

# Long-Term Services and Supports Overview

PIAC Meeting, June 2020

# Overview

- What Are Long-Term Services and Supports (LTSS) and Who Uses LTSS?
- What Are Home and Community-Based Services (HCBS)?
- How Can RAEs Work with Members to Utilize LTSS?
- Ongoing Engagement is Essential!

# Client Story

Dana is 48 years old and lives in subsidized housing in Denver. She has a history of severe mental illness but has not been hospitalized for many years. She has a diagnosis of obesity, diabetes type 2, high blood pressure, dental problems. She uses a wheelchair because of “bad feet”. She is in rehab center because she was sent there after she fell and broke a hip. She has limited abilities to read and write. A friend who brought mail to the rehab center discovered a letter from property management saying that her lease was not going to be renewed because of excessive 911 calls. Her lease is up July 01. Her planned discharge is June 25<sup>th</sup>.

# Client Story

Joe is 59 and is in a Mesa County nursing facility after the homeless shelter in town said they could not accommodate his needs. Joe is an above the knee amputee and uses a manual wheelchair (that does not fit very well). He lived in public housing in a town about an hour away with his elderly mother until she died in December. The lease was in her name. He is a veteran but refuses to work with the VA. He will not give any information about his service. He shows obvious signs of PTSD but is not interested in mental health services. He has had a couple of falls out of his chair, often when drunk, and injured his shoulder and his movement is very restricted.

# What Are Long-Term Services and Supports?



**At Home** (e.g. personal or family home; group homes; assisted living facilities)



**In Community** (e.g. day programs; supported employment)



**Within Institutions** (e.g. nursing homes; intermediate care facilities)

# Long-Term Services and Supports System

## Direct Services

- At home
- In community
- In facilities



## Case/Care Management

- Community Centered Boards (CCBs)
- Single Entry Points (SEPs)
- Regional Accountable Entities (RAEs)

# Who Receives Long-Term Services and Supports?

7%



## Children & Adolescents

ages 20 & younger  
& qualifying former  
foster care youth

44%



## Adults

ages 21-64

49%



## Older Adults

ages 65 or older

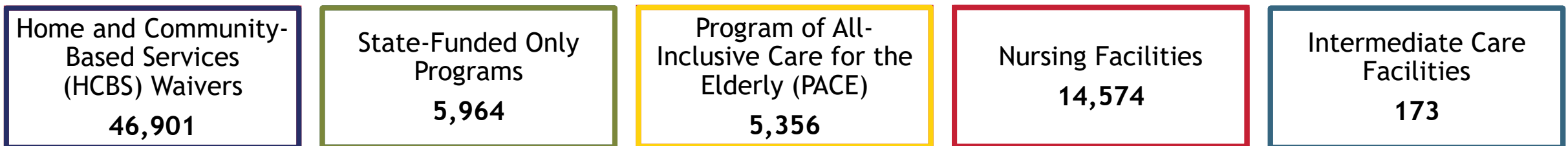
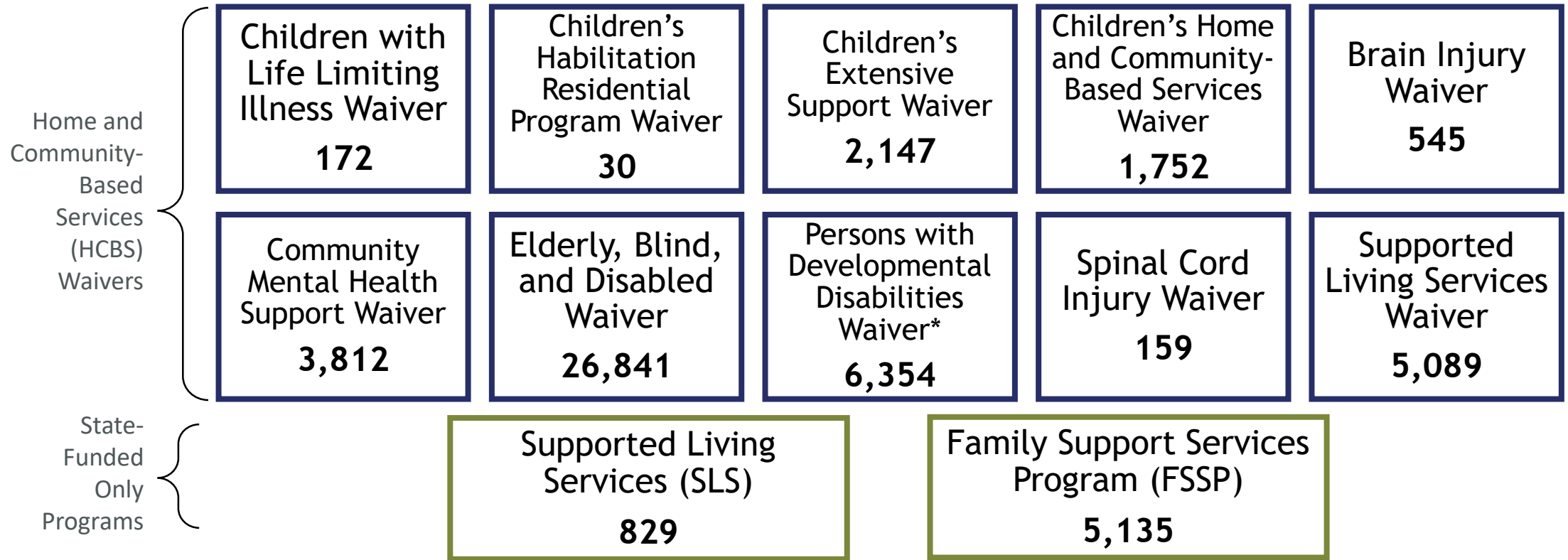


