

# American Rescue Plan Act (ARPA) Update Webinar

Colorado Department of Health Care Policy &  
Financing

Office of Community Living  
Health Programs Office

November 17, 2022

# Agenda

- **General ARPA Updates**

Presenter - Hayley Gleason, Director, Strategic Outcomes Division, Office of Community Living (OCL)

- **Key Project Highlights**

Presenters -

Emily Holcomb, Behavioral Health Crisis Response Policy Advisor, Behavioral Health Initiatives & Coverage,  
Kim Cortez, Competitive & Supported Employment Unit Supervisor, OCL,  
Colin Laughlin, Deputy Director, OCL,  
Mark Queirolo, ACC Unit Supervisor, Cost Control & Quality Improvement, &  
Amanda Lofgren, Director, Case Management & Quality Performance Division, OCL

- **Grant Opportunity Highlights**

Presenters - Amanda Smith, Office of eHealth Innovation & Colin Laughlin, Deputy Director, OCL

- **Other Office Updates**

Presenter - Colin Laughlin, Deputy Director, OCL

# General ARPA Updates



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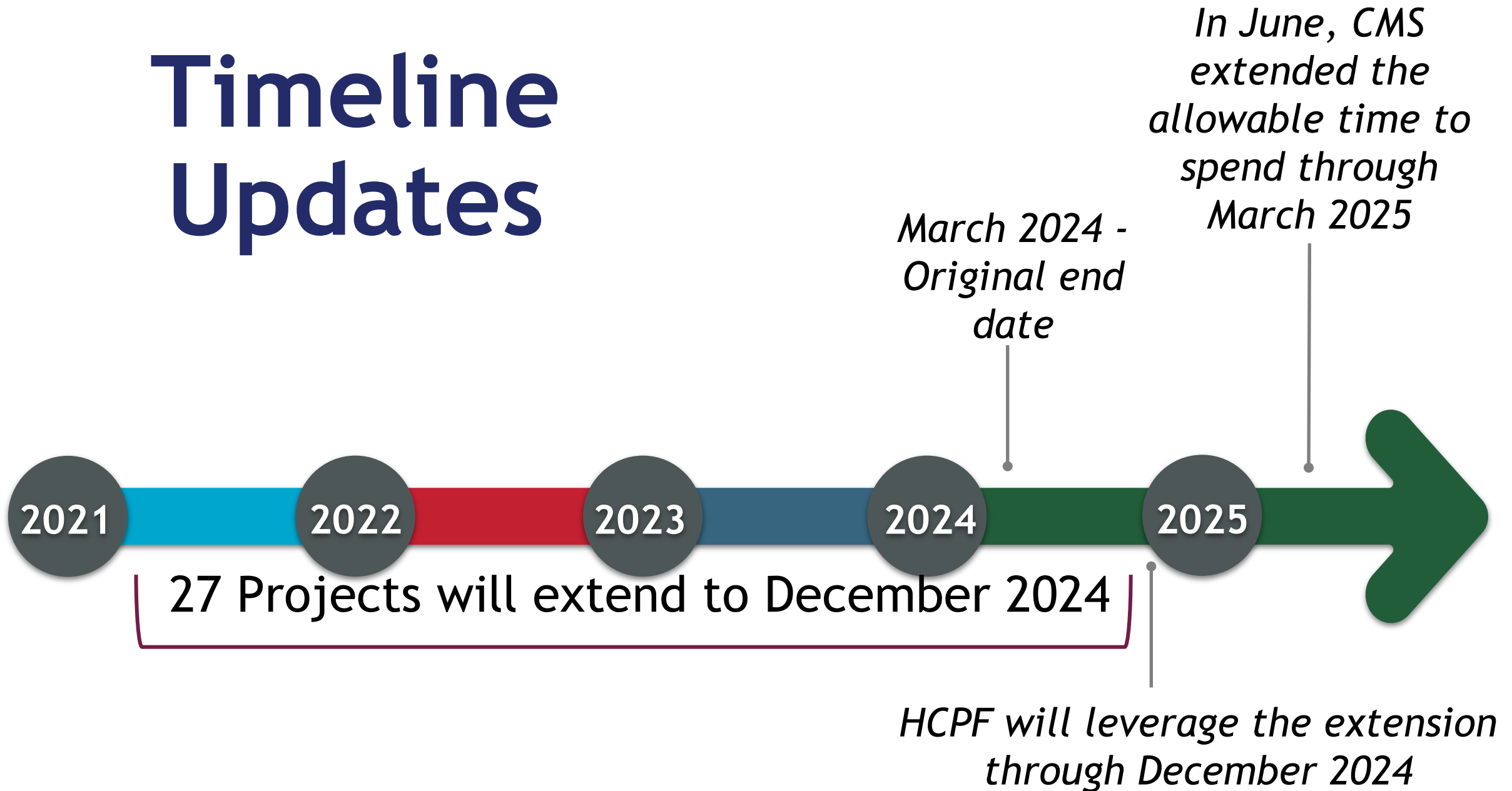
# ARPA HCBS Budget

