

Office of Community Living Update Webinar Updates & Technical Assistance for Providers

January 20, 2022

Bonnie Silva Office Director

Colin Laughlin Deputy Office Director

Amanda Lofgren Division Director

Agenda - Providers

- **2022 Webinar Schedule**
Bonnie Silva, Office of Community Living Director, HCPF
- **New CDC Quarantine & Isolation Guidance**
Colin Laughlin, Office of Community Living Deputy Director, HCPF
- **Chapter 8 & Chapter 26 Rule Revisions**
Anne Strawbridge, Policy and Regulation Services Manager, Health Facilities and Emergency Medical Services Division, CDPHE
- **NMT Check In**
Colin Laughlin, Office of Community Living Deputy Director, HCPF
- **IRSS changes**
Colin Laughlin, Office of Community Living Deputy Director, HCPF
- **Case Management Redesign Update**
Amanda Lofgren, CMQP Division Director, HCPF
- **American Rescue Plan Act Update**
Bonnie Silva, Office of Community Living Director, HCPF
Colin Laughlin, Office of Community Living Deputy Director, HCPF
- **\$15 Base Wage Update**
Colin Laughlin, Office of Community Living Deputy Director, HCPF
- **Innovage Update**
Colin Laughlin, Office of Community Living Deputy Director, HCPF
- **Budget Supplementals**
Bonnie Silva, Office of Community Living Director, HCPF

2022 Webinar Schedule

- OCL Updates
 - January - March - June - September
 - Guest presenters from other parts of HCPF, other state agencies
- Quarterly ARPA Updates (and other updates as needed)
 - February - May - August - November
 - Co-presented with HCPF Health Programs Office (HPO)

JAN	FEB	MAR
OCL Updates	ARPA Updates	OCL Updates

APR	MAY	JUNE
No Webinar Scheduled	ARPA Updates	OCL Updates

JULY	AUG	SEPT
No Webinar Scheduled	ARPA Updates	OCL Updates

OCT	NOV	DEC
No Webinar Scheduled	ARPA Updates	No Webinar Scheduled

Please share information about these webinars with your personal and professional networks!

If you would like a flyer and/or a communication packet with text and links for a newsletter or to share with friends and family send a request to hcpf_hcbs_questions@state.co.us

Webinar Topic Suggestions

NEW [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

[Home](#) > [For Our Members](#) > [Program Benefits](#) > [Long-Term Services and Supports Programs](#) > [Office of Community Living Stakeholder Engagement](#) > Office of Community Living Update Webinars

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 here.](#)

Expand All

- ✓ Updates for Disability, Older Adult & Advocacy Communities
- ✓ Updates & Technical Assistance for Providers

CDPHE Rule Revisions

Chapter 2

Chapter 8

Chapter 26



Chapter 2 *(General Licensure Standards)*

Part 12 *(COVID-19 Vaccination)*

- Applies to all licensed healthcare facilities
- Applies to all employees, direct contractors, and support staff except:
 - Live-in caregivers employed by a licensed Home Care Agency.
 - Employees who exclusively provide telehealth or telemedicine outside of the facility.
 - Employees who provide support services for the facility that are performed exclusively outside the facility.

Major changes from August to December Rule

- 100% Vaccination = Vaccinated + Medical Exemptions + Religious Exemptions *(Waiver no longer needed if facility/agency grants religious exemptions)*
- New hires must be fully-vaccinated, or start vaccination protocol prior to providing care, treatment, or other services.
- Mandatory Mitigation
 - Don PPE when in spaces occupied by clients, other employees, direct contractors and staff
 - Maintain social distancing when doing so does not interfere with job duties.
 - Testing is no longer mandatory (unless subject to a Public Health Order)

Chapter 8 *(Facilities for Persons with Intellectual and Development Disabilities)*

Effective: January 14, 2022

- Changes were occasioned by a routine regulatory review by the Department.
- That review identified a number of substantial changes that occurred related to the provision of services in these facilities since the last comprehensive update, in addition to changes in statute and the federal Conditions of Participation.

