# Supported Living Services (SLS) Waiver Exception Review Process

Case Management Training December 20, 2022

Presented by: Lindsay Westlund and Karli Altman



#### Our Mission:

Improving health care equity, access and outcomes for the people we serve while saving Coloradans money on health care and driving value for Colorado.

### Meeting Purpose

To provide training to Case Management Agencies (CMAs) regarding the implementation of the Supported Living Services (SLS) Waiver Exception Review Process

### Housekeeping

- Mute your mic if you are not speaking
- Use the "raise your hand" feature if you'd like to ask a question before we pause for breaks; or,
- Type your question in the chat box
- If you are on the phone, unmute by pressing \*6 to ask a question
- We are recording! Please do not share protected health information (PHI) during this meeting
- Send follow up questions to <u>HCPF\_HCBSwaviers@state.co.us</u>
- SLS Waiver Exception Review Process webpage

# What We Hope You Know After Today's Training

- What the Supported Living Services (SLS) Waiver Exception Review Process is and why it is important
- Who is eligible
- How to talk with members about this process
- How to submit a SLS Exceptions Review request
- Who reviews the SLS Exceptions Review requests
- Impact to Prior Authorization Requests (PARs)
- When this process starts



## What is the "SLS Waiver Exception Review Process?"

- In 2020 the Department submitted a budget request to increase flexibilities within the SLS waiver to allow members, who are likely also on the DD waiver waitlist, to access additional services and supports. This request was authorized through 21-22 Long Bill, SB 21-205
- The exception process gives access to services beyond the established limits and SPAL funding to eligible SLS waiver members to support them in the community of their choice.

### Why is the Review Process Important?

- The flexibility allowed is anticipated to improve member health while supporting and promoting individual choice.
- The increased amount of long-term services and supports for SLS waiver members has the potential to ensure members' ability to maintain independence in the community of their choice.
- Decreases disparities between higher-needs individuals on the SLS waiver and the available services and supports.
- With the availability of additional services and supports, some members may never require the move to the DD waiver.



### Questions?



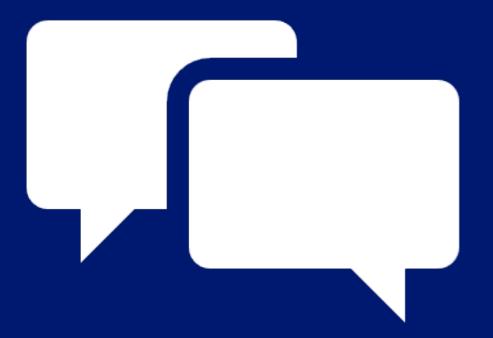
#### Who May Be Eligible?

- A. Members on the SLS waiver who are at risk for an emergency DD waiver enrollment; and,
- B. Members who have less than 10% of SPAL funding remaining; or,
- C. The needed service units are not available because of current service unit limitation(s).

Members can meet requirements A, B, and C; A and B; or A and C to be eligible for a request.

#### Regulation Resources

- Regulations have been updated for the SLS Waiver Exceptions Review Process
  - > 10 CCR 2505 10 8.500.102.G
  - ➤ Not available until after 1/1/22 on the <u>Secretary of State's</u> website
- A copy of the draft rule is available on the Medical Services Board (MSB) page for review prior to 1/1/22 MSB 21-08-05-B

