

2018-2019 IDD Waivers Renewal

Persons with Developmental Disabilities
Waiver (DD)
Supported Living Services Waiver (SLS)

Waiver Appendices D, E, & F

Presented by: Dennis Roy

Sept-06



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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**



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Ground Rules

During the meeting:

- Please hold all questions or comments until a break in the presentation
- For those accessing via webinar we will address your questions during breaks

During the engagement process:

- Questions about this Stakeholder engagement process can be sent to: hcbswaivers@state.co.us
- If you have a formal comment/suggestion on the waiver(s), please submit them to ltss.publiccomment@state.co.us



Meeting Purpose



- Inform Stakeholders of the Waiver Renewal Process & CMS required information.
- Explain the content of a HCBS waiver application
- Explain how the waiver applications illustrate the respective program operations



Other Efforts



- Waiver Implementation Council
- Current Waiver Amendments
- HCBS Settings Transition
- Statutory Changes
- Conflict Free Case Management (CFCM)



Scope

Things that can change:

- Can correct grammatical/technical language errors

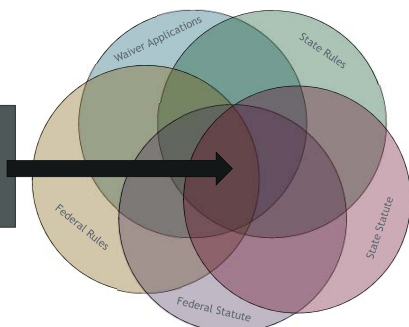
Things we cannot change:

- Cannot change existing contracts
- Cannot change budgetary allocations



Policy Sources

How the Member experiences the program



Home and Community-Based Services Overview



HCBS waiver authority

- Permits a state to offer home and community-based services to individuals who:
 - Are found to be at risk of institutional placement
 - Members of a target group included in waiver
 - ex: Brain Injury, Spinal Cord Injury, etc.
 - Meet Medicaid financial eligibility criteria
 - Require 1 or more waiver services to function in community
- Exercise freedom of choice.



Waiver Application Process

- States must submit initial waiver application to CMS
- Initial approval period is 3 years
- After initial period renewal occurs every 5 years
- Colorado waivers requiring renewal in 2019 include DD, SLS, CES and CHRP.



Renewal Process

- The Persons with Developmental Disabilities (DD) and the Supported Living Services (SLS) waivers expire on June 30th, 2019.
- State's must respond to Evidentiary Reports and other CMS Guidance
- Waiver Applications submitted 90-180 days in advance



Intended Timeline

Important Dates:



- Public Comment Period from 1/28/2019 through 2/28/2019
- The Department hopes to submit the renewal to CMS around 3/1/2019
- Renewals will go into effect on 7/1/2019

Center for Medicare and Medicaid Services (CMS)



CMS has requirements States must meet when administering a waiver.

What are those requirements?

Today's Sections



Appendix D: Participant-Centered Planning and Service Delivery



Appendix E: Participant Direction of Services



Appendix F: Participant Rights

D: Participant-Centered Planning and Service Delivery



How are participant needs identified and addressed during the service plan development process?

Appendix D Identifies

Participant-centered service plan development and outlines the implementations and monitoring of the service plan

Appendix D: Technical Guide

- D-1 Service Plan Development
- D-2 Service Plan Implementation and Monitoring
- Quality Improvement: Service Plan



What does Colorado include in Appendix D of the Waiver Application?

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D: Responsibility for Service Plan Development (DD/SLS)

Case Managers Qualifications:

- Bachelor’s degree in a human behavioral science or related field of study; or
- Experience working with LTSS population, in a private or public agency may substitute for the required education on a year for year basis

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D: Service Plan Development Safeguards (DD/SLS)

20 Community Centered Boards (CCB) act as Case Management Agencies (CMA) and are required to complete:

- Support Intensity Scale (SIS)
- Each participant’s Service Plan on the Benefits Utilization System (BUS)
- Assist participants with Service Provider selection and monitor satisfaction/dissatisfaction.

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D: Supporting the Participant in Service Plan Development (DD/SLS)

Each CCB is contractually obligated to provide information to participants about:

- Potential Services
- Supports
- Resources



D: Service Plan Development Process (DD/SLS)

What: The Service Plan is developed on the Benefits Utilization System (BUS).

When: Completed annually and at the time of enrollment in waiver services.

Where: Every effort shall be made to hold the meeting at a time and place convenient to the person receiving service.



D: Risk Assessment and Mitigation (DD/SLS)

- The Supports Intensity Scale (SIS) is completed along with service provider assessments
- The CM identifies and documents any safety concerns in Service Plan
- A Back-up Plan is created during development of the Service Plan



D: Informed Choice of Providers (DD/SLS)

Waiver Participants can select their providers from a statewide list of qualified Medicaid providers.



