

Office of Community Living Update Webinar Disability, Older Adult, & Advocacy Communities

March 17, 2022

- **Department Priorities Update**
Kim Bimestefer, Executive Director, HCPF
- **Behavioral Health Bills & Disability**
Julie Reiskin, Executive Director, CCDC
- **Pause on PARs**
Colin Laughlin, Office of Community Living Deputy Director, HCPF
- **Public Health Emergency Unwind**
Colin Laughlin, Office of Community Living Deputy Director, HCPF
- **Case Management Updates**
Rhyann Lubitz, Case Management Quality Performance Section Manager, HCPF
- **IDD Awareness Month**
Cristiano Sosa, Executive Director, The ARC of Colorado
- **Brain Injury Awareness Month**
Gavin Attwood, CEO, Brain Injury Alliance of CO
- **Health Equity Plan**
Aaron Green, Health Disparities and Equity, Diversity, and Inclusion Officer, HCPF



Department priorities to improve care for members with disabilities

Executive Director Kim Bimestefer

Thank you for your partnership!

You are **essential** to helping us improve care & service

You have given us so much, helping us **make tomorrow better**

Thank you for your incredible, outstanding contributions

Your voice, sharing your experiences **makes a difference**

Your **engagement** in our work, especially American Rescue Plan Act HCBS work, matters - ***this is a major priority!***



Transforming for a better tomorrow

You're helping Coloradans



Jessica wants people in the Deaf community to know they can feel confident with coverage from Health First Colorado.

When baby Maddie was diagnosed with Pitts-Hopkins syndrome, Health First Colorado was there to get her personalized care. Maddie recently graduated from kindergarten.

Stephan was born more than three months early. He is growing and thriving with the help of his family and Health First Colorado.

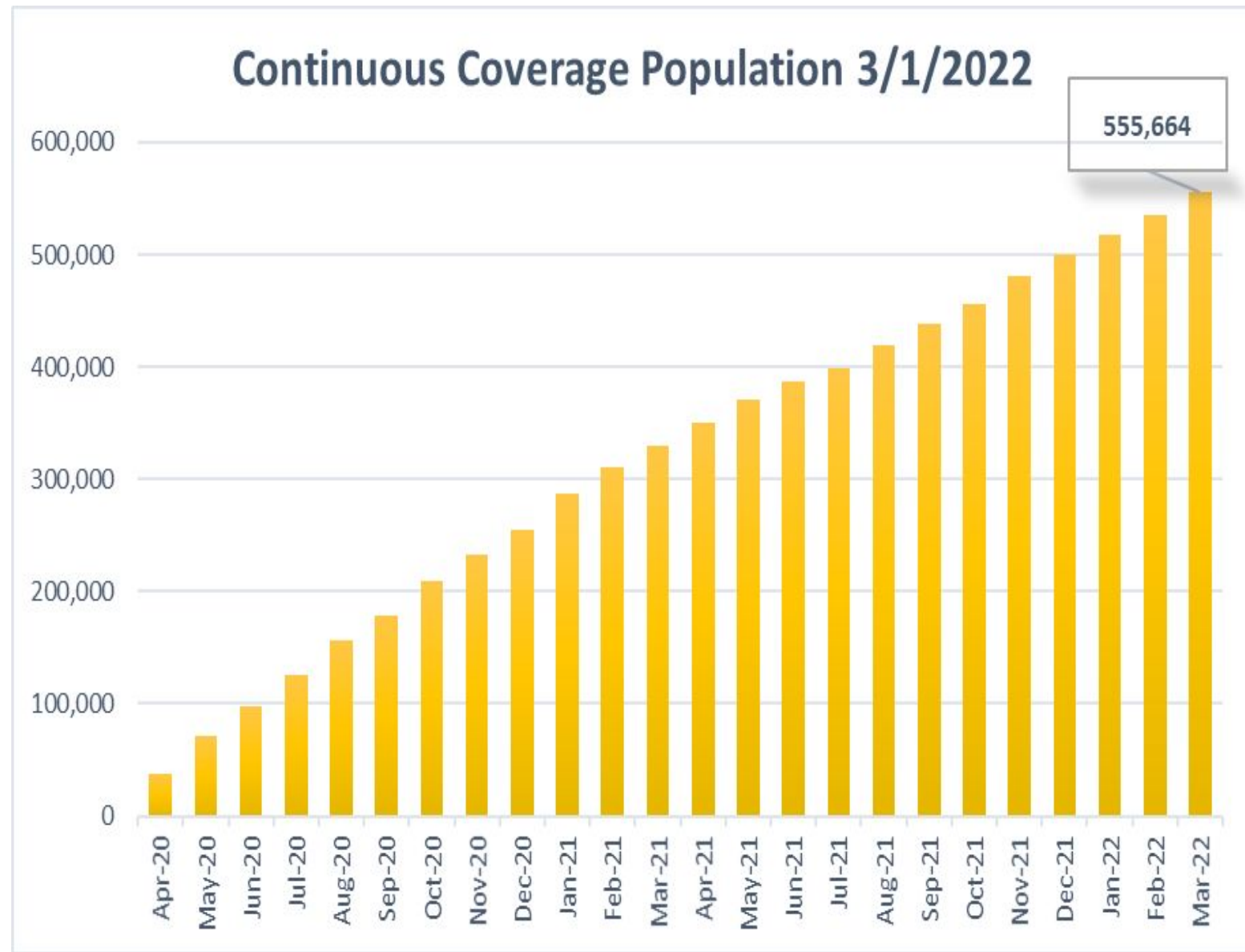
Learn more about these members' stories in our Annual Report:
hcpf.colorado.gov/publications