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SOURCE: FY17-18 data; Data represent percentage of people receiving Medicaid LTSS in various age groups.

# Long-Term Services and Supports Programs





# HCBS versus “Regular” Medicaid

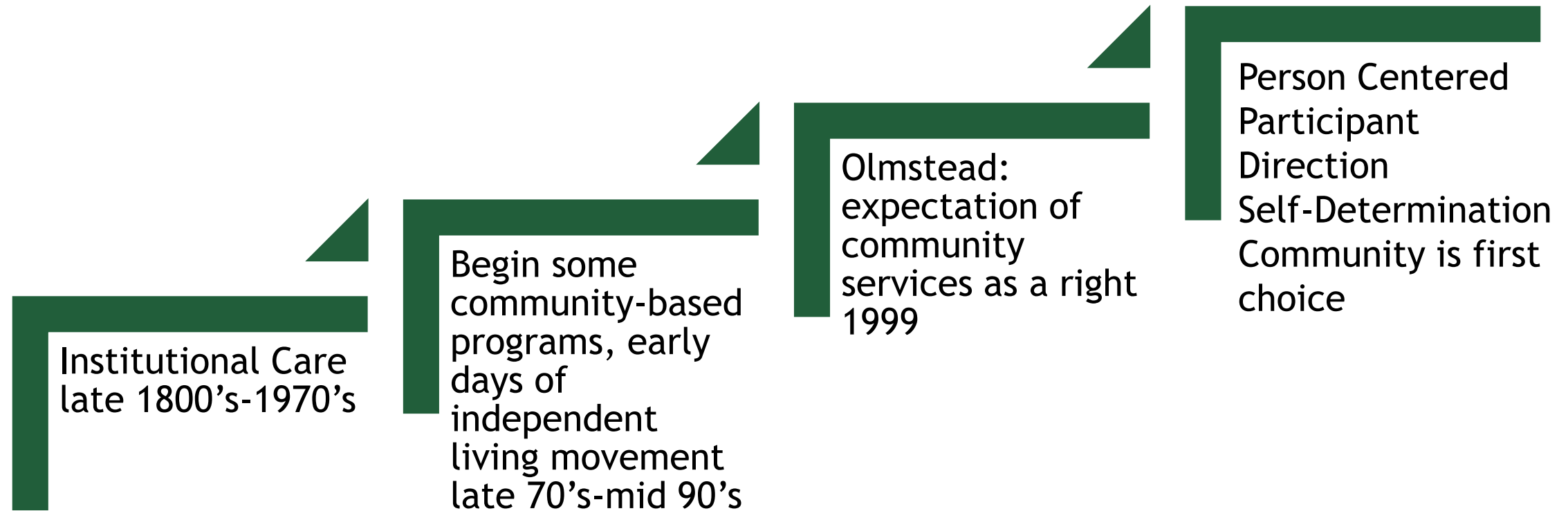
## HCBS Waivers

- Non-medical services
- Focus is on what is needed to keep out of institutional setting
- Eligibility based on functional deficit
- Specific benefits usually with capped amounts that cannot be stretched even when need is obvious
- Always includes access to “regular” Medicaid”
- Each waiver serves specific number of people