D: Process for Making Service Plan Subject to the Approval of the Medicaid Agency (DD/SLS)

- CM is required to utilize the BUS to enter:
 - Service Plans
 - Monthly case management log notes
 - Utilization Long-Term Care assessment (ULTC 100.2)



D: Service Plan Implementation and Monitoring (DD/SLS)

- CM are responsible for monitoring the implementation of the service plan and the health and welfare of the participant.
- Department is in the process of implementing Conflict Free Case Management (CFCM) by 2022



D: Quality Improvement (DD/SLS)

State must assure that:

The state demonstrates it has designed and implemented an effective system for reviewing the adequacy of service plans for waiver participants.

How does the HCPF meet the assurance?



D: Quality Improvement (DD/SLS)

State meets the assurance with 9 separate Performance Measures (PM).

The PMs in Appendix D provide CMS with the assurance that the participant's support plan is meeting their needs and services are delivered according to the support plan



E: Participant Direction of Services




What authority do participants have to direct some or all of their waiver services?



Appendix E Identifies


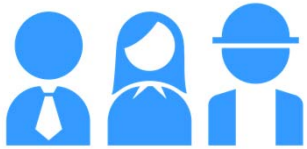
If the waiver affords participants the opportunity to direct some or all of their waiver services



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Appendix E: Technical Guide

- E-1 Overview
- E-2 Opportunities for Participant Direction



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What does Colorado include in Appendix E of the Waiver Application?



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E: Participant Direction of Services (DD/SLS)

- DD: This waiver does not provide participant direction opportunities
- SLS: This waiver provides participant direction opportunities through Consumer Directed Attendant Support Services (CDASS)



E: Description of Participant Direction (SLS)

- Gives participant the ability to recruit select, discharge, train, schedule, supervise and set wages for attendants.
- Participants must live in their own private residence or home of a family member.



E: Election of Participant Direction (SLS)

The SLS waiver is designed to offer participants the opportunity to direct some of their services.

- Prior to making the decision to participate in CDASS, participants are informed of all possible service options by their CM.



E: Participant Direction by a Representative (SLS)

CDASS Participants can select an Authorized Representative to direct CDASS option or may be required to select an Authorized Representative (AR) if required by a physician attestation.

- The AR may be selected by the participant or legal representative if the Authorized Representative requirements are met.



E: Participant-Directed Services (SLS)

- Basic Homemaker
- Enhanced Homemaker
- Health Maintenance Activities
- Personal Care



E: Financial Management Services (FMS) (SLS)

The following are services provided by the FMS:

- Perform CBI and Nursing background checks
- Ensure Attendants meet minimum qualifications
- Process Paychecks
- Track and report Utilization of allocations
- Customer services



E: *Information and Assistance in Support of Participant Direction(SLS)*

- CM assist the participant in the development of their Service Plan
- The Department contracts with a training vendor to provide CDASS participants training on the responsibilities of participant directed care.



E: *Voluntary/Involuntary Termination of Participant Direction (SLS)*

- Voluntary: Participant notifies CM when deciding to terminate CDASS and the CM assists in transition.
- Involuntary: The Department may involuntarily remove a participant from CDASS



E: *Participant - Employer Authority (SLS)*

The participant or AR employs the individuals who provide their CDASS supports.

- The Participant/CDASS AR recruits, hires, schedules and trains their attendants
- The Participant/ CDASS AR is the managing employer and legal employer of their attendants



E: Informing Participant of Budget Amount (SLS)

- CM and participant develop the task worksheet based on support needs and SPAL which will generate the CDASS allocation amount
- Modifications to the participant directed budget must be preceded by a change in the service plan



F: Participant Rights



How are participant rights protected?



Appendix F

Participant's right to request a fair hearing



Appendix F: Technical Guide

- F-1 Opportunity to Request a Fair Hearing
- F-2 Additional Dispute Resolution Process
- F-3 State Grievance/Complaint System





What does Colorado include in Appendix F of the Waiver Application?



F: *Opportunity to Request a Fair Hearing (DD/SLS)*

- Participants are notified of adverse action through issuance of a written form entitled the Long Term Care Waiver Program Notice of Action (LTC 803 Form)
- A waiver participant is notified of his/her right to a fair hearing upon enrollment in the waiver and when the CCB anticipates an adverse action will be taken.



F: Additional Dispute Resolution Process (DD/SLS)

A waiver participant may utilize the additional process to dispute the specific actions taken by the Community Centered Board (CCB), Program Approved Service Agency (PASA) or other qualified provider



F: Additional Dispute Resolution Process (DD/SLS)

- Notice of intended action provided to participant at least 15 days prior in writing
- Participant files complaint
- Within 15 days agency provides opportunity to participant to informally negotiate
- If unable to resolve complaint, present to impartial decision maker



F: Department Review of the Dispute Decision (DD/SLS)

- The Department is responsible to review the dispute decision
- The Department monitors the Dispute Resolution process at PASA agencies through an Agreement with the Colorado Department of Public Health and Environment (CDPHE)



F: Operation of Grievance/ Complaint System (DD/SLS)

The Department is responsible for operating the state grievance/complaint system. Rules describing the requirements for this process are located at 10 CCR 2505-10



Questions or Concerns?



Submit any public comments to:

ltss.publiccomment@state.co.us



Next Meeting

September 20, 2018

10:00 AM - 12:00 PM



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Thank You!
