

Appendix A: Administrative Authority

The Medicaid Agency retains ultimate administrative authority and responsibility for the operation of the waiver program by exercising oversight of the performance of waiver functions by other state and local/regional non-state agencies (if appropriate) and contracted entities. CMS expects that for every waiver function that the State Medicaid Agency delegates, it should have an agreement with the delegated entity that specifies the delegated entity's responsibilities related to the delegated function(s).

| Performance Measure | Assessment Tool | Waiver |
|---|---------------------|----------------|
| <p>PM 1 Number and percent of CMAs that performed delegated functions as identified in the Administrative Tool. Numerator = Number of CMAs that performed delegated functions as identified in the Administrative Tool Denominator = Total number of CMAs serving waiver participants</p> | Administrative Tool | Global Measure |

| | | |
|---|--|-----------------------------|
| <p>PM 2 Number and percent of data reports as specified in the Interagency Agreement (IA) between CDPHE and the Department that were submitted on time and in the correct format. Numerator = Number of data reports, as specified in the IA, that were submitted on time and in the correct format. Denominator = Number of data reports specified in the IA</p> | <p>Reports to State Medicaid Agency/Interagency Agreement with CDPHE</p> | <p>Global Measure</p> |
| <p>PM 3 Number and percent of CMAs in a representative sample determined to have met all contractual obligations by desk reviews and/or on-site monitoring visits by the Department during the performance period, based on a four year cycle. Numerator = Number of CMAs in a sample determined to have met all contractual obligations Denominator = Number of CMAs expected to be reviewed during the performance period based on a four-year cycle</p> | <p>Operating Agency Performance Monitoring Check List</p> | <p>Global Measure</p> |
| <p>Number and percent of quarterly coordination and communication meetings convened to ensure that CMHS Waiver providers and agencies with delegated functions work in collaboration and coordination with one another to best serve participants on the CMHS Waiver. Numerator = Number of quarterly meetings held for which agendas and the minutes are available. Denominator = 4 (expected number of meetings per year)</p> | <p>Meeting Agenda/Notes</p> | <p>CMHS Waiver Specific</p> |

| | | |
|--|--------------------------------------|--------------------------|
| <p>Number and percent of quarterly coordination and communication meetings convened to ensure that CHCBS Waiver providers and agencies with delegated functions work in collaboration and coordination with one another to best serve participants on the CHCBS Waiver.</p> <p>Numerator = Number of quarterly meetings held for which agendas and the minutes are available.</p> <p>Denominator = 4 (expected number of meetings per year)</p> | Meeting Agenda/Notes | CHCBS Waiver Specific |
| <p>Number and percent of randomly selected Alternative Care Facilities (ACFs) that maintain Department defined "homelike character" standards.</p> <p>Numerator = Number of randomly selected ACFs surveyed by CDPHE in the performance period that were shown on survey/certification documents to meet defined "homelike" standards</p> <p>Denominator = Number of randomly selected ACFs surveyed by CDPHE in the performance period.</p> | Provider Performance Monitoring | CMHS/EBD Waiver Specific |
| <p>Number and percent of randomly selected ACFs visited by Department staff that demonstrates the CDPHE survey adequately enforces provider standards.</p> <p>Numerator= Number of ACFs visited in the performance period that demonstrate the CDPHE survey adequately enforces provider standards</p> <p>Denominator= 4 (1 visit per quarter x 4 quarters in performance period)</p> | Onsite Observations Checklist/Report | CMHS/EBD Waiver Specific |

Appendix B: Level of Care

The State demonstrates that it implements the processes and instrument(s) specified in its approved waiver for evaluating/reevaluating an applicant's/waiver participant's level of care consistent with care provided in a hospital, NF, or ICF/ID-DD

Sub-assurance (i): An evaluation for Level of Care is provided to all applicants for whom there is reasonable indication that services may be needed in the future

| Performance Measure | Assessment Tool | Waiver |
|---|---------------------------------|----------------|
| <p>PM1 Number and percent of new waiver enrollees with a level of care (LOC) assessment indicating a need for institutional level of care prior to receipt of services. Numerator = Number of new waiver enrollees who received a Level of Care assessment indicating a need for institutional level of care prior to the receipt of waiver services Denominator = Total number of new waiver enrollees</p> | BUS Data/Super Aggregate Report | Global Measure |

*Sub-assurance (b): LOC of enrolled participants are reevaluated at least annually or as specified in the approved waiver (**This subassurance has been deleted**)*

This subassurance has been removed from HCBS waiver requirements by the Centers for Medicare & Medicaid Services (CMS). The state continues to conduct annual level of care re-evaluations but is no longer required to report evidence of those re-evaluations as part of its Quality Improvement Strategy.