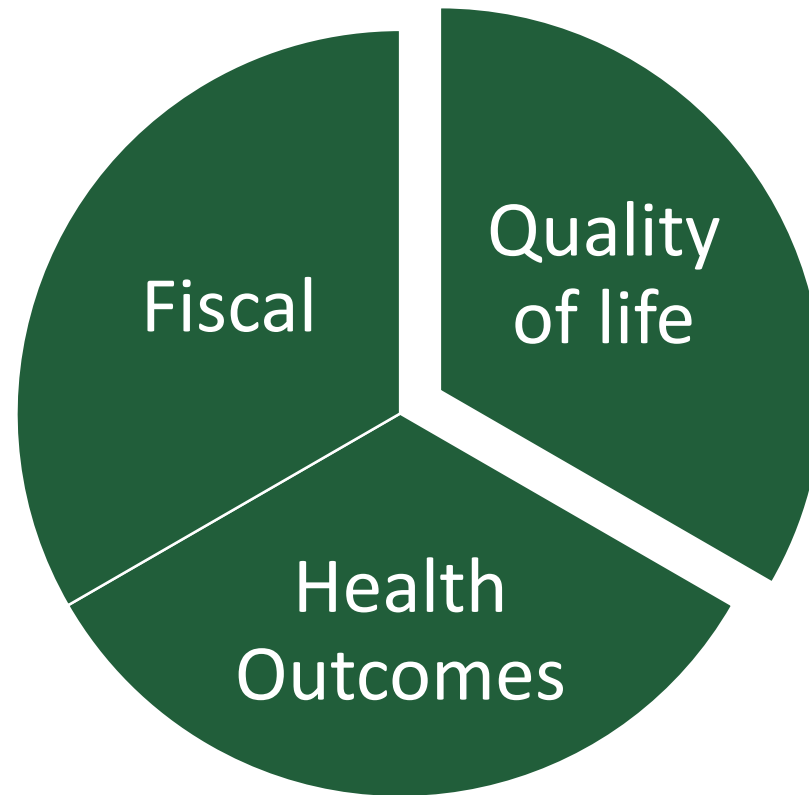
## “Regular” Medicaid

- Medical services
- Focus is on what is medically necessary
- Eligibility for the program is based on fitting in a specific category ; for each service is based on medical necessity
- All services must be provided in an amount, duration and scope sufficient to achieve the purpose-limits can be imposed for convenience but can be (and sometimes must be) exceeded depending on the benefit and need
- Medicaid does not entitle someone to HCBS
- Must serve all eligible clients

# Brief History of Community Based Services



# Benefits of HCBS



# Understanding Members' Unique Needs

**80%** of members receiving **Long Term Services and Supports** have one or more chronic condition

- Compared to **36%** of members **not receiving LTSS**



**19%** of members receiving LTSS with a chronic condition have 5 or more

# Services

- HCBS offers specific additional services for each waiver.
- Unlike regular Medicaid the waiver can set out specific service limits as long as the state can still meet the assurances required by CMS.
- Services should be tied to the ability to live in the community and stay out of institutions but they can also be geared towards integrated community life
- The list here is not exhaustive-for services connected to each waiver go to the Long Term Care Section of the Department Web Page under Case Management tools
- [Waivers](#)

# Personal Care

- Personal care is UNSKILLED and includes some types of bathing, dressing, hygiene, as well as services such as assisting with ambulation, assisting with exercise, accompanying client in community and protective oversight. Also includes assistance with errands, meal preparation, etc.
- Rate for personal care is \$19.82 an hour to the agency or \$18.16 for CDASS. This leaves a very low hourly rate for the worker.
- The DD system has several variations of personal care (hiring someone to help with something) with various rates.

# Homemaker

- Cleaning the house and doing laundry
- Rules are focused on elderly people who may live in one room of a home and are not geared towards a client who is head of household. Rules talk about only cleaning the permanent living space of the client-as if the client does not live in the whole house. Does not include any outdoor work (such as shoveling snow).
- Rate the same as personal care.
- DD has enhanced homemaker rate and service.

# Adult Day

- This is a service that is generally respite for family care providers of clients who cannot be left alone so that the family member can work. There are a few therapeutic or skill building programs.
- They are supposed to provide activities, outings, and sometimes therapies for clients.
- Clients can go any from half a day to five days a week.
- DD waiver limit all day services to 24 hours a week. There are many types of “day” supports in the DD system including supports for employment and various “habilitation” programs with various rates associated.