Total ARPA HCBS Budget					
Item	FY 2021 - 2022 Budget	FY 2022 - 2023 Budget	FY 2023 - 2024 Budget	FY 2024 - 2025 Budget	Total
FTE	\$1,222,747	\$5,987,811	\$5,739,048	\$2,439,708	\$15,389,314
Admin (Contractors and Grants)	\$1,969,447	\$143,420,385	\$115,007,828	\$747,200	\$261,144,860
Rate Increases	\$83,616,684	\$146,738,773	\$1,500,000	\$0	\$231,855,457
<b>Total</b>	<b>\$86,808,878</b>	<b>\$296,146,969</b>	<b>\$122,246,876</b>	<b>\$3,186,908</b>	<b>\$508,389,631</b>

# Spending FY 22/23

FY 2022-2023 ARPA HCBS Costs Through October 2022					
Item	FY 2023 Budget	Budgeted Amount Through October 2022	Total Committed	Expenditures	Encumbrances
FTE	\$5,987,811	\$1,796,795	\$1,796,795	\$1,796,795	\$0
Admin (Contractors and Grants)	\$143,420,385	\$16,237,418	\$14,267,475	\$985,531	\$13,281,944
Estimated Increases to Services	\$146,738,773	\$61,939,432	\$57,236,208	\$57,236,208	\$0
<i>2.11% Temp Increase</i>	\$6,608,162	\$4,165,597	\$4,165,597	\$4,165,597	\$0
<i>Respite Rate Increase</i>	\$5,227,037	\$1,314,477	\$1,203,721	\$1,203,721	\$0
<i>Home Modification Increase</i>	\$2,000,000	\$500,000	\$493,872	\$493,872	\$0
<i>PACE Rate Increase</i>	\$9,145,859	\$3,850,888	\$3,850,888	\$3,850,888	\$0
<i>CDASS Rate Increase</i>	\$18,650,801	\$7,852,969	\$7,852,969	\$7,852,969	\$0
<i>\$15/hr Base Wage Increase</i>	\$105,106,914	\$44,255,501	\$39,669,161	\$39,669,161	\$0
<b>Total</b>	<b>\$296,146,969</b>	<b>\$79,973,645</b>	<b>\$73,300,478</b>	<b>\$60,018,534</b>	<b>\$13,281,944</b>

# Timeline Updates





# Questions & Discussion

*Use Raise Hand feature in Reactions  
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# Key Project Highlights



# Expansion of Crisis Services

- Colorado is adding to the crisis continuum by launching a new Mobile Crisis Response (MCR) Medicaid benefit available to all Coloradans regardless of insurance status
- The Department and the Behavioral Health Administration (BHA) are collaborating to design and launch this benefit
- Providers may receive an enhanced federal match for the first three years to offset the costs of ramping up services

## Goals

- Improve Service Quality
- Reduce Unnecessary Service Utilization
- Enhance Client Connections To Community Based Services
- Strengthen Network Capacity, Especially For Target Populations
- Increase Awareness
- Integration Within The Crisis Service Continuum