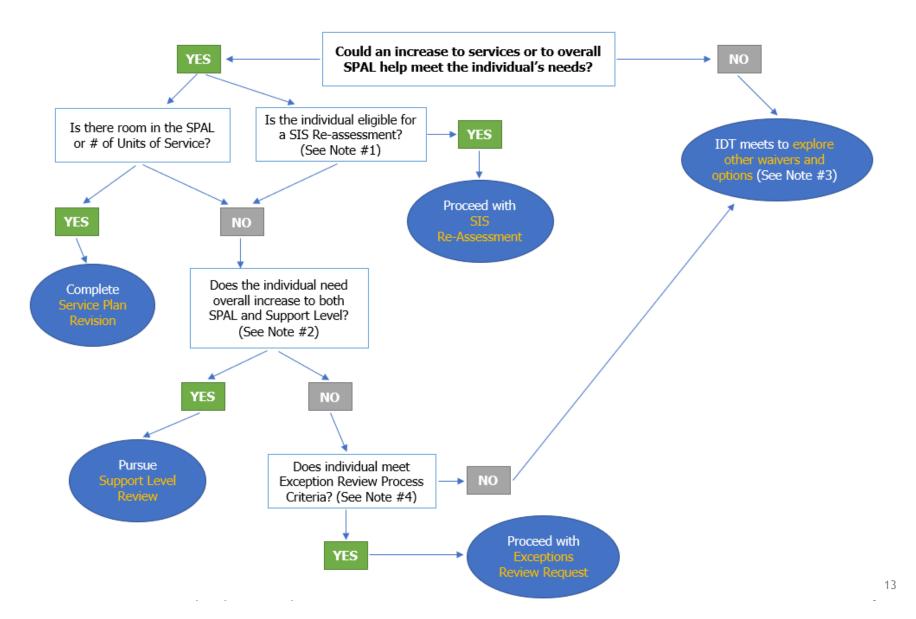


### Questions?

#### **Process Flowchart**

- The Department has created a flowchart to help case managers (CMs) understand how and when to discuss the SLS Exceptions Review during service planning with members.
- By answering a series of yes/no questions the Interdisciplinary team (IDT) including the CM can determine the best the course of action between the following options: Service Plan revision, Support Level Review, SIS Reassessment Request, SLS Exceptions Review, or exploring other waiver options and programs.

#### **Process Flowchart**







### Who Reviews and Approves the Requests?

- The Department is working with our current Quality Improvement Organization (QIO), Telligen, to amend our contract to include these reviews
- Telligen provides reviews and approval/denials for other Office of Community Living (OCL) program eligibility needs, Over Cost Containment (OCC), and Health Maintenance Reviews (IHSS/CDASS)
- The Department hopes to maintain consistency for case managers and has seen success in Telligen's management of other OCL work

### Telligen Review Process

- Telligen will review all SLS Exception Requests
- Telligen will provide a training on how this review will be conducted but will utilize Qualitrac in much the same way it is used for other program/ eligibility review types currently
- Reviews will be initiated with the IDT/CM as part of service planning as discussed previously
- Reviews will be initiated with Telligen when the CM submits the "SLS Exception Review Request" form to Telligen with supporting documentation

#### Telligen Review Process Continued

COLORADO  Department of Health Car  Policy & Financing	e				
Supported Living Services (SLS) Exception Review Request Form					
Date Submitted to Telligen:			Clear Form		
Member Information					
First Name:	MI:	Last Nan	ne:		
Date of Birth:	Medicaid ID:		Support Level: Select One		
Community Centered Board Inf	formation				
Agency Name:					
Case Manager Name:	Case Manager Phone:				
Case Manager Email:					
SLS Exception Review Process	Eliaibility				
Could an increase to services or to the overall SPAL help meet the member's needs?	☐ Yes	□ No	If NO, do not proceed with the SLS Exception Review Request but meet with IDT to explore other waivers and/or options.		
Is there room in SPAL or are there additional service units that could be authorized to support the member?	☐ Yes	□ No	If YES, <i>do not</i> proceed with the SLS Exception Review Request but complete a service plan revision.		
Is the member eligible for a new SIS assessment?	□ Yes	□ No	If YES, do not proceed with the SLS Exception Review Request but proceed with a SIS Reassessment request.		
Does the member need an overall increase to both SPAL and Support Level?	☐ Yes	□ No	If YES, do not proceed with the SLS Exception Review Request but proceed with a Support Level Review request.		
Does the member meet the SLS Flexibility eligibility criteria?	A. At risk for seekin Developmental D DD) waiver enro future?	isability (HCBS	- proceed with the SLS Exception Review Request.		
	Yes No		If A and B are met proceed with the SLS Exception Review Request.		
	10% of SPAL funding remaining?  Yes No  C. Are the services needed to support the member not available due to current service unit limitations?  Yes No		If A and C are met proceed with the SLS Exception Review Request.		
			If B and C, or only B, or only C are met, do NOT proceed with the SLS Exception Review Process but meet with IDT to review alternative supports.		