(Revised) Sub-assurance (II): The processes and instruments described in the approved waiver are applied appropriately and according to the approved description to determine initial participant level of care.

| Performance Measure | Assessment Tool | Waiver |
|---|--|----------------|
| <p>PM1 Number and percent of new waiver participants assessed with the ULTC assessment tool prior to receiving waiver services. Numerator= Number of new waiver participants receiving waiver services that were assessed with the ULTC assessment tool prior to receiving waiver services. Denominator= Total number of new waiver participants receiving waiver services.</p> | BUS Data/Super Aggregate Report/MMIS Claims data | Global Measure |

| | | |
|--|--|-----------------------------|
| <p>PM2 Number and percent of cases in a representative sample in which the ULTC assessment tool was applied appropriately for the initial assessment. Numerator= Number of cases in a representative sample in which the ULTC assessment tool was applied appropriately for the initial assessment Denominator=Total number of clients reviewed in sample</p> | <p>BUS Data/Super Aggregate Report</p> | <p>Global Measure</p> |
| <p>PM3 Number and percent of waiver participants in a representative sample for whom a Professional Medical Information Page (PMIP) was completed and signed by a licensed medical professional according to Department regulation for initial determinations. Numerator = Number of waiver participants in the sample for whom an initial PMIP was completed as required Denominator = Total number of initial determinations in the sample certified to receive waiver services</p> | <p>BUS Data/Super Aggregate Report</p> | <p>Global Measure</p> |
| <p>Number and percent of initial determinations in which the life limiting attestation was appropriately checked and signed by the physician. Numerator = Number of initial determinations with the life limiting attestation appropriate checked and signed by the physician Denominator = Total number of initial determinations</p> | <p>State Review of Form</p> | <p>CLLI Waiver Specific</p> |

Appendix C: Qualified Providers

The State demonstrates that it has designed and implemented an adequate system for assuring that all waiver services are provided by qualified providers.

Sub-assurance (i) The State verifies that providers initially and continually meet required licensure and certification standards and adhere to other standards prior to their furnishing waiver services

| Performance Measure | Assessment Tool | Waiver |
|--|-----------------|----------------|
| <p>PM 1 Number and percent of waiver providers enrolled within the performance period, by type, that have the required license or certification prior to serving waiver participants. Numerator = Number of newly enrolled waiver providers, by type, that have the required license or certification prior to serving waiver participants Denominator = Total number of newly enrolled waiver providers, by type.</p> | MMIS Data | Global Measure |

| | | |
|---|--------------------------------|-----------------------|
| <p>PM 2 Number and percent of waiver providers that continue to be licensed or certified at time of regularly scheduled or periodic recertification survey. Numerator = Number of licensed/certified waiver providers who had no deficiencies or made the required correction to deficiencies as a identified in their survey within the prescribed timelines Denominator = Total number of licensed/certified waiver providers surveyed</p> | <p>MMIS Data/CDPHE Reports</p> | <p>Global Measure</p> |
| <p><i>Sub-assurance (ii) The State monitors non-licensed/non-certified providers to assure adherence to waiver requirements</i></p> | | |
| <p>Performance Measure</p> | <p>Assessment Tool</p> | <p>Waiver</p> |
| <p>PM 1 Number and percent of non-licensed/non-surveyed waiver providers enrolled during the performance period, by type, that meet the initial waiver provider qualifications. Numerator = Number of newly enrolled non-licensed/non-certified waiver providers that meet the initial waiver provider qualifications Denominator = Total number of newly enrolled non-licensed/non-certified waiver providers</p> | <p>MMIS Data</p> | <p>Global Measure</p> |