Chapter 8 *(Facilities for Persons with Intellectual and Development Disabilities)*

Effective: January 14, 2022

- Part 3 - Licensing Requirements
 - License term for Group Homes is changed from 2-years to 1-year to conform with statutory obligations. Licensure fees were cut in half as to not penalize licensees.
- Part 4 - Governing Body
 - Requirement added at Part 4.5 to ensure governing body performs a criminal history record check on the administrator.
- Part 5 - Administrator
 - All administrator responsibilities have been consolidated into this Part.
 - Administrator qualifications for ICF-IIDs were made more flexible with the addition of several education/experience options, and qualifications were added for the administrators of Group Homes.
- Part 6 - Personnel and Staffing
 - Criminal history record check language was updated
 - Clarifications added to the requirements for personnel records, personnel policies, restrictions on staff working while sick, and ensuring sufficient trained staff are on duty.
- Part 7 - Training
 - Part 7.1 updated to add specific minimum training topics and clarifies the topics that must be included in initial orientation and those that must be given before unsupervised contact.
- Part 9 - Resident Rights
 - No change to the length of time a facility must complete a MANE investigation, but the facility may submit an addendum to their report to the Department after an outside oversight authority completes its investigation.

Chapter 8 *(Facilities for Persons with Intellectual and Development Disabilities)*

Effective: January 14, 2022

- Part 10 - Resident Funds
 - Facility policies regarding resident funds shall comply with legal and regulatory requirements.
 - Updated who can access resident funds based on changes to the HCBS Settings Final Rule.
- Part 11 - Resident Records
 - Required documentation of resident's interaction in the community, individual preferences, and any special diet requirements in the resident record.
- Part 12 - Infectious Disease Prevention & Control
 - Infectious disease control must be based on nationally recognized standards.
 - Must have access to an individual trained in infection control.
- Part 13 - Dietary Services
 - Food safety training is required for staff who handle, prepare, or serve food.
 - Policies must allow for resident choice in meals and snacks and residents must be allowed to cook unless determined to be incapable of cooking in a safe manner.
- Part 14 - Medications
 - Monitoring of residents who are self-administering medications must be done by a licensed provider who is legally authorized to monitor medications within their own scope of practice.
 - All medications, including PRN medications, shall be administered only by persons authorized by law.
 - Residents may self-administer medications unless determined incapable to do so safely.
 - QMAPs may administer medication provided the facility complies with Sections 25-1.5-301 through 303, C.R.S. and 6 CCR 1011-1, Chapter 24

Chapter 8 *(Facilities for Persons with Intellectual and Development Disabilities)*

Effective: January 14, 2022

- Part 15 - Medical Services, Therapeutic Services, and Equipment, Supplies, and Assistive Technology
 - Added definitions of “therapeutic services,” “serious changes in weight” and “significant changes in weight” for clarity.
 - Additions to the requirements related to the use of unlicensed staff in providing therapeutic services, including training, monitoring, and documentation requirements.
- Part 16 - Nursing Services, Specialized Care, and Social Services
 - Rules related to specialized care were inadvertently removed when Chapter 8 was updated during the implementation of HB13-1314. These regulations were added back in to cover services considered specialized care (e.g. catheter care, tracheostomy care, oxygen saturation monitoring).
- Part 17 - Gastrostomy Services
 - Added specific requirements to clarify the components that are expected to be included in a resident’s written, individualized gastrostomy service protocol.
- Part 19 - Emergency Management Plan and Procedures
 - Language updated to add specificity when evaluating the risks to the facility that must be addressed by the emergency management plan and to add specific requirements to the emergency plan itself.

Chapter 26 *(Home Care Agencies)*

Effective: February 14, 2022

Overview of Changes:

- First comprehensive revision since the inception of rules in 2009.
- Removed duplication to Chapter 2 - General Licensure Standards.
- Clarified, streamlined, and reorganized language throughout the chapter.
- Updated language to support current industry standards and future training programs.

Chapter 26 *(Home Care Agencies)*

Effective: February 14, 2022

- Part 5 - General Requirements for all License Categories
 - Added language in consumer rights to ensure consumer safety and the provision of adequate care.
 - Emergency Preparedness was rewritten with the following changes:
 - Added a risk assessment
 - Bolstered existing requirements to support current industry standards and practices.

