



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, March 9, 2018, beginning at 9:00 a.m., in the eleventh floor conference room at 303 East 17th Avenue, Denver, CO 80203. 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 to you for publication, pursuant to § 24-4-103(3)(a) and (11)(a), C.R.S.

MSB 17-11-03-A, Revision to the Medical Assistance Rule concerning Nursing Facility Post Eligibility Treatment of Income- Incurred Medical Expenses, Section 8.482.33

Medical Assistance. The rule change updates regulations to reflect recent changes in related Medicaid State Plan Benefits. Nursing Facility PETI should not be used if a service is billable under the State Plan. The rule also applies standard timely filing deadlines which were previously unaddressed.

The authority for this rule is contained in 25.5-1-301 through 25.5-1-303, §1902(r)(1)(A) of the Social Security Act and 42 CFR § 435.832.

MSB 17-10-17-A, Revision to the Medical Assistance Rule concerning In-Home Support Services, Section 8.552

Medical Assistance. The current rule does not designate authority to any one party to develop and approve IHSS Care Plans, resulting in multiple disputes between the IHSS agency and the case management agency. The rule amendment promotes case management initiation of services, coordination, and authority. The current rule does not thoroughly define or describe key components of IHSS which results in varied interpretation by each party. The amended rule addresses the necessary processes and procedures in IHSS delivery, which will improve service delivery for the participants served through IHSS. The current rule does not emphasize Independent Living Core Services (ILCS), a statute required service to be offered to participants by IHSS agencies. The amended rule adds emphasis on these services and direction to the agencies to improve implementation of ILCS as a benefit of IHSS.

The authority for this rule is contained in 25.5-1-301 through 25.5-1-303 and 25.5-6-12; 8-85-102 (6), C.R.S..