Waiver Implementation Council Meeting Summary
March 22, 2018
303 E. 17th Ave., Denver CO 80203

WIC Members	Department Staff	Guests
David Bolin Tamara French Linda Medina Molly Kennis Danna Snedden Laurel Rochester Sara Leeper Carol Meredith Shari Repinski Gerrie Frohne Stacey Honeyman	**Facilitator:** Kimberley Smith **OCL Staff:** Bonnie Silva Alicia Ethredge Lori Thompson Matt Baker Josh Negrini Rebecca Spencer **Budget Staff:** Jill Schnathorst **Rates Staff:** Scott Nelson	Jennie Stormes Bob Lawhead Dana Orr Douglas Creech Lisa Larsen Natalie Wood Tom Marshall Ellen Jensby

Agenda Item	Summary of Discussion	Requests & Follow-Up

Welcome, introductions, and agenda overview (Kimberley Smith)	• New Staff member introductions: Josh Negrini and Rebecca Spencer
	• New WIC members: Heidi and June
	   o Heidi – Arc of Colorado, excited because people should get the care that they need as simply and effectively as possible
	   o June – Director for Intellectual and Developmental Disabilities (IDD) Department for PASCO, came from Easter Seals Central California, loved working there and was excited to continue in the field when she moved to Colorado	

	• Review Department's mission, OCL vision, meeting agenda, meeting materials, meeting scope • Review of Jun 28th, 2017 meeting summary (no comments/change)	

Refresher (Alicia Ethredge)	• **Why waiver redesign** - Current waivers:
	   ○ Inflexible and outdated
	   ○ Individuals and families want greater control and authority
	   ○ Encourage a caretaker role
	   ○ Long history of waiting lists
	• **Our Charge: The Community Living Advisory Group made recommendations for Long-Term Supports & Services (LTSS) waiver simplification, then the Waiver Redesign Workgroup made recommendations in a report:**
	   ○ Design a waiver so that people get the right services at the right time, in the right amount, per the individual's preferences, goals, aspirations, and needs
	   ○ HB 15-1318 was enacted to consolidate 2 adult IDD waivers
	   ○ Established WIC to advise and guide on the implementation of a consolidated, redesigned IDD waiver
	• Our work since 2017/2018
	   ○ Established the WIC Online Forum
	   ○ Service Coverage Standards drafts
	   ○ OCL reorganized and our waiver redesign team is complete
	   ○ Contract work
	• Budget Request
	   ○ R19	

Update (Lori Thompson)	• Work since July
	   ○ Incorporated WIC feedback and contractor work into Service and Coverage Standards drafts
	• Residential Habilitation
	   ○ Learned about complexity of the delivery model
	   ○ Understood that billing at 15-minute units would be arduous and non-representative of the actual services being provided
	   ○ Identified additional actuarial work (R19) needed to analyze utilization of the combined population
	      ▪ Data and actuarial (regression analysis)	

	▪ Transition plan development and ad hoc analysis – to develop the most robust transition plan to move HCBS-DD and SLS waiver participants to new waiver to ensure continuity of services ▪ Stakeholder engagement - Home & Community Based Services(HCBS) Final Rule ○ Cannot do a new waiver due to not being in compliance with the Final Rule (CFCM anticipated timeline for implementation-2022) ○ Plan is to amend the HCBS DD waiver – this is faster, but more complex transition plan with a challenging timeline - Waiver implementation timeline (Detailed timeline handout) ○ Q4 (April – June) 2018– currently reviewing Service Coverage Standard drafts ○ Q1 (July – Sept) 2018– assuming R19 is approved, will begin contract work ○ Q1 (July – Sept) 2019– waiver submission to CMS ○ Q3 (Jan – March) 2020– waiver approved and transition begins	
Budget Presentation (Jill Schnathorst)	- Challenges in estimating waiver consolidation ○ Variation in need ○ Residential Habilitation (RH) ○ HCBS DD waiting list ○ Funding - Challenge 1: variation in need ○ DD has more variability in Support Levels ○ SLS is more concentrated around SIS/Support Levels 1 & 2 ▪ Question (Q): why is Support Level 7 not on the charts? ▪ Answer (A): Lori Thompson: they are outliers with cost-based rates ▪ Q: Do we know how many Support Level 7's there are? ▪ A: Lori Thompson: Yes, we will find out exact numbers ○ How to limit services ▪ SPALs? ▪ Unit limits? ○ Fiscal Year (FY) 2018-2019 R19 "IDD Waiver Consolidation and Administrative Funding" budget request	- Number of level 7's - Cost per person in DD using Residential Habilitation vs. cost of individuals in SLS that are going to the hospital more (what are the expenditures for SLS participants in acute & Long-Term Home Health and Emergency Rooms/Hospitalization)