# Assisted Living

- This is an HCBS benefit. Assisted living is for clients who do not need a lot of care but for whom living alone is either not desired or possible. Assisted living services may include congregate meals, assistance with medication, light housekeeping (very light). Some facilities have activities. Assisted living is anything from 4 people living in a house to a large facility serving more than 100 clients.
- Clients are required to give most of their income to the facility for room and board (Medicaid cannot pay room and board).
- Quality varies significantly

# Electronic Monitoring

- This is usually the “I’ve fallen and cannot get up” button but can be much more. There are medication reminder systems, wandering alert systems, and even systems that allow clients who are immobile to open doors and control switches. If a client has ONLY electronic monitoring as a service it might be an indicator that they are on HCBS primarily for Medicaid. (This should not be used to kick people off of the program, the client might have significant needs that are being met elsewhere). These individuals should be assessed and if appropriate OFFERED buy in when it is available but should not be pressured or told that they will lose HCBS as they have passed the assessment and screening.
- Generally available to clients who are alone on regular basis or not able to speak or use a telephone.

# Non-Medical Transportation

- Not available for children
- For clients outside of DD it is only available for 2 round trips, or four one way trips per week excluding day program.
- Clients can use for day program up to 5 times a week and those clients can have the additional 2 trips.
- Availability is supposed to be statewide but it is not
- Some SEP agencies are still requiring clients to justify how each specific ride keeps the client out of nursing facility. This is not appropriate as the CAP of 2 trips per week eliminates the need for this level of micro management. All people need to go out at least twice a week just to take care of business.

# Vocational

- The DD waivers offer supported employment as an option. During the waiver changes that occurred in 2006-2008 changes were made in this benefit to assure no duplication with DVR services.
- There are no vocational services for clients in other waivers and clients are specifically prohibited from using waiver services to support work.

# Community Participation

- Services in the DD system that have origin as alternative to vocational services, but that have expanded and become the “norm” for DD day program. There are several forms of this, facility based, individual (is rapidly decreasing), and various rates.

# Home Modification

- This is a once in a lifetime benefit of \$14,000 (clients in IDD waivers have more)
- For increasing accessibility to the home
- Because it is once in a lifetime clients who are younger are encouraged to try to save it if they are renting
- Usually used for ramps, widening doorways, bathroom access, sometimes used for kitchen access for clients who are head of household or single

# Specialized Medical Equipment

- Available only under BI and DD waivers
- For items that are not covered under the regular state plan benefit
- Examples include prism glasses for someone with brain injury or a tandem bike for adult with autism and diabetes who needed to be physically active but who would not be safe doing so independently.

# Other services

- Respite is available in all adult waivers-usually facility based but can be community based
- Behavioral services are available in the DD programs, along with mentorship, dental and vision services.
- Residential options are available in the HCBS DD system, most clients are in host homes or small group homes. CHRP is also a residential waiver and is provided in specialized foster homes or small group homes.
- The Brain Injury Waiver also offers a supported living program, which is campus based 24 hour programming focusing on people with significant brain injury and rehabilitation needs.



# Delivery Method

- There are specific services and how the services are delivered. Most services have only one method of delivery.
- Some services have a choice of delivery method. Those services are Personal Care and Homemaker -options are available in some waivers.

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# Options

## Consumer Directed

- Program is called CDASS
- Also includes long term home health as health maintenance
- Allows for complete control including budget and complete responsibility including backup

## In Home Support Services

- Provides flexibility re who can be hired (exempted from nurse practice) also includes health maintenance
- Client can hire who they want and control scheduling
- Agencies manage budget and provide backup