Addressing Growing Membership with Expanding Access and Improving Service

- Protected member benefits & provider reimbursements
- Expanded member access to care: added >17k providers (+ >20%, now >90k) & 30 pharmacies & 887 pharmacists (+44%) in 18 months ending December 2021
- Improved customer service: member call center answers in less than 1 min (year average is 38 seconds), and record low member correspondence error rate (0.012% December 2021)

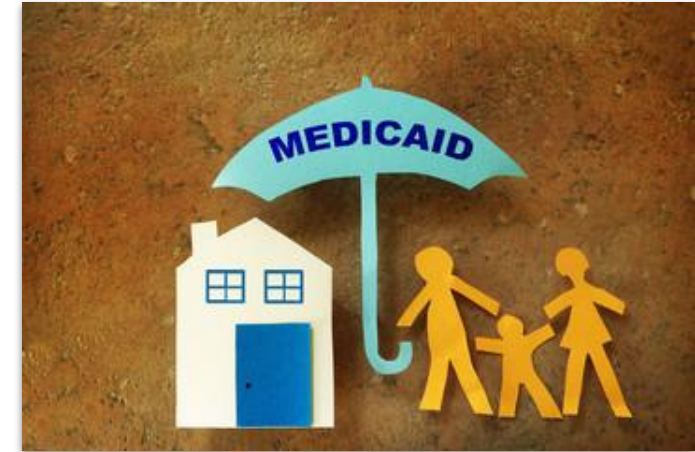
Medicaid/CHP+ up 28% Now covering 1.6M Coloradans, 1 in 4

- Held Colorado uninsured rate steady at 6.6% through pandemic by keeping Coloradans covered
- 555,000, 35% “continuous coverage” population



Keeping Coloradans covered after the public health emergency (PHE)

- During PHE, kept uninsured rate steady at ~6.6%*
- When PHE ends, HCPF, in partnership with counties, will need to review and redetermine eligibility for 555k+ (35% of members)
- It's imperative we keep Coloradans covered through this transition, by leveraging subsidies available through Connect for Health Colorado
- We have time to unwind thoughtfully



Three Key Operational Goals

1. Member continuity of coverage
2. Smooth transition, member experience
3. Minimize impact to eligibility workers



Key Activities to Achieve Goals

- Can take up to 14 months to unwind
- Increase automation of renewals where possible to reduce impact on members
- Reformat renewal packet for clarity
 - Special call out on the required signature
- Enhance online member tools (PEAK, electronic signature)



Keeping Informed & Engaged

- Latest updates on federal guidance
- Frequently Asked Questions
- Member, provider, county & eligibility partner content

Stakeholder Online Resource Center:
hcpf.colorado.gov/phe-planning

Budget Items Approved

- Formal spending authority for HCBS ARPA, roll-over authority
- 2% increase to providers across-the-board
- Increased provider rates for transportation, speech therapy, physical & occupational therapy
- Continuation of HCBS \$15/hr base wage increase
- Home delivered meal service expansion
- Staffing to support compliance & quality- including an Olmstead FTE

DOJ Findings, CO Violated ADA

- DOJ investigation began in 2018
- Comparing findings to our HCBS programs developed since then and future investment plans to identify gaps
- To address gaps, will form a process and engage you
- Deep commitment to creating a system that ensures people with disabilities always have the option to receive their care in the community

Health Cabinet Policy Summit

March 24, 3-4:50 and March 31, 3-4:50

FREE virtual event

- Health care affordability for Coloradans
- Behavioral health transformation
- Hospital Insights Report findings
- COVID-19 pandemic to endemic, future readiness
- Keeping Coloradans covered after the public health emergency



Dianne Primavera
Colorado Lt. Governor



Morgan Medlock, MD
Behavioral Health
Commissioner



Kim Bimestefer
Department of Health Care
Policy & Financing
Executive Director



Jill Hunsaker Ryan
Department of Public Health
& Environment Executive
Director



Michael Conway
Division of Insurance
Commissioner



Michelle Barnes
Department of Human
Services Executive Director

Agenda & Registration:

hcpf.colorado.gov/affordability





Feedback?



