

COLORADO

Overview			
<p>Colorado recognizes two types of centers: adult day services (ADS) centers and specialized adult day services (SADS) centers. Adult day services centers in Colorado have to conform to state-established certification standards in the <i>Medical Services Board Medical Assistance Staff Manual</i> in order to receive Medicaid reimbursement. These standards are part of state rules for the Home and Community-Based Services for the Elderly, Blind, and Disabled (HCBS-EBD) program. This profile presents the certification standards as they apply to Medicaid providers. Colorado does not require ADS centers that do not participate in Medicaid to meet certification standards; however, state informants are not aware of any such centers in operation.</p>			
Licensure and Certification Requirements			
Licensure Only <input type="checkbox"/>	Certification Only <input checked="" type="checkbox"/>	Both Required <input type="checkbox"/>	Other <input type="checkbox"/>
Definitions			
<p>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.</p> <p>Basic adult day services center means a community-based entity that conforms to all state-established requirements as described by provider participation requirements and services provided by ADS centers.</p> <p>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 and related disorders, multiple sclerosis, brain injury, chronic mental illness, or developmental disability, or post-stroke participants who require extensive rehabilitative therapies. To be determined <i>specialized</i>, 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.</p>			
Parameters for Who Can Be Served			
<p>Providers may serve only individuals whose needs can be met by the ADS center within its certification category.</p>			
Inspection and Monitoring			
Yes <input checked="" type="checkbox"/>		No <input type="checkbox"/>	
<p>The Department of Health Care Policy and Financing or its designee conducts an annual on-site survey of ADS centers and SADS centers.</p>			

Required and Optional Services				
	Basic Adult Day Services		Specialized Adult Day Services	
	Required	Optional	Required	Optional
Activities of Daily Living (ADL) Assistance	X		X	
Health Education and Counseling				
Health Monitoring/Health-Related Services	X		X	
Medication Administration	X		X	
Nursing Services	X		X	
Physical Therapy, Occupational Therapy, or Speech Therapy			X	
Skilled Nursing Services			X	
Social Services				
Transportation				
Provisions Regarding Medications				
Nurses shall supervise the administration of medications. Medication administration shall be included in an ADS center's written operation policies.				
Provisions for Groups with Special Needs				
Dementia <input checked="" type="checkbox"/>	Mental Retardation/ Developmental Disabilities <input type="checkbox"/>	Other <input checked="" type="checkbox"/> multiple sclerosis, brain injury, chronic mental illness, post-stroke participants who require extensive rehabilitative therapies		
Staffing Requirements				
<p>Type of staff. All ADS centers shall provide nursing services for regular monitoring of the ongoing medical needs of participants and the supervision of medications. These services must be available a minimum of 2 hours daily and must be provided by a registered nurse (RN) or 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 the participant's needs.</p> <p>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 the restorative needs of the client participant.</p> <p>Staffing ratios. All ADS centers must maintain a staff-to-participant ratio of one-to-eight or lower to provide for the needs of the population served.</p>				
Training Requirements				
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 staff members. All staff must be trained in the use of universal precautions (infection control). The operator and staff must have training specific to the needs of the populations served (e.g., elderly, blind, and disabled). All staff and volunteers must be trained in the handling of emergencies, including written procedures to meet medical crises.				

Relevant Medicaid Contracting Requirements for Adult Day Services Providers

Providers participating in the HCBS-EBD program must be certified according to the standards outlined in this profile.

Location of Licensing, Certification, or Other Requirements

1. http://www.chcpf.state.co.us/HCPF/Pdf_Bin/491ads.pdf.

Citations

1. *Medical Services Board Staff Manual Volume 8--Medical Assistance (State Rules)*. Home and Community-Based Services for the Elderly, Blind, and Disabled--Adult Day Services (Section 8.491). Department of Health Care Policy and Financing. [Adopted 12/13/96 and effective 2/01/97]

REGULATORY REVIEW OF ADULT DAY SERVICES: Final Report

PDF Files Available for This Report

Cover, Table of Contents, Acknowledgments and Introduction

<http://aspe.hhs.gov/daltcp/reports/adultday.pdf>

SECTION 1. Overview of Adult Day Services Regulations

<http://aspe.hhs.gov/daltcp/reports/adultday1.pdf>

SECTION 2. State Regulatory Profiles

<http://aspe.hhs.gov/daltcp/reports/adultday2.pdf>

Each state can also be viewed separately at:

Alabama <http://aspe.hhs.gov/daltcp/reports/adultdayAL.pdf>

Alaska <http://aspe.hhs.gov/daltcp/reports/adultdayAK.pdf>

Arizona <http://aspe.hhs.gov/daltcp/reports/adultdayAZ.pdf>

Arkansas <http://aspe.hhs.gov/daltcp/reports/adultdayAR.pdf>

California <http://aspe.hhs.gov/daltcp/reports/adultdayCA.pdf>

Colorado <http://aspe.hhs.gov/daltcp/reports/adultdayCO.pdf>

Connecticut <http://aspe.hhs.gov/daltcp/reports/adultdayCT.pdf>

Delaware <http://aspe.hhs.gov/daltcp/reports/adultdayDE.pdf>

District of Columbia <http://aspe.hhs.gov/daltcp/reports/adultdayDC.pdf>

Florida <http://aspe.hhs.gov/daltcp/reports/adultdayFL.pdf>

Georgia <http://aspe.hhs.gov/daltcp/reports/adultdayGA.pdf>

Hawaii <http://aspe.hhs.gov/daltcp/reports/adultdayHI.pdf>

Idaho <http://aspe.hhs.gov/daltcp/reports/adultdayID.pdf>

Illinois <http://aspe.hhs.gov/daltcp/reports/adultdayIL.pdf>

Indiana <http://aspe.hhs.gov/daltcp/reports/adultdayIN.pdf>

Iowa <http://aspe.hhs.gov/daltcp/reports/adultdayIA.pdf>

Kansas <http://aspe.hhs.gov/daltcp/reports/adultdayKS.pdf>

Kentucky <http://aspe.hhs.gov/daltcp/reports/adultdayKY.pdf>

Louisiana <http://aspe.hhs.gov/daltcp/reports/adultdayLA.pdf>

Maine <http://aspe.hhs.gov/daltcp/reports/adultdayME.pdf>

Maryland <http://aspe.hhs.gov/daltcp/reports/adultdayMD.pdf>

Massachusetts <http://aspe.hhs.gov/daltcp/reports/adultdayMA.pdf>
Michigan <http://aspe.hhs.gov/daltcp/reports/adultdayMI.pdf>
Minnesota <http://aspe.hhs.gov/daltcp/reports/adultdayMN.pdf>
Mississippi <http://aspe.hhs.gov/daltcp/reports/adultdayMS.pdf>
Missouri <http://aspe.hhs.gov/daltcp/reports/adultdayMO.pdf>
Montana <http://aspe.hhs.gov/daltcp/reports/adultdayMT.pdf>

Nebraska <http://aspe.hhs.gov/daltcp/reports/adultdayNE.pdf>
New Hampshire <http://aspe.hhs.gov/daltcp/reports/adultdayNH.pdf>
New Jersey <http://aspe.hhs.gov/daltcp/reports/adultdayNJ.pdf>
New Mexico <http://aspe.hhs.gov/daltcp/reports/adultdayNM.pdf>
New York <http://aspe.hhs.gov/daltcp/reports/adultdayNY.pdf>
Nevada <http://aspe.hhs.gov/daltcp/reports/adultdayNV.pdf>
North Carolina <http://aspe.hhs.gov/daltcp/reports/adultdayNC.pdf>
North Dakota <http://aspe.hhs.gov/daltcp/reports/adultdayND.pdf>

Ohio <http://aspe.hhs.gov/daltcp/reports/adultdayOH.pdf>
Oklahoma <http://aspe.hhs.gov/daltcp/reports/adultdayOK.pdf>
Oregon <http://aspe.hhs.gov/daltcp/reports/adultdayOR.pdf>

Pennsylvania <http://aspe.hhs.gov/daltcp/reports/adultdayPA.pdf>

Rhode Island <http://aspe.hhs.gov/daltcp/reports/adultdayRI.pdf>

South Carolina <http://aspe.hhs.gov/daltcp/reports/adultdaySC.pdf>
South Dakota <http://aspe.hhs.gov/daltcp/reports/adultdaySD.pdf>

Tennessee <http://aspe.hhs.gov/daltcp/reports/adultdayTN.pdf>
Texas <http://aspe.hhs.gov/daltcp/reports/adultdayTX.pdf>

Utah <http://aspe.hhs.gov/daltcp/reports/adultdayUT.pdf>

Vermont <http://aspe.hhs.gov/daltcp/reports/adultdayVT.pdf>
Virginia <http://aspe.hhs.gov/daltcp/reports/adultdayVA.pdf>

Washington <http://aspe.hhs.gov/daltcp/reports/adultdayWA.pdf>
West Virginia <http://aspe.hhs.gov/daltcp/reports/adultdayWV.pdf>
Wisconsin <http://aspe.hhs.gov/daltcp/reports/adultdayWI.pdf>
Wyoming <http://aspe.hhs.gov/daltcp/reports/adultdayWY.pdf>