



COLORADO

Department of Health Care
Policy & Financing

Meeting Minutes Children's Disability Advisory Committee Department of Health Care Policy and Financing

Colorado Department of Public Health and Environment
4300 Cherry Creek Drive South, C-1-A Room Located in Building C
Denver, CO 80246

Note: Participants need to sign-in at the CDPHE front desk in Building A to receive a badge for access to Building C.

February 13, 2019
10:00 a.m. to 12:00 p.m.
Phone: 720-279-0026 or 1-877-820-7831

Pin: 308112

Webinar: <https://cohcpf.adobeconnect.com/childcommittee/>

Agenda Items

1. Meeting Purpose: Christy Blakely

Christy Blakely shared that the purpose of this meeting is to share current issues in children's services. The attendees want to find the barriers that children face in the system and resolve the problems. The meeting attendees are trying to educate themselves and move ahead with good ideas.

2. New Business

a) CES, SLS, DD, CHRP Waivers/Public Comment Period Open – Lindsay Westlund

- Fact Sheets Available and Summary of Changes at:
- www.colorado.gov/hcpf/hcbs-waiver-transition

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www.colorado.gov/hcpf



Lindsay Westlund introduced herself as an HCBS Benefits specialist at the Department of Healthcare Policy and Financing. She stated the comment period is open right now for CES, SLS, DD, and CHRP HCBS Waivers. Their renewal will be effective July 1, 2019. The fact sheets and summary of changes are posted on the website with instructions on where to send comments.

Bethany Pray asked if some of the changes discussed at the CES stakeholder meetings would be incorporated to the current changes. Candace Bailey, Community Options Benefits Section Manager from the Department of Health Care Policy and Financing, stated that they were not able to incorporate all of the changes, because the Department does not currently have the authority to make these types of changes, but some of the requests presented at the CES stakeholder meetings could be implemented without changing the waiver at all.

Bethany Pray asked if it would be harder to change elements of the waiver after the renewal. Candace Bailey responded that it would not be harder, because the Department is able to amend the waiver during the life of the waiver.

Candace Bailey also mentioned that the CHRP renewal would include the changes that are currently underway [being discussed at other stakeholder meetings], because the Department has already been given legislative authority to implement these changes.

b) Family Support Services Program (FSSP) Update – Kendall Smith (HCPF)

Kendall Smith introduced herself as the new FSSP Benefit Specialist and explained the Department was working to revise regulations on the FSSP. Kendall Smith explained that most of the changes had already come from the manual, would clean up the eligibility requirements, and would standardize waitlist.

It was asked if CCBs could keep a waitlist if they aren't using the full amount of money given. For example, could a CCB only allow about \$1,000 per family? Kendall Smith responded that the CCBs have the flexibility to determine how they allocate money and whether they have a cap on enrollment or evenly distributed money. Candace Bailey mentioned the FSSP is determined with a set amount of General Fund dollars allotted to each CCB based on their numbers.

Kendall Smith mentioned that the new regulations will allow the Department to have better authority over the program.



One parent in the room mentioned her family uses this program for respite, hippotherapy, conductive education/therapy, summer camp, and housekeeping to supplement her child's CHCBS waiver. Another mom on the phone mentioned she has two kids, who used to use the program, but they've been waitlisted and felt the current regulations were very vague and confusing.

There was a question about how the Family Support Council is developed, who is on the council, and how the CCBs can outreach for more members.

Carol Meredith mentioned she wants to see the budget and amount of the funds that are following the program including family support coordinator and administrative costs and limits for the CCBs.

One mom mentioned she's used FSSP and really appreciated the Family Support Coordinator being in place.