Behavioral Health Bills & Disability

Julie Reiskin, Executive Director, CCDC

Crisis Services

- (3) (a.5) ALL CRISIS WALK-IN CENTERS THROUGHOUT THE STATE'S CRISIS RESPONSE SYSTEM SHALL BE APPROPRIATELY LICENSED, ADEQUATELY PREPARED, AND PROPERLY STAFFED TO PROVIDE CRISIS SERVICES TO AN INDIVIDUAL WITH A SUBSTANCE USE DISORDER.... OR AN INDIVIDUAL WITH A DISABILITY, AS DEFINED IN THE FEDERAL "AMERICANS WITH DISABILITIES ACT OF 1990",
- REGARDLESS OF PRIMARY DIAGNOSIS, CO-OCCURRING CONDITIONS, OR IF THE INDIVIDUAL REQUIRES ASSISTANCE WITH ACTIVITIES OF DAILY LIVING, A CRISIS WALK-IN CENTER SHALL PRIORITIZE TREATING HIGH-ACUITY INDIVIDUALS IN THE LEAST RESTRICTIVE ENVIRONMENT WITHOUT THE USE OF LAW ENFORCEMENT

The following behaviors should stop!

We cannot
meet your
medical needs

You cannot
stay here
because...

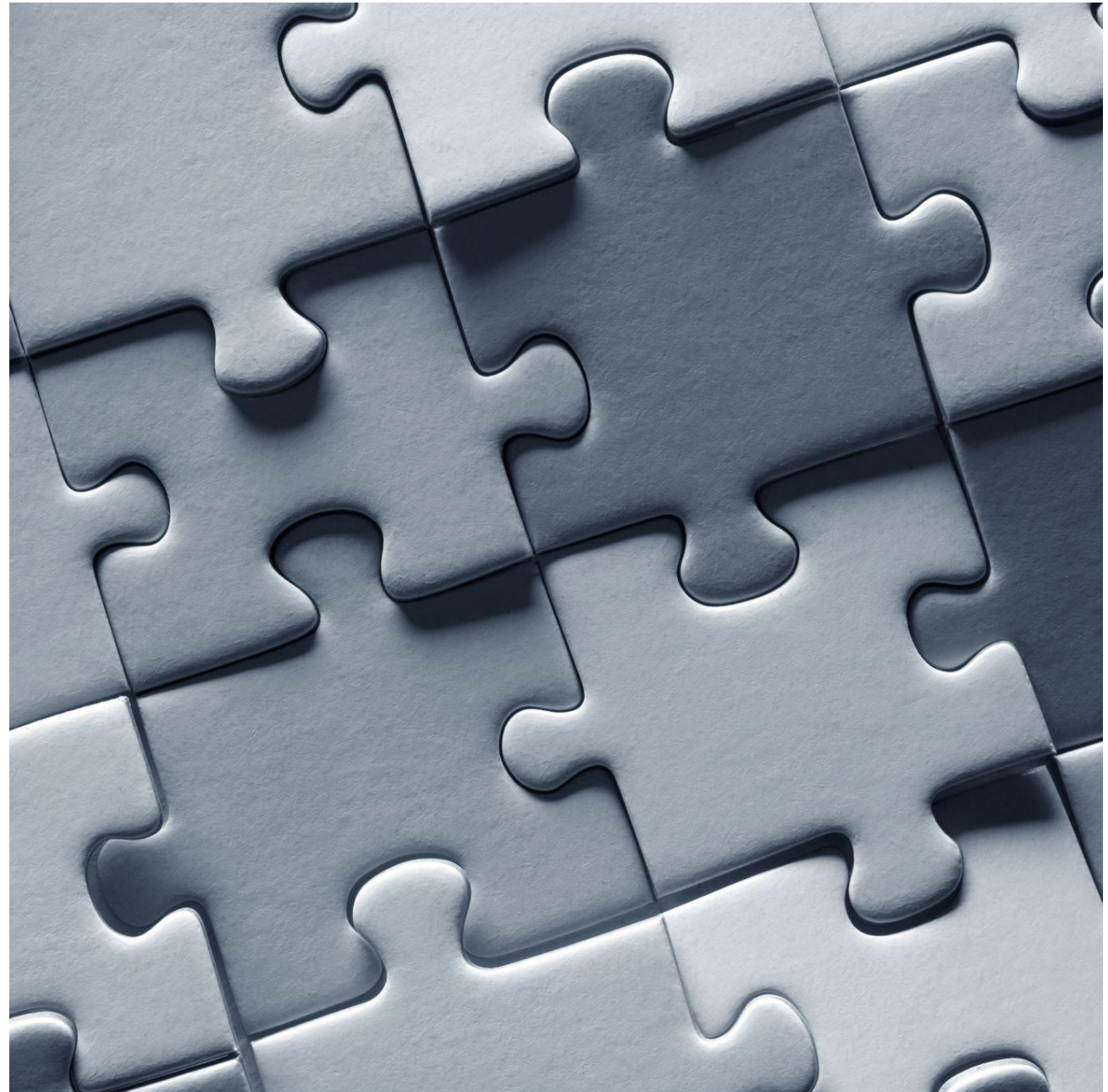
These
symptoms are
due to autism

You need to
call the police

Our staff are
not trained to
serve you

Behavioral Health Administration HB 1278

- Removes language about IDD
- Clarify roles of RAE and BHASO
- Very high bar for reject/eject for safety net providers
- Care coordination means making sure person gets to “appropriate” treatment
- Statewide grievance system and management of resources



Other Behavioral health bills

- HB 1061 -re need to be hospitalized and re-evaluated for NGRI
 - HB 1065 Standards for Commitment
 - HB 1256 Supports for people facing commitment
- HB 1131 No arresting kids 10-12
 - HB 1243 Funds for school based BH
 - HB 1268 Medicaid Reimbursement transparency
 - HB 1283 Youth and Family (foster care) treatment
 - SB 106 Conflict of Interest in BH



And more bills relevant to the community

- HB 1301 - Right to Repair
- HB 1290 - Accountability for wheelchair repair
 - No PAR for repair
 - Metrics for quality developed
 - HCPF can fine after this 3 years

Pause on PARs:
**Pediatric Long-Term Home Health
Therapies and Services**

PARs Paused...

Effective Feb. 28, the pause on the requirement to submit a PAR includes:

- Pediatric long-term home health CNA services
- Pediatric long-term home health therapies: occupational therapy, physical therapy, and speech-language pathology therapy
- Pediatric long-term home health intermittent skilled nursing

Why the PAR Pause?

- We heard denial rates were much higher for *specific services*, especially CNA.
- We discovered CNA PARs were denied at higher rates Nov. 2021 - Jan. 2022 when PARs were briefly on.
- Two-thirds of *CNA LTHH PARS* during this three-month period were denied.
- **We chose to pause PARs because of this identified discrepancy.**

Our two-year pause allows us to comprehensively evaluate the cause(s) and investigate options, develop solutions *together*.