# Mobile Crisis Response 24/7

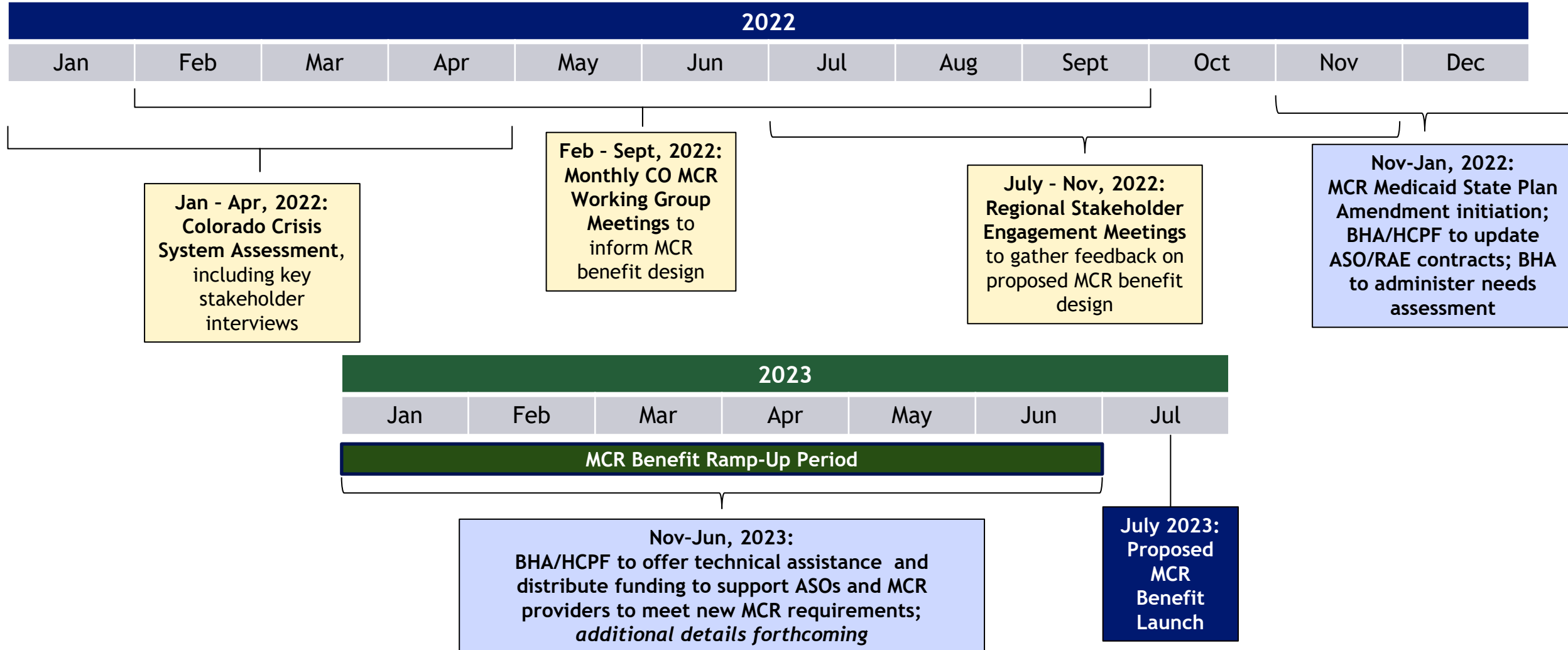
- ✓ Occurs where a client is at, in the community, to offer relief & stabilization
- ✓ Dispatched through 988, 911, Colorado Statewide Crisis line & other direct crisis channels
- ✓ MCR is delivered by a multi-disciplinary mobile crisis response team with specialized crisis training & expertise set by federal requirements
- ✓ MCR providers are required to coordinate follow up services to ensure continuity of care for the client
- ✗ MCR is not a replacement for ongoing mental health and substance use disorder treatment services
- ✗ MCR does not replace or stop other crisis response services, but is another option for communities & is an opportunity for greater collaboration across crisis providers

