

Individual Residential Support Services (IRSS) Regulation Revisions

Presented by: Cassandra Keller and Jeremy
Branting
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COLORADO
Department of Health Care
Policy & Financing

Purpose

- The purpose of this meeting and workgroup is to discuss revisions to the Residential Habilitation and IRSS regulations.
 - Since revisions took effect in 2019, there are several areas identified where additional oversight or revision to the rules is required.
- This is the fourth of five scheduled meetings.
 - A recording of the previous meetings can be found at:
<https://hcpf.colorado.gov/OCL-stakeholder-engagement>



Concerns From The Colorado Department of Public Health & Environment (CDPHE)

- Issue # 1: Host Home Providers not primarily living in the HH residence, or operating multiple host homes.
- Language:
 - The Host Home is the primary residence of the provider, which means that the Host Home provider occupies the residence the majority of the time. The provider may not operate additional homes with the intent of supporting additional individuals not living within that home. There may be no more than 3 participants served in this setting at any time.
 - A Host Home provider is not permitted to be the primary direct care provider for any participant outside of their Host Home.
 - The designated Host Home provider is responsible for providing the majority of residential care to the participant.



Concerns From The Colorado Department of Public Health & Environment (CDPHE)

- Issue # 2: Direct service providers and backup providers are providing services even though they have substantiated allegations of MANE on their record.
- Language:
 - Direct service and backup providers shall be prohibited from providing IRSS to any participant if they have any of the following:
 - a. A substantiated allegation of abuse, neglect, exploitation, or harmful act, as defined in Section 26-3.1-101, C.R.S., made by APS at a severity level of “Moderate” or “Severe” as defined in 12 CCR 2518-1 Section 30.100;
 - b. Three or more substantiated allegations of abuse, neglect, exploitation, or harmful act, as defined in Section 26-3.1-101, C.R.S., made in the last five years by APS at any severity level as defined in 12 CCR 2518 Section 30.100; or
 - c. A criminal conviction of abuse, neglect, or exploitation against an at-risk adult as defined in Section 18-6.5-102, C.R.S.



Regulatory Limitations Under Current Rules

- Unable to adequately address issues related to HHPs managing other settings.
- Unable to adequately address issues where PASA staff seek out employment elsewhere and move multiple PRS to another agency.
- Citing PASAs in which one employee has created care and safety concerns, but has since moved to another PASA.



Allowable IRSS Settings

The Department has heard that the proposed language about outlining allowable settings inadvertently limits settings and hinders flexibility.

Problem - PCA or HH providers are acting as pseudo-PASAs. They own and control the homes members are receiving services in, and they are subcontracting with direct caregivers to serve individuals out of the homes. Those direct care providers contract with the PCA or HH providers, not a provider agency.

Suggestions on how to regulate this?



Changed to Bi-Annual Surveys

- Language: PASA's must conduct an evaluation of consumer satisfaction with services and supports *no less than every two years*. The PASA must address any complaints or problematic practices requiring corrective action.
- Discussion and feedback?



Future Meetings

- Friday September 10, 1PM - 2:30PM
- Meeting reminders will be sent by John Barry and Constant Contact





Questions?



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Thank you!