Partnering with Kepro on Areas of Opportunity

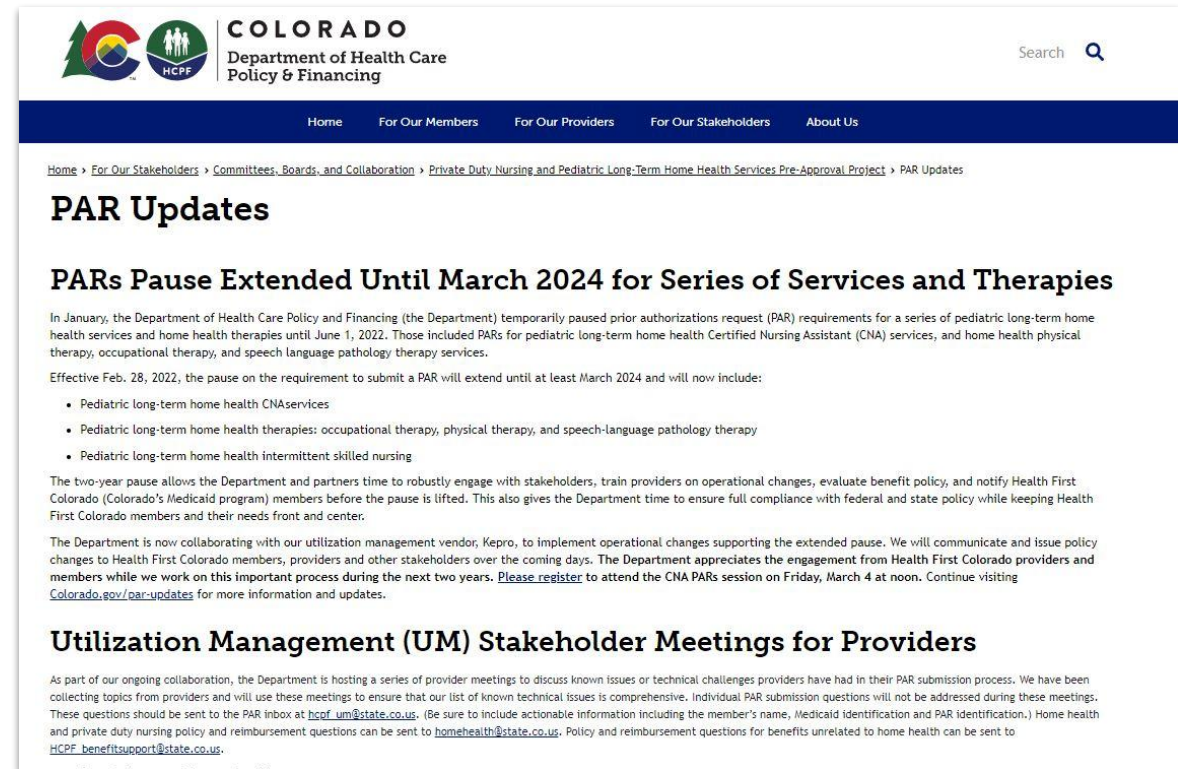


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Department of Health Care
Policy & Financing

- Listening sessions with outpatient Speech Therapy, OT/PT, and Durable Medical Equipment providers to understand issues with PAR submission process
- Planning underway for smaller task forces to address policy issues, PAR processes, systems and training issues within state and federal constraints for DME and therapies
- Kepro participated in the listening sessions and will participate on the task forces in addition to their ongoing work to improve provider satisfaction
- Member communication to follow provider meetings

Keep Up to Date



The screenshot shows the website header with the Colorado Department of Health Care Policy & Financing logo and a search bar. The navigation menu includes Home, For Our Members, For Our Providers, For Our Stakeholders, and About Us. The breadcrumb trail reads: Home > For Our Stakeholders > Committees, Boards, and Collaboration > Private Duty, Nursing and Pediatric Long-Term Home Health Services Pre-Approval Project > PAR Updates. The main heading is 'PAR Updates'. The article title is 'PARs Pause Extended Until March 2024 for Series of Services and Therapies'. The text states that in January, the Department temporarily paused PAR requirements for pediatric long-term home health services and home health therapies until June 1, 2022. Effective Feb. 28, 2022, the pause will extend until at least March 2024. A list of services includes Pediatric long-term home health CNA services, Pediatric long-term home health therapies (occupational therapy, physical therapy, and speech-language pathology therapy), and Pediatric long-term home health intermittent skilled nursing. The text explains that the two-year pause allows for stakeholder engagement and policy evaluation. It also mentions collaboration with Kepro for operational changes and upcoming stakeholder meetings for providers. Contact information for PAR questions and reimbursement inquiries is provided at the bottom.

PAR Updates

PARs Pause Extended Until March 2024 for Series of Services and Therapies

In January, the Department of Health Care Policy and Financing (the Department) temporarily paused prior authorization request (PAR) requirements for a series of pediatric long-term home health services and home health therapies until June 1, 2022. Those included PARs for pediatric long-term home health Certified Nursing Assistant (CNA) services, and home health physical therapy, occupational therapy, and speech language pathology therapy services.