# Expansion of Crisis Services

This service definition outlines key components that comprise the new MCR benefit and is intended for use by mobile crisis response teams that are eligible for reimbursement for services to Medicaid members

- Engagement with Community Partners
- Dispatch integration
- Mobile Crisis Response Activities
  - Initial Face-to-Face Risk Assessment: Brief Intervention, Stabilization, and De-Escalation
  - Crisis and Safety Planning
  - Immediate Follow-Up Activities: Face to Face or Telephone, Coordination with and Referrals to Health, Social, and Other Services and Supports
- Maintaining Relationships with Community Partners
- Staffing Requirements
  - Team Requirements
  - Team Members
  - Roles of Select Team Members
  - Training Requirements
- 24/7/365 Availability, Timeliness, and Place of Service Standards
- Use of Telehealth
- Coordinate Secure Transportation (if needed)

# Expansion of Crisis Services



# Expansion of Crisis Services

- Weekly technical assistance meetings hosted by HCPF/BHA -
  - Accessibility requests must be made via email or phone one week in advance of the meetings
  - Contact Emily Holcomb for information if you are interested in attending a stakeholder session geared at member experience or provider needs at [Emily.Holcomb@state.co.us](mailto:Emily.Holcomb@state.co.us)
  - Find out more here: [bha.colorado.gov/blog-post/colorado-mobile-crisis-response-asks-for-important-stakeholder-engagement](https://bha.colorado.gov/blog-post/colorado-mobile-crisis-response-asks-for-important-stakeholder-engagement)

A needs assessment will be available soon for providers interested in meeting mobile crisis benefit standards by July 2023 launch

# Disability Employment Awareness Month

National employment data (all job types):

- No disability 76%
- Any disability 37%
- Cognitive disability 28%

Colorado is an Employment First state:

- Ending subminimum wage employment
- Reducing systemic barriers

❖ *Lack of awareness is the most significant barrier*

# Supported Employment Pilot

**Goal:** Test incentive-based payment methods to encourage fading of job coaching supports and better employment outcomes

- Fading job coaching (reducing services over time) is a studied best practice



# Supported Employment Pilot

The five providers in the Pilot are reimbursed for every hour the participants work, not every hour of service provision. This incentivizes:

- Providing minimum necessary service hours to sustain employment
- Supporting members to increase hours worked
- Utilizing best job coaching practices
- Finding the best possible job match

Data generated from this pilot will inform future Supported Employment policy decisions and payment systems to advance Employment First in Colorado.



# Accountable Care Collaborative Phase III

## Ongoing Stakeholder Activities



# ACC Phase III Goals

- Improve quality care for members
- Close health disparities and promote health equity
- Improve care access
- Improve the member and provider service experience
- Manage costs to protect member coverage, benefits, and provider reimbursements

# ACC Phase III Priorities

- Member Communication and Support
- Accountability for Equity and Quality
- Improving Referrals to Community Partners
- Alternative Payment Methodologies
- Care Coordination
- Children and Youth
- Behavioral Health Transformation
- Technology and Data Sharing



# Case Management Best Practices

The project will use evidence-based best practices and stakeholder feedback to develop and implement process improvements for members with complex needs who are receiving both Care Coordination from the RAEs and HCBS Case Management from the CMAs. The following minimum objectives have been identified:

- Increase cross-agency coordination
- Reduce gaps in medical care and coordination of services
- Increase member and provider understanding of RAE and CMA roles and responsibilities
- Reduce duplication of services
- Improve member experience



# Case Management Best Practices

- We are excited to have a dedicated Coordinator for this project, Lauren Landers-Tabares!
  - Lauren has 10 years of experience in case management, including direct service, supervision, and local government administration. She currently sits on the board of directors for the National Association of Case Management.
- Lauren will be developing a diverse Stakeholder Task Force to provide input at all stages of this project. Be on the lookout for future communications!

