

COLORADO

Overview

Colorado has two types of adult day services: basic adult day services (ADS) and specialized adult day services (SADS). Neither type require licensure but to receive Medicaid reimbursement, ADS centers and SADS centers have to meet state certification standards. The Department of Health Care Policy and Financing administers the Medicaid program and oversees Medicaid ADS and SADS providers.

This profile presents the certification standards for both ADS and SADS Medicaid providers. The state has multiple 1915(c) waiver programs, which may have additional standards for SADS providers depending on the populations they serve, such as persons with mental illness, persons with AIDS, and persons with a brain injury. For example, the Brain Injury Waiver program has additional training requirements to address the unique needs of its participants.

ADS and SADS centers that do not participate in Medicaid do not have to meet certification standards.

Definitions

Adult day services means health and social services and individual therapeutic and psychological activities furnished on a regularly scheduled basis in an ADS center, as an alternative to long-term nursing facility care.

Basic adult day services center means a community-based entity that conforms to all state-established requirements.

Specialized adult day services center means a community-based entity determined by the state to be providing intensive health supportive services for participants with a primary diagnosis of Alzheimer's disease or other type of dementia, multiple sclerosis, brain injury, chronic mental illness, or developmental disability; or post-stroke participants who require extensive rehabilitative therapies. To be considered a specialized center, two-thirds of an ADS center's population must be participants whose physician has verified one of the above diagnoses and recommended the appropriate specialized services.

Parameters for Who Can Be Served

Providers may serve only individuals whose needs can be met by the ADS center within its certification category.

Inspection and Monitoring

To determine if a provider meets certification standards, the Department of Health Care Policy and Financing or its designee reviews a provider's application and the Department of Health conducts an on-site survey. The Department or its designee conducts an annual on-site survey of ADS and SADS centers.

Required and Optional Services

All ADS programs furnish socialization, social activities, nutrition services, and supervision to ensure safety. They also monitor participants' health and functioning at a basic level to determine if the program can continue to meet participants' health and functional needs. The table below lists additional required and optional services.

Required and Optional Services	Basic Adult Day Services		Specialized Adult Day Services	
	Required	Optional	Required	Optional
ADL Assistance	X		X	
Health Education and Counseling			X	
Health Monitoring/Health-Related Services			X	
Medication Administration	X		X	
Nursing Services	X		X	
Physical Therapy, Occupational Therapy, or Speech Therapy		X ¹	X	
Skilled Nursing Services		X	X ²	
Social Services				
Transportation				
1. These services are provided only if they are prescribed by the participant's physician, documented in the participant's care plan, and are not being provided in the participant's home. 2. Although not stated in the Code of Colorado Regulations, skilled nursing services are required if needed to meet participants' needs.				

Medication Provisions

ADS and SADS centers must provide nursing services necessary to supervise the administration of medications by trained medication aides. Provisions regarding medication administration must be included in an ADS center's written operation policies. ADS centers providing medication administration as a service must have qualified persons on their staff who have been trained in accordance with state law regarding qualified medication administration.

Staffing Requirements

Type of Staff. ADS and SADS center requirements for licensed staff are based on their participants' level of need. All ADS centers must provide nursing services for regular monitoring of participants' ongoing medical needs and the supervision of medication administration. These services must be available a minimum of 2 hours daily and must be provided by a *registered nurse* (RN) or a *licensed practical nurse* (LPN). *Certified nursing assistants* (CNAs) may provide these services under the direction of an RN or an LPN. Supervision of CNAs must include consultation and oversight on a weekly basis or more according to participants' needs.

Staffing Ratios. All ADS centers must maintain a staff-to-participant ratio of 1:8 or fewer participants to meet the needs of the population served. SADS centers providing a restorative model of care shall have sufficient staff to provide the following: (1) nursing services during all hours of operation provided by a licensed RN or LPN or by a CNA under the supervision of an RN or LPN; and (2) therapies to meet participants' restorative needs.

Training Requirements

All staff must be trained in the use of universal precautions for infection control. The operator and staff must provide training specific to the needs of the populations served (e.g., elderly, blind, and disabled). All staff and volunteers must be trained to handle emergencies, and providers must have written procedures for staff to meet medical crises.

Location of Licensing, Certification, or Other Requirements

Department of Health Care Policy and Financing website: LTSS Services and Special Programs, Adult Day Services.

