

APPENDIX K: Emergency Preparedness and Response and COVID-19 Addendum

Background:

This standalone appendix may be utilized by the state during emergency situations to request amendments to its approved waiver, to multiple approved waivers in the state, and/or to all approved waivers in the state. It includes actions that states can take under the existing Section 1915(c) home and community-based waiver authority in order to respond to an emergency. Other activities may require the use of various other authorities such as the Section 1115 demonstrations or the Section 1135 authorities.¹ This appendix may be applied retroactively as needed by the state. Public notice requirements normally applicable under 1915(c) do not apply to information contained in this Appendix.

Appendix K-1: General Information

General Information:

A. State: Colorado

B. Waiver Title(s): Community Mental Health Supports (CMHS)

C. Control Number(s): HCBS-CMHS: CO.0268.R06.07

D. Type of Emergency (The state may check more than one box):

<input checked="" type="checkbox"/>	Pandemic or Epidemic
<input type="checkbox"/>	Natural Disaster
<input type="checkbox"/>	National Security Emergency
<input type="checkbox"/>	Environmental
<input type="checkbox"/>	Other (specify):

E. **Brief Description of Emergency.** *In no more than one paragraph each*, briefly describe the: 1) nature of emergency; 2) number of individuals affected and the state’s mechanism to identify individuals at risk; 3) roles of state, local and other entities involved in approved waiver operations; and 4) expected changes needed to service delivery methods, if applicable. The state should provide this information for each emergency checked if those emergencies affect different geographic areas and require different changes to the waiver.

COVID-19 pandemic. This amendment will apply waiver-wide for each waiver included in this Appendix, to all individuals impacted by the virus or the response to the virus (e.g. closure of day programs, etc.). This Appendix K is additive to the previously approved Appendix K amendments. Effective July 1, 2023, through the end of the Appendix K, the Department has implemented a new service to the CMHS waiver. This new residential service is designed for individuals who require 24/7 care to develop skills necessary for daily living and to assist with successful integration into lower-level services and/or into the community.

The Department will amend the base waiver in July 2023 to have this new service effective beyond the Appendix K approval period.

F. Proposed Effective Date: Start Date: March 10, 2020 **Anticipated End Date:** 6 months after the conclusion of the public health emergency

G. Description of Transition Plan.

All activities will take place in response to the impact of COVID-19 as efficiently and effectively as possible based upon the complexity of the change.

H. Geographic Areas Affected:

These actions will apply across the waiver to all individuals impacted by the COVID-19 virus

I. Description of State Disaster Plan (if available) Reference to external documents is acceptable:

N/A

Appendix K-2: Temporary or Emergency-Specific Amendment to Approved Waiver

Temporary or Emergency-Specific Amendment to Approved Waiver:

These are changes that, while directly related to the state's response to an emergency situation, require amendment to the approved waiver document. These changes are time limited and tied specifically to individuals impacted by the emergency. Permanent or long-ranging changes will need to be incorporated into the main appendices of the waiver, via an amendment request in the waiver management system (WMS) upon advice from CMS.

b. X Services

i. X Temporarily modify service scope or coverage.

[Complete Section A- Services to be Added/Modified During an Emergency.]

Contact Person(s)

A. The Medicaid agency representative with whom CMS should communicate regarding the request:

First Name: Colin
Last Name Laughlin
Title: Deputy Director of the Office of Community Living
Agency: Department of Health Care Policy and Financing
Address 1: 1570 Grant Street
Address 2: Click or tap here to enter text.
City Denver
State Colorado
Zip Code 80203
Telephone: 303-866-2549
E-mail Colin.Laughlin@state.co.us
Fax Number 303-866-4411

8. Authorizing Signature

Signature: /S/

Date: June 21, 2023

State Medicaid Director or Designee

First Name: Adela
Last Name Flores-Brennan
Title: Medicaid Director
Agency: Colorado Department of Health Care Policy and Financing
Address 1: 1570 Grant Street
Address 2: Click or tap here to enter text.
City Denver
State Colorado
Zip Code 80203
Telephone: 303-910-5918
E-mail Adela.flores-brennan@state.co.us
Fax Number 303-866-4411

Section A---Services to be Added/Modified During an Emergency

Complete for each service added during a time of emergency. For services in the approved waiver that the state is temporarily modifying, enter the entire service definition and highlight the change. State laws, regulations and policies referenced in the specification should be readily available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

Service Specification	
Service Title:	Mental Health Transitional Living Home Service (MHTLH) (new)
<i>Complete this part for a renewal application or a new waiver that replaces an existing waiver. Select one:</i>	
Service Definition (Scope):	
<p>This service will be provided in a licensed Assisted Living Residence with a Mental Health Transitional Living Home Certification.</p> <p>The Mental Health Transitional Living Home Service is a residential service provided only to individuals that reside in the community and require 24/7 care to develop skills necessary for daily living to assist with successful integration into the community. There is a gap in the state’s mental-health system in which many patients could be discharged from an inpatient level of care at the state’s Mental Health Institutes but cannot be discharged, due to the lack of these types of services in a community setting that can provide this level of care appropriate to their needs. The Mental Health Transitional Living Home Service will provide supportive intervention services these individuals need who have transitioned and are living in the community. The purpose of the supportive interventions is to teach them how to live independently beyond the walls of residential care. Individuals utilizing this service have transitioned from institutional settings where there is little autonomy or ability for independent decision-making. This service and the specially trained staff will support members in acclimating to community living where they have more independence and the opportunity to make decisions for themselves. Staff focus on providing life skills training to help individuals develop the skills they need to successfully live in the community post discharge from an institution.</p> <p>The service will assist the member to reside in the most integrated setting appropriate to their needs. This residential service will include protective oversight and supervision; assistance with medication and medication management; assistance with community participation and support in accessing the community; provide assistance and coaching throughout community participation and activities; assistance with recreational and social activities; assisting the member with finding and securing housing, as needed; assisting the member in securing supporting documents/records, completing/submitted applications, securing deposits, and locating furnishings; life skills training; and Activities of Daily Living (ADL) support as needed. Transportation is not included in the service and individuals may access Non-Medical Transportation.</p> <p>This service will have a specific focus on life skills training. As the member acclimates to life outside an institution, they will need to develop the skills and tools necessary for community living. Staff are trained to teach and coach members to act independently, facilitate their own choices, select their own meals, develop a daily schedule, and seek employment if the member is interested. Direct care providers will accompany members out into the community, providing training and coaching throughout the outing or experience. Members will have developed the skills necessary while residing in this setting to create even more independence and integrate even further into community living.</p> <p>Personal care/assistance or other similar services may be a component part of Mental Health Transitional Living Home Service but may not comprise the entirety of the service.</p>	
<p>Rate: Day</p> <p>Average Cost/Unit: \$383.64/day</p>	

