

Participant-Directed Programs Policy Collaborative

Minutes Approved by Stakeholders

February 24, 2021

John Barry opened the meeting, introduced the Google Meets Platform and how to work the meeting;

Attendance and voting rights were established:

January Stakeholder Minutes: There were two typos pointed out that John will correct. With these changes the minutes were approved without objection and will be posted online.

Open Forum #1:

1. Rebecca Sturdevant from PPL had a quick announcement that they have a new account specialist for Colorado. Her name is Ashley Young and she will be attending in the future.
2. Julie Reiskin said that HCPF sent out Estate Recovery Letters and they went to some people erroneously. These are letters that should go to people who are over 55 and using LTSS. If someone is on Medicaid under those two circumstances the state sells their home after they die to help offset the cost of their services. If someone has a dependent child, an adult disabled child, a spouse or sibling living in the home that person gets to stay until they die. If someone is in the home and leaving will cause homelessness that person can petition the department for hardship exemption. People that got a letter who are under 55 or not on LTSS should return with a note that this is not relevant to that person. If anyone has questions, Julie said the CCDC advocacy team was dealing with this and HCPF has admitted letters were sent out in error.
3. There was a lot of interest in vaccines for people who are homebound and questions about prioritization. Julie offered to set up a speaker about vaccines for the March meeting. She said the state is working on a way to do home vaccines throughout the state. There was discussion about priorities for the state (two days after the meeting the Governor changed priorities making it more inclusive for people who require in-home services). The vaccine website at CDPHE is the best place to get information. Julie clarified that HCPF does not make these decisions nor do legislators.

ACUMEN CONTRACT:

Jessica gave an update: Acumen will no longer be providing services after March 15. The deadline was 2/10 to select a new vendor or they would be sent to PALCO. The next time to choose is in June. You need to do paperwork so make sure you connect with PALCO or PPL to get the paperwork done no later than March 12 to assure no delay in payment by March 15 payroll.

Julie said to make sure to double check that people are properly listed as a family caregiver or not because in the past she had people listed improperly as family caregivers and they were not and taxes were not paid properly. Julie said she did a transition from Acumen to PALCO and it went very smoothly.

Jason Smith posted: If you have any questions, our contact information is 1-866-710-0456 or co-cdass@palcofirst.com.

Debbie said she got an inaccurate W2 form from Acumen and asked if she can still call and get it fixed. Jessica said she would work with Debbie and Acumen off line to get this fixed.

Gabrielle said this may be her last PDPPC meeting and said it was their pleasure to provide services and committed to working with other FMS for a smooth transition.

Cheryl Hargett-Dorsett also had W-2 questions and Jessica will follow up.

Jessica Corral asked that people reach out to her with any problems or concerns. Her contact information is Jessica Corral Participant Directed Programs Contract Specialist jessica.corral@state.co.us 303.866.3504.

EVV UPDATE:

Jon Lentz gave an update. [A memo to that effect is here](#). They were going to deny claims if providers were not on EVV as of 3/1 but they are not doing this. They will let people know about the new date at least one month before it goes into effect.

Specifically to CDASS they have been working with the FMS vendors to be sure everything is working well. It is moving along well.

Two types of compliance:

1. FMS vendors submitting info to department
2. Member compliance with EVV. They are working on a protocol.

There is a lot of background work going on re EVV. As they are figuring out the backend this will help figure out next steps.

Questions:

1. Will there be a "limit" on manual entry before there is a problem with payment.
2. Concern about employees not being able to enter times due to the apps timing out, then the employee forgets to do it later. This is a huge issue and happens at least once a day.

John Lentz from HCPF said those issues have been built into EVV solutions work with FMS vendors. Julie said that we have no control over the software selected by the vendors and are not allowed to have direct communication with the software companies about problems we experience. John said they are interested in this conversation. They know there are people involved. There will always be the need for correcting records. If there is an issue with contacting an FMS vendor, we should copy the EVV inbox if we cannot get answers or connect with the software vendor. EVV@state.co.us. This will make sure they have it on record.

Jessica said there are specific requirements for systems to work in specific ways but also flexibility for FMS to have some features. Understanding what areas are hard is helpful so looping Jessica in is also helpful. If solutions are not available ADA accommodation may be the answer.

SICK TIME:

As discussed before SB 20-205 was signed last July. This is the Healthy Families and Workplaces Act and requires all employers to provide paid sick time. January 2021 requires employers with 16 or more to comply and by January 2022 all employers must comply.

