

# December 2024: *The Latest in LTSS*



In a collaborative effort, leadership members from various agencies in our region have partnered to compile and distribute streamlined communication to our stakeholders in long-term care and supports.

We invite you to actively share this information with your stakeholders, ensuring widespread distribution. All issues of this newsletter can be found on the TRE website [here](#).

## The Latest

### TRE Updates

- TRE has successfully **completed** its Backlog Reduction and Stabilization Plan to eliminate delays in activities necessary for timely access to services for Members. This plan has been focused on backlogs related to:
  - Initial Level of Care Assessments
  - Monitoring Contacts
  - Service Plans including PARs
- TRE has continued to see improvements in staffing overall and has greatly reduced vacancies. 23 staff were hired in November and December with an additional 20 in January. These staff will require at least 60 days to complete the necessary training for the positions. TRE is also seeing fewer escalation cases with HCPF.
- Remaining Challenges Being Addressed:
- TRE Vault data system
  - 12/18/2024 -A pilot group of providers will start working and testing the Provider Portal. TRE will receive feedback and discuss possible enhancements to the Provider Portal prior to a full roll out to all providers in 2025.
  - TRE is working with Wipfli to discuss service requests/referrals in the system based on current provider feedback.

### HCPF Updates

HCPF has a number of Priority Projects for 2025. HCPF will be re-launching bi-monthly webinars focusing on these projects. You can also access information and updates at [Long-Term Services and Supports Programs | Department of Health Care Policy and Financing](#).

- Paying Providers Timely to Protect Access to Services – HCPF is making updates to member benefit plan processing in interChange to address this issue. It is expected to be implemented on 12/18/24.
- CCM System Efforts to Address Known Issues
  - Requested the vendor to add resources
  - Introduced a phased implementation of enhancements, delaying some
  - Improved internal governance, oversight, and accountability of the vendor
  - Increased Case Manager support through 1:1 agency meetings, weekly CCM communications, and bimonthly TA support calls

- Protecting Coverage for LTSS Members – HCPF will begin transitioning to a 60-Day Pause for Terminations in January 2025. Each month, on the 5<sup>th</sup> of the month, HCPF will generate a list of renewals for that month. For those Members who are potentially not eligible for LTSS, they will be sent a letter regarding information that is necessary in order to continue their eligibility. If the Member has not provided this information within 60 days of their renewal month, they will be sent a letter to terminate them from LTSS. CMAs are expecting to receive a copy of these lists each month in order to support efforts to work with Members to provide the needed information. If a member wants to appeal this termination, beginning June 2025, the Member will need to submit a Continuation Request for Benefits prior to the end of the 60-day period.
- Community First Choice – CFC is an optional Medicaid program being implemented by Colorado by July 1, 2025. It provides for home and community based attendant services and supports to be offered to eligible members through the Medicaid State Plan, rather than through the Waivers. It is intended to promote self-direction, relocation out of institutions, and person-centered practices. See HPCF’s website for more information - [\[\\*\] Community First Choice Option | Department of Health Care Policy and Financing](#). HCPF is in the process of developing communication to Members to help explain CFC. As part of CFC implementation in Colorado:
  - **CLLI and CHCBS Waivers** will merge into a new Children with Complex Health Needs (CwCHN) Waiver.
    - The new waiver will have expanded eligibility criteria to capture both previous waiver populations. Members currently enrolled in either of the existing waivers will be transitioned into the new waiver. This transition will occur on July 1, 2025 for children currently on the CLLI waiver and at the time of the child’s scheduled CSR in FY 25-26 for those on the CHCBS waiver.
    - Families will have access to the following services under the CwCHN Waiver
      - Wellness Education Benefit (WEB)
      - Respite
      - Counseling
      - Massage
      - Therapeutic Life Limiting Illness Support
      - Palliative Support
      - Expressive Therapy
      - Families will need to utilize at least 1 service per month to remain enrolled in the waiver.
    - IHSS will move from waiver services to CFC State Plan services. Members will continue to have access to IHSS if they have an assessed need. TRE understands that this information has many complexities, and we do not have further information at this time. Please know TRE is participating in stakeholder groups and working closely with HCPF to understand changes, implementation and providing advocacy for our families. We will continue to share information as it is available.

