

# Systemic Assessment Crosswalk on Settings

In January 2014, the Centers for Medicare & Medicaid Services (CMS) published a rule to ensure that Home and Community Based Services (HCBS) are provided in settings that meet certain criteria. 79 Fed. Reg. 2948 (Jan. 16, 2014). The rule went into effect in March 2014, and states have five years—until March 2019—to ensure that their HCBS settings are compliant with the rule.

The Colorado Department of Health Care Policy & Financing (HCPF or “the Department”) has developed a Statewide Transition Plan (STP) for bringing Colorado’s HCBS settings into compliance with the HCBS Settings Rule. Under the STP, the Department has conducted a comprehensive review of the kinds of settings in which HCBS services are provided in Colorado and the state statutes, regulations, and waivers that govern the provision of HCBS services in these settings. The results of this systemic review are set forth below. Summaries and paraphrases of state legal authorities are for convenience only and are not intended to be complete or authoritative for any purpose outside of this crosswalk.

In addition to the Department, other state agencies, such as the Colorado Department of Public Health and Environment (CDPHE) and the Colorado Department of Human Services (CDHS), are involved in ensuring compliance with the HCBS Settings Rule. The Department plans to work with these agencies to ensure that their relevant statutes and regulations promote compliance. Although the Department has begun coordinating with CDPHE and CDHS on this endeavor, this crosswalk is issued only by the Department and is not a joint publication with CDPHE or CDHS.

The following notes are intended to make it easier to review and comment on the crosswalk:

1. Certain criteria in the HCBS Settings Rule apply to all HCBS settings. These criteria are set out below in red font above Table 1. Within Table 1, all affected HCBS settings are listed alphabetically from top to bottom. From left to right, the crosswalk summarizes existing state statutes, regulations, and waivers, stating whether they are consistent with, silent with respect to, or in conflict with each federal criterion.
2. Additional criteria in the HCBS Settings Rule apply only to provider-owned or -controlled residential HCBS settings. These criteria are set out below in orange font above Table 2. Within Table 2, all affected provider-owned or -controlled residential HCBS settings are listed alphabetically from top to bottom. From left to right, the crosswalk summarizes existing state statutes, regulations, and waivers, stating whether they are consistent with, silent with respect to, or in conflict with each federal criterion.
3. The Department is proposing to take a “belt and suspenders” approach to ensuring that all HCBS settings conform to the federal requirements.
  - a. Pursuant to this approach, the Department plans to propose two new regulations: 10 CCR 2505-10 AAA, requiring all HCBS settings to comply with set 1 of the federal criteria (see red text above Table 1), and 10 CCR 2505-10 BBB, requiring all provider-owned or -operated residential HCBS settings to comply with set 2 of the federal criteria (see orange text above Table 2). “AAA” and “BBB” are placeholders for numbers to be assigned later.
  - b. In addition, the Department plans to propose piecemeal edits to its regulations governing particular HCBS settings, and to work with other agencies that are involved with such settings, as set out in the two tables below. These edits are described below as “redlines.” The Department hopes that these redlines will be relatively uniform across different kinds of settings, but it invites comment on whether different language or considerations should apply to particular settings.
4. For the sake of efficiency and uniformity, the Department expects the bulk of the redlines to affect its own regulations and those of other agencies. The Department plans to seek changes to statutes and waivers only where necessary to mitigate possible conflicts with federal requirements, and not to address mere silence in a statute or waiver vis-à-vis federal requirements (which will be addressed via regulatory amendments). Working with CMS, the Department may eventually seek to amend its waivers so that similar requirements are addressed with similar language, and so that services that are provided under multiple waivers are described in a consistent way.
5. Where a statute, regulation, or waiver is silent with respect to two or more federal requirements, the silence is noted in the first column in the table; subsequent columns in the table that direct the reader to “see Column X” (prior column) mean that the authority is also silent with respect to the additional federal requirements.
6. Where the crosswalk indicates that the Department plans to propose redlines or work with another agency to do so, the public will have an opportunity down the road to review and comment on the actual proposed redlines (e.g., during a rulemaking proceeding or the notice-and-comment period for waiver amendments). Therefore, while you may comment on all aspects of this crosswalk, you may find it most efficient to focus now on big-picture issues, and to save particular wording preferences for the comment periods to come.

## Set 1 of federal criteria: standards applicable to all HCBS settings (42 C.F.R. § 441.301(c)(4))

Home and community-based settings must have all of the following qualities, and such other qualities as [CMS] determines to be appropriate, based on the needs of the individual as indicated in their person-centered service plan:

- (i) The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.
- (ii) The setting is selected by the individual from among setting options including non-disability specific settings and an option for a private unit in a residential setting. The setting options are identified and documented in the person-centered service plan and are based on the individual's needs, preferences, and, for residential settings, resources available for room and board.

(iii) Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.

(iv) Optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact.

(v) Facilitates individual choice regarding services and supports, and who provides them.

New Rule AAA will provide that the above standards apply to all settings in which HCBS services are provided, except where HCBS services are permitted to be delivered in a setting that is institutional or does not meet the HCBS settings standards, such as respite. See 79 Fed. Reg. at 3011. Palliative/Supportive Care services provided outside the child's home (under the Children with Life-Limiting Illness waiver) are similar to respite, and new Rule AAA will not apply to such services.

**Table 1: standards applicable to all HCBS settings**

Type of setting	A. Integrated	B. Selected by individual	C. Ensures individual's rights	D. Optimizes autonomy in life choices	E. Facilitates choice regarding services and supports
<p>1. Adult day services centers (alternatives to nursing facilities)—includes basic and specialized adult day services centers</p> <p>The Department has convened a stakeholder workgroup to ensure that the rules relating to this type of setting comply with the HCBS Settings Rule.</p>	<p>Statute: C.R.S. 25.5-6-303(1) generally requires that all federal requirements be met, but does not specifically list integration, etc. C.R.S. 25.5-6-313(1.5) requires the Medical Services Board to regulate restricted environments and restrictive egress alert devices at adult day care centers.</p> <p>Regs: 10 CCR 2505-10 8.491 and 8.515.70 do not specifically require integration, etc. The Department plans to propose redlines to accomplish this, in addition to adding a reference to new Rule AAA. For this particular setting and federal requirement (integration), the Department also plans to propose redlines that specify concrete, desired outcomes. The Department also plans to propose a rule under C.R.S. 25.5-6-313(1.5) to regulate restricted environments and egress alert devices in a manner consistent with the federal HCBS Settings Rule.</p> <p>Waiver: BI Waiver, EBD Waiver, SCI Waiver, and CMHS Waiver are silent with respect to integration, etc.</p>	<p>Statute: See Column A.</p> <p>Regs: See Column A; the Department plans to propose redlines.</p> <p>Waiver: BI Waiver, EBD Waiver, SCI Waiver, and CMHS Waiver at App. B-7 and App. D-1, items b &amp; c confirm that people are informed of feasible service alternatives provided by the waiver and the choices of either institutional or home and community-based services, and that the case manager provides a choice of providers.</p>	<p>Statute: C.R.S. 26-20-103 limits the use of restraints by state agencies as well as public or private entities that contract with or are licensed/certified by state agencies. Otherwise, see Column A.</p> <p>Regs: 6 CCR 1011-1 Chapter 02 Part 8 limits the use of restraints in all licensed health care facilities, and 10 CCR 2505-10 8.491.20(B)(12) requires a restraint-free environment. Otherwise, 8.515.70 is silent on this issue; see Column A; the Department plans to propose redlines.</p> <p>Waiver: BI Waiver, EBD Waiver, SCI Waiver, and CMHS Waiver at App. G-2 describe statutory and regulatory protections for certain rights, including freedom from restraint.</p>	<p>Statute: See Column A.</p> <p>Regs: 10 CCR 2505-10 8.491.14(F) provides that clients have the right to choose not to participate in social and recreational activities. 8.515.70 is silent on autonomy. The Department plans to propose redlines to one or both of these provisions.</p> <p>Waiver: See Column A.</p>	<p>Statute: See Column A.</p> <p>Regs: See Column A; the Department plans to propose redlines.</p> <p>Waiver: See Column A.</p>
<p>2. Alternative care facilities (ACFs)/assisted living residences (ALRs)</p> <p>The Department has convened a stakeholder workgroup to ensure that the rules relating to this type of setting comply with the HCBS Settings Rule.</p>	<p>Statute: C.R.S. 25-27-104 is silent with respect to integration, etc. C.R.S. 25.5-6-303(3) generally requires that all federal requirements be met, but does not specifically list integration, etc.</p> <p>Regs: <u>input is invited</u> on whether to amend the CDPHE and Departmental rules below beyond adding reference to new Rule AAA.</p> <p>6 CCR 1011-1 Chap 07 1.104(5)(m) requires ACF to have a policy on restrictive egress alert devices, and 1.108 regulates secured environments; <u>input is invited</u> on whether changes are needed for community integration. 1.106(1)(l) protects resident's right to make visits outside the facility. 1.107(2) requires ACF to provide opportunities for social and recreational activities within and outside the facility.</p> <p>Under 10 CCR 2505-10 8.495.1, protective oversight includes resident choice and ability to travel and engage independently</p>	<p>Statute: See Column A.</p> <p>Regs: Client chooses to live in an ACF, per 10 CCR 2505-10 8.495.2.B and 8.495.4.A(1). Otherwise silent; the Department plans to propose redlines.</p> <p>Waiver: EBD Waiver and CMHS Waiver at App. B-7 and App. D-1, items b &amp; c confirm that people are informed of feasible service alternatives provided by the waiver and the choices of either institutional or home and community-based services, and that the case manager provides a choice of providers.</p>	<p>Statute: C.R.S. 25-27-104(e) requires promulgation of regs to protect individual rights but does not specify which rights. C.R.S. 26-20-103 limits the use of restraints by state agencies as well as public or private entities that contract with or are licensed/certified by state agencies.</p> <p>Regs: No redlines needed. Under 6 CCR 1011-1 Chap 07 1.104(5)(g), ACFs must have written policies on resident rights that incorporate the provisions of Section 1.106(1), which address privacy, dignity, respect, and freedom from restraint; see also 6 CCR 1011-1 Chapter 02 Part 8 and Chap 07 1.106(3) (limiting use of restraints); 10 CCR 2505-10 8.495.6.E. (protecting privacy during phone calls and visits and in bedroom). Also, 6 CCR 1011-1 Chap 07 1.102(3)(b)(iv), 1.104(5)(j), 1.105(3), and 1.106(1)(m) protect residents' control of their money and property. And under 10 CCR 2505-10</p>	<p>Statute: See Column A.</p> <p>Regs: No redlines needed. Under 10 CCR 2505-10 8.495.4.A, ACF must foster client independence, promote individuality and lifestyle, and avoid reducing personal choice and initiative.</p> <p>Waiver: EBD Waiver at App. G-2, item a requires ACF to be homelike and provide choice about care and lifestyle. CMHS Waiver at App. G-2, item a-ii, requires ACF to "comply with the home-like and person centered environment requirements."</p>	<p>Statute: See Column A.</p> <p>Regs: No redlines needed. Under 10 CCR 2505-10 8.495.4.A, ACF must promote choice of care.</p> <p>Waiver: See Column D.</p>

