

## **From Colorado Department of Health Care Policy and Financing**

### **The following questions are a follow up to the OCL Hearing**

#### **1. Young - How many people in the state of Colorado are challenged with an IDD diagnosis?**

##### **RESPONSE:**

Studies indicate between 1 and 3 percent of the overall U.S. population lives with an intellectual and/or developmental disability (IDD).<sup>\*</sup> Applying these statistics to the 2015 Colorado population estimate of about 5.5 million, between an estimated 55,000 and 165,000 people in Colorado live with an IDD. As of September 2016, Medicaid served about 11,000 people in three IDD waivers that require the individual to meet means-testing requirements and need an institutional or equivalent level of care.<sup>^</sup> Not all individuals with an IDD meet these requirements.

<sup>\*</sup>Data pulled from the report of the President's Committee for People with Intellectual Disabilities, [https://acl.gov/Programs/AIDD/Program\\_Resource\\_Search/docs/PCPID-Report-2016.pdf](https://acl.gov/Programs/AIDD/Program_Resource_Search/docs/PCPID-Report-2016.pdf).

<sup>^</sup> Home and Community-Based Services waivers including Children's Extensive Support Services, Adult Supported Living Services, and Adult Individuals with Development Disabilities

#### **2. Hamner - I'm really concerned about this issue in the western slope and in rural parts of Colorado to maintain financial stability in these CCBs. Are you aware of that and what are you doing to help these CCBs. There is attrition from these CCBs to other places. Who is paying attention to this? What can we do?**

##### **RESPONSE:**

Support for access to case management and Home and Community-Based Services (HCBS) waivers in rural areas is crucial to both individuals receiving services and providers. The Department is committed to ensuring timely access to services for individuals with intellectual and developmental disabilities (IDD) and maintaining a stable system from which to access these services. As part of the work for HB 14-1051, the Department has improved the methods used to track enrollments and individuals transferring from one part of the state to another, necessitating a need to receive case management from a different Community Centered Board (CCB) and other service providers. Using the information from the tracking system, the Department is looking at the current regulations and policies for waiting list management.

In order to uphold its commitment to ensuring timely access and maintaining a stable system, the Department has engaged with a contractor to recommend waiting list management regulations and policies, taking into consideration Colorado's diverse geographical makeup. The contractor will conduct research on other states waiting list management practices, on federal CMS requirements, and Colorado's current regulations. The contractor will recommend changes and engage with all stakeholders to obtain feedback on the Department's waiting list management, both current and recommended, practices. Stability of the IDD system remains of utmost importance to the Department, especially as the system transitions to Conflict-Free Case Management.

Additionally, CCBs are required to have a certified public accounting firm complete an annual audit of each agency's financial statements. The Department reviews these audits once finalized to identify any areas of concern. If the CCB is determined to be financially unstable, the Department may provide

technical assistance or contract with a certified public accountant to identify and attempt to resolve specific issues.

Further, the Department is utilizing the Medicaid Provider Rate Review process, as required in Senate Bill 15-228, to determine whether HCBS rates are sufficient for provider retention and client access. The Department will also work to identify specific providers that may be affected as the minimum wage continues to rise in the future. Any changes that the Department identifies that requires additional funding will follow the standard budgeting process.

**3. Young - who is responsible for the costs? Federal or State funding? (related to coming into compliance with HCBS settings rules). Sue said we could follow up on specifics from Telegen**

RESPONSE:

The administrative costs of assessing provider compliance have been appropriated to the Department and the Colorado Department of Public Health and Environment (CDPHE) by the General Assembly.

Going forward, additional costs may include:

- Costs to providers to implement remediation strategies, including one-time costs (*e.g.*, installing individualized egress alert systems) and ongoing costs (*e.g.*, hiring more staff);
- Costs of transition assistance to help individuals move from non-compliant settings to compliant settings (*e.g.*, extra case management); and
- Costs to the Department of implementing systems changes to avoid payment for services rendered at noncompliant settings (*e.g.*, changes to Interchange, the new Medicaid Management Information Systems (MMIS)).

The Department is currently assessing the likely extent of and the best means of addressing such costs and would utilize the budget process to request any additional funding necessary to fully implement the HCBS settings rule. Should the Department request funding it would work to obtain the correct federal matching rate for the services requested.