Chapter 26 *(Home Care Agencies)*

Effective: February 14, 2022

- Part 6 - Skilled Care
 - Removed the Professional Advisory Committee requirement to align with CMS and to reduce agency burden.
 - Modified the written summary report in the Plan of Care.
 - A summary will now only be required for consumers who experienced a change in status or needs that necessitated a change in the plan of care.
 - Added a section on telehealth supervisory visits to allow for nurse aide supervision via telehealth in certain circumstances.
 - Added clinical records to align more closely with CMS record requirements that support accountability and improved customer outcomes.

Chapter 26 *(Home Care Agencies)*

Effective: February 14, 2022

- Part 7 - Non-medical/Personal Care
 - Modifications made to Governing Body, Administration, and Agency Manager to provide more flexibility in meeting regulations and create a system of greater accountability through evaluation and analysis.
 - Added telehealth supervisory visits to allow for supervision of homemakers and personal care workers to be conducted via telehealth under certain circumstances.
 - Personal Care Worker requirements were restructured to more closely align with the training program being developed by HCPF.
 - The new language creates a stacked model where “homemaker” is now the base requirement and a “personal care worker” must meet all of the homemaker requirements, plus additional requirements specific to their training needs and responsibilities.

Questions?



Contact Information

Questions related to the regulations?

Chapter 2 - Anne Strawbridge
Anne.Strawbridge@state.co.us

Chapter 8 - Francile Beights
Francile.Beights@state.co.us

Chapter 26 - Monica Billig
Monica.Billig@state.co.us

Questions related to implementation?

Please contact the program that oversees your license category.

American Rescue Plan Act Updates

- New JBC and CMS Quarterly Reports coming soon! - Will be posted to [website](#) after submission on February 1, 2022
- Hiring continues
 - Check the [ARPA webpage](#) or the [State of CO Job Opportunities Page](#) for posts
- Phase 2 Projects launched on January 1, 2022

Project Title	Category							
	Workforce & Rural Sustainability	Crisis & Acute Services	Access for Underserved	Recovery & Innovation	Case Management	Tools & Technology	Emergency Preparedness	Quality
PHASE 2 PROJECTS								
Behavioral Health Transition Support Grants		x						
Expand Behavioral Health Crisis Teams		x						
IMD Exclusion, Risk Mitigation Policy		x						
Quality Measures & Benefits Training								x
P4P for PACE								x
CMS Quality Metrics								x
ACF Tiered Rates & Benefit				x				
Residential Innovation				x				
New Systems of Care				x				
Pilot CAPABLE				x				
Connect CMAs to CORHIO						x		
Centers for Excellence in Pain Management						x		
Member Tech Literacy						x		
Member-Facing Provider Finder Tool Improvement						x		
Improvements - System Communication [Interface with Trails]						x		
Public Awareness Campaign	x							
Establish a Training Fund	x							
Career Pathways	x							

American Rescue Plan Act Updates

Stakeholder Engagement and Communications



- ARPA Project Pulse Newsletter launching tomorrow - [SIGN UP HERE](#)
- ARPA Webpage expansion underway
 - New dedicated pages to each project category group
 - Articles, meetings announcements, meeting material archives, and more
 - New ARPA-specific stakeholder calendar on website
 - Similar to OCL Stakeholder calendar, but only ARPA project meetings
 - Birds eye view of all opportunities across all projects in one place
- Focused work to strategically consolidate and efficiently offer stakeholder engagement opportunities
 - Coordination across all projects
 - Respectful of valuable stakeholder time

Supplementals

BA-7: “Increase Base Wage for Nursing Homes”

- Requests a statewide, annual payment for nursing homes that pay a base wage of \$15 per hour to workers
 - \$4.8M total funds in FY 2022-23

S-10, BA-10: “ARPA Spending Authority”

- Requests formal spending authority for expenditures in the HCBS ARPA spending plan, which is a requirement of SB 21-286
 - \$179.0M total funds in FY 2021-22
 - \$251.4M total funds in FY 2022-23



Supplementals



S-16, BA-16: “HB 21-1166 Rollforward”

- Requests rollforward funding to implement HB 21-1166, “Comprehensive Care Coordination and Treatment Training Model,” across fiscal years due to a failed vendor procurement this year
 - \$0 total funds (rollforward authority only)

S-20, BA-20: “Skilled Nursing Facility Enhanced Payments”

- Requests temporary funding for nursing facilities to support sustainability and incentive hospital discharges
 - \$20M total funds in FY 2021-22

\$15 Base Wage Updates

Reporting:

- The letter to be provided to all impacted workers is [posted on the Department website](#)
- An Operational Memo will be sent out in February with the reporting tool and instructions for completion
- First report will be due no later than June 30, 2022
- HCPF_WageCompliance_FCU@state.co.us

\$15 Base Wage FAQs

Is the entire rate increase supposed to be passed through to the worker?