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	<p>in the wider community. 8.495.2.B requires an assessment of whether the ACF meets the person's need for independence and community integration. 8.495.6.F requires ACF to encourage and assist client's participation in activities within the wider community, when appropriate.</p> <p>Waiver: EBD Waiver, App. G-2, item a requires ACF to facilitate community integration. CMHS Waiver at App. G-2, item a-ii, states that a survey tool administered by CDPHE ensures that ACFs "comply with the home-like and person centered environment requirements and support community integration." CMHS Waiver at App. G-2, item c, states that ACF "must facilitate community integration; protect the health, welfare and safety of the client; and be home-like and person-centered." The Department plans to delete references to ACFs in the BI Waiver (with ACFs being replaced by SLPs and TLPs).</p>		<p>8.495.4.B, clients shall be informed of their rights.</p> <p>Waiver: EBD Waiver and CMHS Waiver at App. G-2 describe statutory and regulatory protections for certain rights, including freedom from restraint.</p>		

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<p>3. Child Residential Habilitation settings</p> <ul style="list-style-type: none"> <li>• Foster Care Homes (no more than 3 foster care children)</li> <li>• Kinship Foster Care</li> <li>• Non-certified Kinship Care</li> <li>• Specialized Group Facilities (SGFs) <ul style="list-style-type: none"> <li>○ Group Homes (up to 6 children if three are in CHRP program)</li> <li>○ Group Centers (up to 7 children if two are in CHRP program or 9 children if one is in CHRP program)</li> </ul> </li> <li>• Residential Child Care Facilities (RCCFs)</li> </ul> <p>The Department plans to work with CDHS on regulatory and/or waiver edits that will have minimal impact on the numerous foster care homes, SGFs, and RCCFs that serve children who are not enrolled in the CHRP waiver.</p>	<p>Statute: C.R.S. 25.5-10-201 declares the General Assembly's intent that individuals with IDD be included in community life, but does not specify integration as a requirement for particular settings. C.R.S. 25.5-10-227 allows a service agency to hold person's money and requires it to disburse "reasonable amounts" on request; <u>input is requested</u> on whether this adequately protects children's ability to control personal resources.</p> <p>Regs: The Department plans to work with CDHS to add references to new Rule AAA.</p> <p>10 CCR 2505-10 8.608 and the service plan require providers serving people with IDD to promote community inclusion.</p> <p>Under 12 CCR 2509-8 7.701.200, children in foster care are entitled to participate in appropriate cultural and social activities. Facilities providing residential care must use a "reasonable and prudent parent standard" in deciding whether to allow participation. <i>Id.</i> 7.708.38 and -.39 specify educational and community participation rights for children in foster care; work must be approved by foster parent(s) and the county designee.</p> <p>12 CCR 2509-8 7.708.33, 7.708.67, and 7.708.68 (for foster care) and 7.714.31 and 7.714.7 (for SGFs and RCCFs) protect children's right to keep and use their possessions, subject to certain limits, and be allowed to spend a "reasonable sum" of their own money; <u>input is requested</u> on whether this adequately protects children's ability to control personal resources.</p> <p>12 CCR 2509-8 7.714.2, 7.714.6, &amp; 7.714.7, applicable to SGFs and RCCFs, require facilities to have policies on participation in recreational &amp; religious activities &amp; community life; to provide for educational &amp; vocational programs in the most appropriate &amp; least restrictive setting; &amp; to encourage participation in community activities. 7.709.25 provides for children in SGFs to participate in school &amp; community activities.</p> <p>Waiver: CHRP waiver does not expressly address integration, although it states in App. C-2 that "[a] group home is located within a community and provides an environment that is similar to a foster or familial home. The children [like those in a foster home] [have] access to activities in the community."</p>	<p>Statute: Statutes do not address whether the child chooses the residential habilitation setting.</p> <p>Regs: No redlines needed. 12 CCR 2509-8 7.708.61 (for children in foster care), 7.714.2 (for children in SGFs and RCCFs), and the service plan require placement agreement to be developed with the involvement of the child and parent(s) or guardian(s).</p> <p>Waiver: CHRP Waiver, App. B-7, provides that "[w]hen an individual is determined to be likely to require a level of care as indicated in the waiver, the individual or his/her legal representative will be: a. informed of any feasible alternatives under the waiver; and b. given the choice of either institutional or home and community-based services." In some circumstances, the legal guardian or custodian making this choice may be the county.</p>	<p>Statute: C.R.S. 25.5-10-216 through -240 protect the rights of individuals with IDD in general (-218), and in particular with respect to privacy (-223) and freedom from coercion and restraint (-221). Dignity and respect are protected through C.R.S. 25.5-10-201 and -216 through -240 as a whole.</p> <p>C.R.S. 26-6-106(2)(g) authorizes child care facility licensing rules to "safeguard the legal rights of children served," but does not specify which rights. C.R.S. 26-6-106(2)(k) authorizes rules to set standards for short-term confinement of children.</p> <p>C.R.S. 26-20-103 limits the use of restraints by state agencies as well as public or private entities that contract with or are licensed/certified by state agencies.</p> <p>Regs: the Department plans to work with CDHS to propose redlines to clarify points below.</p> <p>10 CCR 2505-10 8.604.1 (relating to people with IDD) reiterates that people receiving services have the same rights as others; 8.604.2 requires providers to protect rights in C.R.S. 25.5-10-218 through -231 (<u>input requested</u> on whether this should be C.R.S. 25.5-10-216 through -240); and 8.608.3 thru 8.608.5 limit the use of restraints.</p> <p>In 10 CCR 2505-10 8.500.15, 8.500.105, and 8.503.150, add reference to C.R.S. 25.5-10-216 through -240.</p> <p>10 CCR 2505-10 8.508.180 seeks to protect privacy, dignity, and other rights, and makes rights in CDHS Social Services Staff Manual, Section 7.714.50, "CHILDREN'S RIGHTS" (12 CCR 2509-8) applicable. This cross-reference should be updated.</p> <p>12 CCR 2509-8 7.708.33 thru -.37 (for foster care) and 7.714.31 thru 7.714.4 &amp; 7.714.52 (for SGFs and RCCFs) explicitly protect privacy, implicitly protect dignity and respect, and limit coercion &amp; restraint.</p> <p>6 CCR 1011-1 Chapter 02 Part 8 limits the use of restraints in all licensed health care facilities. Also, 12 CCR 2509-8 7.714.53 <i>et seq.</i> sets out conditions under which restraints are allowed in foster care, SGFs, and RCCFs.</p> <p>Waiver: CHRP waiver, App. C-2, refers to CDHS's rules for group homes, including rights protections as described above. CHRP waiver is silent with respect to rights in other CHRP settings.</p>	<p>Statute: See Column B.</p> <p>Regs: No redlines needed. 10 CCR 2505-10 8.608 requires providers serving people with IDD to work to help these clients make increasingly sophisticated and responsible choices, exert greater control over their life, and develop and exercise their competencies and talents.</p> <p>12 CCR 2509-8 7.708.61 (for children in foster care) and 7.714.2 (for children in SGFs and RCCFs) require care to be provided in the least restrictive, most appropriate setting in order to meet the child's needs.</p> <p>Waiver: CHRP waiver is silent with respect to autonomy.</p>	<p>Statute: See Column B.</p> <p>Regs: CDHS child welfare regulations do facilitate some degree of choice regarding services and supports, but the Department plans to work with CDHS to propose redlines to make this more explicit and thorough.</p> <p>Waiver: See Column D.</p>
<p>4. Day Habilitation/treatment centers for individuals with IDD—includes 3 subcategories, below</p>	<p>Statute: C.R.S. 25.5-10-206(1)(D) and 27-10.5-104(1)(c) require day services and supports to support community integration.</p>	<p>Statute: C.R.S. 25.5-6-409.3 requires new consolidated adult IDD waiver to incorporate freedom of choice over living</p>	<p>Statute: C.R.S. 25.5-6-409.3 is silent with respect to individual rights. However, C.R.S. 25.5-10-216 through -240 protect</p>	<p>Statute: C.R.S. 25.5-6-409.3 requires new consolidated adult IDD waiver to incorporate freedom of choice over living</p>	<p>Statute: C.R.S. 25.5-6-409.3 requires new consolidated adult IDD waiver to provide support to organize resources and achieve</p>