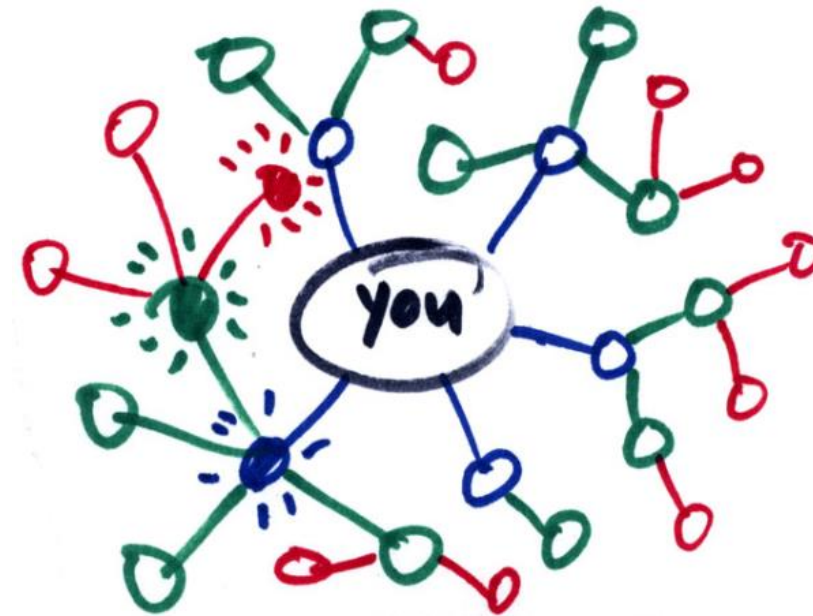
# Family Provider

- Family members can receive payment in any of the following ways:
  - Family members can be paid CDASS providers for up to 40 hours a week.
  - There is a benefit in most waivers under personal care called “relative personal care” which is a very low daily amount amounting to less than 2 hours a day of care.
  - Family Caregiver Act allows clients in the HCBS-DD system to receive care in the family home, and for clients in both DD waivers to receive care provided by family members. The conditions are significantly restrictive at this point.
  - Home Care Allowance is not a Medicaid program but another direct pay option. Cannot use HCA and HCBS together



# Connection to RAE

- How could a RAE help in client stories?
- Where is there overlap between HCBS and State Plan?
- Where are the gaps?



# Ongoing engagement is essential!

Build Trust

Develop Working Relationships

Establish Communication Channels

# Client Story

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# Questions?



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# COVID-19 Response and Resources



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# Guidance Issued

## Case Management Agencies

### Operational Changes

- [OM 20-049](#)
- [OM 20-027](#)
- [OM 20-034](#)
- [OM 20-037](#)
- [OM 20-045](#)

### Critical Incident Reporting for COVID-19

- [OM 20-044](#)

### Level of Care Changes

- [OM 20-053](#)

### Transition Coordination

- [OM 20-056](#)

### PASRR Changes

- [OM 20-043](#)

## Facilities and PACE

### Infection Control And Prevention of COVID-19 in Nursing Homes (CMS)

- [CMS QSO-20-14-NH](#)

### Telemedicine in Nursing Facilities

- [OM 20-032](#)

### Training & Certification

- [OM 20-038](#)

### Rate Increase

- [OM 20-050](#)

### Options Counseling

- [OM 20-054](#)

### Stimulus Payments

- [OM 20-059](#)

### Civil Money Penalty (CMP)

- [IM 20-021](#)

## HCBS Providers

### Long-term Care and Congregate Settings

- [OM 20-017](#)

### HCBS Therapy Services

- [OM 20-020](#)

### Guidance for Class B Providers

- [OM 20-023](#)

### Changes to Benefits & Services (Table)

- [OM 20-046](#)

### Telemedicine

- [Temporary Policy](#)

### Non-medical Transportation

- [OM 20-031](#)

### Residential Guidance

- [OM 20-035](#)

### Host Home Inspections

- [OM 20-036](#)

### Retainer Payments

- [OM 20-039](#)

### CDASS Sick Time

- [OM 20-047](#)

### Changes to Benefits & Services Rates (Table)

- [OM 20-048](#)

### Flexibility in Hiring

- [IM 20-019](#)

### Safer at Home for Day Programs

- [OM 20-057](#)

### CC & SCC Clarifications

- [OM 20-060](#)

### Additional Provider Relief Funds

- [IM 20-024](#)

All COVID-19 and LTSS related memos and FAQs can be found here: [www.colorado.gov/hcpf/long-term-services-and-supports-covid-19-response](http://www.colorado.gov/hcpf/long-term-services-and-supports-covid-19-response)

# Resources from Others

- Institute for Community Inclusion (ICI) released a [series of publications](#) on **providing day and employment services** during the COVID-19 pandemic
- Multicultural Council (MCC) released [COVID-19 Culturally and Linguistically Diverse Resources](#)
- [Video: Supporting Grayson's Family](#), includes key themes that are relevant to home visiting during the COVID-19 pandemic
- [Video: Una visita en el hogar con la familia de Liam \(A Home Visit with Liam's Family\)](#), Ohio occupational therapist Marta Gonzalez delivers an early intervention home visit during the COVID-19 pandemic, illustrating how home visits using video conferencing can continue to support children and their families (in Spanish with English sub-titles)

# CDC Guidance for People with IDD

The Centers for Disease Control (CDC) has released COVID-19 guidance, with a primary focus on family members and caregivers who support people with developmental disabilities.