Also Prop 118 passed and this will be a couple of years away but we want to make sure people are ready for this.

HCPF is working with FMS vendors and applied self-direction and CMS to figure this out. Sick time has not been included for CDASS but now it needs to be. They are confident they will be ready for the 1/1/22 launch. They have an interim process that will be communicated in the next week or so to allow CDASS members to authorize sick time through their existing allocation using a form that will replace the current COVID form. That form was quickly pulled together during the pandemic but with the new rules we

have to allow sick time for more reasons. It will go to the memo series and through the John Barry list.

Curt said FMLA requires employer and employee contribution and wondered how it applies. Erin said that this is part of Prop 118 passed by the voters. There will be employer contributions. This will be figured into how we pay. There is no employee contribution in SB 20-205. If they work 30 hours they accrue 1 hour of paid sick leave. Does not matter how long it takes to get 30 hours.

Questions:

1. Curt asked if employers with fewer than 10 workers had to contribute? Erin will follow up
2. Julie asked if employers who employ more than 16 people will be notified. Yes, FMS will reach out.
3. Julie asked if we can go over the 1 hour per 30 if we choose. The law allows for lots of flexibility. Erin is not sure right now. One complication is they need to come up with a system parameter that will work for everyone. She will get back to us.
4. Renee asked if there will be a way for us to be involved with codes, EVV, and how this works. Erin said they need to get this done on time but always want to use the opportunity to discuss and engage people and will try to schedule something for this. Erin said there are many new employer responsibilities.
5. Irina asked if they had an update on hourly pay for Denver workers who may work more than 4 hours in Denver but do additional hours in another city. If the client lives in Denver the Denver minimum wage should be paid even if the worker and client go elsewhere. If an employee has two different clients they may have two different rates. The agency has to figure out how they schedule. Erin said she would get her information HCPF got from the Department of Labor. David Bolin said regular minimum wage applies for all clients outside of Denver. Erin said that Denver minimum wage is complicated and the system is either Denver or not and they do not know where people go –so the rate is either Denver or not Denver. There is info on the City and County of Denver website. If a member lives in the City and County of Denver, they have a higher rate.

Eligibility Updates:

Jennifer VanCleave: The Dept of Health and Human Services said they plan to extend the Public Health Emergency (PHE) through the end of the year but they have to do it 90 days at a time. They have said they will give all state agencies at least 60 days

notice before ending it to give states time to wind down. The PHE means no one gets kicked off of Medicaid. As part of this, CO and other states are trying to come up with the best way to re-determine eligibility for people maintaining eligibility only due to the public health emergency. No updates yet. They are reviewing cases that are currently having eligibility maintained and reaching out to members to get updated info. They are trying to get them updated and on a normal certification prior to any end of the PHE.

Last month they were able to release guidance to allow application assistants to help folks remotely and act as a limited Authorized Representative to sign an application for individuals. If you know anyone that needs help they can help. The memo can be found here: [HCPF PM 21-001 Remote Application Assistance](#).

HCPF has picked up work again on a project that was paused at start of pandemic, called PEAKpro to help with better communication between case management agencies and counties, as well as decrease time to get updates to and from counties for individuals utilizing LTSS.

Questions:

1. If someone has a period of ineligibility (POI) can they be closed? Jennifer explained this is a time when the person has Medicaid but not waiver or long term care services for a period of time. This does not apply to people on Buy In. CMS has confirmed that the assessment of a POI is still allowable and PHE does not change or turn off this rule to check for transfers of assets without consideration of fair market value. However, a POI will not close a case, it will only limit the individual to state plan benefits. Sometimes a POI can be a small amount of time, because it depends on how much money or assets were sold or given away for less than what they were worth. If the asset is returned the POI can be reversed. Another part that is important is that there is an undue hardship request process. If a POI will cause inability to provide for food or shelter, or would put an individual's health or life in danger etc, the member or someone acting on their behalf can send a written request for an Undue Hardship Exception to their eligibility site. They have to provide evidence of the hardship and also evidence of what they have done to recover the asset. The updated POI notices are much better, and give instructions to the member on how they can request an Undue Hardship exception.
2. Cheryl asked if someone got an inheritance of \$10K and how eligibility would be affected. Jennifer said if someone is applying for Medicaid proceed as normal, income in month received or asset after, as the PHE does not waive income or resource limits/requirements. If they were already on medical assistance during

the PHE and they receive a large inheritance, they would not be denied or closed due to excess resources because they would be on forced pass. The counties would later reach out to see if there was evidence of the spenddown. Renee asked about this example for HCBS and Jennifer said it would be dealt with the same way for any program with a resource/asset test. During the PHE the only way to close is if you request to close your benefits, die or are no longer a Colorado resident.