Effective Feb. 28, 2022, the pause on the requirement to submit a PAR will extend until at least March 2024 and will now include:

- Pediatric long-term home health CNA services
- Pediatric long-term home health therapies: occupational therapy, physical therapy, and speech-language pathology therapy
- Pediatric long-term home health intermittent skilled nursing

The two-year pause allows the Department and partners time to robustly engage with stakeholders, train providers on operational changes, evaluate benefit policy, and notify Health First Colorado (Colorado's Medicaid program) members before the pause is lifted. This also gives the Department time to ensure full compliance with federal and state policy while keeping Health First Colorado members and their needs front and center.

The Department is now collaborating with our utilization management vendor, Kepro, to implement operational changes supporting the extended pause. We will communicate and issue policy changes to Health First Colorado members, providers and other stakeholders over the coming days. The Department appreciates the engagement from Health First Colorado providers and members while we work on this important process during the next two years. [Please register](#) to attend the CNA PARs session on Friday, March 4 at noon. Continue visiting [Colorado.gov/par-updates](https://colorado.gov/par-updates) for more information and updates.

Utilization Management (UM) Stakeholder Meetings for Providers

As part of our ongoing collaboration, the Department is hosting a series of provider meetings to discuss known issues or technical challenges providers have had in their PAR submission process. We have been collecting topics from providers and will use these meetings to ensure that our list of known technical issues is comprehensive. Individual PAR submission questions will not be addressed during these meetings. These questions should be sent to the PAR inbox at hcpf_um@state.co.us. (Be sure to include actionable information including the member's name, Medicaid identification and PAR identification.) Home health and private duty nursing policy and reimbursement questions can be sent to homehealth@state.co.us. Policy and reimbursement questions for benefits unrelated to home health can be sent to HCPF_benefitsupport@state.co.us.

hcpf.colorado.gov/par-updates

Public Health Emergency (PHE) Unwind & LTSS Services

- Submitted and received approval for fourteen (14) Appendix K Amendments to our HCBS waivers.
- We received approval from CMS to temporarily change several sections of our waiver programs for individuals impacted by the PHE.
- The Department has also adopted permanent changes through the waiver amendment process.

