



COLORADO
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**Adult IDD Waiver Redesign Stakeholders:
Draft Service & Coverage Standards**
Residential Services

Disclaimer: Deliberative Document

This **working draft document** is provided for policy development and discussion purposes only. The notes, discussions, comments, suggestions, and recommendations made in this document should not be seen as, or be interpreted as, having any effect or change whatsoever in the current or future waiver services as currently or ultimately written; neither should they be seen as representative of the positions, comments, or feelings of all or a majority of the State of Colorado, the Department of Health Care Policy & Financing, the Office of Community Living, the Policy, Innovation & Engagement Division, or the Service Development & Evaluation Unit, individually or collectively. The service and coverage standards detailed below are subject to change and may change significantly over the course of the project.

Residential Services

Service Specifications

Definition

1. Residential Services (RS) support members whose needs [require](#) 24/7 access to supports that ensure the health, safety, and welfare of a member and those supports that assist the member in the acquisition, retention or improvement in skills necessary to support the participant to live and participate successfully in their community.

Eligibility

1. To be eligible for Residential [S](#)services, ~~waiver members~~ a member must [meet needs-based criteria including](#) ~~be assessed with needs-based criteria on the~~ ~~participate in an assessment of the~~ amount, type, frequency and duration of their daily support needs, their support needs for community protection and safety, and ~~that their needs require 24/7 access to supports. the extent to which the member's needs could be met through Residential Service's comprehensive access or through Personal Support's incremental access, with consideration of~~ ~~through~~ this criteria, the member must demonstrate that their needs justify more comprehensive daily access to supports than can be provided by Personal Supports, ~~other waiver services, or~~ ~~other available services or resources.~~

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Covered Services

Residential Services (RS) include:

- 1.–24/7 access to supports ~~that ensure the health, safety, and welfare of a member and those supports that assist the member in the acquisition, retention or improvement in skills necessary to support the participant to live and participate successfully in their community. More specifically, covered services include:~~

1.

Living residence environmental safety assurances, in provider owned or operated settings, including home and yard maintenance, snow removal and pest eradication. Living residence environmental safety assurances, in provider owned and operated settings, including.

- 2.
3. Health and Wellness Coordination services.
4. Transportation to enable the participant to routinely engage in their community that is not related to Employment Supports or Community and Personal Engagement waiver services. Travel services may include providing, arranging, transporting, or accompanying the participant to services and supports identified in the Person-Centered Support Plan.
5. A combination of lifelong, —or extended, duration, —supervision (whether general or task-related), hands-on assistance (supporting a person in performing a task), cuing to prompt member to perform a task, or support (i.e. support is any task performed for the participant, where learning is secondary or incidental to the task itself, or an adaptation is provided), and which are essential to daily community living. Specifically, such services may be provided across the following areas: be provided across the following areas:

- a. Supervision services as provided identified in the member's Person-Centered Support Plan to ensure the health, safety, and welfare of the member.
- b. Activities of Daily Living (ADLs), which include basic self-care activities of mobility, transferring, bathing, dressing, toileting, and eating. Components of these ADLs may include such activities as grooming, hygiene, walking, support for maintaining continence, administering medications, and administering gastrostomy tubes (g-tubes) services.
- c. Instrumental Activities of Daily Living (IADLs), which include activities related to independent living, including preparing meals, managing money, shopping for groceries or personal items, performing housework, and communication. Components of these IADLs may include such activities as daily planning, decision-making, problem-solving, transportation management, shopping, communication devices and techniques, service animal care, laundry.

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Commented [BM1]: This is part of the bundled comprehensive service package; not necessarily a responsibility attached to the actual property and likewise the IRSS HUD inspection.

Commented [TL2R1]: 6/18/19 stakeholders requested deleting qualifier of "Owned or Operated by the Residential Services provider"; as this component of the Res Service is necessary no matter where the member lives (e.g. owns home, family home, Host Home, Group Home). Consider indicating this caveat in the "Limitations" section, per CMS TA- "If not otherwise provided by the property management company" The bundled res rate includes this service. If in PSS, the member buys this service separately, if they need it, and if it is not otherwise included in the property management responsibilities.

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Commented [SR3]: These services are individually planned and coordinated through the member's Person-Centered Support Plan. The frequency, duration, and scope of these services are determined by the member's needs identified in the Person-Centered Support Plan.

Commented [SR4]: More detail and supports for things like healthy lifestyles, etc.

Commented [TL5R4]: Included an element of healthy lifestyles in #3 "support the member's wellbeing" and in d. "experiencing healthy lifestyle"

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Commented [SR6]: Needs to match language in the definition including the suggested empowerment, self-advocacy, and independence language

Commented [TL7R6]: Matched language from PSS in Definition above in 1.

