

Survey/Audit	Department	Division	Who	When	Where	What/Why
<b>Family Support Services Program Audit</b>	Case Management and Program Quality	Family Support Services Program	Office of Community Living (OCL), a Division under Health Care Policy and Financing (HCPF)	Unscheduled audits are completed by the State. Last audit was completed/finalized in 2022.	OCL/HCPF requested specific information about all areas of FSSP via e-mail. Information was sent electronically to the State.	OCL/HCPF did a comprehensive audit of the Family Support Services Program to ensure guidelines were being adhered to across the State of Colorado.
<b>Family Support Services Program Satisfaction Survey</b>	Case Management and Program Quality	Family Support Services Program	Community Outreach Department Management	Annually, typically in April	Electronic surveys are sent to families via e-mail	We are seeking to evaluate the effectiveness and satisfaction level of the Family Support Services program. Information is shared with relevant teams and leaders in a survey report annually.
<b>Post Payment Reviews aka Payment Error Rate Measurements (PERMs)</b>	Case Management and Program Quality		Health Care Policy and Financing (HCPF) and/or a 3rd party contractor	Random schedule (See what/why section)	Post Payment Reviews are primarily desk-review type audits completed by HCPF or a contractor based on information provided by Medicaid providers	The Payment Error Rate Measurement (PERM) is an audit program developed by the federal government. HCPF (or a contractor) will examine eligibility decisions and payments to various providers for Medicaid services across a variety of Medicaid programs. The reviews are based on a variety of documentation providers must keep on file; the type of documentation required is outlined in the Medicaid rules in the Colorado Code of Regulations: 10 CCR 2505-10 8.130.2. Documentation may include copies of service plans authorizing supports, copies of assessments, letters of recommendation, invoices, attendance records, etc.
<b>Quality Improvement Strategy (QIS) for HCBS Waivers</b>	Case Management and Program Quality	Waiver Programs	Health Care Policy and Financing (HCPF) as mandated by Centers for Medicare and Medicaid Services (CMS)	Annually around July/August for previous fiscal year	QIS is completed through a variety of desk-review methods by a third party contractor for the state of Colorado	The Centers for Medicare and Medicaid Services (CMS) require annual and periodic reviews of the service planning process for Medicaid Waivers. The survey reviews 3 of 6 federal assurances (waiver requirements) including: level of care, service planning, and health and welfare. For all HCBS waivers, each Case Management Agency (CMA) will have a random sample of clients reviewed for the previous fiscal year; HCPF will then review and request remediation on any open issues.
<b>Client Satisfaction Survey for individuals receiving Case Management with Developmental Pathways under the Case Management Agency Contract</b>	Case Management and Program Quality	Waiver Programs, (some) State General Fund Programs, Administrative and Case Management Functions	Conducted by Quality Assurance section; Developmental Pathways	Annually around July/August for previous fiscal year	The survey is delivered via email to individuals served by the Case Management department, as well as their parents, guardians, and authorized representatives; the results are analyzed on-site at our administrative offices	When waiver operational and administrative functions are conducted by contracted entities and/or local/regional non-state entities, the Centers for Medicare and Medicaid Services (CMS) requires states to develop a plan for oversight of the performance of such entities to ensure that waiver requirements are met. One of the ways in which Health Care Policy and Financing provides oversight over Case Management Agency (CMA) is to require an annual satisfaction survey.
<b>National Core Indicator (NCI) Survey</b>	Case Management and Program Quality	Waiver Programs (all statewide)	Health Care Policy and Financing (HCPF) Via 3rd Party Contractor: Vital Research	Annually between Jan (ish) and May (ish)	NCI is completed through a variety of desk-review and in-person surveys by state staff and/or a contractor	The National Core Indicator (NCI) surveys are standard measures used across 40 states to assess the outcomes of services provided to individuals with intellectual and developmental disabilities and their families. Key areas of satisfaction are measured in areas such as employment, respect/rights, service planning, community inclusion, choice, and health and safety.  To gather the information included in this report, face-to-face interviews with a random sample of adult individuals with a Developmental Disability who receive at least one Medicaid Waiver service other than case management, are conducted.  The project takes several months from start to finish and includes: 1.) Comprehensive pre-surveys based on client Medicaid records 2.) Data requests to CMAs for any additional relevant data 3.) In-person interviews with individuals in service; locations of in-person interviews are dependent on the entity completing the interviews
<b>Contract Deliverables for CMA</b>	Case Management, Systems Navigation, and Program Quality		Office of Community Living (OCL) a Division under Health Care Policy and Financing (HCPF)	On a schedule per fiscal year; generally quarterly	Reporting is prepared by each CMA and sent to the OCL/HCPF for review.	Each year, Case Management Agencies (CMAs) enter into a contract with Health Care Policy and Financing (HCPF) in order to provide case management, associated utilization review services, and other administrative activities for both applicants of and individuals enrolled into Medicaid long-term care programming. The contract has a robust statement of work attached in which CMAs are asked to both complete and report on the commitments outlined therein.  On a set schedule, which is governed by HCPF, CMAs submit a variety of contract deliverables to HCPF for review and validation. Reports sent to the OCL/HCPF for review include (but are not limited to): 1. Quarterly Reporting on critical incidents and critical incident trends, complaints and complaint trends, and case management staff training 2. Long-range, closeout, communication, and business continuity plans.
