



Subacute Care Meeting Agenda

May 20th, 2022

9-10 AM

Invitees: Kevin Martin, Andrew Abalos, Tyler Samora, Diana Lambe, Raine Henry, and Jacob Curtis

Agenda Items		
No.	Item	Comments
1.	<ul style="list-style-type: none"> <u>Greetings:</u> 	<ul style="list-style-type: none"> Kevin Martin, HCPF Fee-for-Services Rates Division Director
2.	<ul style="list-style-type: none"> <u>PHI Warning:</u> 	<ul style="list-style-type: none"> Please speak in generalities.
3.	<ul style="list-style-type: none"> <u>Background:</u> <ul style="list-style-type: none"> Our understanding of the problem: Current solution and how it works: Current solution not being used: 	<ul style="list-style-type: none"> Behavioral Health needs Children left in ER; require financial assistance. <ul style="list-style-type: none"> Specific to Medicaid population Autistic children; need sitters/companions Extended Stay Patients: difficult to place; have development and/or behavioral needs Patients who require guardianship
4.	<ul style="list-style-type: none"> <u>Our limitations for payment:</u> 	<ul style="list-style-type: none"> Inpatient Subacute Care - Hospital: a per diem rate of \$235 (Federal Limitation). Timely filing within a year
5	<ul style="list-style-type: none"> <u>What we need to develop a better solution:</u> 	<ul style="list-style-type: none"> CHA can assist with communication (daily message). <ul style="list-style-type: none"> Care Coordination Lead
6.	<ul style="list-style-type: none"> <u>Hospital Discussion:</u> 	<ul style="list-style-type: none">

7.	<ul style="list-style-type: none"> • <u>Next Steps:</u> 	<ul style="list-style-type: none"> • HCPF to talk with RAE contract managers to incorporate into behavioral health contracts. • North Colorado Health Alliance can assist with details regarding guardianship. • Hospital Engagement Meeting, 7/8, 1-4 PM: will provide update
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09:09:14 From Raine Henry to Everyone:

<https://hcpf.colorado.gov/ipop-billing-manual#Inpatient%20Subacute%20Care>

09:10:41 From Todd Grivetti - Intermountain Health to Everyone:

Able to access. Thank you

09:14:02 From Raine Henry to Everyone:

Inpatient Subacute Care

Administration of subacute care by an enrolled hospital in its inpatient hospital or alternate care facilities is covered for the duration of the Coronavirus Disease 2019 (COVID-19) public health emergency. Subacute care in a hospital setting shall be equivalent to the level of care administered by a skilled nursing facility for skilled nursing and intermediate care services as defined in 10 CCR 2505-10, Sections 8.406 and 8.409.

Members may be admitted to subacute care after an inpatient admission, or directly from an emergency department, observation status, or primary care referral to the administering hospital.

09:14:52 From Amanda to Everyone:

So any Medicaid pt awaiting long term care placement adult/pediatrics that no longer meet medical necessity?

09:15:46 From Amanda to Everyone:

Yes

09:15:49 From Amanda to Everyone:

Thank uou

09:15:55 From Dan Schonlau to Everyone:

this program will expire with the Public Health Emergency declaration?

09:17:05 From Dan Schonlau to Everyone:

Got it. Thanks.

09:18:03 From terri.ridgeway to Everyone:

We have seen some HFC members who are adults on DD waivers who were unable to receive placement at the Regional Center and had discharge delays from hospital of several months while trying to find a Host Home or PCA. While hospitalized, would they be eligible for this reimbursement as well?

09:18:42 From Elizabeth Freudenthal, she/her to Everyone:

Thanks, Raine! Seems like you could add it to the contracts?

09:22:43 From Elizabeth Freudenthal, she/her to Everyone:

Thank you for that explanation--so so helpful.

09:25:21 From 19stca to Everyone:

To clarify, they have to be discharged and readmitted under this code?