| | | |
|--|-------------------------------|----------------------|
| <p>PM 2 Number and percent of non-licensed/non-surveyed waiver providers, by type, that continually meet waiver provider qualifications. Numerator = Number of non-licensed/non-certified waiver providers that continually meet waiver provider qualifications Denominator = Total number of enrolled non-licensed/non-certified waiver providers</p> | MMIS Data | Global Measure |
| <p><i>Sub-assurance (iii) The State implements its policies and procedures for verifying that provider training is conducted in accordance with state requirements and the approved waiver</i></p> | | |
| <p>Performance Measure</p> | <p>Assessment Tool</p> | <p>Waiver</p> |
| <p>PM 1 Number and percentage of HCBS providers surveyed in the performance period, by type, trained in accordance with Department regulations Numerator = Number of HCBS providers surveyed in the performance period, trained in accordance with Department regulations Denominator = Total number of HCBS providers surveyed in the performance period that require training by Department regulations</p> | CDPHE Reports | Global Measure |

Appendix D: Service Plans

The State demonstrates it has designed and implemented an effective system for reviewing the adequacy of service plans for waiver participants.

Sub-assurance (i) Service plans address all participants' assessed needs (including health and safety risk factors) and personal goals, either by the provision of waiver services or through other means

| Performance Measure | Assessment Tool | Waiver |
|---|---------------------|----------------|
| <p>PM 1 Number and percent of waiver participants in a representative sample whose Service Plans (SPs) address the needs identified in the ULTC assessment, through waiver and other non-waiver services.</p> <p>Numerator = Number of waiver participants in the sample whose SPs address the needs identified in the ULTC assessment, through waiver and other non-waiver services</p> <p>Denominator = Total number of waiver participants in the sample</p> | Program Review Tool | Global Measure |

| | | |
|---|----------------------------|-----------------------------|
| <p>PM 2 Number and percent of waiver participants in a representative sample whose SPs address the waiver participant’s desired goals as identified in the Personal Goals. Numerator = Number of waiver participants in the sample whose SPs address the waiver participant’s personal goals Denominator = Total number of waiver participants in the sample</p> | <p>Program Review Tool</p> | <p>Global Measure</p> |
| <p>PM 3 Number and percent of waiver participants in a representative sample whose SPs address identified health and safety risks through a contingency plan. Numerator = Number of waiver participants in the sample whose SPs address identified health and safety risks through a contingency plan Denominator = Total number of waiver participants in the sample</p> | <p>Program Review Tool</p> | <p>Global Measure</p> |
| <p>CMHS PM 4 Number and percent of waiver participants in a representative sample whose records indicate coordination between the Case Management Agency and the waiver participant’s mental health provider. Numerator = Number of participants in the sample for whom BUS records indicate the waiver participant’s mental health provider was contacted at least once every 180 days Denominator = Total number of participants in the sample</p> | <p>BUS Data</p> | <p>CMHS Waiver Specific</p> |

*Sub-assurance (b) The State monitors service plan development in accordance with its policies and procedures **(This subassurance has been deleted)***

This subassurance has been removed from HCBS waiver requirements by the Centers for Medicare & Medicaid Services (CMS). The state continues to develop service plans in accordance with its policies and procedures but is no longer required to report evidence of these practices as part of its Quality Improvement Strategy

Sub-assurance (ii) Plans are updated/ revised at least annually or when warranted by changes in the waiver participant's needs

| Performance Measure | Assessment Tool | Waiver |
|--|---------------------|----------------|
| <p>PM 1 Number and percent of waiver participants in a representative sample whose SPs were revised, as needed, to address changing needs. Numerator = Number of waiver participants in the sample whose Service Plans were revised, as needed, to address changing needs. Denominator = Total number of waiver participants in the sample who needed a revision to their Service Plan to address changing needs</p> | Program Review Tool | Global Measure |

