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Department of Health Care
Policy & Financing

Department of Health Care Policy and Financing
Office of Community Living
1570 Grant Street
Denver, CO 80203

January 21, 2016

Subject: Department Response to Recommendation to Modify Requirement for Attendant Signature

The Department has received the Participant Directed Programs Policy Collaborative (PDPPC) recommendation to modify the attendant timesheet requirement. Specifically, the PDPPC has requested a change to the "two signature requirement," so that only the client/employer or authorized representative's (AR) signature is included on a claim sheet, with a qualifying affidavit statement regarding authorization to approve and to assume personal responsibility for the accuracy of the information.

The Department has reviewed this recommendation and does not agree to make the requested change to current policy.

Regulation 8.510.6.A.9 states that it is the client/AR's responsibility to "review all attendant timesheets and statements for accuracy of time worked, completeness, and client/AR and attendant signatures. Timesheets shall reflect actual time spent providing CDASS services." Likewise, Regulation 8.510.6.A.12 requires the client/AR to "understand that misrepresentation or false statements may result in administrative penalties, criminal prosecution, and/or termination from CDASS. Client/AR is responsible for assuring timesheets submitted are not altered in any way and that any misrepresentations are immediately reported to the FMS." Requiring attendant approval of timesheets may offer the client additional reassurance that the information being submitted to the FMS is accurate.

In addition, Federal law requires the Department to take all necessary safeguards to assure financial accountability for funds expended for consumer directed care. 42 U.S.C. § 1396n(j)(2)(a); *see also* C.R.S. § 25.5-6-1102. Indeed, the Department is permitted to implement any "other appropriate safeguards" it determines necessary in the pursuit of this objective. 42 C.F.R. 441.464(2)(iv). Such safeguards include preventing the premature depletion of the participant directed budget, as well as identifying any potential service delivery problems. *Id.* at (a)(1).

Accordingly, in keeping with this directive, the Department has determined that requiring attendants to attest to the number of hours they have provided the client in a given time period is an essential safeguard for both CDASS recipients and for the integrity of the Medicaid program. Requiring attendant review and approval of

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timesheets allows the Department to quickly identify when there is a disagreement between the attendant and the client concerning the hours worked. The Department can then intervene to offer additional training and other aids under the rules. The attendant signature is also an expedited way to identify clients who may not be effectively managing their attendants or their budget. Again, steps short of debarment from participation should be available when these issues are discovered. Eliminating the attendant signature requirement would serve to delay Department intervention.

Moreover, requiring attendant approval of timesheets will ensure that attendants can be held accountable if they submit false timesheets or misrepresent the actual care provided. By requiring that attendants attest to their time entries, action can be taken directly against the attendant, and not toward a client who may have made a simple mistake. In other words, the signature requirement provides another mechanism by which to ensure that the Department is meeting its obligation to safeguard the Medicaid program against fraud, waste and abuse.

If you have any further questions or concerns, please contact Rhyann Lubitz at (303) 866-3641.

Best,

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