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	<p>Also, C.R.S. 25.5-6-409.3 requires new consolidated adult IDD waiver to support employment and community integration. (N/A to children.) See also C.R.S. 25.5-10-201 &amp; -202(21) (General Assembly's intent that individuals with IDD be included in community life). In addition, C.R.S. 13-21-117.5 encourages community integration by limiting the liability of CCBs &amp; providers serving individuals with IDD. <u>The Department seeks input</u> on the effect of this provision and whether it should be modified.</p> <p>C.R.S. 25.5-10-227 allows a service agency to hold a person's money and requires it to disburse "reasonable amounts" upon request; <u>the Department seeks input</u> on whether this provision adequately protects the person's ability to control personal resources. <u>The Department also seeks input</u> on whether a provider may control a client's money if it is not the SSA-designated representative payee.</p> <p>Regs: 10 CCR 2505-10 8.608 requires providers serving people with IDD to promote community inclusion. 8.609.9(A)(1) requires day habilitation services to be provided outside the home unless otherwise indicated by documented need. The Department plans to change 8.609.9(A)(3), which provides for non-integrated, sheltered, and/or segregated settings for activities. The Department plans to propose redlines to eliminate non-integrated settings and require integration, in addition to adding a reference to new Rule AAA.</p> <p>Waiver: SLS Waiver, App. C, provides that day habilitation "takes place in a non-residential setting, separate from the participant's private residence or other residential living arrangement, except when due to medical and/or safety needs." See also DD Waiver, App. C (similar).</p>	<p>arrangements and social, community, and recreational opportunities; individual authority over supports and services; and maximum personal control. (N/A to children.)</p> <p>Regs: Day habilitation regs are silent with respect to selection by individual. The Department plans to propose redlines to conform to federal rule and state statute.</p> <p>Waiver: SLS Waiver, App. D-1, items c, d, and f, confirm that the CCB must provide information to participants about the potential services, supports, and resources that are available, and that the participant or his/her guardian are offered free choice from among qualified providers. See also DD Waiver, App. D-1, items c, d, and f (same).</p>	<p>the rights of individuals with IDD in general (-218), and in particular with respect to privacy (-223) and freedom from coercion and restraint (-221). Dignity and respect are protected through C.R.S. 25.5-10-201 and -216 through -240 as a whole. In addition, C.R.S. 26-20-103 limits the use of restraints by state agencies as well as public or private entities that contract with or are licensed/certified by state agencies.</p> <p>Regs: The Department plans to propose redlines to clarify points below.</p> <p>10 CCR 2505-10 8.604.1 (relating to people with IDD) reiterates that people receiving services have the same rights as others; 8.604.2 requires providers to protect rights in C.R.S. 25.5-10-218 through -231 (<u>input requested</u> on whether this should be C.R.S. 25.5-10-216 through -240); 8.608.3 thru 8.608.5 limit the use of restraints; and 8.609.5(B)(6) presumes that people can manage their own funds and possessions unless their plan documents limitations and a plan to increase this skill.</p> <p>In 10 CCR 2505-10 8.500.15, 8.500.105, and 8.503.150, and perhaps in 8.600.5(B), add reference to C.R.S. 25.5-10-216 through -240.</p> <p>6 CCR 1011-1 Chapter 02 Part 8 limits the use of restraints in all licensed health care facilities.</p> <p>Waiver: SLS Waiver, App. G-2, describes statutory protections for certain rights, including freedom from restraint. See also DD Waiver, App. G-2 (same).</p>	<p>arrangements and social, community, and recreational opportunities; individual authority over supports and services; and maximum personal control. (N/A to children.)</p> <p>Regs: No redlines needed. 10 CCR 2505-10 8.500.5.A(2) and 8.500.94.A(3) require day habilitation environments to foster independence and personal choice. Also, 10 CCR 2505-10 8.608 requires providers serving people with IDD to work to help these clients make increasingly sophisticated and responsible choices, exert greater control over their life, and develop and exercise their competencies and talents.</p> <p>Waiver: SLS Waiver, App. C, provides that day habilitation "[a]ctivities and environments are designed to foster the acquisition of skills, appropriate behavior, greater independence, and personal choice." See also DD Waiver, App. C (same).</p>	<p>"key service outcomes." (N/A to children.)</p> <p>Regs: See Column B; the Department plans to propose redlines.</p> <p>Waiver: SLS Waiver and DD Waiver are silent with respect to obligation on provider's part to facilitate choice regarding services and supports.</p>
<ul style="list-style-type: none"> <li>(a) Specialized Habilitation centers</li> </ul>	<p>See Row 4, above, with the following additional points:</p> <p>Regs: The Department plans to add a reference to new Rule AAA. Also, under 10 CCR 2505-10 8.500.5.A(2) and 8.500.94.A(3), specialized habilitation is provided in a non-integrated setting where a majority of the clients have a disability; the Department plans to change this to eliminate non-integrated settings and require integration. Also, the Department plans to change 8.609.4, which provides for non-integrated activities.</p> <p>Waiver: SLS Waiver, App. C, provides that specialized habilitation is "generally provided in non-integrated settings where a majority of the persons have a disability, such as program sites." The Department plans to change this to eliminate non-integrated settings and require integration. See also DD Waiver, App. C (same).</p>				
<ul style="list-style-type: none"> <li>(b) Supported Community Connections (SCC) (adults and children)</li> </ul>	<p>See Row 4, above, with the following additional points:</p> <p>Regs: No redlines needed beyond a reference to new Rule AAA. Under 10 CCR 2505-10 8.500.5.A(2) and 8.500.94.A(3), SCC services help the client access typical activities and functions of community life, such as those chosen by the general population, including community education or training, retirement, and volunteer activities. The services are conducted in a variety of settings in which the client interacts with persons without disabilities.</p> <p>Waiver: SLS Waiver, App. C, provides that SCC "supports the abilities and skills necessary to enable the participant to access typical activities and functions of community life such as those chosen by the general population, including community education or training, retirement and volunteer activities. [SCC] provides a wide variety of opportunities to facilitate and build relationships and natural supports in the community, while utilizing the community as a learning environment to provide services and supports as identified in a participant's Service Plan. These activities are conducted in a variety of settings in which participants interact with non-disabled</p>				

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	individuals (other than those individuals who are providing services to the participant). These types of services may include socialization, adaptive skills and personnel to accompany and support the participant in community settings, resources necessary for participation in activities and supplies related to skill acquisition, retention or improvement." See also DD Waiver, App. C (similar); CHRPA waiver, App. C (similar); CES waiver, App. C (similar).				
<ul style="list-style-type: none"> <li>(c) Prevocational Services centers</li> </ul>	See Row 4, above, with the following additional points: Reqs: No redlines needed beyond a reference to new Rule AAA. Under 10 CCR 2505-10 8.500.5.A(2) and 8.500.94.A(3), prevocational services are provided in a variety of non-residential locations. Waiver: Under SLS Waiver, App. C., prevocational services "are provided in a variety of locations separate from the participant's private residence or other residential living arrangement." See also DD Waiver, App. C (same).				
5. Day treatment facilities under BI waiver The Department has convened a stakeholder workgroup to ensure that the rules relating to this type of setting comply with the HCBS Settings Rule.	Statute: C.R.S. 25.5-6-703(7) is silent with respect to integration, etc. Reqs: 10 CCR 2505-10 8.515.80 is silent with respect to integration, etc. The Department plans to propose redlines to address this, in addition to adding a reference to new Rule AAA. Waiver: BI waiver is silent with respect to integration, etc.	Statute: See Column A. Reqs: See Column A; the Department plans to propose redlines. Waiver: BI Waiver at App. B-7 and App. D-1, items b & c confirms that people are informed of feasible service alternatives provided by the waiver and the choices of either institutional or home and community-based services, and that the case manager provides a choice of providers.	Statute: C.R.S. 26-20-103 limits the use of restraints by state agencies as well as public or private entities that contract with or are licensed/certified by state agencies. Otherwise, see Column A. Reqs: No redlines needed. 10 CCR 2505-10 8.515.80(C) enumerates individual rights, including privacy and freedom from restraint; dignity and respect are protected though not explicitly listed. In addition, 6 CCR 1011-1 Chapter 02 Part 8 limits the use of restraints in all licensed health care facilities. <u>The Department seeks input</u> on whether the list of rights in 10 CCR 2505-10 8.515.80(C) should be extended to other services and waivers (by codifying it in a more general provision, and changing the BI-day-treatment specific "treatment plan" to "person-centered plan"). Waiver: BI Waiver at App. G-2 describes statutory and regulatory protections for certain rights, including freedom from restraint.	Statute: See Column A. Reqs: See Column A; the Department plans to propose redlines. Waiver: See Column A.	Statute: See Column A. Reqs: See Column A; the Department plans to propose redlines. Waiver: See Column A.
6. Group Residential Services and Supports (GRSS) community residential homes for four to eight people	Statute: C.R.S. 25.5-6-409.3 requires new consolidated adult IDD waiver to support employment and community integration. (N/A to children.) See also C.R.S. 25.5-10-201 & -202(21) (General Assembly's intent that individuals with IDD be included in community life). Also, C.R.S. 25.5-10-214(5)(a) requires regulation of the distance between such homes. In addition, C.R.S. 13-21-117.5 encourages community integration by limiting the liability of CCBs & providers serving individuals with IDD. <u>The Department seeks input</u> on the effect of this provision and whether it should be modified. C.R.S. 25.5-10-227 allows a service agency to hold a person's money and requires it to disburse "reasonable amounts" upon request; <u>the Department seeks input</u> on whether this provision adequately protects the person's ability to control personal resources. <u>The Department also seeks input</u> on whether a provider may control a client's money if it is not the SSA-designated representative payee. Reqs: 10 CCR 2505-10 8.608 requires providers serving people with IDD to promote community inclusion. 8.609.8(B) also prevents conspicuous grouping of GRSS	Statute: C.R.S. 25.5-6-409.3 requires new consolidated adult IDD waiver to incorporate freedom of choice over living arrangements and social, community, and recreational opportunities, and individual authority over supports and services. (N/A to children.) Under C.R.S. 25.5-10-216(7) and 27-10.5-110(2), a person shall not be admitted to a Regional Center without a court order. Reqs: The Department is considering revising 10 CCR 2505-10 8.609.5(B)(8) to be more explicit that the setting is selected by the individual. Waiver: DD Waiver, App. D-1, items c, d, and f, confirm that the CCB must provide information to participants about the potential services, supports, and resources that are available, and that the participant or his/her guardian are offered free choice from among qualified providers.	Statute: C.R.S. 25.5-6-409.3 is silent with respect to individual rights. However, C.R.S. 25.5-10-216 through -240 protect the rights of individuals with IDD in general (-218), and in particular with respect to privacy (-223) and freedom from coercion and restraint (-221). Dignity and respect are protected through C.R.S. C.R.S. 25.5-10-201 and -216 through -240 as a whole. C.R.S. 26-20-103 limits the use of restraints by state agencies as well as public or private entities that contract with or are licensed/certified by state agencies. Reqs: The Department plans to propose redlines to clarify the points below. 10 CCR 2505-10 8.604.1 (relating to people with IDD) reiterates that people receiving services have the same rights as others; 8.604.2 requires providers to protect rights in C.R.S. 25.5-10-218 through -231 ( <u>input requested</u> on whether this should be C.R.S. 25.5-10-216 through -240); 8.608.3 thru 8.608.5 limit the use of restraints; and 8.609.5(B)(6) presumes that people can manage their own funds and possessions unless their plan documents limitations and a plan to increase this skill.	Statute: C.R.S. 25.5-6-409.3 requires new consolidated adult IDD waiver to incorporate freedom of choice over living arrangements and social, community, and recreational opportunities; individual authority over supports and services; and maximum personal control. (N/A to children.) Reqs: No redlines needed. Under 10 CCR 2505-10 8.500.5.A(5), residential habilitation services assist clients to reside as independently as possible in the community, including through self-advocacy training and community access services. Also, 10 CCR 2505-10 8.608 requires providers serving people with IDD to work to help these clients make increasingly sophisticated and responsible choices, exert greater control over their life, and develop and exercise their competencies and talents. Waiver: Under DD Waiver, App. C, residential habilitation services, which include GRSS, "are designed to assist participants to reside as independently as possible in the community" and include self-advocacy training (which may include training "to make increasingly responsible choices") and cognitive services (which	Statute: C.R.S. 25.5-6-409.3 requires new consolidated adult IDD waiver to provide support to organize resources and achieve "key service outcomes." (N/A to children.) Reqs: Regs for GRSS community residential homes are silent with respect to facilitating choice regarding services and supports. The regs for case planning cover this, but the Department plans to add this point to the regs for this setting as well. Waiver: DD Waiver is silent with respect to obligation on provider's part to facilitate choice regarding services and supports.