- [Guidance for Direct Service Providers](#)
- [Guidance for Group Homes for Individuals with Disabilities](#)
- [Guidance for Direct Service Providers, Caregivers, Parents, and People with Developmental and Behavioral Disorders](#)
- [People with Developmental and Behavioral Disorders](#)

Here is a link to the CDC website:

[www.cdc.gov/coronavirus/2019-ncov/hcp/developmental-behavioral-disorders.html](http://www.cdc.gov/coronavirus/2019-ncov/hcp/developmental-behavioral-disorders.html)

# Resources

## HUD Webinar on cleaning and disinfecting

- CDC and HUD hosted a webinar on cleaning and disinfecting to protect individuals residing in HUD-assisted multifamily properties. A representative from HUD's Multifamily Housing in conjunction with representatives from the CDC and Washington State Dept. of Health presented on their interim guidance on facility cleaning when a person with coronavirus infection is present or suspected. [View the Presentation.](#)
  - **TARGET AUDIENCE:** Managers and maintenance staff of HUD-assisted multifamily housing properties

# Resources

## Alzheimer's Association Colorado Chapter Resources for nursing homes and memory care

- The Alzheimer's Association knows that the COVID-19 pandemic is placing tremendous pressures on facilities and caregivers, and they have prepared a [guidance document](#) to assist staff in caring for persons with dementia in emergencies in long-term and community-based care settings. It also provides guidance on the importance of person-centered care – the essential starting point for optimal care.
- More support is also available at [alz.org/professionals-covid](https://www.alz.org/professionals-covid) or at 800-272-3900

# Resources

## New CDC LTC Frontline Staff Training Webinars

- These short webinars are all published on the [Key Strategies to Prepare for COVID-19 in Long-term Care Facilities](#) (LTCFs) web page at the bottom under a “Webinar Series” section. CDC reports that “These new webinars are intended to be a training tool/resource for frontline long-term care staff members.”
- Here are the direct links to each webinar:
  - Sparkling Surfaces - <https://youtu.be/t7OH8ORr5lg>
  - Clean Hands - <https://youtu.be/xmYMUly7qiE>
  - Closely Monitor Residents - <https://youtu.be/1ZbT1Njv6xA>
  - Keep COVID-19 Out! - <https://youtu.be/7srwrF9MGdw>
  - PPE Lessons - <https://youtu.be/YYTATw9yav4>

# Resources

## Other Links

- [LeadingAge Colorado COVID-19 Updates & Resources](#)
- [LeadingAge](#)
- [Argentum](#)
- [Colorado Department of Public Health & Environment COVID-19 Long-term Care Facility Page](#)
- [Health Care Policy & Financing COVID-19](#)
- [Centers for Disease Control and Prevention](#)
- [Centers for Medicare and Medicaid Services](#)



# Reminder: Personal Protective Equipment

If you or your organization are experiencing a shortage or outage of personal protective equipment (masks, gloves, gowns, etc.) to conduct essential or life saving functions during this crisis, please reach out to your **local emergency manager** or **local public health department**.

[Find Your Local Community Emergency Manager](#)  
[Find Your Local Public Health Department](#)

To report issues in  
obtaining PPE please  
notify:

**Sadie Martinez**  
**Access and Functional Needs Coordinator**  
Office of Emergency Management  
720.610.1691  
[sadie.martinez@state.co.us](mailto:sadie.martinez@state.co.us)

# More Information



[www.cdc.gov/coronavirus/2019-ncov/](http://www.cdc.gov/coronavirus/2019-ncov/)



[www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page](http://www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page)



[covid19.colorado.gov](http://covid19.colorado.gov)



Local Public Health Agencies

[www.colorado.gov/cdphe/find-your-local-public-health-agency](http://www.colorado.gov/cdphe/find-your-local-public-health-agency)



[www.colorado.gov/hcpf/COVID](http://www.colorado.gov/hcpf/COVID)

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# Thank you!