

## AGENDA

### **Joint Budget Committee Meeting with Departments of Heath Care Policy and Financing and Human Services and Community Centered Boards**

**Wednesday, April 19, 2006  
2:00-3:30 p.m.  
Legislative Service Building Hearing Room A**

#### *Questions for Departments of Health Care Policy and Financing and Human Services*

Please provide a copy of your written Plan of Action for addressing Centers for Medicare and Medicaid Services (CMS) demands for changes to Colorado's Medicaid Home- and Community- based waiver programs for persons with developmental disabilities (HCBS-DD). Please also provide a general update on efforts to comply with CMS requirements that Colorado be able to provide an individually-identifiable audit trail for persons enrolled in the HCBS-DD program and related CMS demands. *[A written response is not required beyond the Plan of Action requested above.]* In your presentation, please specifically address:

1. How do you expect rate setting and billing for Medicaid HCBS-DD waiver services to change after July 1, 2006? To the extent this reflects an interim-approach, how do you expect rate setting (and billing, as applicable) to change in the longer-term?
2. What are the proposed time frames for (a) seeking and receiving CMS approval on proposed changes; (b) preparing-for and implementing short- and long-term changes?
3. What are the implications of the proposed changes for how the HCBS-DD program will be administered? For example, how do you anticipate the role of the community centered boards (CCBs) will change, based on the billing, rate-setting, and other system modifications now anticipated? What are the proposed time-frames for addressing outstanding issues or questions in this arena?
4. What are the likely fiscal implications of the proposed changes? In particular, do you anticipate that local funds will continue to be able to draw down federal Medicaid match? If not, how will the loss of \$12 million in funding be addressed? What other short- or long-term fiscal impacts for the State do you foresee?
5. Provide an update on any recent communication with CMS regarding the state's compliance with waiver-requirements to-date and plans to come into compliance.

6. Based on conversations with the Assistant Attorney General and Legislative Legal Services, Joint Budget Committee staff believe that Section 26-4-630, C.R.S., may serve *on an interim basis* to enable the State to make changes consistent with CMS demands, even when these changes appear inconsistent with existing state statute. Staff anticipates that, once the nature of changes are clearer (presumably during the 2007 legislative session) the State will proceed with appropriate statutory changes. Do the departments agree with this analysis? [Section 26-4-630, C.R.S., specifies that “Nothing in this subpart 2 (concerning HCBS-DD services) shall prevent the department of health care policy and financing or the department of human services from complying with federal requirements in order for the state of Colorado to qualify for federal funds under Title XIX of the federal “Social Security Act”, as amended.”]

***Questions for Community Centered Board Representatives  
(Alliance and CCB Partners)***

1. Do the CCBs feel that the proposed Plan of Action provides a reasonable road-map for complying with changes required by CMS?
2. Based on the information that has become available in the last month, do the CCBs have further input on how the interim- and long-term proposed changes to billing and rate setting will affect the community centered board system, providers, and consumers?
3. Do CCBs have additional recommendations on how to proceed in both the short and long term?
4. What do CCBs see as the potential budgetary impacts of the department proposals, as they understand them?