy Development and Implementation Section, presented the rule and provided an overview of its scope, including the grievances it covers. Staff provided a timeline of the rule development and an overview of the stakeholder engagement performed. A review of the audit results was provided to add clarity to the rule. Staff reviewed proposed changes in the rule. The rule language will change between meetings to address the Attorney General Office suggestions regarding incorporation by reference language.

Board Discussion – Board discussion included how it is a good idea to increase the reporting timeline. The burden on managed care entities was discussed and entities currently submit monthly reports. This rule revision is an increase in burden which will be written into contract language for phase 3. The expedited grievance process was discussed and there is a written process for entities to follow. The Department provides guidance to entities for the expedited grievance process.

Public Testimony – Elizabeth Snow, appreciate the engagement at the Public Rule Review and engagement of the staff. There are many barriers to care that

must be addressed in the rule. Request additional stakeholder meetings. The Department commits to following up with stakeholders. Certain grievances can take up to 90 days and some do, but not all.

Mr. McLaughlin moved for the initial approval of Document 04. Dr. Hambidge seconded the motion.

The Board voted the initial approval of Document 04, 7:0.

Document 05, MSB 24-12-05-A, Revision to the Medical Assistance Act Rule concerning eConsults Specialist to Specialist, Section 8.095

Russ Zigler, Policy Development and Implementation Section, presented the rule and reviewed the existing rule. This revision is in response to Board input from the last rule revision. Specialist-to-specialist eConsult is proposed and will increase access to care and timely care.

Board Discussion – Board discussion included the fiscal bill associated with the rule and how costs incurred from eConsult start-up was anticipated from the Budget division. A discussion about the platform was held and the Department is committed to looking into the possibility of cancelling the State platform if it is found to save money.

Public Testimony – NA

Dr. Hambidge moved for the initial approval of Document 05. Mr. Pump seconded the motion.

The Board voted the initial approval of Document 05, 7:0.

Document 06, MSB 24-12-09-B, Revision to the Medical Assistance Act Rule Concerning Cover All Coloradans Rule Clarifications, Sections 8.205.2.B. and 8.715.2.C

Russ Zigler, Policy Development and Implementation Section, presented the rule and provided a background on the rule. The Department brought two rules to comply with House Bill 22-1289 (Cover All Coloradans) to the Medical Services Board, which were adopted on first reading at the October 11, 2024 meeting and received final adoption at the November 8, 2024 meeting. The Department has since identified additional sections of rule that could exclude noncitizens otherwise covered under Cover All Coloradans in the eligibility rules for the Medicaid Statewide Managed Care System and the Breast and Cervical Cancer Program. The proposed rule provides regulatory clarification by incorporating exceptions for non-citizens covered under Cover All Coloradans in the eligibility rules for those programs and services.

Board Discussion – NA

Public Testimony – NA

Dr. Fraley moved for the initial approval of Document 06. Dr. Hambidge seconded the motion.

The Board voted the initial approval of Document 06, 7:0.

Document 07, MSB 24-12-10-A, Revision to the Medical Services Board Act Rule Concerning Support Intensity Scale Assessment (SIS) and Interim Support Level Assessment (ISLA) Rule Revisions, Sections 8.612 & 8.7202.AA

Mariah Kohlruss-Ecker, Office of Community Living, presented the rule and explained the background of the rule. The Support Intensity Scale Assessment currently in use is retiring on June 30 and an interim plan is to bridge to a longterm assessment in the future. Decommissioning of the Support Intensity Scale Assessment means both assessments will run side by side, but no member will go through both assessments. Staff reviewed the decommissioning of the Supports Intensity Scale assessment tool. A review of the stakeholder engagement was given and a review of lessons learned from stakeholder engagement. Revisions include fully repealing 8.612 rule language and moving to 8.7000 rules. Staff reviewed the revisions.

Board Discussion – Board discussion included the background of the assessment tools and how they are important an controls Medicaid payment for 40% of the spending. The plans and timeline to move from the interim to a permanent are not determined due to achieving benchmarks. Confusion will be low, about 9000 members enrolled, and nothing changes for those members. New members will receive the interim assessment tool which allows for 3rd party agencies to conduct interim assessment and is the responsibility of the case management agencies, as well as the permanent assessment tool.

Public Testimony – NA

Mr. McLaughlin moved for the initial approval of Document 07. Dr. Hambidge seconded the motion.

The Board voted the initial approval of Document 07, 7:0.

C. Consent Discussion

Dr. Martin motioned to add Documents 04, 05, 06, & 07 to the Consent Agenda. Mr. McLaughlin seconded the motion.

The Board voted to add Documents 04, 05, 06, & 07 to the Consent Agenda; 7:0.

D. Closing Motion

Dr. Hambidge moved to close the rules portion of the agenda. The motion was seconded by Mr. McLauglin.

Open Comments

Elizabeth Snow, No response from the Citizens' Advocate from the Department has been received. Responses seem to have worsened. A question if the Grievance process should be codified in the Colorado Code of Regulations. Katie Wallat, Colorado Center on Law and Policy, appreciates the responsiveness of staff regarding the Private Duty Nursing issue. Stakeholders are not reflected in the data, the trend of fewer approvals for certain populations, for example.

Rule Previews

- Community First Choice Eileen Saunders
- Children with Complex Health Needs Waiver Eileen Saunders
- Long Term Home Health Candace Bailey

Department Update

• Cristen Bates, Deputy-Medicaid Director

The meeting was adjourned at 12:08 p.m.

The next scheduled meeting of the Medical Services Board is at 9:00 a.m. on Friday, April 11, 2025 at 3885 Upham Street, Suite 100, Wheat Ridge, CO, 80033.

Reasonable accommodations will be provided upon request for persons with disabilities. Please notify the Board Coordinator at 303- 866-4416 or <u>chris.sykes@state.co.us</u> or the 504/ADA Coordinator <u>hcpf504ada@state.co.us</u> at least one week prior to the meeting.