Type of setting	A. Integrated	B. Selected by individual	C. Ensures individual's rights	D. Optimizes autonomy in life choices	E. Facilitates choice regarding services and supports
	<p>homes near other DIDD settings. 8.600.4 (definition of Regional Center)—should say that CDHS, not HCPF, operates Regional Centers.</p> <p>6 CCR 1011-1 Chap 08 Section 10 requires policy on resident funds but does not explicitly provide for resident control of personal resources; <u>input is invited</u> on whether and how CDPHE might edit this section.</p> <p>The Department plans to work with CDPHE to propose redlines to address the above points, and to add a reference to new Rule AAA.</p> <p>Waiver: DD Waiver, App. C-2, item c-ii, cites rule above regarding community inclusion. Also, under App. C, residential habilitation services, which include GRSS, “are designed to assist participants to reside as independently as possible in the community” and include community access services to “explore community services available to all people, natural supports available to the participant, and develop methods to access additional services/supports/activities needed by the participant.”</p>		<p>In 10 CCR 2505-10 8.500.15, 8.500.105, and 8.503.150, and perhaps in 8.600.5(B), add reference to C.R.S. 25.5-10-216 through -240.</p> <p>6 CCR 1011-1 Chap 08 Section 9 protects resident rights set forth 6 CCR 1011-1, Chapter II, Part 6 (includes dignity, privacy, &amp; freedom from inappropriate restraint), and C.R.S. 25.5-10-218 through 225 (<u>input requested</u> on whether this should be C.R.S. 25.5-10-216 through -240). Also, 6 CCR 1011-1 Chapter 02 Part 8 limits the use of restraints in all licensed health care facilities.</p> <p>Waiver: DD Waiver, App. G-2, describes statutory protections for certain rights, including freedom from restraint.</p>	<p>may include training in “planning and decision making”).</p>	
<p>7. Individual Residential Services and Supports (IRSS) homes for up to 3 people</p> <ul style="list-style-type: none"> <li>• Host homes</li> <li>• Homes owned or leased by agency</li> <li>• Family homes (see Row 8)</li> <li>• Own homes (see Row 8)</li> </ul>	<p>Statute: C.R.S. 25.5-6-409.3 requires new consolidated adult IDD waiver to support employment and community integration. (N/A to children.) <i>See also</i> C.R.S. 25.5-10-201 &amp; -202(21) (General Assembly’s intent that individuals with IDD be included in community life). In addition, C.R.S. 13-21-117.5 encourages community integration by limiting the liability of CCBs &amp; providers serving individuals with IDD. <u>The Department seeks input</u> on the effect of this provision and whether it should be modified.</p> <p>C.R.S. 25.5-10-227 allows a service agency to hold a person’s money and requires it to disburse “reasonable amounts” upon request; <u>the Department seeks input</u> on whether this provision adequately protects the person’s ability to control personal resources. <u>The Department also seeks input</u> on whether a provider may control a client’s money if it is not the SSA-designated representative payee.</p> <p>Regs: No redlines needed beyond a reference to new Rule AAA. 10 CCR 2505-10 8.608 requires providers serving people with IDD to promote community inclusion; 8.609.7(B) requires the same for IRSS providers. Also, 8.609.7(A)(3) makes community inclusion and distance from other settings (to avoid conspicuous</p>	<p>Statute: C.R.S. 25.5-6-409.3 requires new consolidated adult IDD waiver to incorporate freedom of choice over living arrangements and social, community, and recreational opportunities, and individual authority over supports and services. (N/A to children.)</p> <p>Regs: The Department is considering revising 10 CCR 2505-10 8.609.5(B)(8) to be more explicit that the setting is selected by the individual, and revising 8.609.7(A)(3), which refers to individual choice, to specify that the setting is selected by the individual from among setting options including non-disability specific settings and an option for a private unit in a residential setting, etc.</p> <p>Waiver: DD Waiver, App. D-1, items c, d, and f, confirm that the CCB must provide information to participants about the potential services, supports, and resources that are available, and that the participant or his/her guardian are offered free choice from among qualified providers.</p>	<p>Statute: C.R.S. 25.5-6-409.3 is silent with respect to individual rights. However, C.R.S. 25.5-10-216 through -240 protect the rights of individuals with IDD in general (-218), and in particular with respect to privacy (-223) and freedom from coercion and restraint (-221). Dignity and respect are protected through C.R.S. 25.5-10-201 and -216 through -240 as a whole.</p> <p>C.R.S. 26-20-103 limits the use of restraints by state agencies as well as public or private entities that contract with or are licensed/certified by state agencies.</p> <p>Regs: The Department plans to propose redlines to clarify the points below.</p> <p>10 CCR 2505-10 8.604.1 (relating to people with IDD) reiterates that people receiving services have the same rights as others; 8.604.2 requires providers to protect rights in C.R.S. 25.5-10-218 through -231 (<u>input requested</u> on whether this should be C.R.S. 25.5-10-216 through -240); 8.608.3 thru 8.608.5 limit the use of restraints; and 8.609.5(B)(6) presumes that people can manage their own funds and possessions unless their plan documents limitations and a plan to increase this skill.</p> <p>In 10 CCR 2505-10 8.500.15, 8.500.105, and 8.503.150, and perhaps in 8.600.5(B), add</p>	<p>Statute: C.R.S. 25.5-6-409.3 requires new consolidated adult IDD waiver to incorporate freedom of choice over living arrangements and social, community, and recreational opportunities; individual authority over supports and services; and maximum personal control. (N/A to children.)</p> <p>Regs: No redlines needed. Under 10 CCR 2505-10 8.500.5.A(5), residential habilitation services assist clients to reside as independently as possible in the community, including through self-advocacy training and community access services. Also, 10 CCR 2505-10 8.608 requires providers serving people with IDD to work to help these clients make increasingly sophisticated and responsible choices, exert greater control over their life, and develop and exercise their competencies and talents.</p> <p>Waiver: Under DD Waiver, App. C, residential habilitation services, which include IRSS, “are designed to assist participants to reside as independently as possible in the community” and include self-advocacy training (which may include training “to make increasingly responsible choices”) and cognitive services (which may include training in “planning and decision making”).</p>	<p>Statute: C.R.S. 25.5-6-409.3 requires new consolidated adult IDD waiver to provide support to organize resources and achieve “key service outcomes.” (N/A to children.)</p> <p>Regs: IRSS regs are silent with respect to facilitating choice of services and supports. The regs for case planning cover this point, but the Department plans to add it to the regs for this setting as well.</p> <p>Waiver: See Column B.</p>