Public Health Emergency (PHE) Unwind & LTSS Services

- Colorado's Appendix K Amendment flexibilities will end 6 months post the PHE. Currently, the PHE is scheduled to end April 2022 which means that the Appendix K flexibility will end October 2022.
- The Department has also submitted, and received approval from CMS, to permanently adopt some of these new options in our waiver programs.

Public Health Emergency (PHE) Unwind & LTSS Services

- Some flexibilities approved for permanent adoption include:
 - Increase in payment rates for several services
 - Modification for Level of Care (LOC) evals and reevaluations including the Telehealth option for several services.

Public Health Emergency (PHE) Unwind & LTSS Services

- Flexibilities ending 6 months post PHE include:
 - Family Caregivers providing Community Connector and Supported Community Connections
 - Some services that are currently available via telehealth
 - A complete list of those that will continue can be found in [10 CCR 2505 - 10 Section 8.615.2](#)
 - Allowing CMAs to complete face-to-face activities via technology based methods
 - Allowing verbal signatures

Case Management Updates

- Case Management Redesign
 - Policy Updates
 - Care and Case Management System Update
- Ongoing Case Management
 - Preparing for post PHE
 - National Core Indicators
 - CM Complaints/Grievances:
[hcpf hcbs cmescalationinbox@state.co.us](mailto:hcpf_hcbs_cmescalationinbox@state.co.us)

Intellectual & Developmental Disabilities



AWARENESS DAY

March 23, 2022

10:00 - 11:00 am - IDD Policy Webinar

**12:00 - 1:00 pm - IDD Day Virtual Luncheon
Speeches & 2022 DSP of the Year Award**

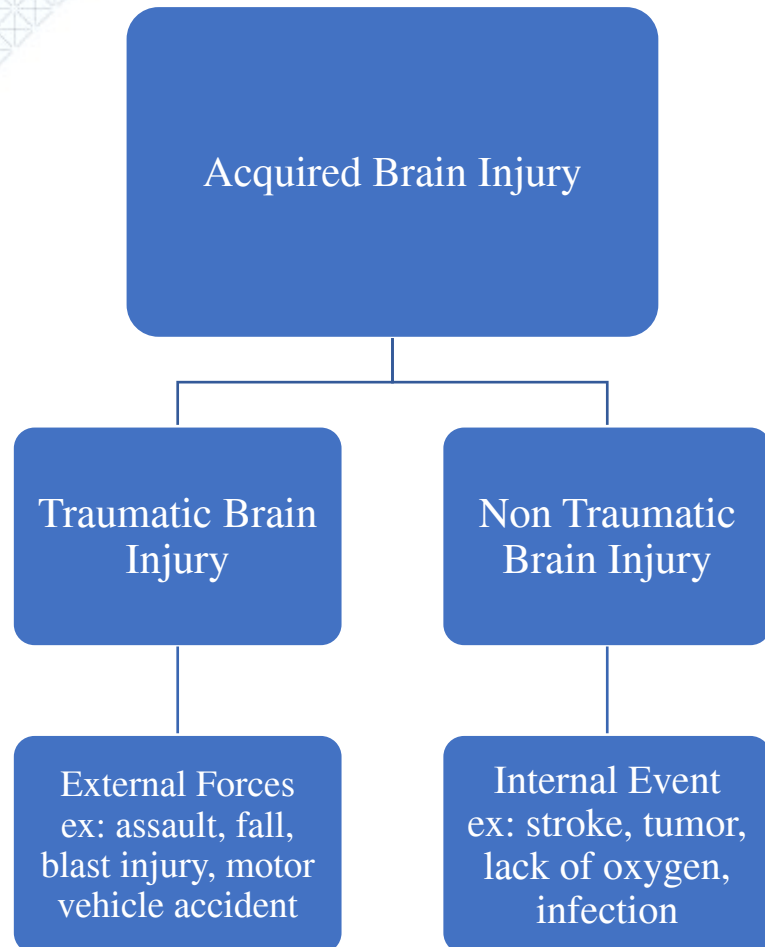
www.alliancecolorado.org/iddawarenessday



March is Brain Injury Awareness Month



What is a “brain injury”?