The Department was asked and agreed to send out information on the CES and FSSP work groups and the upcoming meetings.

c) CES Waiver Workgroup Updates – Lindsay Westlund

Lindsay Westlund said the Department is hosting a series of meetings to discuss elements of the CES waiver that have been brought up by the stakeholder community as areas of improvement. The first meeting was based on plain language, specifically creating plain language in relation to targeting criteria. The goal is to make the targeting criteria and regulations more easily understood by families, CCBs, vendors, and anyone who would need to understand them. The next meeting will be February 27, 2019 and will discuss the CES application and if it can be modified or needs to be used at all. Discontinuing use of the application will not need a waiver amendment but will need input from case managers and families because it will change the way data is collected and reported. Then, there will be a meeting in March to identify roles and responsibilities. As the group decides on changes, they will also decide if there's a need for more training amongst stakeholders. The Department will work with the necessary entities to provide it [training]. Related information can be found on the OCL Stakeholder page:

<https://www.colorado.gov/hcpf/OCL-stakeholder-engagement>



Christy Blakely asked if there was a date set for March yet. Candace Bailey said there was a date previously discussed, but it falls on spring break, so the meeting may be moved to the first week in April.

d) Update on billing codes for Behavioral Therapy – Gina Robinson

Beth Cole mentioned the codes for ABA had changed and asked if they had been corrected yet. Gina Robinson from the Department of Health Care Policy and Financing answered by explaining that there is a process where the Department gets codes in November. CMS had closed a code the Department was not expecting, so the Department had to quickly open a new one. Effective January 1, 2019, the code 96111 was shut down and 96112 and 96113 were opened and providers were notified through a provider bulletin. On January 4, 2019, the Department notified pediatric therapists. 96112 is for the first unit and 96113 is for every unit after the first. About 20-25 codes were closed at that time, so everyone [multiple provider types] had to change their PARs. The Department understands the confusion caused but this [came] from CMS – so it must be implemented. The last time this happened, the Department attempted to change the PARs for providers, but this led to many phone calls, because the Department had to verify the needed units with each provider. This time the Department decided to ask the providers to revise their own PARs. Some providers are getting paid, but some are still not getting paid and the Department is trying to connect those who are not [getting paid] with eQHealth or DXC for help. For providers still having issues, they should contact Gina Robinson or email EPSDT@state.co.us. Some stakeholders have begun saying Medicaid no longer pays for these services and that is not accurate.

Beth Cole asked if these codes were for screening or evaluation. Gina Robinson answered that it was for evaluation, not screening. These codes are for the next step after the office visit.

Christy Blakely asked if there was a bulletin. Gina Robinson confirmed there was one sent and there will be another in the future.

Beth Cole also asked if this affected all provider types. Gina Robinson said it usually affects clinics, such as pediatricians, family physicians, psychologists, etc.



3. Old Business

a) CHCBS Parental Fee updates – Candace Bailey (HCPF)

Candace Bailey shared an update from Dennis Roy at the Department. The Department is working through the questions from the last two stakeholder meetings in January. They are hoping to have out the FAQ and other supporting documents soon. The Department is still coordinating Parental Fees and HIBI. The fee scale was adjusted again to mirror the slope of the Buy-In scale. The Department still does not have a date for when this will be presented to the legislature. The Department is aware of differing information about CNA income and how it is counted. Dennis Roy is working with the eligibility team on this issue. The Department has been told IHSS income is non-taxable income, based on the IRS regulations, but CNA is still taxable.

Ryan Zeiger from PASCO mentioned that there is a new issue related to the fees that MAGI kids will be allowed to receive CHCBS services, when they couldn't before. There are new rumors and feedback that CNA eligibility is being counted now. The IRS information is only about taxability, not countability.

Beverly Hirsekorn from the Department of Health Care Policy and Financing said that Shawn Bodiker, who is a supervisor, will be coming to the meeting next month. The policy specialists at the Department are working on the issue. IHSS is considered a difficulty of care payment.

Questions were posed as to whether families should be notified and if difficulty of care payments mattered for countability or for only taxability. Beverly Hirsekorn answered that it depends on circumstances. Under IRS guidelines, if a person is a live-in caregiver, whether or not the person is related to the individual receiving services, and the services are given under a waiver, that's a difficulty of care payment.

It was questioned if that [difficulty of care payments] would include CNA [income] if it was provided under a waiver such as CES or CHCBS. Candace Bailey answered that the Department is still uncertain, because different people have given different answers. Beverly Hirsekorn added that in the past the Department has always allowed that if services have been provided under a waiver it's exempt, but not if it's provided under MAGI.