# Case Management Projects

## 1) 5.03 Case Management Rate Development

The Department partnered with Myers and Stauffer to complete:

- Case management time study documenting case manager activities and the time associated
- Robust analysis of case management rates

**Result:** The Department is working to increase funding for ongoing targeted case management activities.

## 1) 8.09 Waiver Quality Expansion

The Department is currently hosting a case management satisfaction survey through Vital Research. The survey is open through November 21, 2022.

## 1) 5.01 Case Management Capacity Building

Supporting CMAs through the transition of CMRD; retention payments for case management staff



# Questions & Discussion

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# Grant Opportunity Highlights



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# Grants: By the Numbers

To Date: 6 grant initiatives have opened their request for application (RFA) process & since closed

- Awardees have been selected & contracting is in process for approximately 29 grantees
  - 2 grant teams still reviewing applications
- An additional 2 RFAs are open now
- Across these 8 grant programs- there is a total of \$65.5M in grant funds to be distributed out to the community
- 8 RFAs to open in the coming months

# Grant Financial Vendor - PCG

## What's their role?

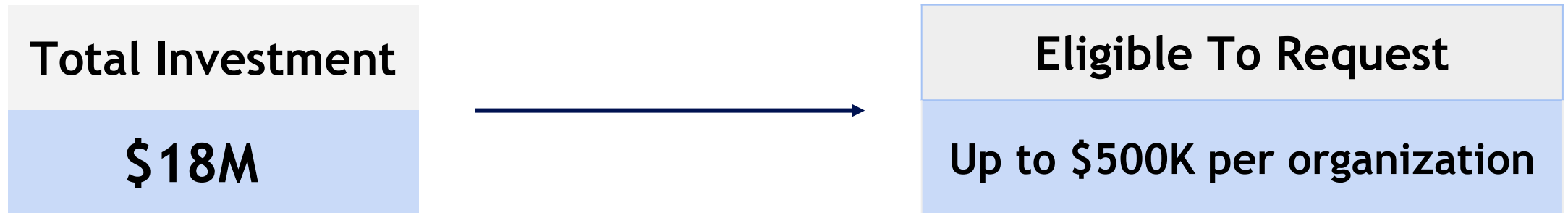
- The grant financial vendor will create the grant agreement documentation (contract), manage the agreements and make payments to the grantees.

## What does that mean for grantees?

- In most cases, if you're awarded a grant you will work with this third-party entity execute the grant agreement and to submit invoices for payment and any other reporting requirements.

# 6.06 “Dollars to Digitize”

\$18 million is available to Health First Colorado-enrolled HCBS and behavioral health providers to adopt or enhance your organization’s digital technology and electronic health records.



# 6.06 Eligibility & Application

## Who is Eligible:

- Home and Community-Based Services (HCBS) providers serving 2 or more Health First Colorado members in the past 12 months
- Behavioral health providers serving 30 or more Health First Colorado members in the past 12 months