| | | |
|---|--|-----------------------|
| <p>PM 2 Number and percent of waiver participants in a representative sample with a prior Service Plan that was updated within one year. Numerator = Number of waiver participants in the sample with a prior Service Plan and whose Service Plan start date is within one year of the prior Service Plan start date Denominator = Total number of waiver participants in the sample with a prior Service Plan</p> | <p>BUS Data/Super Aggregate Report</p> | <p>Global Measure</p> |
| <p><i>Sub-assurance (iii) Services are delivered in accordance with the service plan, including the type, scope, amount, duration and frequency specified in the service plan</i></p> | | |
| <p>Performance Measure</p> | <p>Assessment Tool</p> | <p>Waiver</p> |
| <p>PM 1 Number and percent of waiver services, by type, in a representative sample of waiver participants which were delivered in accordance with the Service Plan. Numerator = Number of waiver services, by type, in the sample where the paid claims equal those services authorized by the Service Plan Denominator = Total number of waiver services, by type, in the sample</p> | <p>MMIS Data and BUS Data</p> | <p>Global Measure</p> |

| | | |
|---|-----------------|-----------------------|
| <p>CMHS/EBD PM 2 Number and percent of waiver participants in a representative sample who reside in an ACF whose records indicate that the ACF was contacted at least once every 180 days. Numerator = Number of participants in the sample residing in an ACF whose records indicate that the ACF was contacted at least once every 180 days Denominator = Total number of waiver participants in the sample residing in an ACF</p> | BUS Data | CMHS and EBD specific |
| <p><i>Sub-assurance (e) Participants are afforded choice between waiver services and institutional care; and between/among waiver services and providers (This subassurance has been revised)</i></p> | | |
| <p><i>(Revised from sub-assurance (e) above)</i> <i>Subassurance (iv) Participants are afforded choice between/among waiver services and providers.</i> This subassurance has been revised by the Centers for Medicare & Medicaid Services (CMS). The state continues to offer individuals choice between institutional and HCBS care, but is no longer required to report evidence of these practices as part of its Quality Improvement Strategy.</p> | | |
| Performance Measure | Assessment Tool | Waiver |

| | | |
|---|-----------------|-----------------------|
| <p>PM 1 Number and percent of waiver participants in a representative sample whose SPs document a choice between/among HCBS waiver services and qualified waiver service providers. Numerator = Number of waiver participants in the sample whose Service Plans document these choices Denominator = Total number of waiver participants in the sample</p> | <p>BUS Data</p> | <p>Global Measure</p> |
| <p>PM 2 Number and percent of waiver participants in a representative sample who are provided a fact sheet with general information about HCBS and specific information about the range of services, types of provider and contact information. Numerator = Number of waiver participants in the sample whose Service Plans indicate a fact sheet was provided Denominator = Total number of waiver participants in the sample</p> | <p>BUS Data</p> | <p>Global Measure</p> |

Appendix G: Health and Welfare

The State, on an ongoing basis, identifies, addresses and seeks to prevent the occurrence of abuse, neglect and exploitation

(Revised) The state demonstrates it has designed and implemented an effective system for assuring waiver participant health and welfare.

(New) Subassurance (i) The State demonstrates on an ongoing basis that it identifies, addresses and seeks to prevent instances of abuse, neglect, exploitation and unexplained death.

| Performance Measure | Assessment Tool | Waiver |
|---|-----------------|-----------------------|
| <p>Number and percent of waiver participants (and/or family or legal guardian) in a representative sample who received information/education on how to report abuse, neglect, exploitation (A.N.E.) and other critical incidents.</p> <p>Numerator = Number of waiver participants in the sample documented to have received information/education on how to report A.N.E. and other critical incidents</p> <p>Denominator = Total number of waiver participants in the sample</p> | <p>BUS Data</p> | <p>Global Measure</p> |

| | | |
|---|---|-----------------------|
| <p>Number and percent of critical incidents including Abuse, Neglect and Exploitation (ANE) and unexplained death reviewed by the Department.</p> <p>Numerator = Number of ANE and Death critical incidents reviewed by the Department</p> <p>Denominator = Number of ANE and Death critical incidents</p> | <p>BUS Data</p> | <p>Global Measure</p> |
| <p><i>(New) Subassurance (ii) The State demonstrates that an incident management system is in place that effectively resolves those incidents and prevents further similar incidents to the extent possible.</i></p> | | |
| <p>Performance Measure</p> | <p>Assessment Tool</p> | <p>Waiver</p> |
| <p>Number and percent of all critical incidents referred for investigation within the required timeframe.</p> <p>Numerator = Number of critical incidents referred for investigation within the required timeframe</p> <p>Denominator = Number of critical incidents that required investigation</p> | <p>Critical Incident Reports and BUS Data</p> | <p>Global Measure</p> |

