Becoming a Remote Supports Provider

A Training for New Remote Support Providers

December 2021

What You Will Learn

- What is Remote Supports
  - ➢ How do I become a Remote Supports Provider
  - ➢ Who is Eligible to Receive Remote Supports

- Medicare vs. Medicaid

- Provider Responsibilities

- Medicaid Billing Process

- Resources and Glossary

- Certificate

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What is Remote Supports?

What is Remote Supports?

Remote Supports is the provision of support by staff at a remote location who are engaged with the participant to assist and respond to the participant's health, safety, and other needs through technology/devices

Individual interaction with support staff may be scheduled, on-demand, or in response to an alert from a device in the remote support equipment system

The type of equipment and where it is placed in the home will depend upon the needs and preferences of the individual

Examples of Remote Supports

Examples of Remote Supports can include:

- Technology for Cooking Safety
- Overnight Support
- Fall and Wandering Detection
- Prompting for Activities of Daily Living

The technology and support will be specific to each person's skills, goals, and support needs.

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Remote Supports vs. Telehealth

Remote Supports can be used to replace in person support for tasks that do not require hands on assistance. The technology used is the service being provided.

Telehealth is a service delivery option for HCBS waiver services that do not include personal care. Telehealth is used as the delivery option for receiving specific services. The technology acts as the modality for delivery.

Who is Eligible to Receive Remote Supports?

Who is Eligible for Remote Supports?

Remote Supports will be included on the following HCBS Adult Waiver Programs
- Brain Injury (BI) Waiver
- Community Mental Health Supports (CMHS) Waiver
- Elderly, Blind, and Disabled (EBD) Waiver
- Spinal Cord Injury (SCI) Waiver
- Supported Living Services (SLS) Waiver

Who is Eligible for Remote Supports?

Remote Supports shall only be authorized for participants who:

Live alone or are alone for significant parts of the day, have no regular caregiver for extended periods of time and would otherwise require routine supervision

- ➤ **Remote Supports may not be used when the participant lives in a home with other wavier participants**

Remote Supports will only be approved when requested by the participant and only for participants who have the ability to utilize the particular system being requested

Learning Checkpoint 1

Take a moment to review these checkpoint questions.

Question	TRUE	FALSE
Remote Supports is an HCBS waiver benefit.		
To be eligible for Remote Supports the participant can live independently or in a group residential setting.		
Remote Supports is another name for Telehealth.		
The type of equipment used and where it is placed in the home is specific to each person's needs and goals.		

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Learning Checkpoint 1
Answers

Question/ Clarification	TRUE	FALSE
Remote Supports is an HCBS waiver benefit. *True: Remote Supports is a benefit on five adult HCBS waivers (BI, CMHS, EBD, SLS, and SCI).*	X	
To be eligible for Remote Supports the participant can live independently or in a group residential setting. *False: Only participants who live alone or are alone for significant parts of the day are eligible to use remote supports.*		X
Remote Supports is another name for Telehealth. *False: With Remote Supports the technology used is the service being provided. Telehealth is used as the delivery option for receiving specific services.*		X
The type of equipment used and where it is placed in the home is specific to each person's needs and goals. *True: Remote Supports services are person specific and will look different for each person.*	X	

Medicare vs. Medicaid

Medicare vs. Medicaid

Medicare	Medicaid
• Federal insurance program that people pay into (payroll deduction) • For people with disabilities and people over 65 years of age • Does NOT cover Long Term Services and Supports • Remote Supports providers have no role/responsibility with Medicare • If HCBS participants have questions about Medicare, refer them to the State Health Insurance Assistance Program (SHIP) shiphelp.org	• Jointly funded by the State and Federal Government • Public health insurance for Colorado residents who qualify • participants must meet financial and functional requirements • Covers Long Term Services and Supports and Remote Supports services • Remote Supports providers bill Medicaid for Remote Supports services

More on Medicaid

Medicaid is an optional program for States:

- States can decide if they want to participate, though **all States currently do** participate

- Medicaid is a federal program, but it is **administered** by individual States

- While there are some basic requirements, States have some **flexibility** to design how their Medicaid system works in their State

More on Medicaid

Once a state chooses to participate in Medicaid, certain populations **must be** included:

- Children
- Low-income families
- Pregnant women
- Elderly individuals
- Individuals with disabilities
- Adults without dependent children

If an individual in one of these categories meets eligibility requirements, that person is **entitled** to receive Medicaid services

Colorado's State Plan

- Each State defines its Medicaid program through a contract with the Centers for Medicare and Medicaid Services (CMS), which is the federal agency that oversees Medicaid

- That contract is called the "State Plan"

- The **State Plan** does 3 key things:
  - ➤ Establishes **eligibility** standards
  - ➤ Determines **type, amount, scope and duration** of medical services
  - ➤ Sets provider **reimbursement** rates

HCBS Waivers

- In addition to State Plan services, there are also Home and Community-Based Services (HCBS) **Waiver programs**

- These **waivers provide additional** Medicaid benefits, including Remote Supports services, to specific populations who meet special eligibility criteria

- HCBS Waivers are Federally authorized by the Social Security Act 1915c

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Adult HCBS Waivers in Colorado

Persons who are Elderly, Blind and Disabled (EBD)

Community Mental Health Supports Waiver (CMHS)

Persons with Brain Injury (BI)

Persons with Spinal Cord Injury (SCI)

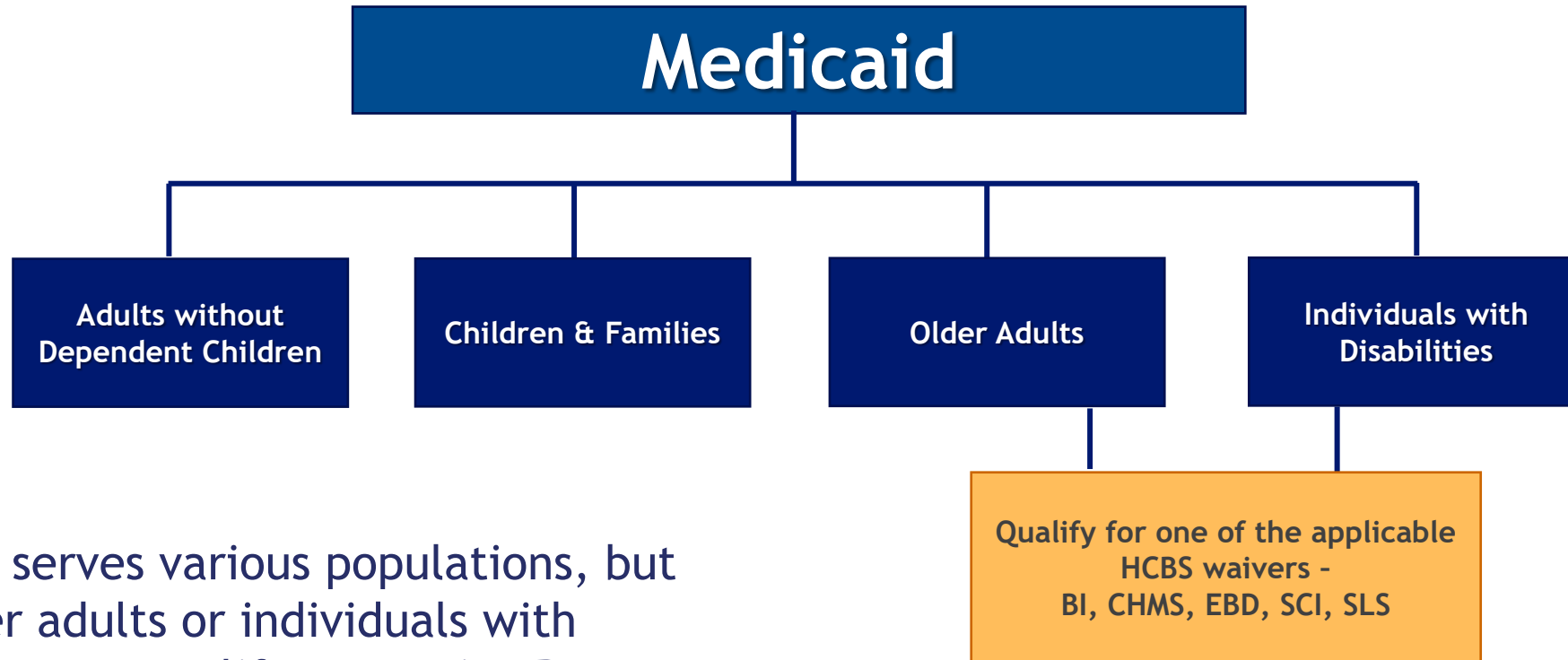Supported Living Services Waiver (SLS)

