



COLORADO

Department of Health Care
Policy & Financing

Home and Community Based Services (HCBS) Waiver Renewals and Amendment Overview

The Department intends to submit the Home and Community Based Services (HCBS) Elderly, Blind, and Disabled (EBD) waiver, the Persons with a Brain Injury (BI) waiver, and the Children's Home and Community Based Services (CHCBS) waiver for renewal on February 26th, 2018.

Significant changes to the CHCBS, EBD, and BI waivers include updated language that speaks to conflict free case management; updated performance measures; updates to the Quality Improvement Organization (QIO) operation; and updates to the forecast for expenditures for the life of the waiver. In addition, the BI and EBD waiver include the request for consolidated reporting for the Quality Improvement Strategy and updates to the coverage of the Home Modification benefit.

The Department also intends to submit a waiver amendment for the Spinal Cord Injury (SCI) waiver to increase the unduplicated client count.

The Department will have the renewals and amendments out for public notice from January 25th, 2018 through February 24th, 2018. The Department has asked for a retroactive effective date of October 1, 2017 for the SCI waiver Amendment and an effective date of July 1st, 2018 for the Renewals.

Explanations of the necessary changes to the above four waivers are found below.

Public Comment Opportunity

The Department will have drafts of the Waiver Renewals and Amendment posted on the Department's website at <https://www.colorado.gov/hcpf/hcbs-waiver-transition> for public comment.

To request a paper or electronic copy of any waiver renewals or amendment materials, including the full draft waiver and/or provide public comment please do so by:

Phone: 303-866-6113

Email: LTSS.PublicComment@state.co.us

Our mission is to improve health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources.

www.colorado.gov/hcpf



In-Person: 1570 Grant Street, Denver, CO 80203
Postal Mail: 1570 Grant Street, Denver, CO 80203 ATTN: HCBS Waiver Renewals and Amendment
Fax: 303-866-2786 ATTN: HCBS Waiver Renewals and Amendment

Public Comments will be accepted from January 25th through February 24th, 2018.

Summary of Changes

Conflict Free Case Management

- *BI, EBD, and CHCBS will include language that discuss the updated Conflict Free Case Management transition plan and future legislation.*

Summary: The Department has been working on implementing major changes with Conflict Free Case Management that will impact person-centered support planning and service delivery. The waiver renewals include language that speaks to the Department's Conflict Free Case Management transition plan, the requirements for Case Management Agencies for service plan development and implementation, and the pursuit of legislation to require the separation of case management from direct service provision for the same individual.

Quality Performance Measures

- *BI, EBD, and CHCBS address revised assurances and sub-assurances, as well as ensuring the global performance measures correspond in order across all waivers.*

Summary: To operate a 1915(c) HCBS waiver, the State must address how it intends to meet specific CMS requirements known as the HCBS waiver assurances. In March 2014, CMS added and revised several assurances and sub-assurances. The waiver renewals address the revised assurances and sub-assurances through the quality performance measures. The performance measures improve metrics on the health and welfare of our clients, the oversight authority of the Department over contracted vendors, and other efforts to increase the integrity of the performance measures and their data sources. The Department also ensured that global performance measures were in the same order across waiver programs to improve communication with CMS on waiver performance measures and make performance measure management by QIS staff more efficient.



Quality Improvement Operation

- *BI, EBD, and CHCBS update the contracted operations for a new Quality Improvement Organization.*

Summary: The Department is in the process of contracting with an independent Quality Improvement Organization (QIO). This QIO will do a number of activities to improve the Quality and Administration of the waivers. Some of these activities include a review of case files for each State Fiscal Year (SFY) to determine if the Case Management Agencies (CMAs) completed specific administrative and case management functions in accordance with Department regulations, responsibility and management of Critical Incident Reports (CIR)s, to review for duplication of service and overall service need based on all available data, and to review the CHCBS enrollment packet to determine if the child meets the CHCBS Targeting Criteria.

Forecast for Expenditures

- *BI, EBD, and CHCBS will update the forecast for expenditures to reflect the next five years for the operation of the waiver program.*

Summary: During the renewal process, the Department is able to update the forecast for expenditures and client count to more accurately project the expenditures for the life of the waiver.

Request for Consolidated Reporting

- *BI and EBD have included a request to consolidate the reporting for the Quality Improvement Activities to increase efficiencies during yearly reporting.*

Summary: When waivers are managed and monitored similarly, it is expected that discovery and improvement activities would be the same, and that the Department will achieve some administrative efficiencies by consolidating quality improvement activities. In addition, this holistic measure ensures that the system for the waivers is responsive to the needs of all individuals served.

Updates to the Home Modification Benefit

- *BI and EBD have updated the Home Modification benefit to remove activities that are now covered under the Durable Medical Equipment (DME) state plan service.*

Summary: As a result of the 2016 CMS final rule for Home Health, which includes changes to DME requirements, the Department has updated the Home Modification benefit to ensure that no duplication occurs with the DME state plan service. During a



previous waiver renewal, CMS asked the Department to update the Home Modification benefit to remove medical supplies and equipment that are offered through the state plan.

Increase to the SCI Waiver Unduplicated Client Count

- *SCI is being amended to update projections to acknowledge program growth.*

Summary: The purpose of this non-substantial amendment is to update the Factor C projections in Appendix B-3 to acknowledge recent program growth. The amendment additionally updates the cost neutrality demonstration in Appendix J to account for the projected increase in waiver participants. These amendments are necessary to ensure that this waiver program does not serve more clients than have been approved by the Centers for Medicare and Medicaid Services (CMS).

Guidelines for Submitting Comments

- The Department will have a draft of the Waiver Renewals and Amendments open for 30-day public comment from January 25th through February 24th, 2018. The renewals and amendments will be posted on the Department's website here: <https://www.colorado.gov/hcpf/hcbs-waiver-transition>
- Individuals may request a copy of the full waiver renewals and amendments by email, phone, fax, postal mail or in-person.
- Comments regarding the draft waiver renewals and amendments can be emailed directly to LTSS.PublicComment@state.co.us; submitted by phone at 303-866-6113; submitted by fax at 303-866-2786 ATTN: HCBS Waiver Renewals and Amendment or in-person at 1570 Grant Street, Denver CO 80203.
- Comments can also be addressed by mail to:

Department of Health Care Policy and Financing

ATTN: HCBS Waiver Renewals and Amendment
1570 Grant Street
Denver, CO 80203

- All comments and responses will be recorded in a listening log that will be published after the public comment period ends.

The Department commits to incorporating comments, concerns, and suggestions when possible.

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