#### Telligen Review Process Continued

SLS Exception Review Request Information				
Requested Start Date:				
Why is this member at risk for seeking an emergency Developmental Disability (HCBS-DD) waiver enrollment in the future?				
☐ Medically fragile with skilled care needs				
☐ Behavioral and/or Mental Health needs				
☐ Criminal convictions and/or law enforcement involvement				
Risk of homelessness				
<ul> <li>Mistreatment, Abuse, Neglect, Exploitation (MANE) reports with potential need to remove from home</li> </ul>				
<ul> <li>Extreme danger to self/others</li> </ul>				
Caregiver capacity or				
☐ 1:1 supervision needed				
□ Other:				
Explain selection(s) above in <b>Additional Member Information</b> below.				
B. Does this member have 10% or less remaining funds in their SPAL?	☐ Yes	□ No		
Current SPAL based on SIS Support Level:				
2. Current Utilization of SPAL:				
3. Requested increase amount to SPAL:				
C. Are the services needed to support the member not available due to current service unit limitations?	☐ Yes	□ No		
Which SLS waiver service(s) are being requested to support this member in the community?				
a. Current service unit authorization:				
b. Anticipated service unit depletion date:				
c. Requested service unit authorization:				
Which SLS waiver service(s) are being requested to support this member in the community?				
a. Current service unit authorization:				
b. Anticipated service unit depletion date:				
c. Requested service unit authorization:				
SLS Exception Review Request Form				

January 2022

#### Telligen Review Process Continued

#### SLS Exception Review Request Information

- 3. Which SLS waiver service(s) are being requested to support this member in the community?
  - a. Current service unit authorization:
  - b. Anticipated service unit depletion date:
  - c. Requested service unit authorization:

#### Additional Member Information

Summary of member's needs and situation that meet the requirements above, include:

- Why the member is at risk of an HCBS DD waiver emergency enrollment in the future;
- Current living situation;
- · Attempted interventions;
- Plans for services and/or funding if approved;
- Is this a temporary need (one year or less) or will this be needed long term (greater than one year)?;
- · Any other information about this member's needs that will assist in determining approval of request.

Attached information for LTHH if any, CDASS Health Maintenance Review information, provider care plans, etc.

Submit completed form with any attachments or supporting documentation, through Telligen's Qualitrac Review and Provider Portal. Find training resources for Qualitrac on the Department's website: <a href="https://hccolorado.gov/long-term-services-and-supports-training#Telligen">https://hccolorado.gov/long-term-services-and-supports-training#Telligen</a>

SLS Exception Review Request Form January 2022

### Telligen Review Process Continued

- The CM will submit the following documentation:
  - the current PAR;
  - the SLS Exceptions Request form;
  - the current service plan; and,
  - any documentation from providers that demonstrate the need to exceed service limitation caps for the additional planned services.
- All services on the SLS waiver can be requested as part of the Exceptions request to support the member.

### Telligen Review Process Continued

- Telligen will have 5 business days to review the request from the date of receipt.
- Telligen can submit a Request for Information (RFI)
  if the documentation does not support the request.
- This will pause the 5 business day review period.
- If no additional information is provided after 10 business days, Telligen will deny the request.
  - No more than two (2) RFIs will be sent before a request is denied.

# Prior Authorization Request (PAR)

- All SLS waiver services must be included on the PAR
- CMs shall upload the outcome letter from Telligen into the Bridge
- The CM will enter the service units as approved by Telligen onto the PAR
- Should there be any message in the Bridge that the PAR has "suspended," or is "pending state review," or "work in progress" the CM should email the LTSSOCC@state.co.us inbox for further assistance.

#### **Effective Date**

- SLS Exceptions Review Requests may be submitted beginning 1/4/22
- While Qualitrac may not be set up to take these requests as of this date, the Department will make available an email address
  - > Reviews can be sent securely
  - The Department will communicate out the email address if needed and update instructions on the LTSS Training Page

### Telligen Review Process Continued

- Telligen can approve a portion of the requested SPAL funding or a portion of the services requested based on the review and documentation of need
  - > This "partial" approval will be indicated on the outcome letter sent to the CM within 5 business days of review
- Telligen will send an outcome letter for all SLS Exception Review Requests submitted

### Exceptions Review Request Frequency

- Requests are approved for no more than a one year certification period (or until the next Continued Stay Review (CSR)).
- The Exception Review Request must be made annually with the member's CSR in order to maintain approval.
- The CM may initiate a review at any time throughout the certification period, not just at scheduled reviews.

#### **Appeals**

- The outcome of the SLS Exceptions Review Request is not appealable by the member;
- HOWEVER, all requests for services that are denied, any adverse changes to a member's HCBS waiver services, or waiver eligibility are appealable as required at 10 CCR 2505 10 8.612.4.E. and Section 8.057.2.A.



# Questions and Feedback?

#### **Contact Information**

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### Thank you!