

Policy Profile

-Submitted by Hanni Raley, Assistant Executive Director-

The Dalai Lama said, "A lack of transparency results in distrust and a deep sense of insecurity," a sentiment many involved in the Colorado IDD system can relate to. After decades of suspicion and concern from the community and confusion under the golden dome, 2016 Legislative leaders passed [Senate Bill 16-038](#). This bill examined, by way of audit, Colorado's 20 Community Centered Boards' (CCBs) processes and structures. Aimed at promoting transparency within the system of supports contractually obligated to provide services to and for people with I/DD, the final report was released to the public in December 2018. Its findings highlight the inadequacy in functions by both CCBs and the Department of Health Care Policy and Financing (HCPF), primarily for case management, billing, and payments. Its findings also signal a turning point for authentic and transparent service delivery for people and families with IDD in Colorado.

The lengthy report can be found [HERE](#) but a brief synopsis of the key findings is included:

- HCPF has not managed funds for the State Supported Living Services (SLS) program to ensure they are used in the program and to reduce program waitlists.
- Nineteen of the 20 CCBs did not provide case management for the State SLS program in line with state requirements. They did not develop Individualized Service Plans, monitor service provision, and/or document case management activities, and, in some cases, this led to putting the person's health, safety, and ability to remain independent, at risk.
- The audit estimated that CCBs did not conduct between 11-15% of required in-person monitoring visits throughout 2017. When case managers do not regularly monitor, they have less assurance that recipients' service needs are being met, and failure to monitor at the required frequency could ultimately jeopardize the State's federal Medicaid funding.
- HCPF paid a total of \$791,916 in claims that did not meet requirements, including claims (1) from CCBs for case management services not supported by log notes; (2) from CCBs that exceeded annual caps for case management; and (3) from direct service providers that lacked required prior authorization, resulting in known questioned costs for federal programs. Paying claims that do

not adhere to requirements inflates the costs of the programs and creates a risk of the State paying for services that were not provided.

- Twelve CCBs billed, and HCPF paid, a total of \$150,730 for 202 occasions in which the billing implies that a case manager provided 24 hours or more of case management in one day. State and federal guidance indicate that the State should only pay for the amount of time a case manager can reasonably provide services.

While disheartening in its findings, the audit is the first step toward assisting the Legislature, CCBs, and HCPF in making necessary changes to improve services and the outcome for individuals with IDD in Colorado. And while the audit identifies substantial issues, it also provides a clear path forward by way of key recommendations for the system and legislature to consider. Specifically, case management services in both function and billing demand attention and overhaul to comply with state and federal requirements and to meet the needs of the people using the services.

The Arc of Aurora will continue to monitor and support these systems in making necessary changes and to provide guidance to our Members in demanding quality services from those obligated to provide them. If you have any questions on the information in this article, don't hesitate to reach out to Hanni Raley or your Individual Advocate at The Arc of Aurora.