



Home and Community Based Services Waiver Amendments and Transition Plan

On March 17th, 2014 the Centers for Medicare and Medicaid Services (CMS) enacted a Federal rule (CMS 2249-F and CMS 2296-F) to ensure individuals receiving Long Term Services and Supports through Home and Community-Based Service (HCBS) waiver programs have full access to the greater community and reside in home-like residences.

In order to satisfy the Federal rule requirement, states must submit individual, waiver-specific transition plans to meet new Federal criteria for all relevant HCBS programs under 1915(c), 1915(k) and 1915(i) when the state amends that waiver. These Transition Plans will outline how the final rule will be implemented over the next five years for individual waivers and will provide assessment, strategies, and timelines for meeting the requirements of the new rules

CMS Final Rule Summary

- The setting is integrated in and supports full access to the greater community;
- Is selected by the individual among setting options;
- Ensures individual rights of privacy, dignity, respect, and freedom from coercion and restraint;
- Optimizes autonomy and independence in making life choices; and
- Facilitates choice regarding services and who provides them.

The final rule requires that all home and community-based settings meet certain qualifications. These include:

- The individual has a lease or other legally enforceable agreement providing similar protections;
- The individual has privacy in their unit including lockable doors, choice of roommates, and freedom to furnish or decorate the unit;
- The individual controls his/her own schedule including access to food at any time;
- The setting is physically accessible.

Background of Plan

The Department of Health Care Policy and Financing (the Department) will be submitting amendments for six out of the seven Long Term Services and Supports (LTSS) waivers to CMS on September 30th, 2014. The waivers that require amendments and individual transition plans are as follows:

- Elderly, Blind, and Disabled (EBD)
- Community Mental Health Supports (CMHS)
- Brain Injury (BI)
- Spinal Cord Injury (SCI)
- Children with Life Limiting Illness (CLLI)
- Children's Home and Community Based Services (CHCBS)

Summary of Waiver Amendments

Increase to the Home Modification Service Limit

- EBD, CMHS, BI, and SCI will increase lifetime maximum from \$10,000 to \$12,500.

General Rate Increases

- EBD, CMHS, CLLI, and CHCBS will update rate projections for legislative approval of a 2% across the board increase. Note: SCI and BI have already included these increases in previous amendments.

Unduplicated Client Count Increase

- EBD, CMHS, and BI will increase overall unduplicated count in projections of those served on the waiver.

EPSDT State Plan Personal Care Exception

- EBD, CMHS, and SCI will include exceptions in the waiver to add clarifying language that those eligible for EPSDT State Plan Personal Care services access those services prior to accessing the service on the waiver. Note: BI has already included this exception in previous amendments.

Fiscal Management System (FMS) Change

- EBD, CMHS, BI, and SCI will include changes to the FMS model to account for more client choice when they use a Consumer Directed service delivery option.

ICD10 Transition

- CMHS and SCI will amend the waiver to change ICD-9 Diagnostic codes to allow for the new ICD10 code migration. Note: BI has already addressed this issue within the waiver.

Targeted Rate Increase

- CLLI requires an amendment to account for the targeted rate increases it received in the 2014 legislative session.

Inclusion of Reserve Capacity

- BI requires an amendment to include the ability to reserve capacity within the waiver for the Transitional Living Program.

Removal of OT/PT Inclusion in the Supportive Living Program

- BI will remove current inclusion of Occupational Therapy and Physical Therapy as covered services within the service.

GUIDELINES ON SUBMITTING COMMENT



- The Department will have this draft of the Waiver Amendments and Waiver Specific Transition Plans open for public comment from August 20th to September 19th. The amendments and plans will be posted on the Department's website here: <https://www.colorado.gov/pacific/hcpf/hcbs-waiver-transition#WaiverAmendments>
- Individuals may request draft Waiver Amendments and Transition Plan materials via email at HCBS_Rules_Submission@state.co.us
- Comments regarding the draft Waiver Amendments and Waiver Specific Transition Plans can be emailed directly to HCBS_Rules_Submission@state.co.us
- Comments can also be addressed to the following:
ATTN: HCBS Transition
1570 Grant Street
Denver, CO 80203
- All comments will be maintained and responses provided in a regularly updated listening log kept on the Department's website found at <https://www.colorado.gov/pacific/hcpf/hcbs-waiver-transition>

The Department commits to incorporating comments, concerns, and suggestions into the proposed transition plan when possible.



