

1570 Grant Street Denver, CO 80203

Travel Time Frequently Asked Questions

FAQ October 2020

This is a resource for Providers and Case Managers to find answers to frequently asked questions regarding the discontinuation of travel time billing for Personal Care and Homemaker services for non-IDD waivers per <u>Policy Memo HCPF PM 20-008</u>.

Frequently Asked Questions

What is changing?

The 21st Century Cures Act requires that state Medicaid agencies implement an Electronic Visit Verification (EVV) System for select Home & Community Based and State Plan <u>services</u>. EVV in Colorado is mandated to begin January 1, 2021.

With EVV, direct care workers must clock-in at the beginning of service delivery and clockout at the end of service delivery. Providers may only bill for the duration of service delivery as recorded by EVV. Under Electronic Visit Verification and the federal definition of personal care and homemaker services, billing of travel time is not allowed. Therefore, billing for direct care worker travel time, i.e. to and from the participant's home, is not allowable as they are not delivering services directly to the individual. For more information on EVV, visit the <u>EVV homepage.</u>

What is the reason travel time billing needed to be removed for EVV?

With EVV, direct care workers must clock-in at the beginning of service delivery and clockout at the end of service delivery. Providers may only bill for the duration of service delivery as recorded by EVV. Therefore, billing for direct care worker travel time, i.e. to and from the participant's home, is not allowable under EVV as they are not delivering services directly to the individual. For more information on EVV, visit the <u>EVV homepage.</u>

If travel time is no longer allowed, how can my agency get reimbursed for travel expenses?

With EVV implementation, providers must bill duration of service only, not travel time. As of January 1, 2021, travel time will no longer be permitted to be billed.



The Department is aware that the discontinuation of travel time billing practices will potentially impact provider revenue or create access to care issues for members. Therefore, the Department incorporated travel time into the rate methodology for Personal Care and Homemaker services for the Elderly, Blind, and Disabled (EBD), Community Mental Health Services (CMHS), Spinal Cord Injury (SCI), and Brain Injury (BI) HCBS waivers.

Do the new rates that include travel only apply to agencies? What about CDASS or IHSS?

The rates impacted are Personal Care and Homemaker services for the Elderly, Blind, and Disabled (EBD), Community Mental Health Services (CMHS), Spinal Cord Injury (SCI), and Brain Injury (BI) HCBS waivers.

Participant Directed Programs such as Consumer Directed Attendant Support Services (CDASS) and In-Home Support Services (IHSS) do not include travel; therefore, the rates have not been rebased.

What are the rate changes?

Starting January 1, 2021, the 15-minute unit rate for agency-based Personal Care and Homemaker services for the Elderly, Blind, and Disabled (EBD), Community Mental Health Services (CMHS), Spinal Cord Injury (SCI), and Brain Injury (BI) HCBS waivers will be \$5.29. This rate rebasing coincides with the Federal EVV Mandate.

Additionally, the Colorado General Assembly and Joint Budget Committee approved a rate increase for the City and County of Denver for select waiver services. The 15-minute unit rate for agency-based Personal Care and Homemaker service in the Denver area will be \$6.04.

Personal Care Rate	07/01/2020	01/01/2021
Members residing in the city and county of Denver	\$4.93	\$6.04
All other members	\$4.93	\$5.29
Homemaker Service Rate		
Members residing in the city and county of Denver	\$4.93	\$6.04
All other Members	\$4.93	\$5.29
Other Service Rates		



As a provider, how will this impact my billing?

Beginning January 1, 2021 providers may no longer bill the Department for travel time units. The Department understands that the discontinuation of travel time billing practices may impact provider revenue and potentially create access to care issues for members. Therefore, the Department has rebased the rates and rate methodology to now be inclusive of travel time. This rebase will account for the discontinuation of this practice of billing separately of travel time for Personal Care and Homemaker services for the HCBS BI, CMHS, EBD, and SCI waivers to mitigate the impact. Providers are encouraged to work with the Case Management Agencies (CMA)s in their service area to verify any changes to the Prior Authorization Request (PAR).

How does this impact case management agencies?

Effective January 1, 2021 travel time units will not be authorized on the PARs by case management. All Prior Authorization Requests (PARs) that include travel time units will need to be revised to remove those units.

Will this effect Prior Authorization Requests (PAR's)?

Yes, CMAs will need to ensure all PARs for impacted members are revised prior to the effective date to remove units allotted for travel time.

Why are there two different rates?

Due to EVV, travel time is no longer billable because it does not involve a service being delivered. Therefore, the Department incorporated travel time into the rate methodology which increased the Homemaker and Personal Care rates. Additionally, the General Assembly and Joint Budget Committee approved a rate increase for the City and County of Denver for select waiver services. These rate changes, while happening at the same time, are separate.

What is the best way to determine if a member lives in Denver since there is a different rate for the service?

Providers serving members residing in the city and county of Denver will have rates correlating with their residence. To verify an address, please visit <u>Denver City Assessor</u> <u>Property Search</u>. Postal codes and mailing addresses are not a reliable indicator.



What considerations were given for rural counties when we likely travel more?

The Department conducted research with case management agencies (CMA) authorizing travel time and looked at different factors involving travel time. Travel time was inflated in Denver Metro area and was approved less frequently in rural areas. We realize there may be exceptions and the Department will be working with CMA's to ensure members are not adversely impacted by the policy and rate changes.

How was data collected and reviewed?

The Department reviewed Prior Authorization Requests (PARs) for each Case Management Agency. Case Managers reported specific travel time authorization per client. The aggregate data was reviewed by the Department's Rates and Budget Sections, as well as the Office of State Budgeting and Planning.

How should we distinguish the pay rate for care providers who provide services for members in Denver county and other counties? This will create a conflict and many care givers might refuse cases outside of the Denver Area.

The Department does not set pay rates for Direct Care Workers. Per <u>Senate Bill 19-238</u>, workers providing Personal Care and Homemaker services must receive at least \$12.41 per hour. The Colorado minimum wage can be found <u>here</u>. Denver County established its own minimum wage effective January 1, 2020; information on Denver's Ordinance can be found <u>here</u>.

How much of the final rate is applicable to SB19-238 passthrough?

Providers serving members outside of the city and county of Denver have not received a rate increase; therefore, no amount is required to be passed through. Providers serving members residing in the city and county of Denver will be required to pass through 85% of the \$.75 increase to workers per <u>Senate Bill 19-238</u>.

How can I share my concerns with the Department?

The Department held a stakeholder meeting on September 8, 2020 to address the rule changes for Personal Care and Homemaker services. The Department is accepting comments, concerns and suggestions via email at <u>evv@state.co.us</u>.

For more information

Electronic Visit Verification (EVV) Inbox evv@state.co.us