No, the base wage requirement is not a wage pass-through. Providers are receiving increased rates for eligible services so that workers can earn the base wage. Any additional funds can be used for other provider expenses at the discretion of the agency.

\$15 Base Wage FAQs

Will this rate increase be temporary or permanent?

This rate increase will be funded through the Department's approved American Rescue Plan Act (ARPA) spending plan through mid-April of 2024. The ongoing funding of this initiative is included in this upcoming year's Governor's Budget and is contingent on approval by the legislature.



COLORADO

Department of Health Care
Policy & Financing

\$15 Base Wage FAQs

Why didn't Denver County rates receive an increase?

Denver County rates did in fact receive an increase. In 2020, the General Assembly approved rate increases for specific services in Denver effective January 1, 2021 and January 1, 2022 to support increased costs associated with the Denver Minimum Wage.

New CDC Quarantine & Isolation Guidance



COLORADO

Department of Health Care
Policy & Financing

Updated COVID Guidance



- New [CDC Guidance](#) issued shortens the recommended isolation and quarantine period for the *general population*
- Throughout the pandemic, Adult Day and Day Habilitation Providers have been categorized by the state as [“limited healthcare settings”](#) and have followed CDPHE and HCPF guidance for those settings (*ie. not part of the general population*)
- CDPHE has updated Colorado’s guidance to match for the *general population* and they are in the process of updating guidance for health care workers. Until that guidance is updated, providers (including Day Program providers) should follow [Existing CDC Guidance for Healthcare Personnel](#)

Work Restrictions for HCP With SARS-CoV-2 Infection and Exposures

HCP are considered “boosted” if they have received all COVID-19 vaccine doses, including a booster dose, as recommended by CDC. HCP are considered “vaccinated” or “unvaccinated” if they have NOT received all COVID-19 vaccine doses, including a booster dose, as recommended by CDC.

For more details, including recommendations for healthcare personnel who are immunocompromised, refer to Interim Guidance for Managing Healthcare Personnel with SARS-CoV-2 Infection or Exposure to SARS-CoV-2 (conventional standards) and Strategies to Mitigate Healthcare Personnel Staffing Shortages (contingency and crisis standards).

Work Restrictions for HCP With SARS-CoV-2 Infection

Vaccination Status	Conventional	Contingency	Crisis
Boosted, Vaccinated, or Unvaccinated	10 days OR 7 days with negative test [†] , if asymptomatic or mildly symptomatic (with improving symptoms)	5 days with/without negative test, if asymptomatic or mildly symptomatic (with improving symptoms)	No work restriction, with prioritization considerations (e.g., asymptomatic or mildly symptomatic)

Work Restrictions for Asymptomatic HCP with Exposures

Vaccination Status	Conventional	Contingency	Crisis
Boosted	No work restrictions, with negative test on days 2 [‡] and 5–7	No work restrictions	No work restrictions
Vaccinated or Unvaccinated, even if within 90 days of prior infection	10 days OR 7 days with negative test	No work restriction with negative tests on days 1 [‡] , 2, 3, & 5–7	No work restrictions (test if possible)

[†]Negative test result within 48 hours before returning to work

[‡]For calculating day of test: 1) for those with infection consider day of symptom onset (or first positive test if asymptomatic) as day 0; 2) for those with exposure consider day of exposure as day 0



CS328856-A | December 23, 2021 5:27 PM

[cdc.gov/coronavirus](https://www.cdc.gov/coronavirus)



To see the CDC guidance anytime, please visit the CDPHE Isolation and Quarantine page ([covid19.colorado.gov/isolation-and-quarantine](https://www.colorado.gov/covid19/isolation-and-quarantine)) and click the Health Care Settings link

Isolation & quarantine

For Coloradans	▼
Winter holiday tips	
Vaccine	>
About COVID-19	>
COVID-19 treatments	>
Symptom support	>
Isolation & quarantine	
Testing & notifications	>
High risk populations	>

Last updated January 18, 2022.