	- Challenge 2: Residential Habilitation Services - Approximately 93% of HCBS-DD waiver clients used Residential Habilitation in FY 16-17 $225 million spent annually on Residential Habilitation (RH) - Increase in Support Level 1 use of RH would be about $60 million - Cost savings: Personal Care/Homemaker Services substitution factor - Shifting costs of individuals from HCBS-DD waiver using different, less expensive services if they were offered - Contractor to analyze utilization of Residential Habilitation - Challenge 3: eliminating HCBS-DD waiver waiting list - Projected budgeting process to eliminate waiting list by 2020 – estimated to cost $190 million annually once fully eliminated - Assumptions: - All clients would be enrolled by July 1st, 2020 2310 on waiting list as of September 2016 - Did assume some offsets of cost 70% of waiting list receive SLS 19% receive no Medicaid services 6% were receiving EBD services 5% were receiving only state plan services - As of February 2018, approximately 2800 people are waiting on DD waiver services with As Soon As Available status - Challenge 4: funding - There was no additional funding appropriated for services in HB 15-1318 - No reserve funding from underutilization – when a person is authorized for services under a PAR, state doesn't reserve that dollar amount for that person. Forecasts are based on actual utilization/expenditures - State budget process: - Internal approval – April/May - Can be adjusted until August - But need ball park/high level idea by May - Submit to Governor's office – August - Make any edits required and clean up estimates	

- Submit to Joint Budget Committee (JBC) – November
- Briefing and Hearing – December
  - JBC and Department have opportunities to discuss
  - No decisions made yet
- Figure Setting – March
  - JBC is again presented with requests
  - JBC decides what to include in the long bill
- Funding available – July 1st
  - Earliest funding for services available would be July 1st, 2019

- **Budget Question and Answer (Q&A)**
  - Q: Estimated $190 million to eliminate waitlist, is this additional funding or total funding?
    - A: Jill: This is funding that would be needed in addition to funding for the redesigned waiver
  - Q: When calculating this, how are you accounting for all of the other initiatives that are happening at the Department, such as the new assessment tool? The new assessment tool will make all of this look different, and how do we incorporate person-centered planning?
    - A: Bonnie Silva: hold off until Bonnie's portion of the presentation
  - Q: Chart, on Slide 26 of Power Point Presentation, showing percentages of individuals in each Support Level does not include what they are spending, CLAG recommendation: of all of the 11 waivers at that time, the cost of people to the state plan who were in IDD services, was the lowest. What is the total cost per person? What is the cost per person in DD using Residential Habilitation vs cost of individuals using SLS that are going to the hospital more?
    - A: Jill Schnathorst: We can get that information together
  - Q: Given the new assessment tool, and that we don't know what people will be determined to need or not need, we cannot accurately assume what utilization will be.
    - A: Jill Schnathorst: This will be better determined with the actuarial analysis from our contractor

	o Q: Considering there was no funding attached to 15-1318. Are we assuming that consolidating the waivers will be budget neutral?
	    ▪ A: Jill Schnathorst: We don't believe there was an assumption either way when the bill was passed, will need to work through the budget process
	o Q: Families who are using the DD waiver, will they have to worry about a potential they will receive less funding?
	    ▪ A: Bonnie Silva: The honest answer is that we talk about right-sizing services, and that there are people who are not appropriately getting their needs met. There might be people who are getting more than what they need within our current structure. It would be disingenuous to say that no one will be reassessed to receive appropriate amount of services. Both of these initiatives are to appropriately meet needs, knowing that most people will need more
	o Q: There is a finite amount of funding and a waiting list. Are we going to try to consolidate with the same amount of funding? Spreading funding over more people by bringing SLS into DD?
	    ▪ A: Bonnie Silva: It would be nearly impossible to consolidate without new funding. We would need to reassess and work with the budget process
	o Q: We have a history of backing into the budget.
	    ▪ A: Bonnie Silva: We can only spend the money we are appropriated, there is a limited amount of money to go around. If we don't have the money to do this, we don't do it or we'll do something different.
	o Q: When we are looking at moving people out of residential services into something that doesn't offer housing as a component to make the service possible, we have a significant housing problem in the state, they could potentially not have a place to live.	

Submitted Questions	• Submitted question Can we get clarification on the timelines for implementation of:
	  o Combined Waiver
	  o New Assessment Tool	

	- Single state-wide assessment for LTSS for individuals in CO - Currently up to 50 different assessments - Attempting to consolidate into a single assessment tool - Will have 19 modules with algorithms that pertain to what you want and what you need - Settings Final Rule in Colorado - No Wrong Door Program - Conflict Free Case Management - A: Bonnie Silva: 3 guide posts for all initiatives - Streamline access to services - Improve service coordination - Increase service options and quality - Improve and enhance operational excellence initiatives - Many initiatives are interdependent - Have to assess impact broadly of each initiative - Hope that they will complement one another when fully implemented - New assessment tool will have resource allocation associated with it - Assessment tool will complement waiver redesign, but it is not necessary to be fully implemented to move forward with waiver redesign - General timeline of initiatives review - Combined waiver: July 2019 Centers for Medicare and Medicaid Services (CMS) submission - New assessment tool: piloting through FY 18-19 - No Wrong Door: piloting through fall 2019 - Recommendations from CLAG, it is really hard to access services, families have to do the work - A "no wrong door" entry point system – anywhere you go you can find information on where you can go to receive services - HCBS Settings Final Rule Compliance: March 2020 - Conflict Free Case Management: June 30, 2022		

