COLORADO
Department of Health Care Policy & Financing

At-Risk Diversion CMA Newsletter Updates

The following information was provided to Case Management Agencies (CMA) in the Department of Health Care Policy and Financing (HCPF) Case Manager's Corner Monthly Newsletter from January 2025 through September 2025

January 2025 - At-Risk Diversion:

Information: Operational Memo 25-002 informs Case Management Agencies (CMAs), Home and Community-Based Services (HCBS) members, their families, and other interested stakeholders of the forthcoming implementation of At-Risk Diversion, outreach to HCBS members who may be most at-risk of nursing facility admission and to provide CMAs the operational guidance necessary to implement At-Risk Diversion. This memo outlines CMA roles and responsibilities, clarification on outreach, and documentation requirements. The CMAs should be prepared to operationalize by January 31, 2025, and the initial list will be provided soon after, and it will consist of approximately 250 members statewide. The target date for the initial list distribution is March 2025 (subject to change). HCPF has developed a statistical model to prospectively identify HCBS members who may need nursing facility care in the near future. The HCPF LTSS website will provide further details on the methodology.

Office hours will be scheduled to provide case managers with an opportunity to ask questions, provide feedback, and seek out assistance. Case managers are encouraged but not required to attend office hours. Starting in February 2025, office hours will occur on the third Tuesday of each month from 2 to 3 p.m.

February 2025 - At-Risk Diversion Pilot Office Hours:

Information: At-Risk Diversion is aimed at strengthening community-based services for people with disabilities, enhancing home and community-based services to expand access and improve quality, and ensuring all individuals can receive care in their communities and live in the community of their choosing. The new process will include targeted outreach to Health First Colorado members living in the community

who are at the highest risk of needing institutional care in the near future. The statistical model to prospectively identify these HCBS members will be provided on the HCPF LTSS website when approved.

To pilot this program, the first At-Risk list will be distributed on March 24, 2025. The first list will be smaller than previously expected (approximately less than 200 members statewide). HCPF recognizes the importance of monitoring, identifying, and addressing any issues or concerns that come up from case management agencies.

Office hours will be scheduled to allow case managers to ask questions, provide feedback, and seek out assistance. Case managers are encouraged but not required to attend office hours. Office hours have been changed from Google Meet to Zoom effective March 2025. Through all of 2025, these Office Hours will occur on the third Tuesday of each month from 2 to 3 p.m. These events can be found on the OCL Stakeholder Engagement Calendar. Registration and location: office hours will be virtual via Zoom. Register in advance here. Attendees will receive a confirmation email after registering with information about joining the webinar.

March 2025 - At-Risk Diversion Pilot Office Hours:

Information: On March 24, 2025, the At-Risk Diversion pilot program began. At-Risk includes additional targeted outreach by the case management agency to support members identified by HCPF as "At-Risk" in the community with services and necessary support before their need for institutional admission.

April 2025 - At-Risk Diversion Project Feedback Opportunity:

Information: The At-Risk Pilot program began on March 24, 2025. HCPF sent CMAs lists of members assigned to their agencies that were identified by HCPF as "At-Risk". CMAs completed outreach to assess At-risk members for additional community services and support (if needed). The second “At-Risk” list will be distributed after July 1, 2025 (please note: this date is subject to change and more information to come).

HCPF invites you to complete the At-Risk Diversion Project survey (optional). This allows HCPF to obtain stakeholder feedback with the initiative for improvement in communication, collaboration, and coordination between CMAs and HCPF. The At-Risk Diversion Project survey will be available for stakeholder feedback through May 30, 2025. The preliminary results from the survey will be provided the following month.

June 2025 - At-Risk Diversion:

Information: On August 15, 2025, the second list to CMAs will be distributed for the At-Risk pilot program, the list will consist of approximately 200 members statewide. As part of the contract requirements, case managers are asked to reach out to each member on the list within the required timeframe and ask them the prescribed At-Risk questions, complete necessary documentation, and refer them to supporting agencies as needed. It is encouraged that CMAs reach out and ask questions.

Since April CMAs engaged in a Pilot Project survey to provide feedback, comments, and what type and level of information and/or training would be helpful to implement At-Risk Diversion successfully.

