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State/Territory Name: Colorado

State Plan Amendment (SPA) #: 22-0042

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS Form 179
- 3) Approved SPA Page

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 601 E. 12th Street, Suite 355 Kansas City, MO 64106



Medicaid & CHIP Operations Group

December 6, 2022

Kim Bimestefer, Executive Director Department of Health Care Policy & Financing 1570 Grant Street Denver, CO 80203

RE: Colorado State Plan Amendment (SPA) 22-0042

Dear Ms. Bimestefer:

We have reviewed the State Plan Amendment (SPA) submitted under transmittal number 22-0042. This Amendment allows the state to authorize additional hours for Private Duty Nursing Services, up to 23 hours per day, when determined medically necessary.

Please be informed that this SPA was approved on December 6, 2022, with an effective date of August 12, 2022. Enclosed are the CMS-179 and the amended plan page.

Should you have any questions about this amendment, please contact Curtis Volesky at (303) 844-7033.

Sincerely,



James G. Scott, Director Division of Program Operations

Enclosures

cc: Adela Flores-Brennan, <u>adela.flores-brennan@state.co.us</u> Bettina Schneider, <u>Bettina.schneider@state.co.us</u> Russell Ziegler, <u>Russ.Zigler@state.co.us</u> Jami Gazarro, <u>Jami.Gazerro@state.co.us</u> Amy Winterfeld, <u>amy.winterfeld@state.co.us</u>

| | 1. TRANSMITTAL NUMBER 2. STATE |
|---|--|
| TRANSMITTAL AND NOTICE OF APPROVAL O | |
| | 3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL |
| FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES | |
| | SECONTITACI O XIX O XXI |
| TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES | 4. PROPOSED EFFECTIVE DATE |
| DEPARTMENT OF HEALTH AND HUMAN SERVICES | August 12, 2022 |
| 5. FEDERAL STATUTE/REGULATION CITATION | 6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a FFY 2022 \$ 131.174 |
| 42 CFR 440.80 | a FFY 2022 \$ 131,174 b. FFY 2023 \$ 787,042 |
| 7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT | 8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION |
| Supplement to Attachment 3.1-A Limitations to Care and | OR ATTACHMENT (If Applicable) |
| Services Item 8 Private Duty Nursing Services, Page 1 of 1 | |
| | Services Item 8 Private Duty Nursing Services, Page 1 |
| | of 1 (TN 09-038) |
| | |
| 9. SUBJECT OF AMENDMENT | |
| | nor dow when determined medically necessary |
| The Department may authorize additional hours, up to 23 hours | per day when determined medically necessary. |
| | |
| 10. GOVERNOR'S REVIEW (Check One) | |
| O GOVERNOR'S OFFICE REPORTED NO COMMENT | OTHER, AS SPECIFIED: |
| O COMMENTS OF GOVERNOR'S OFFICE ENCLOSED | Governor's letter |
| NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL | dated 7/14/2021 |
| 11. SIGNATURE OF STATE AGENCY OFFICIAL | 15. RETURN TO |
| The Signatore of State Adeliver of Heide | Colorado Department of Health Care Policy and Financing |
| | 1570 Grant Street |
| 12. TYPED NAME Bettina Schneider | Denver, CO 80203-1818 |
| 13. TITLE | Attan Amu Münterfeld |
| Chief Financial Officer | Attn: Amy Winterfeld |
| 14. DATE SUBMITTED 9/21/2022 | 1 |
| | |
| 16. DATE RECEIVED | USE ONLY 17. DATE APPROVED |
| September 21, 2022 | December 6, 2022 |
| | DNE COPY ATTACHED |
| 18. EFFECTIVE DATE OF APPROVED MATERIAL | 19. SIGNATURE OF APPROVING OFFICIAL |
| August 12, 2022 | |
| 20. TYPED NAME OF APPROVING OFFICIAL | 21. TITLE OF APPROVING OFFICIAL |
| James G. Scott | Director, Division of Program Operations |
| 22. REMARKS | Director, Division of Frequent Operations |
| | |
| | |

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT MEDICAL ASSISTANCE PROGRAM

42 CFR 440.80

State of Colorado

Supplement to Attachment 3.1-A

LIMITATIONS TO CARE AND SERVICES

8. Private Duty Nursing Services

Private Duty Nursing is face-to-face skilled nursing that is more individualized and continuous than the nursing care that is available under the Home Health benefit or routinely provided in a hospital or nursing facility. Private Duty Nursing is provided in the home, or outside of the home when normal life activities take the client away from the home. Private Duty Nursing shall not be reimbursed in a hospital or nursing facility. Private Duty Nursing services provided to eligible clients shall be provided through Medicaid licensed Home Health agencies.

To be eligible for Private Duty Nursing, a Medicaid client must meet medical necessity criteria.

Private Duty Nursing services are provided by a registered nurse or a licensed practical nurse; under the direction of the recipient's physician.

Private Duty Nursing services may be provided by one nurse to more than one client at the same time, in the same setting, at a reduced rate.

The amount of Medicaid-reimbursed Private Duty Nursing per day may not exceed the hours that are determined necessary under the medical criteria up to sixteen hours per day. The Department may authorize additional hours, up to 23 hours per day when determined medically necessary.

For EPSDT clients, Private Duty Nursing will be provided up to the amount of medical need.

All Private Duty Nursing services must be prior authorized.

TN# 22-0042

SUPERCEDES TN# 09-038

APPROVAL DATE: December 6, 2022 EFFECTIVE DATE: August 12, 2022