

FOOTHILLS GATEWAY, INC.

Waiting List Management

POLICY:

It shall be the policy of Foothills Gateway, Inc. to execute case management services according to the provisions of the rules and regulations of Health Care Policy & Financing (HCPF).

PROCEDURE:

To be placed on a Waiting List for services to be provided through Foothills Gateway, Inc., an individual must:

1. Be determined to have a developmental disability using guidelines from HCPF.
2. Meet program specific eligibility criteria for services requested.
3. Be a Larimer County resident or;
 - Have a court appointed guardian who is a Larimer County resident or;
 - Have parents or immediate family members who are Larimer County residents, or;
 - Be a Regional Center resident whose guardian or involved family members are Larimer County residents, or;
 - Be determined to have a developmental disability by another Case Management Agency in Colorado and then request a transfer to the Waiting List for Larimer County.
4. Meet recommended age guidelines as noted below:
 - Be at least 14 years old if applying for Adult Services Waiting List.
 - There is no age requirement for Family Support Services (FSSP); however, individuals must live in the family home. Additionally, individuals enrolled in a Waiver can receive FSSP funding as long as they have been referred to FSSP and they have an updated Needs Assessment score.
5. Eligibility for services may change and will be reviewed as needed.

Waiting List Placement

1. The DD Waiver Waiting List is organized by Order of Selection dates.
2. A person will be added to appropriate Waiting List by Order of Selection date:
 - The date the person is originally determined to be developmentally disabled in the Colorado system, or;
 - The date of the person's fourteenth (14) birthday if the person is waiting for HCBS-DD or Supported Living Services and if the individual was originally determined developmentally disabled prior to age 14 and continues to meet criteria.
 - Individuals waiting for the Family Support Services Program (FSSP) will always use the original date of DD Determination (date will not change at 14th birthday).

- Children receiving services in the FSSP, or children's HCBS waiver programs may be referred to appropriate adult services Waiting Lists based on recommendations of the Interdisciplinary Team (IDT). The Order of Selection date is either their original DD Determination date or their 14th birthday.
3. A person can be on the Waiting List for multiple services within the designated service area (DSA).
 4. A person cannot be on Waiting Lists in two different DSAs in Colorado at the same time.
 5. If the needs and/or recommendations change for a person on the Waiting List, the change will not affect their Waiting List status or position, only the requested services or timeline will change.

Documentation

1. To add a person to the Waiting List based on IDT recommendations, the Case Manager will complete a Referral to the Waiting List form for either SLS (if between the ages of 14 and 17 years old) and/or HCBS-DD services noting the timeline for acceptance of services.
2. Referral forms include information needed for the Waiting List Registry required by HCPF and maintained on the Care and Case Management (CCM) system.
3. A manual Waiting List is maintained at Foothills Gateway, Inc. The manual Waiting List includes additional information used for internal management as well as documenting information for the Board of Directors.
4. Referral forms are submitted to the Intake Case Management Associate Director. Forms are signed and filed in the virtual file.
5. To change current Waiting List recommendations, the Case Manager will complete a Change of Waiting List Recommendations form. The form is given to the Intake Case Management Associate Director who will update the manual Waiting List and then send the referral to the File Room email to be filed in the person's virtual file.
6. Waiting List status information is included in the individual Service Plan.

General Management of Waiting List

1. The Waiting List will be managed by the Intake Case Management Associate Director.
2. The Waiting List will be managed in an equitable manner. Persons will be served on a "first on the list - first to be considered" basis.
3. The Waiting List will reflect the HCBS-DD services.
4. The Waiting List will reflect the timeline of need for each requested service. Timeline choices are "As Soon as Available", "a Specific future date". or "Safety Net".
5. The FSSP must offer services to individuals/families identified as "Most in Need". A Needs Assessment completed by the family is obtained and scored. The score is added to the FSSP Waiting List information and entered in the CCM. Families who have the highest Needs Assessment score will be offered FSSP first. The Needs Assessment must be updated every year with new scores noted. An individual will

not be offered admission to FSSP if there is not a completed Needs Assessment or if the Needs Assessment is over a year old.