Type of setting	A. Integrated	B. Selected by individual	C. Ensures individual's rights	D. Optimizes autonomy in life choices	E. Facilitates choice regarding services and supports
	<p>grouping) considerations in selecting a setting.</p> <p>Waiver: DD Waiver, App. C-2, item c-ii, cites rule above regarding community inclusion. Also, under DD Waiver, App. C, residential habilitation services, which include IRSS, "are designed to assist participants to reside as independently as possible in the community" and include community access services to "explore community services available to all people, natural supports available to the participant, and develop methods to access additional services/supports/activities needed by the participant."</p>		<p>reference to C.R.S. 25.5-10-216 through -240.</p> <p>Waiver: DD Waiver, App. G-2, describes statutory protections for certain rights, including freedom from restraint.</p>		
<p>8. Private homes belonging to clients or their families, professional provider offices, and clinics</p>	<p>Colorado's statutes, regulations, and waivers do not expressly require that private homes, professional provider offices, and clinics be integrated, selected by the individual, etc. Colorado understands CMS's position to be that if HCBS services are provided in a private home, professional provider office, or clinic, the setting must meet the HCBS settings requirements set forth in 42 C.F.R. § 441.301(c)(4). Colorado plans to promulgate new Rule AAA making these requirements applicable to all settings in which HCBS services are provided. For purposes of site-specific assessments (e.g., Provider Transition Plans and site visits), Colorado plans to draw on its understanding of the way most private homes, professional provider offices, and clinics operate in presuming that they are compliant with these requirements. Anyone may seek to rebut this presumption by providing information about a particular setting to the Department.</p>				
<p>9. Supported Employment/vocational services locations</p> <ul style="list-style-type: none"> <li>• Group</li> <li>• Individual</li> </ul>	<p>Statute: C.R.S. 25.5-6-409.3 requires new consolidated adult IDD waiver to support employment and community integration. (N/A to children.) See also C.R.S. 25.5-10-201 &amp; -202(21) (General Assembly's intent that individuals with IDD be included in community life). In addition, C.R.S. 13-21-117.5 encourages community integration by limiting the liability of CCBs &amp; providers serving individuals with IDD. <u>The Department seeks input</u> on the effect of this provision and whether it should be modified.</p> <p>C.R.S. 25.5-10-227 allows a service agency to hold a person's money and requires it to disburse "reasonable amounts" upon request; <u>the Department seeks input</u> on whether this provision adequately protects the person's ability to control personal resources. <u>The Department also seeks input</u> on whether a provider may control a client's money if it is not the SSA-designated representative payee.</p> <p>Regs: The Department plans to propose redlines to address the points below, and to add a reference to new Rule AAA.</p> <p>10 CCR 2505-10 8.608 requires providers serving people with IDD to promote community inclusion.</p> <p>Under 10 CCR 2505-10 8.500.5.A(7) and 8.500.94.A(14), supported employment may be delivered in a variety of settings in which clients interact with individuals without disabilities to the same extent that individuals without disabilities employed in comparable positions would interact; occurs outside of a provider facility; and is provided in community jobs, enclaves, or</p>	<p>Statute: C.R.S. 25.5-6-409.3 requires new consolidated adult IDD waiver to incorporate freedom of choice over living arrangements and social, community, and recreational opportunities, and individual authority over supports and services. (N/A to children.)</p> <p>Regs: Regs are silent with respect to supported employment setting being selected by individual; the Department plans to propose redlines.</p> <p>Waiver: SLS Waiver, App. D-1, items c, d, and f, confirm that the CCB must provide information to participants about the potential services, supports, and resources that are available, and that the participant or his/her guardian are offered free choice from among qualified providers. See also DD Waiver, App. D-1, items c, d, and f (same).</p>	<p>Statute: C.R.S. 25.5-6-409.3 is silent with respect to individual rights. However, C.R.S. 25.5-10-216 through -240 protect the rights of individuals with IDD in general (-218), and in particular with respect to privacy (-223) and freedom from coercion and restraint (-221). Dignity and respect are protected through C.R.S. 25.5-10-201 and -216 through -240 as a whole. Also, C.R.S. 26-20-103 limits the use of restraints by state agencies as well as public or private entities that contract with or are licensed/certified by state agencies.</p> <p>Regs: The Department plans to propose redlines to clarify points below.</p> <p>10 CCR 2505-10 8.604.1 (relating to people with IDD) reiterates that people receiving services have the same rights as others; 8.604.2 requires providers to protect rights in C.R.S. 25.5-10-218 through -231 (<u>input requested</u> on whether this should be C.R.S. 25.5-10-216 through -240); 8.608.3 thru 8.608.5 limit the use of restraints; and 8.609.5(B)(6) presumes that people can manage their own funds and possessions unless their plan documents limitations and a plan to increase this skill.</p> <p>In 10 CCR 2505-10 8.500.15, 8.500.105, and 8.503.150, and perhaps in 8.600.5(B), add reference to C.R.S. 25.5-10-216 through -240.</p> <p>Waiver: SLS Waiver, App. G-2, describes statutory protections for certain rights, including freedom from restraint. See also DD Waiver, App. G-2 (same).</p>	<p>Statute: C.R.S. 25.5-6-409.3 requires new consolidated adult IDD waiver to incorporate freedom of choice over living arrangements and social, community, and recreational opportunities; individual authority over supports and services; and maximum personal control. (N/A to children)</p> <p>Regs: No redlines needed. 10 CCR 2505-10 8.608 requires providers serving people with IDD to work to help these clients make increasingly sophisticated and responsible choices, exert greater control over their life, and develop and exercise their competencies and talents.</p> <p>Waiver: SLS Waiver, App. C, and DD Waiver, App. C, are silent with respect to autonomy in connection with supported employment.</p>	<p>Statute: C.R.S. 25.5-6-409.3 requires new consolidated adult IDD waiver to provide support to organize resources and achieve "key service outcomes." (N/A to children.)</p> <p>Regs: See Column B; the Department plans to propose redlines.</p> <p>Waiver: See Column B.</p>



Type of setting	A. Integrated	B. Selected by individual	C. Ensures individual's rights	D. Optimizes autonomy in life choices	E. Facilitates choice regarding services and supports
	<p>mobile crews. The Department plans to propose redlines to ensure that these settings are sufficiently integrated. Also change 8.609.4 and 8.609.9(A)(3), which provide for non-integrated, sheltered, and/or segregated work services, to eliminate non-integrated settings and require integration.</p> <p>Waiver: SLS Waiver, App. C, describes supported employment as established in the above-cited regulations. The Department plans to propose redlines to ensure that these settings are sufficiently integrated. See also DD Waiver, App. C (same).</p>				
<p>10. Supported Living Program (SLP) facilities under BI waiver (note that SLP providers must be licensed as an ALR (see Row 2 above) or a Home Care Agency (HCA) Class A (see 6 CCR 1011-1, Ch. 26), but the latter option is being removed from the regulation)</p> <p>The rules relating to this type of setting are currently being revised.</p>	<p>Statute: C.R.S. 25.5-6-703(9) is silent with respect to integration, etc. of supportive care campus.</p> <p>Regs: No redlines needed beyond a reference to new Rule AAA. Under 10 CCR 2505-10 8.515.85.F, SLP must be integrated in and support full access to the greater community. Under 8.515.85.H, it must have certain policies on management of client funds and property. Also, under 8.515.85.A, protective oversight includes the client's choice and ability to travel and engage independently in the wider community; and under 8.515.85.C, SLP services include community participation.</p> <p>Waiver: BI Waiver at App. C-2, item c(ii) requires SLP facility to facilitate community integration.</p>	<p>Statute: See Column A.</p> <p>Regs: No redlines needed. Under 10 CCR 2505-10 8.515.85.F, SLP must be selected by the client from among setting options.</p> <p>Waiver: BI Waiver at App. B-7 and App. D-1, items b &amp; c confirms that people are informed of feasible service alternatives provided by the waiver and the choices of either institutional or home and community-based services, and that the case manager provides a choice of providers.</p>	<p>Statute: C.R.S. 26-20-103 limits the use of restraints by state agencies as well as public or private entities that contract with or are licensed/certified by state agencies. Otherwise, see Column A.</p> <p>Regs: No redlines needed. Under 10 CCR 2505-10 8.515.85.F, SLP must ensure client rights of privacy, dignity, and respect, and freedom from coercion and restraint. Also, 6 CCR 1011-1 Chapter 02 Part 8 limits the use of restraints in all licensed health care facilities.</p> <p>Waiver: Per BI waiver App. G-2, SLP is prohibited from the use of restraints and seclusion.</p>	<p>Statute: See Column A.</p> <p>Regs: No redlines needed. Under 10 CCR 2505-10 8.515.85.F, SLP must optimize individual initiative, autonomy, and independence; also, under 8.515.85.C, SLP services include independent living skills training.</p> <p>Waiver: BI Waiver at App. C-2, item c(ii) requires SLP facility to be homelike and provide choice about care and lifestyle.</p>	<p>Statute: See Column A.</p> <p>Regs: No redlines needed. Under 10 CCR 2505-10 8.515.85.F, SLP must facilitate client choice regarding services and supports.</p> <p>Waiver: BI Waiver at App. C-2, item c(ii) requires SLP facility to be homelike and provide choice about care and lifestyle.</p>
<p>11. Transitional Living Program (TLP) facilities under BI waiver (note that TLP providers must be licensed as an ALR (see Row 2 above))</p> <p>The rules relating to this type of setting are currently being revised.</p>	<p>Statute: C.R.S. 25.5-6-703(10) is silent with respect to integration, etc. of transitional living facility.</p> <p>Regs: The Department plans to propose redlines to address the points below, and to add a reference to new Rule AAA.</p> <p>Under 10 CCR 2505-10 8.516.30(E)(6), TLP services "will occur in the community or in natural settings and be non-institutional in nature." Add redline to state that setting will be integrated, etc., per federal rule. <u>The Department seeks input</u> on whether 8.516.30(C)(4) needs to be clarified to protect client's control over finances.</p> <p>Waiver: BI Waiver at App. C-2, item c(ii) requires TLP facility to facilitate community integration.</p>	<p>Statute: See Column A.</p> <p>Regs: 10 CCR 2505-10 8.516.30 is silent with respect to being selected by individual; the Department plans to propose redlines.</p> <p>Waiver: BI Waiver at App. B-7 and App. D-1, items b &amp; c confirms that people are informed of feasible service alternatives provided by the waiver and the choices of either institutional or home and community-based services, and that the case manager provides a choice of providers.</p>	<p>Statute: C.R.S. 26-20-103 limits the use of restraints by state agencies as well as public or private entities that contract with or are licensed/certified by state agencies. Otherwise, see Column A.</p> <p>Regs: No redlines needed. 10 CCR 2505-10 8.516.30(H) makes rights in 8.515.80(C) (for day treatment facilities under BI waiver) applicable, and adds more privacy in correspondence.</p> <p>Also, 6 CCR 1011-1 Chapter 02 Part 8 limits the use of restraints in all licensed health care facilities.</p> <p>Waiver: Per BI waiver App. G-2, TLP is prohibited from the use of restraints and seclusion.</p>	<p>Statute: See Column A.</p> <p>Regs: Per 10 CCR 2505-10 8.516.30(G)(3), TLP helps client work toward goals that include personal and living independence. The Department plans to propose redlines to clarify that the TLP must optimize individual initiative, autonomy, and independence (in the present, not just in the future).</p> <p>Waiver: BI Waiver at App. C-2, item c(ii) requires TLP facility to be homelike and provide choice about care and lifestyle.</p>	<p>Statute: See Column A.</p> <p>Regs: See Column B; the Department plans to propose redlines.</p> <p>Waiver: BI Waiver at App. C-2, item c(ii) requires TLP facility to be homelike and provide choice about care and lifestyle.</p>
<p>12. Youth Day Service settings under the Children's Extensive Support (CES) Waiver</p> <ul style="list-style-type: none"> <li>Child's home (see Row 8)</li> </ul>	<p>Statute: C.R.S. 25.5-10-201 declares the General Assembly's intent that individuals with IDD be included in community life, but does not specify integration as a requirement for particular settings.</p>	<p>Statute: Statutes do not address whether the child chooses the Youth Day Service setting.</p> <p>Regs: See Column A. CDHS's child care center regulations do not address whether the child chooses the setting.</p>	<p>Statute: C.R.S. 25.5-10-216 through -240 protect the rights of individuals with IDD in general (-218), and in particular with respect to privacy (-223) and freedom from coercion and restraint (-221). Dignity and</p>	<p>Statute: See Column B.</p> <p>Regs: See Column A.</p> <p>Waiver: See Column A.</p>	<p>Statute: See Column B.</p> <p>Regs: See Column A.</p> <p>Waiver: See Column A.</p>