Scope of Problem

Over 500,000 Coloradans have sustained a brain injury

Colorado ranks **9th** in the nation of fatalities and **13th** in the nation of hospitalizations due to a Traumatic Brain Injury (TBI)

Almost **5,000** individuals are hospitalized and nearly **1,000** die due to a TBI in Colorado each year

23,500 emergency room visits each year are due to a TBI

Males are **twice as likely** to sustain a TBI in Colorado as females

The age groups with the highest risk of sustaining a TBI in Colorado are **15-24** and **65+**

Each year, **2,200** individuals continue to experience disability one year after hospitalization for a TBI

Resources



mindsourc colorado.org

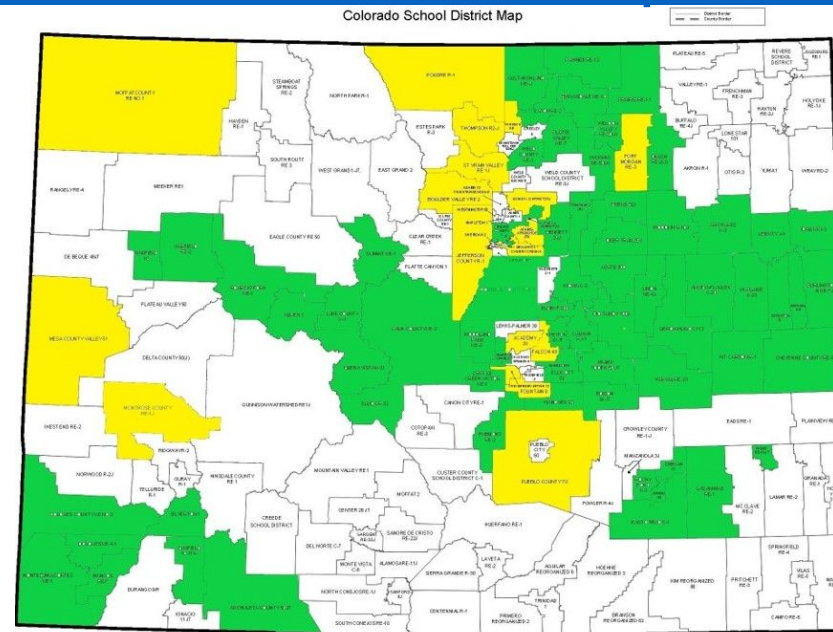


biacolorado.org

- Resource navigation
- Seminars, classes, & workshops
- Skill-building program
- Education consultation for youth with brain injury
- Educational materials for survivors, family, & professionals
- Recreation & social programs
- Peer mentorship program
- Support groups



www.cde.state.co.us/cdesped/sd-tbi



Health Equity Plan Public Meetings

Aaron Green - Health Disparities and Equity, Diversity, and Inclusion Officer, HCPF

HCPF is committed to ongoing and sustained health equity for all our members.

The purpose of the health equity public meeting is to provide space for providers, members, and community stakeholders to learn about the Department Health Equity Plan, and to provide input and feedback. Our goal is to establish the current state of health equity, and strategically look at innovative ways to improve health outcomes and decrease health disparities for our members in Colorado.

Health equity happens when everyone has equal opportunity to be as healthy as they can be. No one's race, ethnicity, disability, sexual orientation, gender identity, socioeconomic status, geography or preferred language should negatively affect their health care. Health equity work includes removing obstacles to health care access and positive health outcomes.



Health Equity Plan Public Meetings

Aaron Green - Health Disparities and Equity, Diversity, and Inclusion Officer, HCPF

To achieve better health outcomes, stakeholder engagement is critical.

Register the following upcoming public meeting focused on engaging the Disability community:

- **June 2, 2022 (12-1 p.m. MDT) - [Registration Link](#) (Focus on Disability)**

This particular session will focus on leveraging federal and local initiatives, and how we can better serve and engage members in the Disability community.

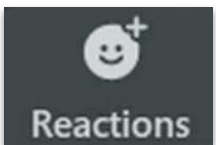
Feedback from sessions will inform the Department health equity strategy & implementation.



Questions & Discussion

*Press *9 to Raise Your Hand if you're on the phone
or*

*Click the Reactions button in Zoom
to find the Raise Hand option*



New Memo Guidance

Issued 1/21/22 - 3/17/22

[Memo Series Page](#)

Case Management Agencies

1/24/22
[OM 22-002](#)

Revised Guidance for the Temporary Enhanced Rate for the Home and Community-Based Services (HCBS) Waiver Respite Benefit

2/8/22
[OM 22-006](#)

Updated HCBS Provider Enrollment Requirements and Revalidation Procedure for CCBs

3/9/22
[OM 22-010](#)

(Supersedes OM 21-072)
HCBS ARPA Rate Increase Continuation

Facilities & PACE

None Issued

HCBS Providers

1/24/22
[OM 22-002](#)

Revised Guidance for the Temporary Enhanced Rate for the Home and Community-Based Services (HCBS) Waiver Respite Benefit

2/4/22
[OM 22-004](#)

Home and Community-Based Services (HCBS) Base Wage Rate Increase Attestation Form & Worker Letter

- [Base Wage Attestation Form](#)
- [IRSS Per Diem Increase Attestation Form](#)