6. If the child needs age 5 determination completed within three (3) months of being offered FSSP, they will have to have their age 5 completed prior to being offered.
7. Individuals on the FSSP Waiting List with a Safety Net or specific date timeline do not need to complete a needs assessment until their timeline changes.
8. The Waiting List will reflect the timeline of need for each requested service. Timeline choices are “As Soon as Available”, “a Specific future date”, “or Safety Net”. To maintain accuracy of the Waiting List, the Case Manager will review the Waiting List status of individuals at the Service Plan (SP), Family Support Plan (FSP), or Individual Family Service Plan (IFSP) meeting (or more frequently if needed) and notify the Intake Case Management Associate Director of any changes recommended by the IDT.
9. The Waiting List will be updated, and new names added/deleted each month. This update will occur at the end of each month.

Placement Decisions

When there is a vacancy in FSSP, the Intake Case Management Associate Director will be notified by the Children’s Coordinator.

1. To fill the vacancy, the Intake Case Management Associate Director will consider the first person on the Waiting List and determine if the individual:
 - Is ready to accept the service or vacancy.
 - Continues to meet program specific criteria.
 - If two or more persons meet all criteria for a vacancy and share the same order of selection date, the following guidelines will apply:
 - For FSSP, the person with the highest Needs Assessment score will receive the first offer.
 - For Medicaid funded services, all persons will begin the process of Medicaid approval as well as selecting providers. Admissions will be made based on who is first ready.

Please refer to the following rules for each program waiting list protocol:

- SLS – 10 CCR 2505-10 8.7560.G
- CHRP – 10 CCR 2505-10 8.7101.C
- CES - 10 CCR 2505-10 8.7101. J
- CHCBS – 10 CCR 2505-10 8.7101.A.3b
- For State SLS (refer to rule 10 CC 2505-10 8.7560.G), if a person is determined to be eligible to receive services under the State SLS program, shall be eligible to be placed on a waiting list for services when state funding is not available.
- Individuals living in Larimer County can be placed on the State SLS waiting list.
- The date used to establish a person’s placement on the waiting list will be the date on which that individual is determined eligible for the State

SLS Program through the DD Determination and the identification of need.

- Individuals on other State or Medicaid funded services or supports will be given a priority for enrollment including individuals who lose Medicaid eligibility and lose Medicaid Waiver services.
2. The Intake Case Management Associate Director will complete a Program Offer in the paperwork tracking system and will notify the appropriate Case Manager.
 3. The Case Manager will contact the individual, legal guardian, parent of a minor or family member to offer the available services. The decision by the person to accept the vacancy will need to be made within agreed upon timelines. The offer that is put into the Program Change Reporting application is used to document the offer of services.
 - a. The CCM wait list card is also updated, to include whether the person accepted the offer, the date they accepted, and the program card status will change from waiting to pending enrollment.
 4. Persons declining an available opening can maintain their status and position on the Waiting List. The Case Manager will discuss the timeline designation with the person/family and submit a change form if necessary. The Case Manager will also need to decline the offer in the Program Change Reporting System and include a reason as to why the person is declining the offer.
 - a. If the person declines the offer, the CCM will be updated with the wait list status as either removed due to choice or referred back to the wait list as a safety net status and the date they declined the offer.

