

INFORMATIONAL MEMO

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TITLE:	COLORADO CHOICE TRANSITIONS (CCT) PROGRAM TIMELINES
SUPERSEDES NUMBER:	N/A
EFFECTIVE DATE:	JANUARY 1, 2020
DIVISION AND OFFICE:	CASE MANAGEMENT AND QUALITY PERFORMANCE DIVISION, OFFICE OF COMMUNITY LIVING
PROGRAM AREA:	COLORADO CHOICE TRANSITIONS (CCT) AND TRANSITION SERVICES
KEY WORDS:	CCT, COLORADO CHOICE TRANSITIONS, TRANSITION SERVICES, DISCHARGE, TRANSITION, TRANSITION COORDINATION AGENCY, TCA
INFORMATIONAL MEMO NUMBER: HCPF IM 20-002	
ISSUE DATE: JANUARY 6, 2020	
APPROVED BY: BONNIE SILVA	

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Purpose and Audience:

The purpose of this Informational Memo is to clarify enrollment timelines related to Transition Services and Colorado Choice Transitions (CCT). CCT is a demonstration program of the national Money Follows the Person (MFP) initiative, designed to assist Health First Colorado (Colorado's Medicaid Program) members who are interested in transitioning out of long-term care facilities back into Home and Community-Based Services (HCBS) settings. CCT provides members access to State Plan benefits, HCBS waivers and CCT-enhanced transition services and supports aimed at promoting independence for 365 days of enrollment.

Information:

Signed April 30, 2018, HB 18-1326: Support For Transition From Institutional Settings directed the Department of Health Care Policy & Financing (Department) to provide Community Transition Services and supports to persons who are in facility settings, who are eligible for Medicaid, and who desire to transition to an HCBS setting. The new program became effective on January 1, 2019, allowing for individuals to receive transition services and supports under existing Medicaid State Plan benefits and HCBS. To delineate the demonstration grant program from the newly created and sustainable services, the Department directed that in order to be eligible for CCT services, the following must occur:

- 1. The Transitions referral for the individual must have been accepted by a Transition Coordination Agency (TCA) prior to December 31, 2018, and;
- 2. Functional eligibility for HCBS must be determined, <u>and</u> individual must discharge to the community prior to June 30, 2019.

The Department received feedback from stakeholders that this did not allow sufficient time for individuals to plan with their team and safely discharge to the community prior to June 30, 2019. During the Transitions stakeholder meetings in July 2019, the Department shared that it was exploring the opportunity with our federal partners, the Centers for Medicare & Medicaid Services (CMS), to extend the discharge timeline to December 31, 2019, such that an individual would be eligible for CCT services upon discharge with the following to occur:

- 1. The Transitions referral for the individual must have been accepted by a TCA prior to December 31, 2018, and;
- 2. Functional eligibility for HCBS must be determined, <u>and</u> individual must discharge to the community prior to December 31, 2019.

At this time, the Department would like to confirm that individuals identified with Case Management Agencies (CMAs) having been accepted by a TCA prior to December 31, 2018 will remain eligible to receive CCT services **if** they have been determined to be

functionally eligible for HCBS <u>and</u> discharged to the community prior to December 31, 2019.

If you have any questions, please contact the Access Unit Manager, Matt Bohanan, at matthew.bohanan@state.co.us.

Attachment(s):

None

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