2/8/22
[OM 22-006](#)

Updated HCBS Provider Enrollment Requirements and Revalidation Procedure for CCBs

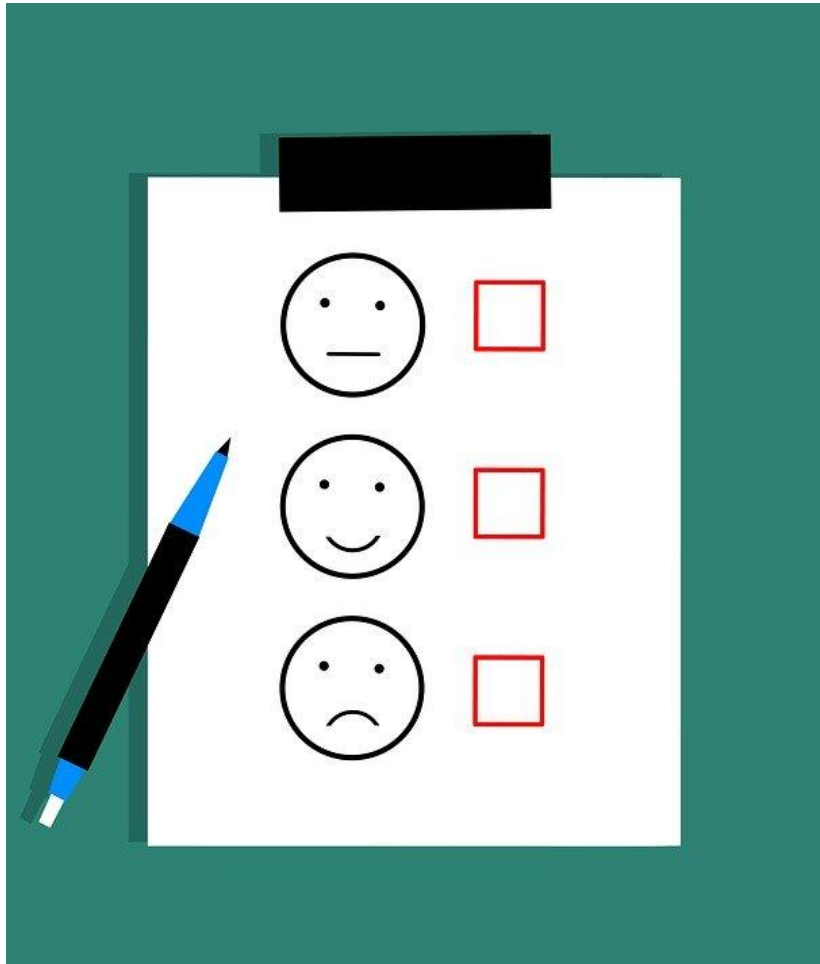
3/9/22
[OM 22-010](#)

(Supersedes OM 21-072)
HCBS ARPA Rate Increase Continuation



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Community 60 Second Satisfaction Survey

www.surveymonkey.com/r/commweb



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Webinar Topic Suggestions

[Stakeholder Topic Suggestion Form](#)

- Opportunity for all stakeholders to submit their requests for information and topics to be covered during each webinar.
- Link to form published on [OCL Webinar page](#)
- Please submit ideas approx. 2 weeks before the webinar date to allow for adequate planning

Office of Community Living Update Webinars

These webinars are intended to provide various stakeholder groups updates on key projects within the Office of Community Living. Webinar recordings and materials will be posted within a week after each meeting.

[Resources for HCBS Providers page](#)

Have a suggestion for a topic to be covered at a future webinar?



Submit Your Request

▼ Updates for Disability, Older Adult and Advocacy Communities

▼ Updates and Technical Assistance for Providers

Next Webinars



ARPA Quarterly Update Thursday May 19, 2022

9:30 - 11 am - Disability, Older Adult, & Advocacy Communities

3:30 - 5 pm - Providers

OCL General Updates Thursday June 16, 2022

9:30 - 10:30 am - Disability, Older Adult, & Advocacy Communities

3:30 - 4:30 pm - Providers

Stay Engaged



[Stakeholder
Engagement
Calendar](#)



[2022 Memo Series](#)



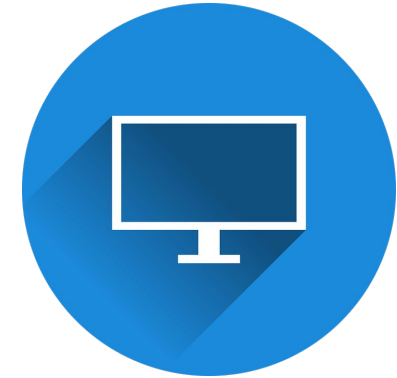
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Thank you!