EMPLOYER BASIC SKILL TRAINING:

Allyson Weitzel with Consumer Direct said that they want to create some training for people. She asked "What are unique challenges that people find are not addressed during the existing onboarding training?" New people do not know what to expect. They want to find a way to develop training for current employers that could be a benefit to them. Topics could include unique hiring situations, managing conflict, working with case managers, etc. They want to get this rolling. Their goal is to come up with a training to be delivered by the end of this year. They would like to work with PDPPC.

What are challenges, what resources would we like to see? What would be a good benefit to others? Consumer Direct is planning to send a survey in March to all PDPPC participants and also want to start a workgroup and this will be hosted through Consumer Direct (not HCPF). They want a list of people who are interested so asked members to either email or call them at 844-381-4433 and ask to speak with Allyson or Emily in CO office or email to infocdco@consumerdirectcare.com.

Mark Simon said he hopes they will include employer liabilities on the training.

Subcommittee Update

There is a lot going on and always opportunities to participate.

Jessica covered the Background Check Workgroup: The meeting on the 3rd Thursday 11-12. They finished their first goal, to update the barrier crimes list being published via department memo. They are now working on exploring needed changes to the FMS process.

New opportunities

IHSS agency as AR workgroup –Kristine DosSantos is leading.
kristine.dossantos@state.co.us.

EVV employer compliance protocol workgroup - coming soon

Utilization Review Utilization Management or URUM: Kristine said this group finished up an HMA documentation guide [-a memo](#) went out this week on this. Other work will include starting next month Telligen will be attending and work with members to iron out any issues that come up with this work, discuss any efficiencies to make process work smoothly and improve getting services in place more quickly with less issue. Anyone interested can email Kristine –see email above.

Erin said they cannot make policy changes without us and they want us to attend.

CALENDAR

John Barry announced a new Office of Community Living (OCL) community calendar feature. [This link](#) will take you to the calendar

This is for public meetings related to OCL. You can subscribe to the calendar and not have to go to the website and you can send suggestions to John. They will fill this out through the end of 2021 as they know about meetings.

CASE MANAGEMENT:

Victor Robertson –

SEP Agency Contracts:

The three SEP agencies began operations 7/1/2020 as Emergency Procurements were required to complete the formal RFP process this year:

Starpoint- Fremont and Custer Counties

Community Connections - Archuleta, La Plata and San Juan Counties

Costilla County - Costilla and Conejos Counties

Starpoint and Community Connections were awarded the contract and will continue to serve as the SEPs in their regions. Costilla County was not awarded the contract, as it went to Rocky Mountain Health Plans (RMHP). This change will be effective on July 1, 2021.

He also wanted to talk about changes with the Professional Medical Information Page or PMIP: HCPF was able to make changes to waiver agreements and got CMS approval to

remove the requirement for this document for continued stay reviews. This form is still needed for new waiver enrollment or for clients moving from one waiver to another. This was welcome news and the group applauded this decision.

Curt asked if all SEPS are aware of the SLS waiver. Victor said he hopes so and hopes CCBs are aware of other waivers. He said that since they merged units at HCPF things have been better and part of their goal is communication to all case management agencies is consistent – they combined meetings as well.

As we move to new system more emphasis on choice of program for people.

Open Forum #2:

Mark Simon: Wants to follow up on Julie's comments about estate recovery. If there are spouse or dependent adult children or dependent children the state cannot take the house until they die.

Maria Rodriguez wanted to ask about being reimbursed for meetings as it causes a phone bill. John said the phone numbers with Google meets are not toll free. They have a system where HCPF calls out so it is not on their bill if they do not have long distance. They can do this with anyone. If this is showing up on your bill let John know 303-866-3173 or john.r.barry@state.co.us.

Gabrielle said that Acumen is disputing the HCPF contract breach claim referenced in last month's minutes but this does not change anything and they remain committed to a successful transition.

The meeting adjourned at 3:30 p.m.

Respectfully submitted,

Julie Reiskin