## How to Apply:

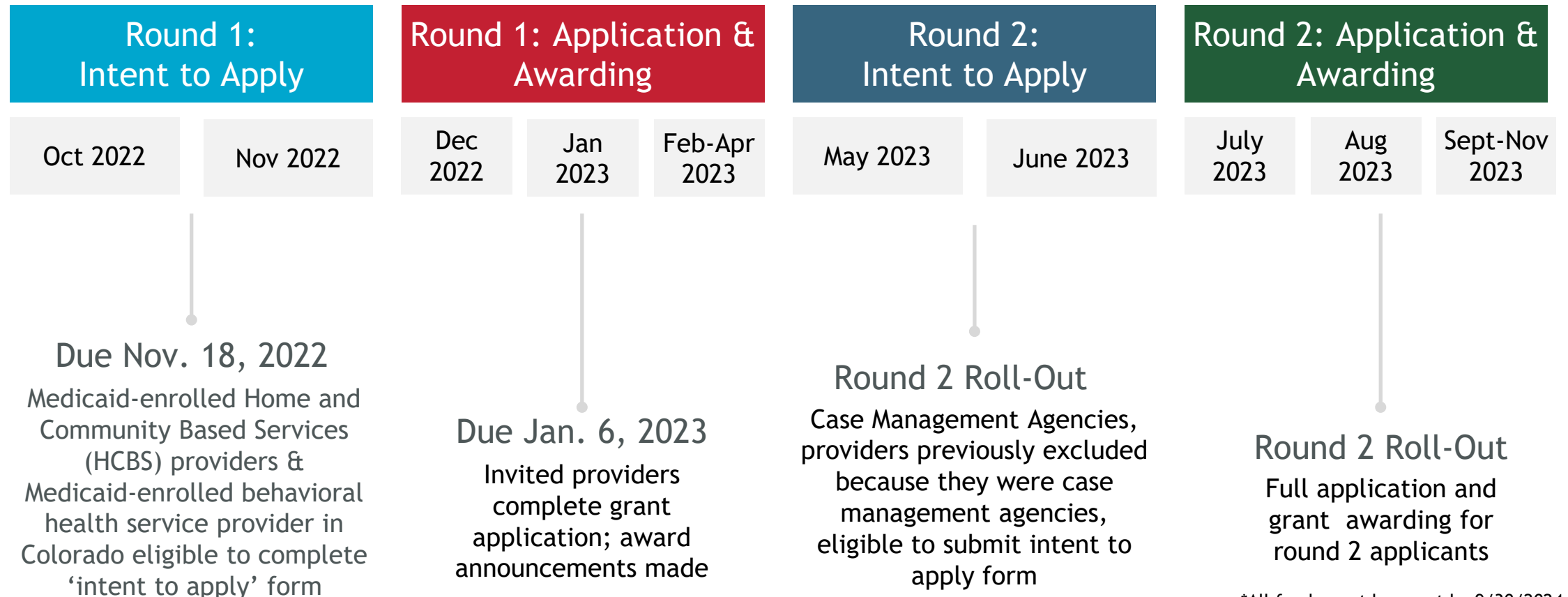
**Step 1:** Complete the [Intent to Apply form](#) by November 18, 2022.

**Step 2:** If eligible based on the *Intent to Apply* form, you will receive an email invitation to complete the grant application (Due January 6, 2023 by 5 p.m.)

Start the grant application at: [hcpf.colorado.gov/arpa/arpa-grant-opportunities#6.06](https://hcpf.colorado.gov/arpa/arpa-grant-opportunities#6.06)

# 6.06 Timelines

There will be two rounds of application and awarding. Each round includes different provider types. Please see the timeline for details.



\*All funds must be spent by 9/30/2024

# 1.05 Training Fund

## Summary of project:

Through funding provided by Section 9817 of the American Rescue Plan Act, the Department, has created the Training Fund Grant program with the primary goal of providing more training opportunities and incentives for workers to gain higher-level skills that would promote greater retention within the HCBS workforce. The focus of the grants are to supplement initial training with the purpose of:

- Specialization training to better support the HCBS population and HCBS workforce; or
- Training that supports advancement opportunities for the direct care workforce.

# 1.05 Training Fund- Provider Grant

## Total Award Amount:

- \$9,500,000 (combined total for Individual and Provider Grants)

## Maximum Award Amount:

- \$100,000 for Provider Grants

## Who is Eligible:

- Currently enrolled Home and Community-Based Services (HCBS) waiver providers; or
- Training vendor/provider that develops/delivers training/specialization for the HCBS workforce.

## How to Apply:

- Review the [Grant Eligibility and Application Requirements](#) document
- Apply at: [hcpf.colorado.gov/arpa/arpa-grant-opportunities#1.05](https://hcpf.colorado.gov/arpa/arpa-grant-opportunities#1.05)

# 1.05 Training Fund- Individual Grant

## **Total Award Amount:**

- \$9,500,000 (combined total for Individual and Provider Grants)

## **Maximum Award Amount:**

- \$500 for Individual Grants

## **Who is Eligible:**

- Individual, age 18 or older, who is currently working within any of Colorado's Home & Community Based Service (HCBS) Waivers; OR
- Individual, age 18 or older, who desires training to enter Colorado's HCBS Waiver workforce.