Persons with Developmental Disabilities (DD)

Additionally, Colorado has four children-specific waivers

Visit our website for more detail about HCBS Waivers: hcpf.colorado.gov/long-term-services-and-supports-programs

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Medicaid

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                    Medicaid
        ┌──────────┬──────────┬──────────┐
   Adults without  Children &  Older Adults  Individuals with
   Dependent Children  Families                Disabilities
                                │              │
                      ┌─────────────────────────────┐
                      │ Qualify for one of the       │
                      │ applicable HCBS waivers –     │
                      │ BI, CHMS, EBD, SCI, SLS       │
                      └─────────────────────────────┘
```

Medicaid serves various populations, but only older adults or individuals with disabilities can qualify to receive Remote Supports by:

- Meeting functional eligibility/level of care requirements

- Meeting targeting criteria for **one** of the applicable waivers – BI, CMHS, EBD, SCI, SLS

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Learning Checkpoint 2

Take a moment to review these checkpoint questions.

Question	True	False
Medicaid is public health program for Colorado residents who qualify.		
Medicare pays for Remote Supports services.		
HCBS Waivers provide additional Medicaid benefits to specific Colorado populations.		
HCBS services are Waiver services.		
Only the Spinal Cord Injury Waiver includes Remote Supports services.		

Learning Checkpoint 2

Answers

Question / Clarification	True	False
Medicaid is public health program for Colorado residents who qualify.	X	
Medicare pays for Remote Supports services. *False: Medicaid pays for Remote Supports services for participants on select HCBS Waivers.*		X
HCBS Waivers provide additional Medicaid benefits to specific Colorado populations.	X	
HCBS services are Waiver services.	X	
Only the Spinal Cord Injury Waiver includes Remote Supports services. *False: Remote Supports is included on the following HCBS Waivers: BI, CMHS, EBD, SCI, SLS*		X

Provider Eligibility and Responsibilities

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Provider Responsibilities

Conform to all State established standards for the specific services they provide under this program

Abide by all the terms of their provider agreement with the Department

Comply with all federal and state statutory requirements. A provider shall not discontinue or refuse services to a participant unless documented efforts have been made to resolve the situation that triggers such discontinuation or refusal to provide services

Rule Citation 10 CCR 2505-10 8.487.11

See Resources and Glossary for more information on locating Medicaid Rules

Provider Responsibilities

Provider agencies shall maintain a log of all complaints and Critical Incidents, which shall include documentation of the resolution of the problem

Provider agencies will be required to submit required policies and procedures during initial provider enrollment and revalidation

Additional information on the provider enrollment process and documentation requirements can be found at: hcpf.colorado.gov/provider-enrollment

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Provider Responsibilities

Provider agencies shall have written policies and procedures for recruiting, selecting, retaining and terminating employees.

Rule Citation 10 CCR 2505-10 8.487.12

Provider agencies shall have written policies governing access to duplication and dissemination of information from the participant's records in accordance with C.R.S. Section 26-1-114, as amended.

Provider agencies shall have written policies and procedures for providing employees with participant information needed to provide the services assigned, within the agency policies for protection of confidentiality.

Rule Citation 10 CCR 2505-10 8.487.13

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Provider Responsibilities

Provider agencies shall maintain a personnel record for each employee. The employee record shall contain at least the following:

- Documentation of employee qualifications

- Documentation of training

- Documentation of supervision and performance evaluation.

- Documentation that the employee was informed of all policies and procedures required by these rules

- A copy of the employee's job description

Rule Citation 10 CCR 2505-10 8.487.17

Provider Responsibilities

A provider agency may become separately certified to provide more than one type of HCBS service if all requirements are met for certification.

- Administration of the different services provided shall be clearly separate for auditing purposes.

- The provider agency shall also understand and be able to articulate its different functions and roles as a provider of each service, as well as all the rules that separately govern each of the types of services, in order to avoid confusion on the part of participants and others.