Here are preliminary results from the survey:

- Number of Respondents: 7
- Was there member impact as a result of the At-Risk outreach:
    - 57.1% -No
    - 14% -Yes
    - 14.3% -N/A
    - 14.3% -Unsure
- Additional Information and/or Training of following topics:
    - 57.1 % - More information on At-Risk methodology (how members are identified)
    - 57.1 % - More information on purpose and goals of At-Risk
    - 42.9% - More information on DOJ updates
    - 28.6% - More information on TCM-TC
    - 28.6% - No additional Information/training
    - 14.3% - More information on CCM documentation
    - 14.3% - More information on HCPF website –regarding At-Risk

July 2025 - At-Risk Diversion Pilot Program Continues:

Information: On August 15, 2025, the second at-risk member list for CMAs will be distributed as part of the At-Risk pilot program. The list will include approximately 200 members across the State. As outlined in contract requirements, case managers are responsible for contacting each listed member within the specified time frame and completing the required documentation in the Care and Case Management system (CCM) under the At Risk Diversion Assessment. Members are referred to supporting agencies as appropriate. Referrals to Targeted Case Management-Transition Coordination (TCM-TC) Diversion Services will be made through CCM. For additional

guidance, refer to the new job aids located in the CCM Google Drive: the At-Risk Diversion checklist, At-Risk Diversion Assessment, and Creating Referrals to the Transition Coordination Agency–for these processes within the CCM.

At-Risk Diversion Training: All new case managers responsible for conducting At-Risk outreach are required to complete the “At-Risk Diversion” web-based training.

August 2025 - At-Risk Diversion Pilot Program:

Information: The second list for the At-Risk pilot program was distributed on August 15, 2025. The Care and Case Management (CCM) system will import the list generated by the methodology QUARTERLY on the 15th.

- The list is designed to run on the 15th every quarter in CCM, regardless of weekends or holidays at 12:55 a.m. ET and will be visible in CCM on the 16th.
- Once the list has been processed, the CCM system will notify the assigned case manager regarding the members assigned to them: it will include At-Risk Alerts and At-Risk Tasks.

At-Risk Alerts in CCM: will be system generated when a member has been identified as At-Risk.

At-Risk Tasks in CCM: The assigned case manager will receive a system generated task when a member has been identified as At-Risk. There are two types of tasks At-Risk Initial Outreach and At-Risk Ongoing Outreach.

At-Risk Initial Outreach Tasks: when the member has been identified as At-Risk for the first time and outreach needs to occur within 10 business days - Invoices are due on 15th of following month for these contacts (September 15th).

At-Risk Ongoing Outreach Tasks: when the member was identified the previous quarter (last list was March 2025) and outreach needs to occur within the next 90 days (this should be completed at the next scheduled contact).

- As outlined in contract requirements, case managers are responsible for contacting each listed member within the specified time frames defined above.

At-Risk Diversion Assessment: case managers are responsible for completing the At-Risk Assessment in CCM for ALL ACTIVE HCBS members that are identified as "At-Risk". The At-Risk Assessment is documentation of activities completed by the case manager, this includes outreach outcomes, referrals, and facilitation to services, supports, and resources that were provided to the member. The At-Risk Diversion

Assessment will substitute for any required activity log notes (additional activity log notes are optional).

- At-Risk Outreach is only for members who are living in the community, if the member is in a NF, ACF, hospital, or deceased; no outreach is required but the at-risk assessment in CCM needs to be completed.

Targeted Case Management -Transition Coordination (TCM-TC) Diversion Referrals: should be completed by the case manager in CCM only if needed and the member has agreed to TCM-TC Diversion Services.

For additional guidance, refer to the new job aids located in the CCM Google Drive: The At-Risk Diversion checklist, At-Risk Diversion Assessment, and Creating Referrals to the Transition Coordination Agency.

At-Risk Diversion Training: All new case managers responsible for conducting At-Risk outreach are required to complete the "At-Risk Diversion" training.

At-Risk Diversion Presentation - April 2025 (This presentation provides an overview of goals, target population, expectations, and referrals)

At-Risk Diversion Training - December 2024

  - Webinar Recording

For additional information on At-Risk Diversion and Escalations, visit the Nursing Facilities Diversion Projects Page.

