

Change Log for Colorado HCBS Statewide Transition Plan -- November 16, 2015

CMS Concern/Question (from CMS's 7/30/15 letter, unless otherwise indicated)	Implementation Status	STP Action Item
Uniform Resource Locator (URL) and Public Notice		
The URL directs to the main state Medicaid webpage, with no clear path from this page to the STP. Please clarify whether this page did direct the public specifically to the STP during the public comment period. If not, the public may not have been able to locate the STP	The Department believes that the URL directed the public to the original STP, and that it no longer does because the Department's website has since been redesigned. Even if there were a problem with the original URL, the Department is curing it through the process used to re-public-notice the revised STP. A URL now directs the public to the revised STP.	4, 5
Please clarify whether the notice posted in the state's register was available non-electronically to the public	We are not aware of hard copies of the state register being widely available to the public throughout the state. Even if that were a problem with the original public notice process, the Department has cured it through the process used to re-public-notice the revised STP. The Department published public notices in 7 newspapers around the state, whose cities' populations are over 50,000 and have a circulation that reach into the rural areas around the city.	5
Clarify whether copies of the STP itself were available in hard copy to the public	Hard copies of the original STP were available to the public upon request. The public notice for the revised STP and the revised STP itself clarified the availability of hard copies by describing a process to request hard copies from the Department.	5
Info about public notice, including the comment period, methods for submitting comments, and availability of the STP document should be included in the STP itself, rather than in separate documents unless those document are identified and posted as part of the STP. Please clarify whether this document was posted with the STP	The Department informed the public of the public notice process, including the comment period, methods for submitting comments, and the availability of the STP, but not all of this information was included in the original STP itself. To the extent a cure is necessary, it was effected through the revised STP.	4, 5
Please explicitly note, in the state's responses to public comment, any changes that the state made to the STP as a result of the public comments	The Department has described comments received in response to the initial public notice, along with any changes that it made to the STP as a result, in the STP. In addition, HCPF has prepared the attached summary, dated November 16, 2015, of the public notice process employed with the revised STP, as well as a summary of the comment(s) received and HCPF's responses to such comment(s).	5
Provide any additional information regarding issues identified in comments that the state has not yet fully addressed, and include the state's responses to those comments, or confirm the state has fully addressed the issues raised	The Department has fully addressed all issues identified in the public comments.	5
Provide a summary of the kinds of public questions/comments received and the state's response, but not a Listening Log containing every individual question/comment. (per 8/21/15 call)	The Department is attaching the requested summary.	N/A
Systemic Assessments		
CMS needs a clear and detailed overview of the state's systemic assessment including what the state reviewed, what the outcomes of the review were, and what remedial actions will be taken as a result of each outcome to achieve systemic compliance	Systemic assessments, including what the state reviewed, what the findings/outcomes were, and what remedial actions will be taken are described in the STP.	9, 21-23

CMS Concern/Question (from CMS's 7/30/15 letter, unless otherwise indicated)	Implementation Status	STP Action Item
The state indicates in the STP that a review of regulations and supporting documentation was completed in June, 2014 but does not indicate the findings	Recommendations across existing waivers and related regulations included exploration and possible modification of waivers and rules to better include/define participant rights, informed choice and person-centered practices. These recommendations will be integrated into both internal and external meetings to further understand potential changes. The Department is currently reviewing suggested changes. The Department is preparing a matrix that will outline the recommendation and inform the Department on implementation of the waiver and rule changes needed along with a timeline for completion.	9
The state indicates in the STP that the state planned to begin addressing outcomes of the review of licensure and certification processes in April, 2015. CMS needs to understand what was occurring during the 10 months after the assessment was completed unless the state's review of policy and procedures is different from the review of licensure and certification (if that is the case, please clarify in the STP)	The Department was working and is continuing to work with CDPHE on the process concerning licensure and certification. Current plan for completion of this review is 01/01/17. The Lewin Group has drafted a document of suggested Regulation and Language changes which encompassed both The Department and CDPHE's affected programmatic regulations, though not all of the licensure and certification processes have been addressed in this document and requires more work between the Department and CDPHE before 01/01/2017.	16-20
Provider and Setting-specific Assessments		
CMS needs additional details with respect to how the provider and settings assessments will be completed, such as . . .	[see below]	[see below]
Which types of providers and settings will be assessed	Adult Residential and Adult Non-Residential settings have completed self-assessments via a two-level survey process. The self-assessment survey process for Child Residential settings is still in progress. In addition, all settings are being assessed through an Individual, Family and Stakeholder survey, which went live on 06/30/2015.	8, 13
The assessment timeline and what the state will do to address providers that fail to respond to the assessment	The Individual, Family and Stakeholder survey will be on-going, with data being collected and analyzed quarterly. The provider self-assessment survey process for Child Residential settings will be completed by 01/15/2016. Site visits will be completed by 01/01/17. The Department will remind providers that failed to responded to the Self-Assessment that they need to complete the survey, and that those not completing the survey will be assumed non-compliant.	11 thru 14
Clarify the validation process for the provider assessments	The use of on-site surveys process will be used to validate provider responses. The Individual, Family and Stakeholder survey along with NCI data will be used to track over all implementation through the state	12 thru 14
Will the results of the survey of individuals and families be cross-referenced to the provider specific assessment results to check for response agreement	Data from the Individual, Family and Stakeholder survey and from NCI will be used to track over all implementation through the state, but not to validate particular providers' responses. The use of on-site surveys will be used to validate provider responses.	13
Will any site visits be utilized by the state to validate provider responses	Yes	12, 14
What entity will conduct the site visits	We are currently talking with CDPHE about completing this work. The process and survey have already been created and has been shared with CDPHE. Currently waiting to hear from CDPHE regarding whether it can complete this work	14

