

FORMAL RECOMMENDATION RESPONSE SUMMARY

Issued: February 22, 2023

Issued by: Participant Directed Programs Unit

Recommendation Title: Proposal to Change the CDASS Overspending Protocol Limit

1. Background

The Department of Health Care Policy & Financing (HCPF) Participant Directed Programs (PDP) Unit received a Formal Recommendation from the Participant Directed Programs Policy Collaborative (PDPPC) regarding Consumer Directed Attendant Support Services (CDASS) Overspending Protocol on September 6, 2023. This recommendation was called for a vote by the PDPPC CDASS Overspending Limits Subcommittee on August 23, 2023 and accepted by stakeholders.

The formal recommendation from PDPPC has requested the following regarding the CDASS Overspending Protocol:

- HCPF should remove the monthly 129.99% spending limit for CDASS member allocations when the member has reserve funds available.
- Stakeholders propose that HCPF allow CDASS members to spend their reserve funds with no limit during the fiscal year of the member's certification.
- Spending more than 110% without prior authorization from the case manager would continue to follow the CDASS Overspending Protocol as it is currently described.

The reasons a member might need to exceed the 129.99% spending limit could vary. The Subcommittee identified two common reasons that members would benefit from this flexibility: additional support when traveling or engaging in additional community activities and when there are fluctuations in service needs. An example of this could be an individual with Multiple Sclerosis may have much higher care needs in the summer than in the winter, or a member with arthritis who needs additional support in the winter.

2. Department Response

The Unit has evaluated the recommendation to remove the CDASS overspending limit of 130% for CDASS members when the member has reserve funds available. It reviewed current



overspending policies and procedures, current and historical CDASS utilization trends, and historical stakeholder engagement materials surrounding the implementation of the existing limit. The Unit took into consideration the research and examples used to establish the limit which reinforced the importance that it balances the member's need for budget flexibility with HCPF's responsibility to prevent significant budget mismanagement. Significant budget mismanagement could put members at risk of critical service depletion, limiting their access to necessary health services.

The Unit agrees with the PDPPC's recommendation to remove the 130% CDASS overspending limit for those members who have reserve funds in their budget. This allowance will not create a budget deficit. To utilize reserve funds that exceed the 130% monthly spending limit, HCPF will require individualized requests to be authorized by the case manager and submitted through the FMS contractor. The Unit requests stakeholder input to review and revise the overspending request process.

Members who do not have reserve funds and anticipate their service needs will significantly increase should consult with their case manager to determine if a CDASS allocation revision is appropriate. If members are unable to work collaboratively with their case manager to achieve the increase they believe is needed, they have the option to utilize the mediation process available through the training and operations contractor, Consumer Direct for Colorado (CDCO). More information about the Mediation process is available on CDCO's <u>website</u>.

The Unit agrees that CDASS members who have reserve funds shall not be limited in the amount of their reserves they may spend. Spending must occur within the member's current CDASS certification period. Once reserves are depleted, overspending may only occur up to the 29.99% limit and may not exceed the total annual allocation. CDASS funds may only be used to reimburse attendants for services covered in regulation 10 CCR 2505-10, 8.510.3 "Covered Services".

The Unit agrees that the <u>CDASS Overspending Protocol</u> will remain. As a reminder, spending that leads to an Overspending Episode per the protocol is "monthly expenditures exceeding 9.99% of the client's monthly allocation with no reserve funds from prior months in the certification period, no prior approval for overspending by the case manager and/or no documented fluctuation in overspending approved on the client's Attendant Support Management Plan (ASMP)".

Updates to policies and procedures are necessary to implement these supported recommendations with the Financial Management Services (FMS) providers and CDCO. The process steps are outlined in the timeline below.

Because spending over 129.99% of a CDASS member's monthly allocation is explicitly prohibited in Code of Colorado Regulations, HCPF is unable to permit spending over 129.99%



until the regulation is modified. The Unit anticipates necessary changes to the FMS systems, training materials, Code of Colorado Regulations, and the CDASS Overspending Protocol can be completed no sooner than August1, 2024.

3. Department Responsibilities and Timeline

Task	Anticipated Completion Date
Contract and Regulatory Updates	
Amend CDASS Code of Colorado Regulations 10 CCR 2505-10, 8.510.6.A.14 and 8.510.17.B	July 30, 2024
 Draft new regulation language and submit rule documents to Medical Services Board (MSB) coordinator 	April 5, 2024
Public rule review hearing	April 22, 2024
Final version of rule prior to MSB hearing	May 1, 2024
MSB Initial Approval	May 10, 2024
MSB Final Adoption	June 14, 2024
Forms and Materials	
Amend CDASS Overspending Protocol documents and references.	July 12, 2024
Develop with CDCO additional training examples addressing the planning and use of reserve funds.	July 12, 2024
Work with stakeholder workgroup to develop Overspending Attestation form.	July 1, 2024
Contractor Oversight	
Oversee adjusted payroll process and application of CDASS Overspending Protocol.	Ongoing
Communications	
Develop communication to notify members and case managers of change to CDASS Overspending Protocol	July 1, 2024

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