<http://www.colorado.gov/cs/Satellite/HCPF/HCPF/1218102955170>

Code of Colorado Regulations. Medical Assistance, Section 8.400: Long Term Care, 8.491, Adult Day Services. The Department of Health Care Policy and Financing. [May 30, 2014]

<http://www.sos.state.co.us/CCR/GenerateRulePdf.do?ruleVersionId=5709&fileName=10%20CCR%202505-10%208.400>

Instructions for Providers: How to Get Licensed or Certified, Flowchart.

[http://www.colorado.gov/cs/Satellite?blobcol=urldata&blobheadername1=Content-](http://www.colorado.gov/cs/Satellite?blobcol=urldata&blobheadername1=Content-Disposition&blobheadername2=Content-Type&blobheadervalue1=inline%3B+filename%3D%22Licensure%2FCertification+Process+Flowchart.pdf%22&blobheadervalue2=application%2Fpdf&blobkey=id&blobtable=MungoBlobs&blobwhere=1251859149338&ssbinary=true)

[Disposition&blobheadername2=Content-Type&blobheadervalue1=inline%3B+filename%3D%22Licensure%2FCertification+Process+Flowchart.pdf%22&blobheadervalue2=application%2Fpdf&blobkey=id&blobtable=MungoBlobs&blobwhere=1251859149338&ssbinary=true](http://www.colorado.gov/cs/Satellite?blobcol=urldata&blobheadername1=Content-Disposition&blobheadername2=Content-Type&blobheadervalue1=inline%3B+filename%3D%22Licensure%2FCertification+Process+Flowchart.pdf%22&blobheadervalue2=application%2Fpdf&blobkey=id&blobtable=MungoBlobs&blobwhere=1251859149338&ssbinary=true)

Colorado's 1915(c) HCBS Waiver Services, Service Descriptions for Waiver Modernization Sub-Group. [December 27, 2012]
<http://www.colorado.gov/cs/Satellite?blobcol=urldata&blobheader=application/pdf&blobkey=id&blobtable=MungoBlobs&blobwhere=1251845201750&ssbinary=true>

Information Sources

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Long Term Services and Supports Division
Department of Health Care Policy and Financing

REGULATORY REVIEW OF ADULT DAY SERVICES: FINAL REPORT, 2014 EDITION

Files Available for This Report

FULL REPORT

Executive Summary <http://aspe.hhs.gov/daltcp/reports/2014/adultday14es.cfm>
HTML <http://aspe.hhs.gov/daltcp/reports/2014/adultday14.cfm>
PDF <http://aspe.hhs.gov/daltcp/reports/2014/adultday14.pdf>

SEPARATE STATE PROFILES

[**NOTE:** These profiles are available in the full HTML and PDF versions, as well as each state available as a separate PDF listed below.]

Alabama	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-AL.pdf
Alaska	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-AK.pdf
Arizona	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-AZ.pdf
Arkansas	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-AR.pdf
California	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-CA.pdf
Colorado	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-CO.pdf
Connecticut	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-CT.pdf
Delaware	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-DE.pdf
District of Columbia	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-DC.pdf
Florida	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-FL.pdf
Georgia	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-GA.pdf
Hawaii	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-HI.pdf
Idaho	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-ID.pdf
Illinois	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-IL.pdf
Indiana	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-IN.pdf
Iowa	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-IA.pdf
Kansas	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-KS.pdf
Kentucky	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-KY.pdf
Louisiana	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-LA.pdf

Maine	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-ME.pdf
Maryland	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MD.pdf
Massachusetts	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MA.pdf
Michigan	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MI.pdf
Minnesota	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MN.pdf
Mississippi	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MS.pdf
Missouri	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MO.pdf
Montana	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MT.pdf
Nebraska	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NE.pdf
Nevada	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NV.pdf
New Hampshire	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NH.pdf
New Jersey	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NJ.pdf
New Mexico	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NM.pdf
New York	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NY.pdf
North Carolina	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NC.pdf
North Dakota	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-ND.pdf
Ohio	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-OH.pdf
Oklahoma	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-OK.pdf
Oregon	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-OR.pdf
Pennsylvania	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-PA.pdf
Rhode Island	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-RI.pdf
South Carolina	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-SC.pdf
South Dakota	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-SD.pdf
Tennessee	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-TN.pdf
Texas	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-TX.pdf
Utah	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-UT.pdf
Vermont	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-VT.pdf
Virginia	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-VA.pdf
Washington	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-WA.pdf
West Virginia	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-WV.pdf
Wisconsin	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-WI.pdf
Wyoming	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-WY.pdf