**Applications will be accepted soon**



# Interested in Applying for a Grant? Take these Steps Now

- ❑ Check the [Secretary of State website](#) to ensure you are registered and in good standing
- ❑ Keep an eye on our [ARPA Grant Opportunity webpage](#)
- ❑ Review the [ARPA Project Pulse newsletter](#) each month
- ❑ Remember, these funds are to supplement your work, not supplant existing funds



# Questions & Discussion

*Press \*6 to unmute if you're on the phone  
or  
Raise your hand in Zoom*



# Other Office Updates

# Public Health Emergency (PHE) Updates

**Current PHE continues to run through January 11, 2023**

*We expect this to be extended again*

New working dates are:

**February 10, 2023 - *next 60-day notice date***

**April 11, 2023 - *new expected end date***

[Recent Tweet from HHS official on 60-day notice](#)

*“The COVID Public Health Emergency remains in effect & HHS will provide a 60-day notice to states before any possible termination or expiration. As we’ve done previously, we’ll continue to lean on the science to determine the length of the PHE. Read FAQs: <https://phe.gov/Preparedness/legal/Pages/phe-qa.aspx>”*



# PHE - Senate Vote on 11/15

- On November 15, 2022 the U.S. Senate votes to end the **COVID-19 Emergency Declaration**
- This is different than the Public Health Emergency
  - Only the Department of Health and Human Services (HHS) is able to end the PHE
  - The Senate vote on 11/15 has no impact to Medicaid-related coverages or policy tied to the PHE
  - The COVID-19 Emergency Declaration is tied to things like student loan payment freeze, closing ports of entry, and customs deadlines

# PHE - Stakeholder & Partner Outreach

- **PHE Unwind website hub**
  - Includes Update Your Address & Get Ready to Renew toolkits (*Time to Renew toolkit coming at end of PHE*), provider, member and eligibility worker information
  - [Colorado.gov/hcpf/phe-planning](https://colorado.gov/hcpf/phe-planning)
- **Community Partner Webinars beginning 11/17/22:**
  - **Save the Dates:** Quarterly eligibility site & community partner [webinars](#) Nov. 17, Jan. 25, Apr. 26, July 26, Oct. 25
  - [Monthly PHE Unwind newsletter](#) (re-launched Oct. 18, ongoing monthly throughout the PHE Unwind)

# PHE - Stakeholder & Partner Outreach

[Home](#) > [COVID-19](#) > COVID-19 Public Health Emergency Planning

## Public Health Emergency Planning



### Background

In January 2020, the U.S. Department of Health and Human Services (HHS) declared a public health emergency (PHE) in response to the outbreak of COVID-19. Congress passed legislation that ensured anyone enrolled in Health First Colorado (Colorado's Medicaid program) was guaranteed to keep their health coverage during the PHE. This also applies to kids and pregnant people covered by Child Health Plan *Plus* (CHP+).

Even though Health First Colorado and CHP+ members will not lose coverage during the PHE, they still receive regular renewal letters each year in the mail and their PEAK inbox.

It will be critical for members to complete renewals when the PHE ends.

### Planning for the end of the COVID-19 PHE

When the PHE ends, Health First Colorado and CHP+ will return to normal renewal processes.

- The Department of Health Care Policy & Financing (HCPF) will take **12 months** (14 months including noticing) to complete renewals for each of the approximately **1.6 million people** currently enrolled.
- It's essential that members respond to renewal letters to make sure they keep their Health First Colorado and CHP+ coverage if they are still eligible.

### Jump To:

[How you can help](#)

[Toolkits](#)

[Phase 1: Preparing for renewals](#)

#### Public Health Emergency Status:

**Extended**

HHS Secretary Xavier Becerra [formally extended the PHE](#) on **Oct. 13, 2022**.

The PHE can be extended for up to 90 days at a time. The Biden administration said that they will provide a 60-days advance notice, by **Nov. 12, 2022**, before any end to the PHE.

