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State/Territory Name: Colorado

State Plan Amendment (SPA) #: 23-0008

This file contains the following documents in the order listed:

- Approval Letter
 CMS Form 179
- 3) Approved SPA Pages



Medicaid and CHIP Operations Group

December 4, 2023

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

RE: TN 23-0008

Dear Director Bimestefer:

The Centers for Medicare & Medicaid Services (CMS) has completed its review of Colorado's State Plan Amendment (SPA) Transmittal #23-0008, submitted on June 20, 2023. The SPA will provide qualifying community-based mobile crisis intervention services pursuant to Section 1947 of the Social Security Act.

CMS approved SPA #23-0008 on December 4, 2023, with an effective date of July 1, 2023. Enclosed is a copy of the CMS-179 summary form, as well as the approved pages for incorporation into the Colorado State Plan.

If you have any questions regarding this amendment, please contact Mandy Strom at Mandy.Strom@cms.hhs.gov_or by telephone at (303) 844-7068.

Sincerely,



Division of Program Operations

Enclosures

cc: Adela Flores-Brennan, CO State Medicaid Director Alex Lyons, Colorado Medicaid

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES 5. FEDERAL STATUTE/REGULATION CITATION Social Security Act, Section 1947 / 42 CFR 440.130(d)	
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Supplement to Attachment 3.1-A – Limitations to Care and Services – Outpatient Behavioral Health Services – 13.d – Rehabilitative Services (NEW) Pages 1 of 3, 2 of 3, and 3 of 3 * Attachment 4.19- B – 13.d – Rehabilitative Services- Mobile Crisis Response Services (New Page)*	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)
 9. SUBJECT OF AMENDMENT This Amendment would authorize the state to reimburse for qualit pursuant to Section 1947 of the Social Security Act. 10. GOVERNOR'S REVIEW (Check One) GOVERNOR'S OFFICE REPORTED NO COMMENT COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL 	fying community-based mobile crisis intervention services OTHER, AS SPECIFIED: Governor's letter dated 24 September 2022
11. SIGNATURE OF STATE AGENCY OFFICIAL 12. TYPED NAME Adela Flores-Brennan 13. TITLE Medicaid Director 14. DATE SUBMITTED [FILL IN ON DATE OF SUBMITTAL] 6/20/2023*	15. RETURN TO Colorado Department of Health Care Policy and Financing 1570 Grant Street Denver, CO 80203-1818 Attn: Alex Lyons
FOR CMS U	
16. DATE RECEIVED June 20, 2023	17. DATE APPROVED December 4, 2023
PLAN APPROVED - O	
	19 SIGNATI IRE OF APPROVING OFFICIAL
July 1, 2023	
20. TYPED NAME OF APPROVING OFFICIAL	21. TITLE OF APPROVING OFFICIAL
James G. Scott	Director, Division of Program Operations
22. REMARKS	

* State authorized pen & ink changes on November 28, 2023, for boxes 7 and 14.

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

STATE OF COLORADO

Supplement to Attachment 3.1-A

LIMITATIONS TO CARE AND SERVICES-OUTPATIENT BEHAVIORAL HEALTH SERVICES

13.d MOBILE CRISIS RESPONSE

Members experiencing a self-defined behavioral health crisis are eligible to receive Mobile Crisis Response (MCR) services without prior authorization. Mobile Crisis Response services are to be available twenty-four (24) hours per day, every day of the year. A Mobile Crisis Response provider enrolled with Colorado Medicaid and endorsed by the Behavioral Health Administration (BHA) is eligible to provide Mobile Crisis Response services.

MCR covered services include:

1. Community-based crisis interventions to members in self-defined Behavioral Health Crises, such interventions include:

- a. Screening,
- b. Assessment,
- c. De-escalation,
- d. Stabilization
- e. Safety planning, and
- f. Coordination with culturally responsive referrals to appropriate resources, including health, social, and other services and supports.
- g. Harm reduction interventions, including the administration of naloxone to reverse an overdose.

2. An initial Mobile Crisis Response must be a paired response by any two members of the BHA-endorsed MCR team.

TN No.	23-0008	Approval Date	12/4/23
Supersedes TN 1	No. <u>NEW</u>	Effective Date	7/1/2023

- 1. The initial face-to-face crisis response must include at least (1) in-person responder from the MCR team.
- 2. The second responder from the MCR team may appear via telehealth.
- 3. Teams must have at least one of the following licensed providers: Psychologist (PhD, PsyD, EdD), Behavioral Health Clinician (ACD/LAC, CSW, LPC, MFT), Nurse Practitioner, Physician or Osteopath affiliated with the group and to be available during a crisis via telehealth or in person for further member assessment.
 - a. An MCR team must always include at least one member who is qualified to complete an assessment under their scope of practice under state law.
- 4. Teams are not restricted to behavioral health professionals with specific credentials. All members of a MCR team, must complete the BHA "Crisis Professional" training. This traumainformed training will, at a minimum include:
 - a. Crisis stabilization and de-escalation
 - b. Harm reduction
 - c. Culturally responsive services
 - d. Responding to people with disabilities
- 5. Unlicensed MCR providers may include:
 - a. Unlicensed Master's Level /Ph.D./Psy.D.
 - i. Providers who have completed a master's level program in a relevant field who have completed the BHA Crisis Professional Curriculum.
 - b. Bachelors level clinician or case manager
 - i. Providers who have completed a bachelor's degree in a relevant field who have completed the BHA Crisis Professional Curriculum.
 - c. Adult or transition age youth peer support professional or family advocate
 - i. Unlicensed providers with relevant lived experience who have completed the BHA Crisis Professional Curriculum and are at least 18 years of age or older.
 - d. Mobile crisis case manager
 - i. Unlicensed providers with relevant case management experience who have completed

the BHA Crisis Professional Curriculum and are at least 18 years of age or older.

- 3. Covered services may only be performed during the following episodes of care:
 - a. Initial face-to-face crisis response;
 - b. Initial follow-up consultation: twenty-four (24) hours after the initial crisis and for up to five days after to coordinate with and refer to health, social and other services and supports; and
 - c. Secondary follow-up: to ensure warm handoff and scheduling appointments to referrals within seven (7) days of referral by the MCR provider.

NON-COVERED SERVICES

MCR does not include:

- 1. Services provided in hospitals or other facility settings.
- Secure Transportation services as described in Supplement to Attachment 3.1-A

 Limitations to Care and Services -Item 24b. Other Care Secure
 Transportation.
- 3. Medical diagnosis, evaluation, medication (with the exception of naloxone), and treatment.
- 4. Higher levels of care.

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

STATE OF COLORADO

Attachment 4.19-B

<u>METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES –</u> <u>OTHER TYPES OF CARE</u>

13d. REHABILITATIVE SERVICES: MOBILE CRISIS RESPONSE SERVICES

Mobile Crisis Response services shall be reimbursed at the lower of the following:

- 1. Submitted charges or
- 2. Market-based fee schedule as determined by the Department of Health Care Policy and Financing based on an analysis of private sector behavioral health care management corporation reimbursement rates and reimbursement rates of similar services covered by the Department.

Except as otherwise noted in the State Plan, state-developed fee schedule rates are the same for both governmental and private providers. The rates are effective for services on or after the date listed on the Attachment 4.19-B Introduction Page. All rates can be found on the official web site of the Department of Health Care Policy and Financing at https://hcpf.colorado.gov/provider-rates-fee-schedule.