	- Q: the new assessment tool will negate the need for SPALs, hopefully new assessment tool will give us great information about what sorts of services an individual needs - A: Matt Baker: We are looking into individualized budgets, we will delve into this at future meetings - A: Bonnie Silva: it would be nice to have all of the initiatives implemented before waiver redesign, but there are individuals waiting for services. Progress is important – progress while keeping an eye on the other initiatives, and hope the work will complement each other. - Q: In regards to the final setting rule, will there be an option to serve many people, 30-45 in a single residence? - A: Bonnie Silva: Based off the final rule, the requirement that we are paying for is home and community like, so serving individuals in a setting with 30-45 people would be very difficult (parking lot this issue) - Q: Will the new assessment tool still utilize SIS levels? - A: Bonnie Silva: the charge was to replace the SIS assessment to determine funding (individual allocations), which is why funding is part of the new assessment tool. • Submitted Questions: How is the Department going to encourage participation in the WIC Online Forum for the purpose of WIC participation in between meetings? - A: Kimberly Smith: This leads us into our group break-out sessions.	
Group Break Out Sessions and Report Out 1) How to give feedback in the most efficient and timely way for Service Coverage	• **Report out from group #1:** **Q1**: How to give feedback in the most efficient and timely way for Service Coverage Standards (Mar-May 2018)? - Split the service coverage standards by sections so people can focus on what they are interested in and what they have expertise in **Q2**: What will the charge be for the next iteration of the WIC (July 2018)? (Think about WIC meeting topics July 2018-June 2019.) - What is the collaboration we should be having with the BHOs with the on-going waiver?	

Standards (Mar-May 2018)?
2) What will the charge be for the next iteration of the WIC (July 2018)? (Think about WIC meeting topics July 2018-June 2019.)
3) How should we get people engaged on the online forum to make it fully functional?
4) How do we increase WIC membership to represent people waiting for services and direct service providers?
	o What will the case management system look like? What sort of case management will there be?
	o **Q4**: How should we get people engaged on the online forum to make it fully functional?
	o Have a calendar invite to go into the online forum and review certain tasks
	• **Report out from group #2:**
	  o **Q1**: How to give feedback in the most efficient and timely way for Service Coverage Standards (Mar-May 2018)?
	  o **Q4**: How should we get people engaged on the online forum to make it fully functional?
	  o They would like to be pinged to go in and use the online forum – then have a webinar or phone conversation
	  o **Q2**: What will the charge be for the next iteration of the WIC (July 2018)? (Think about WIC meeting topics July 2018-June 2019.)
	  o **Q1**: How to give feedback in the most efficient and timely way for Service Coverage Standards (Mar-May 2018)?
	  o The next iteration of the WIC needs to train families and have a communication plan around families to understand. We need to develop an evaluation plan to understand if our ideas have worked
	  o **Q1**: How to give feedback in the most efficient and timely way for Service Coverage Standards (Mar-May 2018)?
	  o Asking WIC members to ping the community and get their feedback
	• **Report out from group #3:**
	  o **Q1**: How to give feedback in the most efficient and timely way for Service Coverage Standards (Mar-May 2018)?
	  o **Q4**: How should we get people engaged on the online forum to make it fully functional?
	  o Liked the proposed service coverage standards discussion schedule - it would be helpful to prompt members to go into the forum and provide feedback
	  o **Q2:** How do we increase WIC membership to represent people waiting for services and direct service providers
	  o **Q4**: How should we get people engaged on the online forum to make it fully functional?	

	- o DHS foster care system, the Arc struggle with how to get the waiting lists representatives: maybe direct service providers should facilitate this through their own forums - o **Q1**: How to give feedback in the most efficient and timely way for Service Coverage Standards (Mar-May 2018) - o Concerns with tight timeline, but they understand that the WIC will be reviewing everything on-going **• Report out from group #4:** - o **Q4:** How should we get people engaged on the online forum to make it fully functional? - o Would like some sort of notification system for online forum use - o **Q1**: How to give feedback in the most efficient and timely way for Service Coverage Standards (Mar-May 2018)? - o Maybe a staff member could pull together all of the materials for the conference call. - o **Q2:** What will the charge be for the next iteration of the WIC (July 2018)? (Think about WIC meeting topics July 2018-June 2019.) - o The charge of the next iteration of the WIC should be the transition plan – what are the provider qualifications and how do we educate the community? **• Report out from group #5:** - o **Q4:** How should we get people engaged on the online forum to make it fully functional? - o Concerned that the online forum is limited to WIC members only - o **Q1**: How to give feedback in the most efficient and timely way for Service Coverage Standards (Mar-May 2018)? - o Would prefer in-person meetings rather than just the online forum and conference calls	
Next Steps (Kimberley Smith)	• The Department will take everyone's feedback and put together a process plan to send out to members and guests	