

State SLS Comments for Medical Services Board – April 12, 2019

1. New eligibility and new services for State SLS in these rules have the potential for expanding the number of people who may participate in State SLS. With 142 State SLS resources coming from the I/DD cash fund to address the current waiting list, how does the state anticipate funding additional enrollments?
2. If there are to be waiting lists, some of the newly defined services, e.g. housing stability, food, setup costs for new housing, would not be able to be utilized. The development of these new services would then seem moot.
3. If services will be available to individuals receiving services in other waivers (e.g. HCBS-EBD), how will coordination be done between the two entities to ensure there is no duplication and ensure all requirements are met? (e.g. 8.501.4.D.)
4. The latest draft regulations do not include a funding level determination or assessment, but do address HCBS-SLS service limits applying to the State SLS program. What method will be used to determine individual funding levels to accompany service limits? Will the SIS be considered? How will the individual's need for services be assessed, particularly in the area of ongoing support?
5. Pages 6 and 7 - 8.501.3 CCB and PASA Reimbursement
 - Page 6, line 31 - the CCB should be able to determine the timelines for the submission of claims and requests for payment, rather than it being defined in rule.
 - Page 7, line 5 - 3.a. Services and Supports are provided by a qualified PASA (also page 10, line 12). This does not appear consistent with 8.501.2.3.g., which allows for the CCB to provide a support service or with other temporary services, which may be based on a payment, rather than a service. In addition, not all services and supports provided through the SLS program are provided by PASAs. Some services are provided by Independent Contractors, vendors, family members. These payments are made through the CCB as the OHCDS. The rule should not limit services to be provided by PASAs only.
 - Page 7, lines 18-24 – 6. and 7. Reimbursement based on the Department's published fee schedule. In accordance with 10 CCR 2505-10 8.603.10 C.2., the CCB has been provided the authority to negotiate rates for the purchase of services. It is important to continue this ability within the CCB catchment area to allow for flexibility in meeting the need so individuals and allowing for geographic cost differences.
6. Page 7, line 28 - 8.501.4.A. - Waiting for HCBS waiver enrollment – is this specific to HCBS-DD or HCBS-SLS or could it be for other waivers when a person has been determined to have an intellectual and developmental disability. For example, if awaiting a Medicaid determination for enrollment in HCBS-EBD, could State SLS Funds be utilized during the waiting period? If for I/DD waivers only, clarification would be beneficial.

7. Page 8, line 4 - 8.501.4.B – Temporary Hardships – while the rule identifies funding limits within a State Fiscal Year, it does not quantify ‘temporary’, nor does it define a limit to the use of funding over more than one State Fiscal Year.
8. Page 9, lines 10-11 – 8.501.4.C. - Supporting Independence in the Community – as above (#7), this does not specify I/DD waivers (states ‘an HCBS waiver’). Clarification would be beneficial. In addition, when an individual is enrolled in an HCBS waiver, would these services be in addition to the newly included waiver transition services?
9. Page 10, lines 5-7 – 8.501.4.D.1. – On-going State SLS Support – this section limits eligibility to those who do not meet requirements to be enrolled in the HCBS-SLS waiver. Could these supports be extended to individuals who do not meet requirements to be enrolled in the HCBS-DD waiver as well?
10. Page 10, line 12 – 8.501.4.D.1.c. – what will be needed for a PASA to be ‘authorized’ to provide State-SLS services? See above.
11. Page 11, lines 1-2 – 8.501.4.E.4. – This requires support plans to be reviewed with the client in a face-to face meeting at least every six months. This requirement seems overly burdensome.
12. Page 13, line 1 – 8.501.6 – Moves to another CCB catchment area – this process is defined for an individual who moves and wishes to transfer his/her State-SLS services, however, the language includes those who are on the waiting list for State-SLS. The process does not seem consistent for individuals waiting for State SLS services. In addition, language should be consistent with the individual having moved to another CCB catchment area, not considering a move and needing support for a transfer (line 24).