- Case Managers/Service Coordinators will support services under both HCBS Waivers and CFC.
- Stakeholders can provide feedback on the Community First Choice regulation which is published on the CFC web page provided above.
- Claims Questions from Providers - Case managers/Service Coordinators are not expected to answer claims or billing questions from providers. Providers should contact the Provider Services Call Center with questions about denied claims or other issues with billing or verifying member eligibility. Providers can [follow this link](#) to access relevant telephone numbers and other web resources. For situations where there is no PAR or the PAR is not accurate, providers should continue to contact TRE.
- Colorado Single Assessment (CSA), Person-Centered Support Plan (PCSP), and SIS Decommission – HCPF intends to retire the SIS and create a new process to determine Support Levels for members with IDD enrolling Residential or Day Habilitation services.
  - The 100.2 will continue to be used for program eligibility
  - Replace the SIS with an Interim Support Level Assessment for ONLY newly enrolling members for DD and SLS waivers by 7/1/25.
  - More information on how SIS reviews will be completed once the SIS is decommissioned is not yet available.
- Nurse Assessor – The Nurse Assessor is a process to streamline the way members are assessed and receive a recommendation for skilled care services. A third party vendor will perform the assessments (these assessments are outside the scope of Case Manager responsibilities). HCPF anticipates phasing in the nurse assessor with the resumption of pediatric LTHH PAR requirements. The assessment will be used for both pediatric and adult members.
- Pediatric Long-Term Home Health (PLTHH) PAR Restart – PLTHH PARs will be restarted beginning 5/1/25 for PT, OT, and ST services and beginning 7/1/25 for Intermittent Nursing and CNA services to align with the roll out of CFC. There will be a phased approach to the requirement. [Home Health Program | Department of Health Care Policy and Financing](#)

## What Members Should Know

- CHCBS and CLLI Children and Families
  - The CLLI and CHCBS Waivers will merge into a new Children with Complex Health Needs (CwCHN) Waiver starting July 1, 2025. The new waiver will have expanded eligibility criteria to capture both previous waiver populations. Members currently enrolled in either of the existing waivers will be transitioned into the new waiver. TRE sent expanded details to families receiving these services and those details are available in the section above.
- Youths transitioning from HCBS-CES or HCBS-CHRP services to the HCBS-DD waiver. Members who are moving from HCBS-CES or HCBS-CHRP into Adult waivers are no longer able to independently choose to enroll into the HCBS-DD waiver. There is a new process that must be approved by HCPF before an enrollment into the HCBS-DD waiver can occur. Similarly, members must now be enrolled in and accessing services through the HCBS-CES or HCBS-CHRP Waiver for at least 30 days to be considered. The new process was effective December 4, 2024. TRE is working through the details with HCPF and your Service Coordinator can guide families through this process.

## Resources and What You Can Do

- HCPF Website: Stabilizing Long-Term Services and Supports (LTSS) – This landing page can be accessed by Members, Providers, CMAs and other Partners to learn about the status of efforts and remedies. You can also find all previous communications from HCPF here. [Stabilizing Long-Term Services and Supports \(LTSS\) | Colorado Department of Health Care Policy & Financing](#)
- Sign up for OCL and HCPF Communications
  - If you are not currently receiving these emails, [sign up here](#). [See a list](#) of all HCPF newsletters you can subscribe to.
- As the Regional Accountable Entity (RAE), Colorado Community Health Alliance is responsible for reducing barriers that members experience when accessing care. CCHA services are part of an individual's **Health First Colorado benefits**, so there is **no cost to members**.

### CCHA Referrals

- Referral form can be found here:
  - Online: [www.cchacares.com/for-providers/ccha-provider-support/](http://www.cchacares.com/for-providers/ccha-provider-support/)

Call CCHA Member Support:

- **Region 7** (El Paso, Park and Teller counties)
  - Email: [R7Referral@cchacares.com](mailto:R7Referral@cchacares.com)
  - Local: 719-598-1540
  - Toll free: 1-855-627-4685

Need printed resources for your members? CCHA can help. Visit this link for educational materials, flyers, and posters available to providers at no cost: [CCHA | Free Educational Materials](#)

- Follow HCPF Stakeholder Engagement - [Office of Community Living Stakeholder Engagement | Department of Health Care Policy and Financing](#)
- Follow TRE on its primary social media platform, Facebook, [here](#)

## What The Acronyms Mean

- Acronym Guide: [Office Of Community Living Acronym Glossary | Colorado Department of Health Care Policy & Financing](#)
- Member = person in services
- CCM = Care and Case Management system (statewide Member health record). This replaced the Benefits Utilization System (BUS)
- HCPF = Health Care Policy and Financing
- CMA = Case Management Agencies. Formerly CCBs and SEPs.
- CMRD = Case Management Redesign

- DSA = Direct Service Area. This is how CMRD designated CMAs. TRE works with both DSA 11 (El Paso, Park, and Teller Counties) and DSA 12 (Pueblo County).
- LTSS = Long Term Services and Supports. Also known as HCBS (Home and Community Based Services) or LTC (Long Term Care).
- OCL = Office of Community Living