Available languages: [Español](#) | [Tiếng Việt](#) | [中文](#) | [Soomaali](#) | [العربية](#) | [नेपाली](#)

Isolation and quarantine are important tools for preventing the spread of COVID-19. Both strategies keep people who may be contagious away from others who might catch the virus from them. The best place to isolate or quarantine is in your own home.

If you have been instructed to isolate or quarantine and have any questions, please contact your [local public health agency](#). These isolation and quarantine instructions apply to the general population in the community, including workplaces. They do not apply to schools, [health care settings](#), correctional settings, homeless shelters, or other high-risk congregate living settings.

Si le han pedido que se aisle o se ponga en cuarentena y tiene alguna pregunta, por favor comuníquese con su [agencia local de salud pública](#).

Isolation

If you have [tested positive for COVID-19](#), you should isolate. If you have symptoms of COVID-19 and are waiting

Quarantine

If you have been exposed to someone who has COVID-19, you may need to quarantine. Quarantine means staying

Non-Medical Transportation (NMT) Provider Requirements

- Effective January 2022, A new vendor will assume responsibility for credentialing all newly enrolling and revalidating NMT providers.
- Providers will send the necessary documentation to the vendor for a compliance review (driver documents, safety inspection, insurance)
- Following satisfactory review of submitted documents, the vendor will issue a Certificate of Compliance to the provider to submit with their new, maintenance, or revalidation HCBS provider application.
- New enrollees, as well as revalidating providers, will be required to provide any applicable compliance documents to the vendor by June 30, 2022



★ ***Vendor will only provide credentialing services for the HCBS provider community; they will not act in a Broker capacity***

HB 18-1376

Regulation of Individual Residential Services and Supports (IRSS) Providers

1. Grants the Department authority to promulgate rules
2. Together with the Division of Housing (DOH), the authority to inspect individual providers for compliance with HUD standards, as well as permissible corrective actions.

- The Department has passed regulations requiring all Host Homes and Provider Owned and Leased settings to receive a HUD inspection by the Division of Housing (DOH).
 - Those inspections were delayed due to COVID, but have resumed this winter.
- DOH also operates a database of all PASAs that operate Host Homes and Provider Owned and Leased settings.
 - This allows the Department to have information about all of these settings - where they are located, who lives there, who the direct care provider is

The Department now has much better oversight of these settings, ensuring safety requirements are met.

