



COLORADO

Department of Health Care
Policy & Financing

Medical Services Board

NOTICE OF PROPOSED RULES

The Medical Services Board of the Colorado Department of Health Care Policy and Financing will hold a public meeting on Friday, June 14, 2019, beginning at 9:00 a.m., at The Coach Home Care and Home Health at 1900 East Pikes Peak Avenue, Colorado Springs, CO 80909. Reasonable accommodations will be provided upon request for persons with disabilities. Please notify the Board Coordinator at 303- 866-4416 or chris.sykes@state.co.us or the 504/ADA Coordinator hcpf504ada@state.co.us at least one week prior to the meeting.

A copy of the full text of these proposed rule changes is available for review from the Medical Services Board Office, 1570 Grant Street, Denver, Colorado 80203, (303) 866-4416, fax (303) 866-4411. Written comments may be submitted to the Medical Services Board Office on or before close of business the Wednesday prior to the meeting. Additionally, the full text of all proposed changes will be available approximately one week prior to the meeting on the Department's website at www.colorado.gov/hcpf/medical-services-board.

This notice is submitted pursuant to § 24-4-103(3)(a) and (11)(a), C.R.S.

MSB 19-02-12-A, Revision to the Medical Assistance Eligibility Rules Concerning General Eligibility Requirements and Verification Requirements, Sections 8.100.3.I, 8.100.4.B, and 8.100.5.B

Medical Assistance. The proposed rule change will amend 10 CCR 2505-10 8.100.I, 8.100.4.B, and 8.100.5.B to incorporate the exceptions for providing a Social Security Number (SSN) when applying for, or receiving Medical Assistance, as detailed in 42 C.F.R. §435.910. In particular, 42 C.F.R. §435.910(h) lists the following exemptions: not eligible to receive an SSN, does not have an SSN and may only be issued an SSN for a valid non-work reason in accordance with 20 C.F.R. 244.104, or refuses to obtain an SSN because of a well-established religious objection.

Currently, 8.100.3.I does not list any of the federally allowable exceptions for providing an SSN, while 8.100.4.B and 8.100.5.B only reference an exception for providing an SSN due to a religious exemption. The SSN exemptions will be listed in 8.100.3.I as part of the Additional General Eligibility Requirements to clearly indicate the rule applies to all applicants and recipients of Medical Assistance. The exceptions to be added to 8.100.3.I will also be referenced in 8.100.4.B and 8.100.5.B, and additional language edits will be made to reinforce that an individual must not be required to submit an SSN if they meet one of the exceptions in federal regulations.

There will be no change to the citizenship and eligible non-citizen eligibility requirements with this rule change. The exceptions for providing an SSN apply to any applicant or recipient of Medical Assistance, regardless of citizenship or immigration status. The current paper and online applications for Medical Assistance already allow an individual to report these exceptions as a reason for why an SSN is not provided on the application. There are no anticipated costs to the Department or any other agency, and no anticipated effect on state revenues. The benefit of the rule is to align policy with federal regulation, as well as potentially eliminate barriers for those that are applying for or receiving Medical Assistance who do not have an SSN and may believe they are not allowed to apply for assistance. Inaction would result in the Department being out of compliance with federal regulation under 42 CFR §435.910.

The authority for this rule is contained in 42 C.F.R. § 435.910(h) (2018); section 25.5-4-204, C.R.S. (2018) and sections 25.5-1-301 through 25.5-1-303, C.R.S. (2018).

MSB 19-03-01-B, Revision to the Medical Assistance Rule concerning In-Home Support Services, Section 8.552

Medical Assistance. In-Home Support Services is a service-delivery option for waiver participants. This revision adds mandatory provider training, task definitions for services, and clarification of secondary / contiguous tasks. Amending the rule will improve implementation of In-Home Support Services and provide clarity to participants, agencies, and case managers. Additionally, the task definitions have been added to the rule to streamline definitions between other delivery options including Consumer Directed Attendant Support Services (CDASS) and Long Term Home Health (LTHH).

The authority for this rule is contained in section 25.5-6-1201, C.R.S. (2017) and sections 25.5-1-301 through 25.5-1-303, C.R.S. (2018).

MSB 18-09-18-A, Revision to the Medical Assistance Long-Term Services and Supports Rule Concerning Consumer Directed Attendant Support Services, Section 8.510

Medical Assistance. The Department is clarifying roles and responsibilities of case management agencies, clients, authorized representatives and Financial Management Service vendors. The rule change identifies additional services which are currently performed as health maintenance activities in Consumer Directed Attendant Support Services (CDASS). The Department is also identifying services that may be participant directed under the Home and Community Based Supported Living Services (HCBS-SLS) waiver.

The authority for this rule is contained in Section 25.5-6-1101 C.R.S (2018) and 25.5-1-301 through 25.5-1-303, C.R.S. (2018).

MSB 19-03-29-A, Revision to the Medical Assistance Rule concerning HCBS BI Incorporation by Reference cleanup, Section 8.515.1

Medical Assistance. This rule corrects the incorporation by reference language at 10 CCR 2505-10, Section 8.515.1, originally adopted by the Medical Services Board (MSB) in rule number MSB 18-08-21-A at the March 8, 2019 MSB meeting, to comply with 24-4-103(12.5), CRS. This rule is a technical update to comply with the incorporation by reference requirements of 24-4-103(12.5) and includes no substantive policy changes.

The authority for this rule is contained in sections 25.5-1-301 through 25.5-1-303, C.R.S. (2018).