Type of setting	A. Integrated	B. Selected by individual	C. Ensures individual's rights	D. Optimizes autonomy in life choices	E. Facilitates choice regarding services and supports
<ul style="list-style-type: none"> <li>Provider's home (see Row 8 and regulations at right regarding family child care homes)</li> <li>Other child care centers</li> </ul> <p>The Department's rule relating to the Youth Day Service is currently being drafted for eventual public notice and codification at 10 CCR 2505-10 8.503.40.A.</p>	<p>Regs: The Youth Day Service rule has not yet been promulgated. When it publishes this rule, the Department plans to include a reference to new Rule AAA and to specify that integration, etc. are required.</p> <p>CDHS regulates child care centers at 12 CCR 2509-8 7.702 <i>et seq.</i>, family child care homes at 7.707 <i>et seq.</i>, and school-age child care centers at 7.712 <i>et seq.</i> Under 7.702.51(C), the child care center must make a reasonable effort to integrate children with IDD with other children.</p> <p>Waiver: CES Waiver is silent w/r/t integration, etc.</p>	<p>Waiver: CES Waiver, App. B-7, provides that the child's parents, guardian, or representative are informed of any feasible alternatives under the waiver and given choice of either institutional or home and community based services. The case manager provides the child's parents, guardian, or representative with a choice of providers as well as choice of whether these services will be provided in the community or in an Intermediate Care Facility for Individuals with an Intellectual Disability (ICF/IID).</p>	<p>respect are protected through C.R.S. 25.5-10-201 and -216 through -240 as a whole.</p> <p>C.R.S. 26-6-106(2)(g) authorizes child care facility licensing rules to "safeguard the legal rights of children served," but does not specify which rights.</p> <p>C.R.S. 26-20-103 limits the use of restraints by state agencies as well as public or private entities that contract with or are licensed/certified by state agencies.</p> <p>Regs: See Column A.</p> <p>Also, 10 CCR 2505-10 8.604.1 (relating to people with IDD) reiterates that people receiving services have the same rights as others; 8.604.2 requires providers to protect rights in C.R.S. 25.5-10-218 through -231 (<i>input requested</i> on whether this should be C.R.S. 25.5-10-216 through -240); and 8.608.3 thru 8.608.5 limit the use of restraints. And 6 CCR 1011-1 Chapter 02 Part 8 limits the use of restraints in all licensed health care facilities.</p> <p>Also, 12 CCR 2509-8 7.702.56, 7.707.8, and 7.712.55 forbid child care centers, family child care homes, and school-age child care centers from using harmful, humiliating, or frightening measures against a child.</p> <p>Waiver: CES Waiver, App. G-2, describes statutory and regulatory protections for rights. This description should be updated; for example, 2 CCR 503, Volume 16, has been repealed (with the transfer of DIDD (then DDS) from CDHS to the Department.</p>		

**Set 2 of federal criteria: standards applicable to provider-owned or controlled residential settings (42 C.F.R. § 441.301(c)(4))**

Home and community-based settings must have all of the following qualities, and such other qualities as [CMS] determines to be appropriate, based on the needs of the individual as indicated in their person-centered service plan: . . .

(vi) In a provider-owned or controlled residential setting, in addition to the qualities at §441.301(c)(4)(i) through (v), the following additional conditions must be met:

(A) The unit or dwelling is a specific physical place that can be owned, rented, or occupied under a legally enforceable agreement by the individual receiving services, and the individual has, at a minimum, the same responsibilities and protections from eviction that tenants have under the landlord/tenant law of the State, county, city, or other designated entity. For settings in which landlord tenant laws do not apply, the State must ensure that a lease, residency agreement or other form of written agreement will be in place for each HCBS participant, and that the document provides protections that address eviction processes and appeals comparable to those provided under the jurisdiction's landlord tenant law.

(B) Each individual has privacy in their sleeping or living unit:

(1) Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors.

(2) Individuals sharing units have a choice of roommates in that setting.

(3) Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.

(C) Individuals have the freedom and support to control their own schedules and activities, and have access to food at any time.

(D) Individuals are able to have visitors of their choosing at any time.

(E) The setting is physically accessible to the individual.

(F) Any modification of the additional conditions, under §441.301(c)(4)(vi)(A) through (D), must be supported by a specific assessed need and justified in the person-centered service plan. The following requirements must be documented in the person-centered service plan:

- (1) Identify a specific and individualized assessed need.
- (2) Document the positive interventions and supports used prior to any modifications to the person-centered service plan.
- (3) Document less intrusive methods of meeting the need that have been tried but did not work.
- (4) Include a clear description of the condition that is directly proportionate to the specific assessed need.
- (5) Include regular collection and review of data to measure the ongoing effectiveness of the modification.
- (6) Include established time limits for periodic reviews to determine if the modification is still necessary or can be terminated.
- (7) Include the informed consent of the individual.
- (8) Include an assurance that interventions and supports will cause no harm to the individual.

New Rule BBB will provide that the above standards apply to all provider-owned or controlled residential settings in which HCBS services are provided, except where HCBS services are permitted to be delivered in a setting that is institutional or does not meet the HCBS settings standards, such as respite. See 79 Fed. Reg. at 3011. Palliative/Supportive Care services provided outside the child's home (under the Children with Life-Limiting Illness waiver) are similar to respite, and new Rule BBB will not apply to such services.