Jocelyn mentioned a family she works with has a child with a disability on a waiver, but the CNA income put her family over the limit. In the past, children could go on SSI to stay eligible, but she wondered if they would lose SSI because of CNA income, as well. Beverly asked for an email with this client's information, so the Department can be aware and can have correct information and answers at the March meeting.

Chris Russell mentioned she has worked with several families who lost Medicaid because of CNA income. At this point, it isn't a question of if the income is taxable; it's whether or not the income is countable. Beverly Hirsekorn mentioned the Department is working on an answer.

Ryan Zeiger recommended the Department put a hold on discharging families based on CNA income until the question is answered. Beverly Hirsekorn stated the Department has given guidance, but this isn't just county or state policy, it's federal policy. Colorado is a 1634 state, so federal policy must be followed, therefore if anyone has examples of counties with policies related to this issue, they should be sent to the Department.

Comments were made that this was much different in Colorado than other states, because in other states providers aren't as likely to live in the house or use other difficulty of care programs that are not counted.

Chris Russell asked where to send examples. Examples could go to Lindsay Westlund for the next month to help facilitate the presentation, but after that they would need to go to the Medicaid eligibility inbox.

Corrine, a parent in the room, asked if IHSS income will count for the calculation of the parental fees. Candace Bailey said the IRS guidance says no, since it is not taxable. Corrine then asked if they stopped counting IHSS income for eligibility, if families would get bumped into the Buy-In. Candace Bailey said the AG's office provided the Department guidance that if a client qualified functionally, the client could stay on CHCBS regardless of income. Chris Russell requested some clarity, as she understood the policy would take effect in October and it was not understood what should happen with clients until then. The Department is working on communication on how this will go into effect.

Erica asked if there were any projections for what this would do to caseloads for case management agencies. Christy Blakely chimed in regarding SSI kids, as now there are more families eligible. Erica again mentioned concerns that this may be too much for case managers to handle. Candace Bailey said that this is an excellent question for



Dennis Roy, as the subject matter expert, but that case management is fee for service for this waiver, so it could be seen as potentially revenue boosting, but in regards to the exact fiscal analysis, Dennis should have the answer.

Beverly Hirsekorn clarified that Buy-In children who qualify for the waiver based on level of care should be enrolled on to the waiver, not the Buy-In because waivers don't consider parental income, only the child's.

4. Public Comments

- a) Bethany Pray asked if the group was interested in a legislative update.
- There is a bill for dental services for pregnant women under CHP+.
 - The K-5 Social and Emotional Health Act is about creating pilots in lower income districts to help children in school and would also help families with referrals for things like food assistance.
 - There's a House bill about hospital transparency.
 - Another House bill is for the Department of Health Care Policy and Financing and the Division of Insurance within the Department of Regulatory Agencies to study and come up with an affordable public option to alleviate some of the pressures on families in areas where health insurance is very expensive.
 - Mental Health Colorado is working on advanced mental health orders for mental health conditions.
 - The Colorado Department of Public Health and Environment is looking into Colorado's maternal mortality rates.
 - There's a House bill for the Office of Saving People Money on Health Care that will allow Lieutenant Governor Primavera to be the head [of the new department] and to look more broadly at healthcare costs.
 - There's a bill to expand subsidized school lunch, which would go through 12th grade, while currently it just goes through 8th.
 - There are also bills that that will address out-of-network healthcare costs, surprise billing, and require providers to set up payment mechanism.
- b) Beth Cole added that there's one bill that hasn't been introduced yet, but it is being spearheaded by Colorado Trust.



5. Adjourn

6. Future meeting topics

- a) Parent CNA Income and MAGI Eligibility (March 2019)
- b) Updates on Parental Fees
- c) CES Update
- d) Legislative Updates

Reasonable accommodations will be provided upon request for persons with disabilities. Please notify Lindsay Westlund lindsay.westlund@state.co.us or the 504/ADA Coordinator hcpf504ada@state.co.us at least one week prior to the meeting.

