

Children's Habilitation Residential Program (CHRP) Waiver Benefits Collaborative

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Department of Health Care
Policy & Financing

Our Mission

Improving health care access and outcomes for the **people** we serve while demonstrating sound stewardship of financial **resources**



What is the Benefits Collaborative Process?



Purpose

Why do we need Benefits Collaborative?

- Clearly define the sufficient amount, scope and duration of Colorado's Medicaid covered services.
- Ensure covered services are evidence-based and guided by best practices.
- Develop working relationships and collaborate with stakeholders.



*What's My Role Here
Today ?*

How Do I Participate?



Your Role

Participants Are Consultants

Your role is to provide suggestions for policy improvement based on:

- Evidence based research and data
- Peer reviewed literature
- Knowledge of the population we serve



Guiding Principles

Policy Suggestions Adopted Will:

- Be guided by recent clinical research and evidence based best practices, wherever possible.
- Be cost effective and establish reasonable limits upon services.
- Promote the health and functioning of Medicaid clients.



Our Role

- To seek out the feedback of the population we serve and those that support them.
- To implement suggested improvements that meet the collaborative's guiding principles.
- To foster understanding in the community about how policy is developing, and why.



Ground Rules

Participants Are Asked To:

- Mind E-manners
- Identify Yourself
- Speak Up Here & Share The Air
- Listen for Understanding
- Stay Solution Focused
- Stay Scope Focused



CHRP Expansion

Kimberley Smith – Compliance and Stakeholder Relations Unit Manager
Michele Craig– Complex Needs Program Development and Evaluation Unit Supervisor
Justine Miracle- Development Specialist, CHRP Expansion



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Office of Community Living Vision



ACCESS

*Streamline Access
to Services*



COORDINATE

*Improve Service
Coordination*



RECEIVE

*Increase Service
Options and Quality*

The What

2. The Department received the authority through HB 18-1328 to expand the CHRP waiver to better serve these children.

Modifications will include:

- Removal of requirement that the child be in foster care.
- Transfer of administration of the CHRP waiver from the CDHS to the Department.
- Transfer of case management from child welfare agencies to Case Management Agencies (specifically Community Centered Boards-CCBs).
- Addition of two services to the waiver to mitigate the need for an out of home placement and facilitate returns to the home once stabilized.



The How and The When

1. Engage stakeholders on new benefits
August-February 2019

2. Renew the waiver with CMS
March-June 2019

3. Promulgate rules and regulations
February-June 2019

4. Training on expanded CHRP waiver
April-June 2019

5. Transition to expanded CHRP waiver
February-June 2019



Eligibility - Selection of Entrants for the waiver

Children/youth age birth (0) through twenty (20) who have a determination of developmental disability by a Community Centered Board, meet the level of care criteria for Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF-IID) as defined in 42 CFR §440.150, and have extraordinary support needs as defined in 10 CCR 2505-10 8.500, and are at risk of, or in need of, out of home placement.



Assessment

Options based on stakeholder feedback:

- Continue use of the current assessment tool for the HCBS-CHRP waiver, the Inventory for Client and Agency Planning (ICAP), until the new Long-Term Services and Supports (LTSS) standardized assessment is implemented.
- Replace the ICAP with the Child and Adolescent Needs and Strengths (CANS) assessment until the LTSS standardized assessment is implemented. This option would include evaluating if and how the CANS assessment could be incorporated with the new tool.



Crisis

Crisis is an event or series of events, and/or state of being greater than normal severity that becomes outside the manageable range for the child/youth and/or their caregivers and poses a danger to self, family, community. Crisis may be self-identified, family identified, and/or identified by an outside party.



The Benefits

Intensive In-Home Therapeutic Support

REVISED TO:

Intensive Support Services



The Benefits

Intensive Support Component Services:

- Crisis Mitigation Plan revised to - *Wraparound Plan*
- In-Home Support - moved from the second component in order to the *third*
- Prevention and Monitoring - moved from the third component in order to the *second*



The Benefits

Intensive Therapeutic Transition Support

REVISED TO:

Transition Support Services



The Benefits

Transition Support Component Services:

- Risk and Crisis Mitigation Plan - revised to *Wraparound Transition Plan*
- In-Home Support - moved from the second in order to the *third*
- Prevention and Monitoring - moved from the third to the *second* in order



Crisis Assessment

- Revised language to remove “Crisis” from the Assessment
- Added need for Respite services
- The Department will not mandate a specific tool- agency providing the services will use the assessment form dictated by the training program through which they are certified.



Provider Qualifications

- Wraparound Facilitator
- Direct Support Professional



Questions for this group

- 1. Are there agencies or providers that you believe could provide these new services?**
- 2. How do you see your role and/or agency aligning with these two new services?**
- 3. Are there any other questions or concerns you would like us to take into consideration as we move forward?**



Step 3:

Advising Councils Review

- Night MAC (State Medical Assistance and Services Advisory Council)
 - 42 CFR 431.12
- Children's Advisory Committee



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Step 4:

Public Comment Period

- Public notice, announcing open and close dates, is sent to stakeholders and partners before the open date.



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Step 5:

State Medicaid Director Approval

- Benefit Coverage Policy reviewed internally
- State Medicaid Director approves



HCBS-CHRP Waiver Renewal

Stakeholder Engagement Meeting

Friday December 7, 2018

9:00am-12:00pm

Department of Health Care Policy and Financing
303 E 17th Ave, Seventh Floor Conference Room 7B
Denver, CO 80203

Remote Participants: Will send out webinar links following this meeting.



Thank you!

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