Commented [SR8]: Consider adding "Characterized by independent living and community living options available to non-HSBC participants"

Commented [TL9R8]: LT gave language verbatim from Settings Rule

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- d. Self-advocacy training, which may include training to assist in expressing personal preferences, increasing self-representation, increasing self-protection from and reporting of abuse, neglect and exploitation, advocating for individual rights and making increasingly responsible choices.
- e. Emergency assistance training includes developing responses in case of emergencies, prevention planning, and training in the use of equipment or technologies used to access emergency response systems.
- f. Life skills training designed and directed with the client to develop and maintain their ability to sustain themselves physically, emotionally, socially and economically in the community; specifically training includes assessing, training, supervising, or assisting the client with activities including personal care (e.g. self-care and the activities of daily living), infant and childcare (for parents who have a developmental disability, medication reminders and supervision, time management skill building, safety awareness, skill development and training, task completion, communication skill building, interpersonal skill development, socialization training, community mobility training, identifying and accessing mental and behavioral health services, reduction or elimination of maladaptive behaviors, understanding and following plans for occupational or sensory skill development, problem solving, benefits coordination, resource coordination, financial management and household management.
- ~~f. Cognitive services may include training involving money management and personal finances, planning and decision making.~~
- g. Implementation of recommended follow-up counseling, behavioral or other therapeutic interventions by residential staff residential direct supports, under the direction of a professional. Implementation of physical, occupational or speech therapies delivered under the direction of a licensed or certified professional in that discipline. Services are aimed at supporting the member in developing, maintaining, or improving their overall effective functioning.
- h. Community access services that explore community services available to all people, unpaid supports available to the client and develop methods to access additional services, supports, or activities needed by the client.
- i. Assistance with routine health-related tasks in a person's home and community. For the purposes of this service, health-related tasks include those that an otherwise eligible Residential Services provider is authorized to perform as exempted under state law or as delegated by a Registered Nurse. Medical and health care services that are integral to meeting the daily needs of the client (e.g., routine administration of medications or

Commented [SR10]: Change to "supports – including training"

Commented [SR11R10]: Changed to "self-advocacy support, which may include education or training..."

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Commented [SR12]: Is there a better word than "responsible"?

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Commented [SR13R12]: "increasingly independent choices"

Commented [SR14R12]: Number of choices

Commented [BM15R12]: I've updated to "self-determined" choices.

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Commented [BM16]: Covered as IADLs in "iii." Above.

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tending to the needs of participants who are ill or require attention to their medical needs on an ongoing basis).

Limitations & Exclusions

1. These services are individually planned and coordinated through the participant's Person-Centered Support Plan. The amount, type, frequency, and duration, of these services are determined by the participant's needs identified in the Person-Centered Support Plan.
2. These services are provided only when neither the member nor a Legally Responsible Person is willing and capable of performing or financially providing for them.
3. Waiver participants ages 18 to 20 who need assistance with health-related tasks may access those services under the Waiver to the extent that the services do not duplicate a service required under Early and Periodic Screening, Diagnostic and Treatment (EPSDT) or to the extent that the Medicaid State Plan, other resources, or another Waiver service is not responsible.
4. Waiver participants ages 21 and older who need assistance with health-related tasks may access those services under the Waiver to the extent that the Medicaid State Plan, other resources, or another Waiver service is not responsible.
5. Residential Services does not include services offered through other waiver services, except those that are incidental to the Residential Services training activities, or purposes, or are incidentally provided to ensure the client's health and safety during the provision of Residential Services.
6. Residential Services is not to be delivered simultaneously during the direct provision or on the same Person-Centered Service Plan as the following waiver services: Assistive Technology (Personal Support Technology), Caregiver Supports, Home Maintenance Services, Personal Supports, Intensive Supports (Site-Based Supports), Transition Services (Life Skills Training).
7. Retainer payments may be made to a Support Worker employed by an agency the Residential Services provider or the participant when the Waiver participant is hospitalized or absent from his or her home. Retainer payments must equal the amount of paid care the support worker would have otherwise provided over the period of absence of the participant. ~~Support Workers employed by the participant may further collect retainer payments for time off from providing services to the participant. In these cases, retainer payments must equal the amount of paid care the support worker would have otherwise provided over the period of their own absence.~~ Support Workers, whether employed by an agency or the participant, may collect retainer payments for an aggregate maximum of 30 days per year.

Commented [BM17]: CMS required language. The member and the LRP decide who is/is not "willing and capable"

Commented [SR18]: SDE team is consulting with CMS TA consultant regarding exception to this required language.

Commented [TL19R18]: Consultation with CMS TA confirmed this required language must remain in the SCS.

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Service Requirements

[Person-Centered service requirements].