Visit the Keeping Coloradans in the Community and Out of Long-Term Institutionalization website for more information on other Office of Community Living (OCL) supports and programs.

The In-Reach Team Project Feedback form is available to provide feedback, ask questions, and report issues and/or concerns outside of traditional meetings.

September 2025 - At-Risk Diversion Updates:

Information: The second list for the At-Risk pilot program was distributed on August 15, 2025, and was visible in the Care and Case Management System (CCM) on August 16, 2025.

- The At-Risk Diversion member list was uploaded into SharePoint for all CMAs on Friday, August 15th (Case Management > At-Risk Members > August 2025 _ At-Risk Member List)
- The At-Risk Diversion Invoice is in SharePoint for all CMAs (Contract Deliverables > Fiscal Year 2025-26 > Templates > At-Risk Diversion Invoice)

Upcoming: On November 15, 2025, the third at-risk member list will be distributed in CCM and in SharePoint.

- The list is designed to run on the 15th of every quarter in CCM, regardless of weekends or holidays, at 12:55 a.m. ET.
- The following day, on the 16th of every quarter, CCM will notify the assigned case manager regarding the members assigned to them that have been identified as "At-Risk": it will include At-Risk Alerts and At-Risk Tasks. At-Risk Alerts and At-Risk tasks will be system-generated. There are two types of tasks: At-Risk Initial Outreach and At-Risk Ongoing Outreach.

As outlined in contract requirements, case managers are responsible for contacting each listed member within the specified time frame and completing the required At-Risk Diversion Assessment in CCM. Members are referred to supporting agencies as appropriate. Referrals to Targeted Case Management-Transition Coordination (TCM-TC) Diversion Services will be made through CCM. For additional guidance, refer to the new job aids located in the CCM Google Drive– the At-Risk Diversion checklist, At-Risk Diversion Assessment, and Creating Referrals to the Transition Coordination Agency–for these processes within the CCM.

At-Risk Diversion/TCM-TC: Members who have been identified as “at risk” of institutionalization by the Department can have access to Targeted Case Management Transition Coordination (TCM-TC) Diversion Services. TCM-TC supports At-Risk members in staying safe within their chosen community setting. Transition Coordinators identify goals, evaluate needs and barriers, determine suitable services and community supports, and develop plans to mitigate risks. For additional information, refer to the HCPF Transition Services website.

TCM-TC-Diversion Services can include, but are not limited to:

- Risk mitigation planning.
- Referral to and/or arrangement of the necessary Community-Based Services, as needed.
- Inter-agency contact/coordination with HCBS Case Managers, RAE Care

Coordinators, etc., regarding service delivery and concerns.

- Work with housing navigation services to secure a housing voucher and find suitable housing. Coordinate a community-based living arrangement.
    - Housing Assistance/Vouchers: At-Risk members would have to qualify under voucher requirements, Community Access Team Vouchers (CATV). DOLA works in partnership with HCPF to administer CATV.

Updates Medical Services Board (MSB): No updates at this time for MSB 24-06-03-A Revision to the Medical Assistance Act Rule concerning At-Risk Diversion for Case Management Agencies, Section 8.7200.

Updates as At-Risk Model Development & Summary: No updates; it is part of the DOJ Agreement, currently in the approval process (subject to change). More information on the methodology will be published on the HCPF Long Term Supports & Services website when approved. Currently, during the pilot phase, risk scores are based on age, an indication of support in their home, previous nursing facility stays, multiple hospital stays, chronic conditions, serious mental illness, stroke, and dementia (Risk scores are still subject to change). Based on the risk score, a list of the top Medicaid members identified that have the highest risk scores will receive targeted outreach.

- Health First Colorado Medicaid members living in the community
- Adults over the age of 21
- Individuals with a physical disability (can include the presence of mental illness/intellectual/developmental disability).

Office hours: will be held on the 3rd Tuesday of each month from 2:00 to 3:00 p.m. throughout 2025. The frequency of office hours is expected to change in 2026; further information will be provided at a later date.