**Table 2: standards applicable to provider-owned or -controlled residential settings**

Type of setting	A. Landlord/tenant rights	B. Privacy in sleeping/living unit	C. Freedom over schedule and access to food	D. Visitors at any time	E. Physically accessible	F. Documented justification for any modification to these conditions
1. Adult day services centers	N/A—this type of setting is not residential.					
2. Alternative care facilities (ACFs)/assisted living residences (ALRs)  The Department has convened a stakeholder workgroup to ensure that the rules relating to this type of setting comply with the HCBS Settings Rule.	<p>Statute: 25-27-104.5 contemplates leases but does not require them or require that they provide protections comparable to landlord/tenant law.</p> <p>Regs: The Department plans to work with CDPHE to propose redlines to address the points below, and to add a reference to new Rule BBB.</p> <p>6 CCR 1011-1 Chap 07 1.104(5)(i) requires ACF to have a policy for eviction, and 1.105(6) limits discharge of residents, but they do not say that the policy must comply with landlord/tenant rights; 1.105(2) requires a written resident agreement but does not require that it provide protections comparable to landlord/tenant law. The Department plans to work with CDPHE to propose redlines to comply with federal rule.</p> <p>Waiver: EBD Waiver is silent with respect to landlord/tenant rights. CMHS Waiver, Attach. 2, notes plans to “support providers in documenting protections and appeals comparable to those provided under Colorado landlord tenant law.”</p>	<p>Statute: 25-27-104 and 25-27-104.5 are silent with respect to privacy in unit.</p> <p>Regs: No redlines needed. Under 10 CCR 2505-10 8.495.4, the ACF must allow capable clients to lock their doors and control access to their quarters, accommodate roommate choices within reason, and allow clients to decorate and use personal furnishings in their bedrooms. Note that under 10 CCR 2505-10 8.495.6.H, doors to bedrooms in secured ACFs shall not be locked unless the resident is able to manage the key independently.</p> <p>Waiver: EBD Waiver at App. G-2, item b requires ACF to be homelike and provide privacy. CMHS Waiver at App. G-2, item b-i refers to regulatory protections for privacy in general (see Table 1, cell C-2 above).</p>	<p>Statute: See Column B.</p> <p>Regs: Under 10 CCR 2505-10 8.495.4 and 8.495.6.E(9), capable clients shall have access to food at all times and access to food prep areas. Under 8.495.6.E(1), ACFs must maintain a home-like quality and feel. <u>The Department seeks input</u> on whether to be more explicit about control over schedule and activities.</p> <p>Waiver: EBD Waiver and CMHS Waiver do not address freedom over schedule (except in CDASS context) or access to food.</p>	<p>Statute: See Column B.</p> <p>Regs: 6 CCR 1011-1 Chap 07 1.106(1)(k) protects right to visitors, but not necessarily at any time. The Department plans to work with CDPHE to propose redlines to conform to federal rule.</p> <p>Waiver: EBD Waiver and CMHS Waiver at App. G-2, item b, refer to visitors, but not necessarily at any time.</p>	<p>Statute: See Column B.</p> <p>Regs: No redlines needed. 6 CCR 1011-1 Chap 07 1.106(1)(g) and 1.112(2) protect right to use of and access to dining room, other common areas, and building.</p> <p>Waiver: EBD Waiver, and CMHS Waiver are silent with respect to physical accessibility.</p>	<p>Statute: See Column B.</p> <p>Regs: 10 CCR 2505-10 8.495.6.E(10) provides for client's cooking capacity to be assessed and limited if necessary, and for the foregoing to be contained in care plan. Otherwise silent with respect to documenting modifications to the additional conditions; the Department plans to propose redlines.</p> <p>Waiver: See Column E.</p>

Type of setting	A. Landlord/tenant rights	B. Privacy in sleeping/living unit	C. Freedom over schedule and access to food	D. Visitors at any time	E. Physically accessible	F. Documented justification for any modification to these conditions
	The Department plans to delete references to ACFs in the BI Waiver (with ACFs being replaced by SLPs and TLPs).					
<p>3. Child Residential Habilitation settings</p> <ul style="list-style-type: none"> <li>Foster Care Homes (no more than 3 foster care children)</li> <li>Kinship Foster Care</li> <li>Non-certified Kinship Care</li> <li>Specialized group facilities <ul style="list-style-type: none"> <li>Group Homes (up to 6 children if three are in CHRP program)</li> <li>Group Centers (up to 7 children if two are in CHRP program or 9 children if one is in CHRP program)</li> </ul> </li> <li>Residential Child Care Facilities (RCCFs)</li> </ul> <p>The Department plans to work with CDHS on regulatory and/or waiver edits that will have minimal impact on the numerous foster care homes, SGFs, and RCCFs that serve children who are not enrolled in the CHRP waiver.</p>	<p>Statute: Statutes are silent with respect to landlord/tenant rights, etc. for child residential habilitation settings.</p> <p>Regs: The Department plans to work with CDHS to propose redlines to address points below, and to add a reference to new Rule BBB.</p> <p>CDHS child welfare regulations are silent with respect to landlord/tenant rights, etc. for child residential habilitation settings. <u>Input is invited</u> on whether and how to add such rights within 12 CCR 2509-8 (e.g., should a parent, guardian, or some other person or entity, rather than the child, be a party to the lease or similar agreement; or should the requirement of a lease or similar agreement be eliminated for children, with appropriate documentation in the person-centered plan?).</p> <p>Note that under 10 CCR 2505-10 8.604.3(B)(5) (relating to people with IDD), services may not be suspended if doing so would put person at risk of loss of abode.</p> <p>Waiver: CHRP waiver is silent with respect to landlord/tenant rights, etc. for child residential habilitation settings.</p>	<p>Statute: See Column A.</p> <p>Regs: 12 CCR 2509-8 7.708.33 (for foster care) and 7.714.31 (for SGFs and RCCFs) provide that “[e]very child has the right to a reasonable degree of privacy.” The Department plans to work with CDHS to propose redlines to more explicitly conform to federal rule criteria.</p> <p>Waiver: CHRP waiver, App. C-2, provides that “children residing within a group home have access to the same amenities as those children residing in a foster home such as . . . privacy to the extent that is appropriate according to the child’s needs.” For group homes, CHRP waiver, App. C-2, also refers to CDHS licensing requirements, including “a reasonable degree of privacy.” CHRP waiver does not explicitly provide for the detailed privacy criteria set forth in the HCBS Settings Rule.</p>	<p>Statute: See Column A.</p> <p>Regs: See Column A; the Department plans to work with CDHS to propose redlines.</p> <p>Waiver: CHRP waiver is silent with respect to freedom over schedule and access to food.</p>	<p>Statute: Under C.R.S. 25.5-10-223, person has right to reasonable and frequent (but not unlimited) opportunities to meet with visitors.</p> <p>Regs: 12 CCR 2509-8 7.708.33 (for foster care) and 7.714.31 (for SGFs and RCCFs) protect children’s right to have convenient opportunities to meet with visitors (but not at any time). The Department plans to work with CDHS to propose redlines to conform more closely to federal rule. <u>Input is invited</u> on how to implement such rights in an individualized and age-appropriate manner.</p> <p>Waiver: CHRP waiver, App. C-2, provides that in group homes, “[v]isitors are allowed in the home, however, visitation maybe is dependent upon the child’s court orders if there are concerns about a child’s safety.” For CHRP settings generally, CHRP waiver cites the CDHS regulations cited above.</p>	<p>Statute: See Column A.</p> <p>Regs: See Column A; the Department plans to work with CDHS to propose redlines.</p> <p>Waiver: See Column C.</p>	<p>Statute: See Column A.</p> <p>Regs: 10 CCR 2505-10 8.604.3(A) (relating to people with IDD) and 8.608.2 (same) requires that any suspension of rights and restrictive procedures be documented in plan and monitored. Also, 12 CCR 2509-8 7.714.31 (for SGFs and RCCFs, but not foster homes) requires that restriction of certain (not all) rights be documented. The Department plans to work with CDHS to propose redlines to the foregoing regs to conform more closely to list of requirements in federal rule.</p> <p>Waiver: CHRP waiver at App. G-1 provides that certain rights may be restricted by foster homes and group homes/centers (does not refer to RCCFs). The Department plans to work with CDHS to propose redlines to ensure that restrictions do not inappropriately limit rights in Table 1, and limit rights in Table 2 only according to CMS’s requirements that limitations be set forth and justified in personal plan.</p>
4. Day Habilitation/treatment centers for individuals with IDD	N/A—this type of setting is not residential.					
5. Day treatment facilities under BI waiver	N/A—this type of setting is not residential.					
6. Group Residential Services and Supports (GRSS) community residential homes for four to eight people	<p>Statute: C.R.S. 25.5-10-214 is silent with respect to landlord/tenant rights, etc.</p> <p>The Department plans to propose redlines to or deletion of C.R.S. 13-21-117.5(7) in order to conform to federal rule (currently provides that “[i]n any civil action brought against a provider, a person with [IDD] who is served in a residential setting owned or leased by a provider shall not be considered a tenant of the provider and statutes regarding landlord-tenant relationships shall not apply. . . . No real property rights shall accrue to a person with [IDD] by virtue of placement in a residential setting.”). <u>The Department seeks input</u> on whether and how to propose modifications to C.R.S. 13-21-117.5(1) (providing that CCBs and service agencies may remove a person with IDD from a residential setting if they believe that the person “may be at risk of</p>	<p>Statute: See Column A.</p> <p>Regs: 6 CCR 1011-1 Chap 08 regs are silent with respect to privacy in sleeping/living unit; the Department plans to work with CDPHE to propose redlines.</p> <p>Waiver: DD Waiver is silent with respect to privacy in sleeping/living unit.</p>	<p>Statute: See Column A.</p> <p>Regs: 6 CCR 1011-1 Chap 08 section 13.8 requires reasonable access to food supplies and between-meal snacks, but could be more explicit about access to food at any time. Regs are silent with respect to freedom over schedule. The Department plans to work with CDPHE to propose redlines.</p> <p>Waiver: DD Waiver is silent with respect to freedom over schedule and access to food.</p>	<p>Statute: Under C.R.S. 25.5-10-223, person has right to reasonable and frequent (but not unlimited) opportunities to meet with visitors.</p> <p>Regs: See Column B; the Department plans to work with CDPHE to propose redlines.</p> <p>Waiver: DD Waiver is silent with respect to right to visitors at any time.</p>	<p>Statute: See Column A.</p> <p>Regs: No redlines needed. 6 CCR 1011-1 Chap 08 section 22.10 protects right to use of and access to dining room, other common areas, and building.</p> <p>Waiver: DD Waiver, App. C-2, item c-ii requires accessibility.</p>	<p>Statute: See Column A.</p> <p>Regs: 10 CCR 2505-10 8.604.3(A) (relating to people with IDD) and 8.608.2 (same) requires that any suspension of rights and restrictive procedures be documented in plan and monitored; the Department plans to propose redlines to conform more closely to list of requirements in federal rule.</p> <p>Waiver: DD Waiver, App. G-2, item b-i states that rights suspensions must be justified, reviewed, and documented in plan, and that “the informed consent of the participant [or] his/her guardian for the use of the restrictive procedure” must be obtained. But this description relies on 2 CCR 503, Volume 16,</p>