#### Stay up-to-date on the COVID-19 PHE

##### Monthly Newsletters

- [COVID-19 Public Health Emergency Updates - November 2022](#)
- [COVID-19 Public Health Emergency Updates - October 2022](#)

[Subscribe now](#)

##### Community Partner Webinars

Planning for the end of the public health emergency: Community partners and advocates

Nov. 17, 2022 - 12:30 - 2 p.m.





**United Nations**



International  
Day of  
**Persons with  
Disabilities**

**3 DECEMBER**

- Of the one billion population of persons with disabilities, 80% live in developing countries.
- An estimated 46% of older people aged 60 years and over are people with disabilities.
- One in every five women is likely to experience disability in her life, while one in every ten children is a child with a disability.

[www.un.org/en/observances/day-of-persons-with-disabilities](http://www.un.org/en/observances/day-of-persons-with-disabilities)



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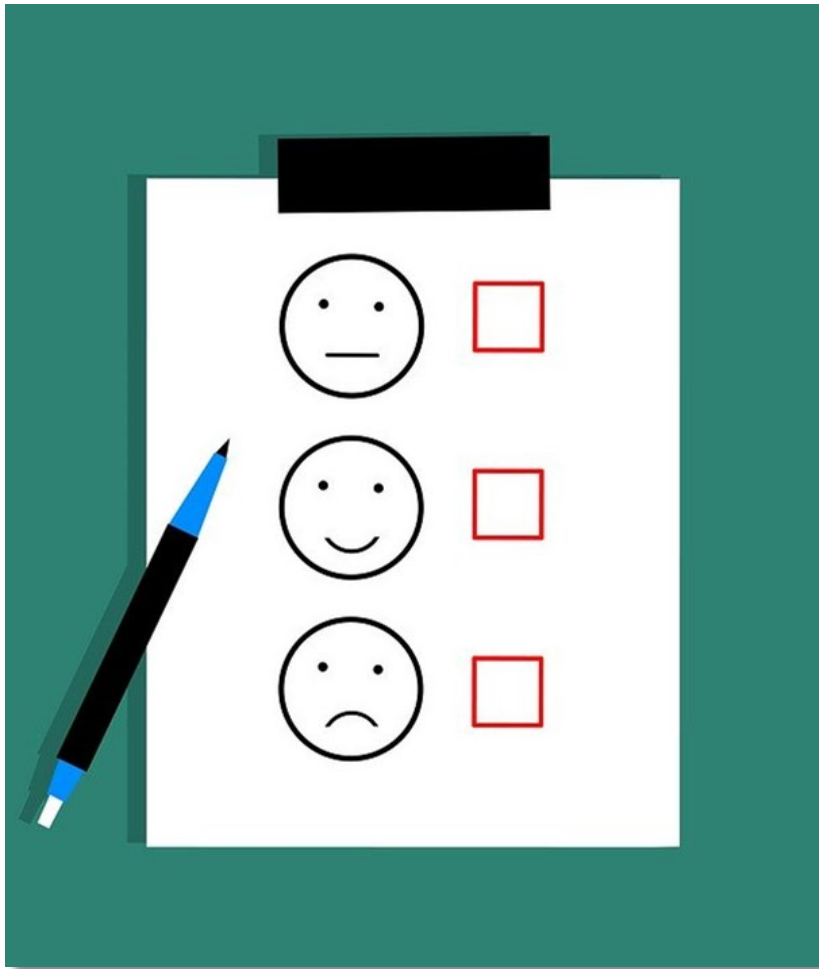




# Questions & Discussion

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# 60 Second Satisfaction Survey

[www.surveymonkey.com/r/GenARPA](http://www.surveymonkey.com/r/GenARPA)



# Next Webinars



**Planning OCL General Update Webinars & ARPA Webinars for calendar year 2023 now!**

*No webinars in December*

*Schedule for 2023 coming next month*

[Provide feedback or suggestions for the 2023 webinar schedule](#)



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# Thank you!