1. Per the Person-Centered Support Plan.
2. Choice
3. Autonomy
4. Community Integration
5. Protection of Rights

Glossary

Term	Definition
Authorized Representative.	Authorized Representative means an individual designated by the client or the legal guardian, if appropriate, who has the judgment and ability to assist the client in acquiring and utilizing supports and services. (Current definition in CCR 8.500).
Comprehensive Daily Access	Comprehensive Daily Access is 24/7 access to supports that ensure the health, safety, and welfare of a member and those supports that assist the member in the acquisition, retention or improvement in skills necessary to support the participant to live and participate successfully in their community.
Daily Support Time	Daily Support Time is the specified type and amount of assistance in ADLs needed by the member on a daily basis.
Important For	
Important To	
Needs-Based Criteria (Residential Services)	To be access Residential Services, a member must establish that they require Residential Services by demonstrating needs through the following needs-based criteria: type, frequency and duration of their daily support needs; support needs for community protection and safety; and whether their demonstrated needs require 24/7 access to supports.
Legally Responsible Person.	Legally Responsible Person means the parent of a minor child, or the member's spouse.

Commented [BM20]: NOTE: This glossary is limited to the terms identified at the 5.15.19 and 5.30.19 Waiver Redesign Stakeholder Meeting.

Commented [SR21]: Define "important to" and "important for"
Concern about adding "important for" could be taken as subjective and health and safety are more objective terms

1. ~~Legally Responsible Person~~
2. ~~Daily Support Time~~
3. ~~Needs-Based Criteria~~

~~4. Eligibility for Residential Services~~
~~5. Comprehensive Daily Access~~
~~Authorized Representative.~~

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All sections and content in the remaining pages of this Service and Coverage Standard are provided as a template placeholder for only contextual purposes of demonstrating the format of a full Service and Coverage Standard. All contents of the following sections should not be seen as, or be interpreted as, having any effect on the sections and deliberative content in the preceding pages of this document. Further, the following sections and content are not to be seen or interpreted as representative of the positions, comments, or feelings of the State of Colorado, the Department of Health Care Policy & Financing, or any of the Department's Offices, Divisions, Sections, or Units, individually or collectively. The following sections and content of this Service and Coverage Standard are to be developed upon the Department's deliberation,

development, stakeholder collaboration, and proposed determination of the content in the preceding sections.

Provider Specifications

Provider Type

1. Program Approved Services Agency: Residential Services Provider

Certification Requirements:

1. The Department of Health Care Policy and Financing Program Approval

Other Standard

1. Program Management: Baccalaureate or higher Degree from an accredited college or university in the area of Education, Social Work, Psychology, or related field, and one year of successful experience in human services; or an Associate's Degree from an Accredited college and two years of successful experience in human services; or four years successful experience in human services.
2. Direct **Support Providers**: Be at least 18 years of age, can communicate effectively, be able to complete required forms and reports, and be able to follow verbal and written instructions. Can provide services in accordance with the member's Person-Centered Support Plan. Have completed minimum training based on State training guidelines. Have necessary ability to perform the required job tasks and have the interpersonal skills needed to effectively interact with persons with developmental disabilities. Verification of Provider Qualifications Entity Responsible for Verification: The Department of Health Care Policy and Financing Frequency of Verification: Initially and every three years
3. All Direct **Support Providers** not otherwise licensed to administer medications must complete a training class approved by the Colorado Department of Public Health and Environment (CDPHE), pass a written test and a practical/competency test.

Staffing Requirements

1. All individuals providing Residential Services shall be supervised by a person who, at a minimum, has met the credentials of Program Management, as outlined above.
2. All individuals providing Residential Services must meet the following qualifications:
 - a. Shall be at least 18 years of age.

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- b. Shall demonstrate competency in caring for the client.
- c. Shall not have had a license as a nurse or certification as a nurse aide suspended or revoked or his application for such license or certification denied.
- d. Shall be subject to ~~and clear a~~ criminal background check ~~and APS abuse registry requirements~~.
- e. Oversight of staff shall include, but not be limited to, the following activities:
 - i. Orientation of staff to agency policies and procedures.
 - ii. Arrangement and documentation of training.
 - iii. Informing staff of policies concerning advance directives and emergency procedures.
 - iv. Oversight of scheduling, and notification to clients of changes; or close communication with scheduling staff.
 - v. ~~Written assignment of duties on a client~~ Member-specific ~~basis~~ information.
 - vi. Meetings and conferences with staff as necessary.
 - vii. Supervisory visits to client's homes at least every three months, or more often as necessary, for problem resolution, skills validation of staff, client-specific or procedure-specific training of staff, observation of client's condition and care, and assessment of client's satisfaction with services. At least one ~~of the assigned Personal Support staff~~ Residential Services direct support ~~person~~ must be present at supervisory visits at least once every three months.
 - viii. Following incident reporting guidelines.
 - ix. Investigation of complaints and critical incidents within 10 working days.
 - x. Counseling with staff on difficult cases, and potentially dangerous situations.
 - xi. Communication with the case managers, the physician, and other providers on the care plan, as necessary to assure appropriate and effective care. Oversight of record keeping by staff.

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