09:31:13 From Raine Henry to Everyone:

Patient Status 70 (discharged/transferred to another type of health care institution not defined elsewhere in this code list)

09:32:19 From Megan leppke to Everyone:

I echo that there is a need

09:33:18 From Elizabeth Freudenthal, she/her to Everyone:

Kevin and Raine, thanks for prioritizing looking into RAE support of this need! I know we're not the only hospital that would benefit :)

09:34:39 From Katie Shuey to Everyone:

I know it has been a long time since an IRF/LTAC engagement meeting was held, and the general hospital engagement meetings never really apply to us.

09:34:55 From Leslie Gale to Everyone:

This one really came though to us so not sure the change but it really worked

09:35:30 From Katie Shuey to Everyone:

CHA would have been great, too.

09:39:11 From Elizabeth Freudenthal, she/her to Everyone:

Hi Terri--that scenario is very aligned with ours on the pediatric side. People with complex conditions and behaviors that make them hard to place, and limited placement options.

09:39:37 From Dan Schonlau to Everyone:
Are Medicare/Medicaid dual-eligible patients eligible for this program?

09:42:03 From Carol Barrett to Everyone:
We also have patients with dementia with behaviors that are dropped off by families or LTC or SNFs

09:42:10 From Raine Henry to Everyone:
Dan, that would depend on how Medicaid requires billing for this since we are payer of last resort.

09:42:15 From Raine Henry to Everyone:
*Medicare

09:43:55 From Megan leppke to Everyone:
Guardianship is absolutely a problem

09:44:08 From Elizabeth Freudenthal, she/her to Everyone:
Agree on guardianship!

09:44:23 From Jeff to Everyone:
I also agree with Guardianships

09:44:45 From 19stca to Everyone:
Here in Pueblo as well. I see everyone of us is having the same issues.

09:45:50 From Elizabeth Freudenthal, she/her to Everyone:
I want to be clear that this applies to both inpatient and Emergency Department, so two billing routes

09:48:22 From Elizabeth Freudenthal, she/her to Everyone:
RE: guardianship--in the peds space, there is a ton of interplay between our setting and the child welfare system

09:48:58 From Elizabeth Freudenthal, she/her to Everyone:
Counties won't accept a child into custody, but parents don't think the child is safe to discharge back home. And child doesn't need inpatient anymore.

09:50:43 From Jacob Curtis to Everyone:
Absolutely.

09:50:52 From Megan leppke to Everyone:
Kevin this is Megan with Denver health. We've implemented a medical legal partnership I'd be happy to talk with you about it. We've had to be savvy about guardianship

09:51:55 From Megan leppke to Everyone:
We're not.

09:52:17 From Dan Schonlau to Everyone:
It just prevents another patient from being admitted, potentially delaying care for someone else.

09:52:18 From Carol Barrett to Everyone:
We are eating the cost of the patient, the sitters etc.

09:52:34 From Kevin to Everyone:
Hi Megan, That would be great. Would it be ok if I brought a couple of other HCPF people into that conversation so we can all get that knowledge?

09:53:24 From Elizabeth Freudenthal, she/her to Everyone:
Yes, anything will help!

09:53:51 From Carol Barrett to Everyone:
We did not know about it. Anything will help!

09:56:03 From Jeff to Everyone:
Kevin, I am happy to talk to Tom Rennell at CHA if you that would help!

09:57:18 From Kevin to Everyone:
Hi Jeff, I have a pretty good relationship with Tom and he's in my meeting next Wed. but yes every little bit helps.

09:57:24 From Dan Schonlau to Everyone:
Thank you Raine and Kevin for the discussion!

09:59:35 From HCPF Trainers - HCPF to Everyone:
July 8th, 1-4pm Next Stakeholder Engagement meeting

10:00:03 From Elizabeth Freudenthal, she/her to Everyone:
Thank you so much for your diligence and responsiveness!