Provider Responsibilities

Remote Supports providers must demonstrate policies and procedures that include:

- HIPAA compliant platforms

- Handling and reporting of Critical Incidents, including accidents, suspicion of abuse, neglect or exploitation, and criminal activity.

- Participant support given through Remote Supports, when needed, to include: accessibility, translation, or when limited auditory or visual capacities are present

Provider Responsibilities

- A contingency plan for provision of Remote Supports if technology fails

- Maintaining an up-to-date Service Plan for Remotes Supports service delivery

- Professionals on staff may not practice outside of their respective scope

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Provider Employee Qualifications

- Must be at least 18 years of age

- Have the ability to communicate effectively, complete required forms and reports, and follow verbal and written instructions

- Have the ability to provide services in accordance with a Service Plan

- Have competed minimum training based on State training guidelines

- Have necessary ability to perform the required job tasks

- Have the interpersonal skills needed to effectively interact with participants receiving waiver services

QMAP

If a Remote Supports participant chooses to receive assistance with medications **beyond reminders**, then the Remote Supports Provider **must** have a Qualified Medication Administration Person (QMAP) on the team to provide that assistance

Staff who successfully complete a QMAP course should be able to:
- Administer medications according to written physician's orders
- Take extra care with Controlled Substances and Narcotics
- Maintain proper documentation of the administration of both prescription and non-prescription drugs
- Use proper techniques when administering medications by the various routes
- Safely and accurately fill and administer medications to and from medication reminder boxes with oversight from a licensed person or qualified manager

For more information: cdphe.colorado.gov/medication-administration/qmap

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Learning Checkpoint 3

Take a moment to review these checkpoint questions.

Question	True	False
A Remote Supports provider that provides medication assistance to residents beyond reminders must have a QMAP on the team to provide that assistance.		
The Remote Supports provider is required to have a contingency plan on file to address what will happen if the technology fails.		
A Remote Supports provider must be at least 16 years of age to provide Remote Supports.		
Remote Supports provider agencies are required to keep a log of complaints and Critical Incidents.		

Learning Checkpoint 3

Answers

Question / Clarification	True	False
A Remote Supports provider that provides medication assistance to residents beyond reminders must have a QMAP on the team to provide that assistance. *True*	X	
The Remote Supports provider is required to have a contingency plan on file to address what will happen if the technology fails. *True*	X	
A Remote Supports provider must be at least 16 years of age to provide Remote Supports. *False: Providers must be at least 18 years of age*		X
Remote Supports provider agencies are required to keep a log of complaints and Critical Incidents. *True*	X	

Health First Colorado Billing Process

How to Submit Claims

Once enrolled as a Medicaid provider and **after attending billing training,** * Remote Supports providers can submit claims electronically through the Provider Web Portal

* See Resources for more info

Submitting Claims

Before submitting a Medicaid claim, a Remote Supports Provider must obtain a **Prior Authorization Request** (PAR) from the Single Entry Point (SEP), Case Management Agency (CMA) or Community Centered Board (CCB), which authorizes services

Claims must be submitted **within 365 days** from the date of service

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Reimbursement

Remote Supports – Equipment Purchase/Install = **$1/Unit**

Remote Supports – Monitoring = **15minites/Unit**

View current rates at:
hcpf.colorado.gov/provider-rates-fee-schedule

Billing Manuals can be found at:
hcpf.colorado.gov/billing-manuals

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Non-billable Services

A Remote Supports Provider cannot bill for services while the resident is in a hospital or Nursing Facility

A Remote Supports Provider cannot bill for services that are duplicative during times when other HCBS waiver services are being provided (e.g., Personal Care, Homemaker, Job Coaching, Mentorship)

Required Billing Training

HCPF's fiscal agent provides in-depth billing training that Remote Supports Provider Agency Representative are **required to attend**

Class schedules can be found at:

hcpf.colorado.gov/provider-training

HCBS Adult billing manuals

hcpf.colorado.gov/billing-manuals

Learning Checkpoint 4

Take a moment to review these checkpoint questions.

Question	True	False
Remote Supports Agency Representative does not have to attend any training related to billing.		