Service Specification

Service Title: Mental Health Transitional Living Home Service (MHTLH) (new)

Complete this part for a renewal application or a new waiver that replaces an existing waiver. Select one:

The Community Mental Health Supports (CMHS) waiver utilizes Fee-for-Service (FFS), negotiated market price, and public pricing rate methodologies. Each rate has a unit designation and reimbursement is equal to the rate multiplied by the number of units utilized. A standard, per-diem rate was negotiated by the Department and the Colorado Department of Human Services Office of Behavioral Health in order to recognize the specialized needs of this higher-risk population.

Specify applicable (if any) limits on the amount, frequency, or duration of this service:

The individual can participate in this service as long as the service remains appropriate to meet the members' needs outlined in their Person-Centered Support Plan.

A member choosing to receive MHTL Home Services may not receive personal care, homemaker, Life Skills Training, Consumer Directed Attendant Support Services (CDASS), Transition Set-Up, or Respite because there would be a duplication of service. Members may not receive services through a Mental Health Transitional Living Home and an Alternative Care Facility concurrently. Room and board and the cost of building maintenance, upkeep, and improvement are not part of the service and rate.

Provider Specifications

Provider Category(s) <i>(check one or both):</i>	<input type="checkbox"/>	Individual. List types:	<input type="checkbox"/>	Agency. List the types of agencies:
				Mental Health Transitional Living Home Provider

Specify whether the service may be provided by <i>(check each that applies):</i>	<input type="checkbox"/>	Legally Responsible Person	<input type="checkbox"/>	Relative/Legal Guardian
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Provider Qualifications *(provide the following information for each type of provider):*

Provider Type:	License <i>(specify)</i>	Certificate <i>(specify)</i>	Other Standard <i>(specify)</i>
Mental Health Transitional Living Home Provider	Assisted Living Residence	Certified as a Mental Health Transitional Living Home provider	This setting must be fully compliant with the HCBS Settings Final Rule requirements

Verification of Provider Qualifications

Provider Type:	Entity Responsible for Verification:	Frequency of Verification
Mental Health Transitional Living Home Provider	Department of Public Health and Environment, Health Facilities and Emergency Medical Services Division	A third of the total MHTLs are inspected every fiscal year by CDPHE. The CDPHE fiscal year runs from July 1 to June 30th. During inspections, the health team inspects each facility for compliance with Chapter VII operating licensing, Chapter 24 medication administration regulations and Volume 8 - MHTL Home regulations.

Service Specification

Service Title: Mental Health Transitional Living Home Service (MHTLH) (new)

Complete this part for a renewal application or a new waiver that replaces an existing waiver. Select one:

		<p>Therefore, two deficiency lists are generated if there are citations under each regulation set. The Health inspections focus on resident care and treatment, resident rights and the delivery of services, including medication administration, etc. In between survey cycles, should CDPHE receive a complaint, this will be investigated as well. Should a MHTL Home demonstrate a pattern of non-compliance or be issued an outcome level deficiency, CDPHE will consider enforcement action in the form of intermediate conditions. Any issues or concerns regarding Life Safety Code found during an inspection are forwarded to Colorado Department Fire Prevention and Control (DFPC). DFPC conducts Life Safety Code Inspections of MHTL Homes on a three-year cycle. DFPC inspects the physical environment, according to the Life Safety Code standards set forth in the National Fire Protection Association.</p> <p>A MHTL Home shall not occupy or use a Health Facility for the provision of services until a completed Certificate of Compliance (COC) has been issued by DFPC. Any violations must be corrected before a COC is issued. DFPC sends the COC to CDPHE, which is needed for the MHTL licensure</p>
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Service Delivery Method

Service Delivery Method <i>(check each that applies):</i>	<input type="checkbox"/>	Participant-directed as specified in Appendix E	<input type="checkbox"/>	Provider managed
	<input type="checkbox"/>		<input type="checkbox"/>	
	<input type="checkbox"/>		<input type="checkbox"/>	



ⁱ Numerous changes that the state may want to make may necessitate authority outside of the scope of section 1915(c) authority.

States interested in changes to administrative claiming or changes that require section 1115 or section 1135 authority should engage CMS in a discussion as soon as possible. Some examples may include: (a) changes to administrative activities, such as the establishment of a hotline; or (b) suspension of general Medicaid rules that are not addressed under section 1915(c) such as payment rules or eligibility rules or suspension of provisions of section 1902(a) to which 1915(c) is typically bound.