Type of setting	A. Landlord/tenant rights	B. Privacy in sleeping/living unit	C. Freedom over schedule and access to food	D. Visitors at any time	E. Physically accessible	F. Documented justification for any modification to these conditions
	<p>abuse, neglect, mistreatment, exploitation, or other harm in such setting," and limiting liability for such removals).</p> <p>Regs: The Department plans to work with CDPHE to propose redlines to address the points below, and to add a reference to new Rule BBB.</p> <p>6 CCR 1011-1 Chap 08 Section 9.1(B) and (C) and 18.3 relating to resident transfers and 10 CCR 2505-10 8.609.5(B)(8) are silent with respect to landlord/tenant rights, etc. The Department plans to work with CDPHE to propose redlines to ensure federal criteria are met.</p> <p>Note that under 10 CCR 2505-10 8.500.9(A)(4), a provider under DD waiver may discontinue services only after documented efforts to resolve the situation. And under 10 CCR 2505-10 8.604.3(B)(5) (relating to people with IDD), services may not be suspended if doing so would put person at risk of loss of abode.</p> <p>Waiver: DD Waiver is silent with respect to landlord/tenant rights, etc.</p>					<p>which has been repealed (with the transfer of DIDD (then DDS) from CDHS to the Department); citations should be updated.</p>
<p>7. Individual Residential Services and Supports (IRSS) homes for up to three people</p> <ul style="list-style-type: none"> <li>• Host homes</li> <li>• Homes owned or leased by agency</li> <li>• Family homes (see Row 8)</li> <li>• Own homes (see Row 8)</li> </ul>	<p>Statute: See Row 6, above.</p> <p>Regs: <u>The Department seeks input</u> on how to implement landlord/tenant rights and the other federal requirements in this table in the context of host homes. Currently, the Department plans to propose redlines to address the points below, and to add a reference to new Rule BBB.</p> <p>10 CCR 2505-10 8.609.5(B)(8) is silent with respect to landlord/tenant rights, etc. The Department plans to propose changes to ensure federal criteria are met.</p> <p>Note that under 10 CCR 2505-10 8.500.9(A)(4), a provider under DD waiver may discontinue services only after documented efforts to resolve the situation. And under 10 CCR 2505-10 8.604.3(B)(5) (relating to people with IDD), services may not be suspended if doing so would put person at risk of loss of abode.</p> <p>Waiver: DD Waiver is silent with respect to landlord/tenant rights, etc.</p>	<p>Statute: Statute is silent with respect to privacy in sleeping/living unit, etc.</p> <p>Regs: See Column A; the Department plans to propose redlines.</p> <p>Waiver: DD Waiver is silent with respect to privacy in sleeping/living unit.</p>	<p>Statute: See Column B.</p> <p>Regs: See Column A; the Department plans to propose redlines.</p> <p>Waiver: DD Waiver is silent with respect to freedom over schedule and access to food.</p>	<p>Statute: Under C.R.S. 25.5-10-223, person has right to reasonable and frequent (but not unlimited) opportunities to meet with visitors.</p> <p>Regs: See Column A; the Department plans to propose redlines.</p> <p>Waiver: DD Waiver is silent with respect to right to visitors at any time.</p>	<p>Statute: See Column B.</p> <p>Regs: No redlines needed. 10 CCR 2505-10 8.609.7(A)(9) requires accessibility.</p> <p>Waiver: DD Waiver, App. C-2, item c-ii requires accessibility.</p>	<p>Statute: See Column B.</p> <p>Regs: 10 CCR 2505-10 8.604.3(A) (relating to people with IDD) and 8.608.2 (same) requires that any suspension of rights and restrictive procedures be documented in plan and monitored; the Department plans to propose redlines to conform more closely to list of requirements in federal rule.</p> <p>Waiver: DD Waiver, App. G-2, item b-i states that rights suspensions must be justified, reviewed, and documented in plan, and that "the informed consent of the participant [or] his/her guardian for the use of the restrictive procedure" must be obtained. But this description relies on 2 CCR 503, Volume 16, which has been repealed (with the transfer of DIDD (then DDS) from CDHS to the Department); citations should be updated.</p>
<p>8. Private homes belonging to clients or their families, professional provider offices, and clinics</p>	<p>N/A—private homes belonging to clients or their families are not generally provider-owned or -controlled, and professional provider offices and clinics are not residential. <u>The Department seeks input</u> on the potential application of the federal standards for provider-owned or controlled residential settings to situations where a family caregiver owns the home in which he or she provides services to a family member. Should these standards generally apply (subject to modification through the person-centered plan)? If so, should family-caregiver-owned homes be presumed compliant for purposes of site-specific assessments (e.g., Provider Transition Plans and site visits), subject to rebuttal if information is provided about a particular home?</p>					

Type of setting	A. Landlord/tenant rights	B. Privacy in sleeping/living unit	C. Freedom over schedule and access to food	D. Visitors at any time	E. Physically accessible	F. Documented justification for any modification to these conditions
9. Supported Employment/vocational services locations	N/A—this type of setting is not residential.					
10. Supported Living Program (SLP) facilities under BI waiver (note that SLP providers must be licensed as an ALR (see Row 2 above) or a Home Care Agency (HCA) Class A (see 6 CCR 1011-1, Ch. 26), but the latter option is being removed from the regulation)  The rules relating to this type of setting are currently being revised.	Statute: C.R.S. 25.5-6-703(9) is silent with respect to landlord/tenant rights, etc. for “supportive care campus.”  Regs: No redlines needed beyond a reference to new Rule BBB. Under 10 CCR 2505-10 8.515.85.F, SLP must put in place a lease or other written agreement that addresses eviction processes and appeals.  Waiver: SLP is provided under BI waiver, which is silent with respect to landlord/tenant rights, etc.	Statute: See Column A.  Regs: No redlines needed. Under 10 CCR 2505-10 8.515.85.F, SLP must ensure privacy in the client’s unit including lockable doors, choice of roommates, and freedom to furnish or decorate the unit.  Waiver: BI Waiver at App. C-2, item c(ii) requires SLP facility to be homelike and provide privacy.	Statute: See Column A.  Regs: No redlines needed. Under 10 CCR 2505-10 8.515.85.F, SLP must ensure that clients have the freedom and support to control their own schedules and activities, and have access to food at any time. 8.515.85.J(1)(a) limits cooking.  Waiver: BI Waiver at App. C-2, item c(ii) requires SLP facility to be homelike and provide access to food and kitchen facilities.	Statute: See Column A.  Regs: No redlines needed. Under 10 CCR 2505-10 8.515.85.F, SLP must enable clients to have visitors of their choosing at any time.  Waiver: See Column A.	Statute: See Column A.  Regs: No redlines needed. Under 10 CCR 2505-10 8.515.85.F, SLP must be physically accessible.  Waiver: See Column A.	Statute: See Column A.  Regs: Under 10 CCR 2505-10 8.515.85.F, there must be documentation for modification to conditions. The Department plans to propose redlines to conform more closely to list of requirements in federal rule.  Waiver: See Column A.
11. Transitional Living Program (TLP) facilities under BI waiver (note that TLP providers must be licensed as an ALR (see Row 2 above))  The rules relating to this type of setting are currently being revised.	Statute: C.R.S. 25.5-6-703(10) is silent with respect to landlord/tenant rights, etc. for transitional living facility.  Regs: 10 CCR 2505-10 8.516.30 is silent with respect to landlord/tenant rights for TLP facility. The Department plans to propose redlines and add a reference to new Rule BBB.  Waiver: TLP is provided under BI waiver, which is silent with respect to landlord/tenant rights, etc.	Statute: See Column A.  Regs: See Column A; the Department plans to propose redlines.  Waiver: BI Waiver at App. C-2, item c(ii) requires TLP facility to be homelike and provide privacy.	Statute: See Column A.  Regs: See Column A; the Department plans to propose redlines.  Waiver: BI Waiver at App. C-2, item c(ii) requires TLP facility to be homelike and provide access to food and kitchen facilities.	Statute: See Column A.  Regs: See Column A; the Department plans to propose redlines.  Waiver: See Column A.	Statute: See Column A.  Regs: See Column A; the Department plans to propose redlines.  Waiver: See Column A.	Statute: See Column A.  Regs: See Column A; the Department plans to propose redlines.  Waiver: See Column A.
12. Youth Day Service settings under the Children’s Extensive Support (CES) Waiver	N/A—this type of service is not residential. To the extent that the service is provided in the child’s or provider’s home, see Row 8.					

Global updates: in 10 CCR 2505-10 8.500 *et seq.*, 8.500.90 *et seq.*, and 8.503 *et seq.* (regulations for DD, SLS, and CES waivers), and 8.600 *et seq.* (regulations for individuals with IDD), the Department plans to update definitions and references involving the Division for Developmental Disabilities and the Operating Agency (*i.e.*, the former DDD within CDHS) to the Division for Intellectual & Developmental Disabilities (*i.e.*, the current DIDD within HCPF). In these regulatory sections and in 10 CCR 2505-10 8.100.1 (Definitions), the Department also plans to update references involving intermediate care facilities for the mentally retarded (ICF/MRs or ICF-MRs) to intermediate care facilities for individuals with intellectual disabilities (ICF/IIDs).