Emergencies / Exceptions to the Procedure Emergency Status:

A person will be considered in an emergency if they meet one or more of the following criteria:

1. **Homelessness:** the person will imminently lose their housing as evidenced by an eviction notice; or whose primary residence during the nights is a supervised public or private facility that provide temporary living accommodations or any other unstable or non-permanent situation; or is discharging from prison; or is in the hospital and does not have a stable housing situation to go to upon discharge.
2. **Abusive or neglectful situation:** the person is experiencing ongoing physical, sexual, or emotional abuse or neglect in their present living situation and their health, safety or well-being are in serious jeopardy.
3. **Danger to others:** the person's behavior and/or psychiatric condition is such that others are at risk of being hurt by them. Sufficient supervision cannot be provided by the current caretaker to ensure safety of persons in the community.
4. **Danger to self:** a person's medical, psychiatric and/or behavioral challenges are such that they are seriously injuring/harming themselves or is in imminent danger of doing so.
5. **Loss or incapacitation of primary caregiver:** A person's primary caregiver is no longer in the person's primary residence to provide care; or the primary caregiver is experiencing chronic, long-term, or life-threatening physical or psychiatric condition that significantly limits the ability to provide care; or the primary caregiver is age 65 years or older and continuing to provide care posing an imminent risk to the

health and welfare of the person or primary caregiver; or regardless of age and based on the recommendation of a professional, primary caregiver cannot provide sufficient supervision to ensure the person's health and welfare.

6. **Emergency:** the emergency cannot be resolved in another way.

Persons not known to Foothills Gateway, Inc. will be determined as to whether or not they have a developmental disability. If determined to have a developmental disability, the IDT will meet and make HCBS waiver services or Support Services recommendations.

Emergency Services

In the event that an individual needs immediate emergency DD Waiver services:

1. The Case Manager will write an emergency funding request to the Health Care Policy & Financing (HCPF), specific to one individual, outlining the crisis and plan to develop services.
2. The Case Manager/Lead Case Manager will send the Emergency Request to the Intake Case Management Associate Director and the Case Management Directors for review.
 - Once the request has been reviewed by the internal team and all questions/concerns have been addressed, the Intake Case Management Associate Director will send the Emergency Request to HCPF for their review.
 - If the person does receive emergency funding, the Intake Case Management Associate Director will notify the Case Manager, supervisor, and the Directors of Case Management that they were approved.
 - The Intake Case Management Associate Director will also add a program offer in the Paperwork Tracking system and update the CCM wait list card, changing the status to pending enrollment and the decision to accepted, date accepted.
3. The Case Manager can then start the enrollment and the RFP Provider Selection process to enroll the person into services as quickly as possible.
4. After admission, HCPF will be notified in writing and an addition of one resource will be added to the contract.
5. If a person declines an offer of emergency services, the person will lose their emergency status and resume their previous Waiting List status according to their Order of Selection/DD Determination date.
6. The CCM wait list card will be updated reflecting their wait list status to safety net or removed with a reason why. The decision is also updated to "declined" with a reason why.
7. The Case Manager will need to decline the offer in the Program Change Reporting System and list the reason why the person is declining services.

8.The Case Manager will need to fill out a new DD Waiver referral and send it to the Intake Case Management Associate Director.

9.The Intake Case Management Associate Director will notify HCPF of the person's decision.

Referrals Not Accepted for Recommended Services

1. The PASA will inform the Case Manager in writing if a person is not accepted for a recommended service or setting, with specific reasons given for their decision.
2. When appropriate, the Case Manager will convene an IDT meeting to review the decision of the provider and address concerns to meet the needs of person.
3. When appropriate, the IDT will be asked to review the type of service or level of care recommendations for the person. If the team makes recommendations for changes to needed services or timeline for services, the Waiting List will be updated with the person maintaining their position on the Waiting List.
4. Denial of services can initiate the Dispute Resolution policy/procedure (Please refer to Dispute Resolution policy/procedure).

Removal from Waiting List

Individuals will be removed from the Waiting List for the following reasons:

- Enrollment into a requested service
- Death of the person
- Residency changes to a designated service area outside of the Foothills Gateway, Inc. designated service area and the person requests to be on Waiting List in another designated service area
- Request by the individual, guardian or authorized representative, or family member as appropriate
- Person is determined to no longer meet the criteria for developmental disability.
- Person no longer needs the requested services
- The person moves out of state

8/95... 11/22; 11/23; 3/24, 3/25