| | | |
|---|--|-----------------------|
| <p>Number and percent of abuse, neglect, or exploitation critical incidents that were reported by the Case Management Agency (CMA) within required timeframe as specified in the approved waiver.</p> <p>Numerator = Number of abuse, neglect, or exploitation critical incidents reported by the CMA timely</p> <p>Denominator = Total number of A/N/E critical incidents</p> | <p>Critical Incident Reports and BUS Data</p> | <p>Global Measure</p> |
| <p>Number and percent of annual reports provided to Case Management Agencies (CMAs) and providers on identified trends in critical incidents.</p> <p>Numerator = Number of annual reports provided</p> <p>Denominator = 23 (Total number of annual reports expected to be provided)</p> | <p>Critical Incident Reports and BUS Data and/or CDPHE Reports; Record reviews</p> | <p>Global Measure</p> |

(New) Subassurance (iii) The State policies and procedures for the use or prohibition of restrictive interventions (including restraints and seclusion) are followed.

| Performance Measure | Assessment Tool | Waiver |
|---|--|----------------|
| <p>Number and percent of critical incidents involving restrictive interventions that followed the Department's policies and procedures. Numerator = Number of critical incidents involving restrictive interventions that followed the Department's policies and procedures Denominator = Total number of critical incidents involving restrictive interventions</p> | Critical Incident Reports and BUS Data | Global Measure |

(New) Subassurance (iv) The State establishes overall health care standards and monitors those standards based on the responsibility of the service provider as stated in the approved waiver.

| Performance Measure | Assessment Tool | Waiver |
|------------------------------------|-----------------|--------|
| No PM developed for this SA | | |

Appendix I: Financial Accountability

State financial oversight exists to assure that claims are coded and paid for in accordance with the reimbursement methodology specified in the approved waiver

(New) The State must demonstrate that it has designed and implemented an adequate system for insuring financial accountability of the waiver program.

Subassurance (i) The State provides evidence that claims are coded and paid for in accordance with the reimbursement methodology specified in the approved waiver and only for services rendered.

Performance Measure

Assessment Tool

Waiver

| | | |
|---|-------------------------------|-----------------------|
| <p>PM 1 <i>Previous:</i> Number and percent of waiver claims in a representative sample paid using the correct code as specified in the Provider Bulletin and Billing Manual. <i>Revise to:</i> Number and percent of waiver claims paid according to the reimbursement methodology in the waiver Numerator = Number of waiver claims in the sample paid according to the reimbursement methodology in the waiver Denominator = Total number of paid waiver claims in the sample</p> | <p>MMIS Data</p> | <p>Global Measure</p> |
| <p>PM 2 <i>Previous:</i> Number and percent of waiver paid claims in a representative sample adhering to the limits set forth in the Prior Authorization Request (PAR). <i>Revise to:</i> Number and percent of clients in a representative sample whose units billed did not exceed procedure code limit Numerator = Number of clients in a representative sample whose units billed did not exceed procedure code limit Denominator = Total number of waiver clients in the sample with a PAR and billed claims for waiver services.</p> | <p>MMIS Data and PAR Data</p> | <p>Global Measure</p> |

(New) Subassurance (ii) The State provides evidence that rates remain consistent with the approved rate methodology throughout the five year waiver cycle.

| Performance Measure | Assessment Tool | Waiver |
|--|-----------------|----------------|
| <p>PM 1 Number and percent of waiver claims in a representative sample of participants paid at or below the rate as specified in the Provider Bulletin and Billing Manual. Numerator = Number of waiver claims in the sample paid using the correct rate as specified in the Provider Bulletin and Billing Manual Denominator = Total number of paid waiver claims in the sample</p> | MMIS Data | Global Measure |
| <p>PM 2 Number and percent of waiver claims in a representative sample paid using the correct rate methodology as specified in the approved waiver application. Numerator = Number of waiver claims in the sample paid using the correct rate methodology as specified in the approved waiver application Denominator = Total number of paid waiver claims in the sample</p> | MMIS Data | Global Measure |