CMS Concern/Question (from CMS's 7/30/15 letter, unless otherwise indicated)	Implementation Status	STP Action Item
How many site visits will be conducted	The Department originally planned to conduct site visits to verify survey responses based on the following compliance levels: 100% of Providers unresponsive to surveys via e-mail and letter; 100% of providers who scored in Level 4 (highest) remedial action level (located on the grounds or immediately adjacent to a public institution-Indicators of Isolation); 50% of the providers who scored in remedial level 3 (Greater than 50% indicators of isolation); 25% of the providers who scored in remedial level 2 (50% or less indicators of isolation and Greater than 50% indicators of Rights, Autonomy, and Choice); 10% of the providers presumed compliant in Remedial level 1 (presumed compliant-50% or less indicators of isolation and less than 50% Indicators of Rights, Autonomy and Choice). Based on CMS statements made on October 14, 2015 during a webinar/Q&A (while the revised STP was out for public comment), the Department has modified its planned approach. The new site-visit plan is described in the current STP.	14
How will the state identify the sites	The Department will use a statistically significant sampling approach, stratified by provider category, as described in the STP.	14
Specify the timeline for bringing providers into compliance	Providers will have to comply according to the timelines (to be developed) in their Provider Transition Plans	48
Heightened Scrutiny		
Clearly lay out the process for identifying settings that are presumed to have institutional characteristics	Currently working to develop this process and a comprehensive list of settings to send through this process. Until on-site survey and the self-assessment validation is complete, the Heightened Scrutiny process cannot be completed	15, 49
Remediation Activities and Ongoing Monitoring		
For any necessary changes identified as a result of the systemic review, remedial action steps should be underway, and the state should include milestones and corresponding timelines for all remedial actions in the revised STP	Remedial action strategies, which will include Provider Transition Plans (PTPs) and Individual Transition Plans (ITPs), are currently being developed	46 thru 50
If any remedial actions have already been completed the state should provide updates with current details in the revised STP	No remedial actions have taken place to date	N/A
If the state will need to relocate individuals, CMS needs to review the state process as part of its remedial action	The ITP process is being established and will follow similar process to CCT and the process used in the Regional Centers. An ITP will be required for each individual that needs to change provider or setting	50
Colorado's STP describes some activities, namely additional training, technical assistance, and using data from the Quality of Life and National Core Indicators' outcomes as part of the assessment and remediation activities. CMS notes that absent the ability to crosswalk the information in these surveys to specific settings the information cannot be used to verify any setting is fully compliant with the regulation. Indicate how the state will complete this crosswalk	The state is not planning to complete a crosswalk. Data from the Individual, Family and Stakeholder survey and from NCI will be used to track over all implementation through the state. The use of on-site surveys will be used to validate provider responses.	14
CMS needs to better understand the state process for ongoing monitoring for the transition period and beyond. Therefore please provide information regarding the process and who will be responsible	The Department is working with CDPHE to update its existing survey and certification practices so it can better monitor service settings that this rule affects	19