Remote Supports Providers cannot bill Medicaid if a participant is in the hospital.		
If I have a question, there is always someone to ask.		

Learning Checkpoint 4

Answers

Question / Clarification	True	False
Remote Supports Agency Representative does not have to attend any training related to billing. **False: Remote Supports Agency Representative are required to attend billing training via HCPF's Fiscal Agent.**		**X**
Remote Supports Providers cannot bill Medicaid if a participant is in the hospital. **True: HCBS benefits cannot be billed during times when a participant is in the hospital.**	**X**	
If I have a question, there is always someone to ask. **True: See resources and glossary section for contact information for various agencies.**	**X**	

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Resources and Glossary

Resources

HCPF Provider Services: hcpf.colorado.gov/provider-services

- Resources you will find – Billing Manuals, FAQs, Enrollment Information, Training

HCPF Resources for HCBS Providers website:

hcpf.colorado.gov/resources-hcbs-providers

To Download **Starting Health First Colorado Provider Enrollment Process**

1. Go to hcpf.colorado.gov/provider-enrollment
2. Review page for helpful information
3. Click on "Start Application"

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Resources

Medicare, State Health Insurance Assistance Program (SHIP):
shiphelp.org

Colorado Community Centered Boards:
hcpf.colorado.gov/community-centered-boards

Colorado Single Entry Point Agencies:
hcpf.colorado.gov/single-entry-point-agencies

Qualified Medication Administration Persons (QMAP):
cdphe.colorado.gov/medication-administration/qmap

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How to Find Remote Supports Medicaid Rules

State laws that govern Remote Supports are called "Rules"

CCR Title: 10 CCR 2505-10, Section 8.400 Medical Assistance

Electronic Monitoring Rules: 8.488 ELECTRONIC MONITORING

Remote Supports Rules: 8.488.50 REMOTE SUPPORTS

View full text of the [Remote Supports Medicaid Rule](#)

(Click on the current version link to view official version of rule on the Secretary of State's website)

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Glossary

Case Managers

Work at SEP agencies and help determine which programs an individual may be eligible for; facilitate care planning; and communicate regularly with participants to ensure needs are met.

Community Centered Board

Provide Case Management Services including intake, eligibility determination, service plan development, arrangement for services, delivery of services, service and support coordination, monitoring, any safeguards necessary to prevent conflict of interest between case management and direct service provision, and termination and discharge from services

Find the CCB in your Region

Glossary

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Home and Community-Based Services (HCBS) Waivers
   Provide additional Medicaid benefits, including Remote Supports services, to specific populations who meet special eligibility criteria

Long-Term Services and Supports (LTSS)
   Services and supports used by individuals of all ages with functional limitations and chronic illnesses who need assistance to perform routine daily activities

Natural Supports
   Non-paid informal relationships that provide assistance and occur in the participant's everyday life including, but not limited to, community supports and relationships with family members, friends, co-workers, neighbors and acquaintances

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Glossary

Prior Authorization

Approval for an item or service that is obtained in advance either from the Department, a State fiscal agent or the Case Management Agency

Service Plan

Written document that specifies identified and needed services, to include Medicaid and non-Medicaid services regardless of funding source, to assist a participant to remain safely in the community and developed in accordance with the Department's rules

SEP Agencies

Single Entry Point agencies provide case management and care planning as well as providing referrals to other resources
[Find a SEP in your region](#)

Remote Supports Provider Training Certificate of Completion

_____

Print Name of Remote Supports Provider Agency

_____

Print Address of Remote Supports Provider Agency

_____   _____

Print Agency Representative Name   Agency Representative

_____

Today's Date

By signing and submitting this page, you confirm that you have **read and understand** *the preceding Remote Supports Provider Training material provided by the Department of Health Care Policy and Financing which is required to become a new Remote Supports Health First Colorado Provider*

Print, sign and scan this page of the presentation and attach it electronically to your Health First Colorado Provider Application in the Provider Portal

This certificate must be kept on file as verification of this process

Thank You!

Contact Info

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