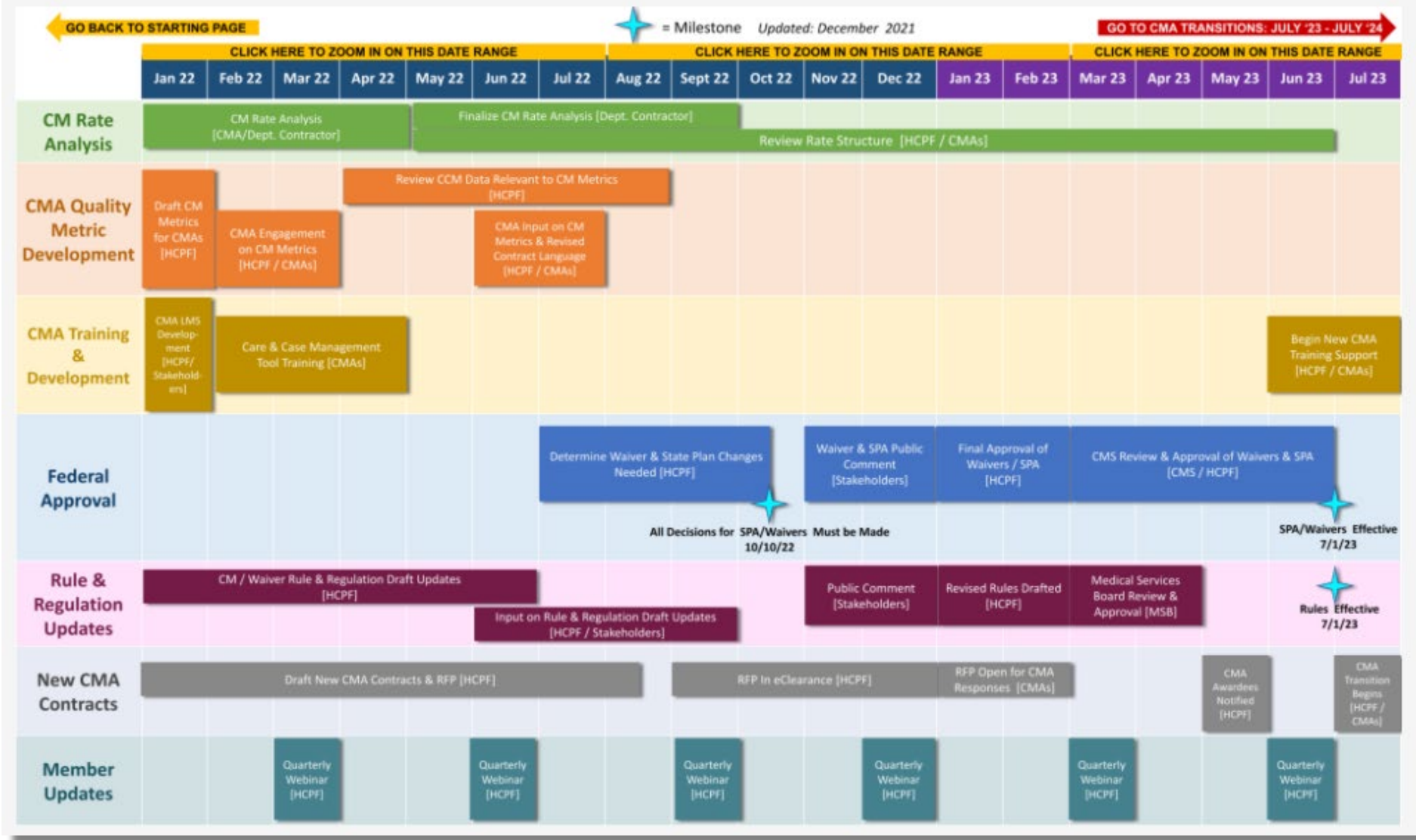


New Case Management Redesign (CMRD) Timeline

[INTERACTIVE VERSION](#)

[TEXT ONLY VERSION](#)

[MOBILE VERSION](#)





Questions & Discussion

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



COLORADO

Department of Health Care
Policy & Financing

New Memo Guidance

Issued 11/18/21 - 1/20/22

[Memo Series Page](#)

Case Management Agencies

- 11/30/21
[OM 21-082](#) Single Entry Point Monitoring Requirements
- 12/17/21
[OM 21-089](#) Children's Home And Community-Based Services Waiver (CHCBS)
- 1/5/22
[IM 22-001](#) Case Management Redesign Policy Update: Implementation Timeline

Facilities & PACE

- 12/7/21
[OM 21-083](#) Guidance For Options Counseling Activities During COVID-19; In-Person Meetings
- 12/17/21
[OM 21-092](#) InnovAge PACE Colorado Enrollment Sanction

HCBS Providers

- 12/10/21
[OM 21-086](#) Senate Bill 19-238 Reporting Reminder
- 12/13/21
[OM 21-087](#) HCBS ARPA Base Wage Rate Increase
- 12/17/21
[OM 21-090](#) Temporary Enhanced Rate For HCBS Waiver Respite Benefit
- 12/17/21
[OM 21-091](#) Oversight Requirements For Non-Medical Transportation (NMT)
- 1/11/21
[OM 22-001](#) ARPA Enhanced Home Modification Benefit





Webinar Satisfaction Survey (very short!)

www.surveymonkey.com/r/ProvUpWeb

Stay Engaged



[Stakeholder Engagement Calendar](#)



[2022 Memo Series](#)



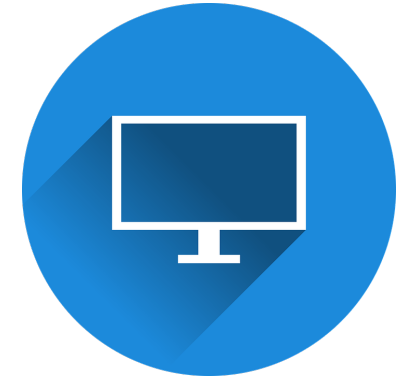
[Email Us](#)



[ARPA Webpage](#)



[Subscribe To The OCL Newsletter](#)



[OCL Webinar Webpage](#)

Thank you!

