



MINUTES

Community First Choice (CFC) Council Meeting Minutes

Monday, August 5, 2013

1:00 – 2:30 pm

Department of Human Services

Conference Room 4A&B

1575 Sherman Street

Denver, CO 80203

Greetings (Martha Beavers)

Co-Chairs: Josh Winkler (CCDC), Martha Beavers, (HCPF)

Other Attendees: Marijo Rymer (Arc of Colorado), Ed Milewski (CPWD), Dawn Russell, Ed Kako (Mission Analytics), Kira Gunther (Mission Analytics), Tyler Deines (DHS-DDD), Lori Thompson (DHS-DDD), Susan Johnson (DDRC), Candie Dalton (HCPF), David Bolin (Accent on Independence), Emily Blanford (DHS-DDD), John Barry (HCPF), Anaya Robinson (Atlantis), Barry Rosenberg (PASCO), Jose Torres (CCDC), Ellen Jensby (Alliance), Elisabeth Arenales (CCLP), David Henninger (Bayaud Enterprises)

Phone Attendees: Bret Pittenger (HCPF), Keith Percy (Boulder), Joanna, Jennifer Shook (Legal Center for People with Disabilities, Heather Jones (Mesa County), Diana Delgado (, Chris Collins (Alliance), Carol Meredith (Arc of Arapahoe-Douglas), Jill Pidcock (Parent), Mason Smith (Mission Analytics), Anita Cameron (ADAPT), AJ Diamontopoulos (VOA), Cathy Kaufman, Jean Hammes (AAA), Louise Delgado (West Central Mental Health Center) , Rob Deherrera (DDRC), Tim Lopez, Kira Gunther (Mission Analytics), Gary Montrose, Beverly Hirsekorn (HCPF)

Open Questions/Concerns: none

July meeting notes: July notes posted on the website.

CMS policy Update (Martha Beavers)

CMS informed Colorado that the state can waive whatever portions of its Nurse Practice Act it needs to waive to implement CFC. The Council will first have to decide whether to waive the Nurse Practice Act at all for CFC. The group discussed different scenarios of delegation. Martha suggested that the topic would need more discussion before any policy decision will be made.

Proposal regarding 15 minute increment billing (Barry Rosenberg)

Barry Rosenberg responded to recommendation about billing in personal attendant services in 15 minute increments. These are very important services that individuals cannot live without. Barry gave a history of billing and expressed concern that billing would create hardship for consumers and attendants.

Bret Pittenger explained that we are not proposing policy changes; we were simply using data for CFC modeling.

Martha Beavers pointed out that there are different billing requirements for different activities and no policy direction or decisions have been made about billing or rates for CFC. For purposes of cost estimates, the model is taking historical claims data and current billing practices and so to compare the data must be normalized.

Cost analysis discussion (Ed Kako and Josh Winkler)

Ed Kako began with a short presentation and then demonstrated the CFC financial modeling scenarios. Martha Beavers will distribute the presentation after the meeting. He reviewed the main components of the model: input data (e.g. number of clients and costs by waiver); choices (e.g. services that are "turned on" as part of CFC); and output (the cost to state general fund). Users of the model can now specify the degree to which current LTHH clients will substitute CFC services for LTHH services. The latest version of the model also allows users to indicate what share (percentage) of a service is eligible for the enhanced match. (Since services are bundles of activities, and not all activities are CFC-eligible, that share will sometimes be less than 100 percent.)

Ed presented 4 scenarios run by HCPF using Mission's model,

1. EBD "light"
2. SLS-No Residential Habilitation
3. DD
4. CFC recommended services.

People found these scenario names confusing and this will be changed. People also did not like the term "wish list" and this will be revised. Each model has a different set of services and assumptions about costs. For example, the "EBD light" scenario includes Residential Habilitation and assumes a relatively low cost for new clients (waitlist clients, long-term home health clients, and entirely new clients); the "DD" scenario also includes Residential Habilitation but assumes a relatively high cost for new clients. Each of these scenarios was detailed in a handout made available to meeting participants.

Under the set of assumptions presented – which are subject to change – the costs to the Colorado General Fund for each of the scenarios is as follows:

- EBD Light: \$13.5 million
- SLS – No Residential Habilitation: \$23.3 million
- DD: \$68.5 million
- CFC Council recommended: \$76.8 million

Ed pointed out that while the exact dollar amounts will likely change depending on scenario assumptions, the order of the scenarios (from least to most expensive) are unlikely to change. In other words, EBD light will be the least expensive scenario, and the CFC recommended will be the most expensive.

Martha will distribute copies of the presentation electronically.

Next Steps, Questions and Wrap Up (All)

- The feasibility analysis will include more information about the model. Some members suggested providing a more detailed PDF of the model with assumptions.
- The next meeting will be on September 9th, 2013.