<b>Office of the State Auditor (OSA) Survey</b>	Case Management and Program Quality		Conducted by the Office of the State Auditor	As determined by the state of Colorado	OSA audits are completed through a variety of desk-review and in-person surveys by state staff and/or a contractor	And audit was conducted in 2017-2018, pursuant to Section 25.5-10-209(4), C.R.S., which requires the State Auditor to conduct, or cause to be conducted, a performance audit of each CCB that receives more than 75 percent of its funding from governmental entities, to assess whether the CCB are effectively and efficiently fulfilling their statutory obligations. State auditors worked with HCPF and leadership from Developmental Pathways to gather data and complete an in-depth analysis of work conducted and billed for by CCBs. CCBs were presented with deficiencies for remediation, and a final report was presented to the Legislative Audit Committee.
<b>Continuous Quality Improvement Plan</b>	Case Management and Program Quality	Colorado Department of Health Care Policy & Financing	Program Quality	Annually	Uploaded to HCPF Sharepoint site	As part of the Developmental Pathways contract we include how we oversee the work performed by case managers, ensure it aligns with what it stated in the contract to confirm all tasks are being performed in a high-quality manner, and we identify and address Case Management performance issues.

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Program Quality Review	Case Management, Systems Navigation, and Program Quality	Colorado Department of Health Care Policy & Financing	Program Quality	3 years	Onsite/Remote	The Department staff completes surveys of CMAs and review, specifically, separation of case management from service delivery, the Person Centered Support Plan (PCSP) development process, provider selection processes, and monitoring of participant satisfaction with services and provider choices. The on-site survey process also includes interviews with participants and guardian regarding PCSP development and choice from among qualified providers.
Local Funding Program Satisfaction Surveys	Community Engagement	Community Outreach Wait List Program, Unmet Needs, and Scholarships	Community Engagement Department Management	Annually, in July	Electronic surveys are sent to families via e-mail	We are seeking to evaluate the effectiveness and satisfaction level of Local Funding Programs. Information is shared with our leadership team in a comprehensive survey report.
CDEC EI Program Supervision	EI	Colorado Department of Early Childhood (CDEC) EI Program		Monthly Statewide Technical Assistance (TA)	TA calls are available monthly to support EI local programs.	CDEC EI Program is the responsible for insuring compliance with Federal Part C regulations as well as state focused systematic improvement. They provide general supervision and generalize and focused monitoring.
EI Colorado Family Outcomes Survey	EI	Colorado Department of Early Childhood (CDEC) EI Program		Upon exiting EI	Emails to families	EI Colorado Family Outcomes Survey - This survey is sent to each family as they exit EI to ask them if they understand their rights, if the EI services helped them understand their child's needs and if EI services helped the family help their children develop and learn.
CDEC EI Quarterly Fiscal Reporting	EI	Colorado Department of Early Childhood (CDEC) EI Program		Quarterly	Quarterly and year end fiscal reports are sent via email with follow up from CDHS EI Program staff if needed	Quarterly utilization report to measure fiscal compliance. CDHS EI program staff monitor state and federal Part C funding utilization as well as Medicaid use and Private Insurance utilization expectations.
CDEC Monthly KPI Reporting	EI	Colorado Department of Early Childhood (CDEC) EI Program		Quarterly/Annual	Quarterly/Annual reports are sent by CDHS EI Program staff. CDHS staff monitor data reporting and individual agency performance. CDHS staff also follow up via phone, email or in person to address concerns.	Performance Indicators capture all of the activities used to meet Federal Part C requirements as well as state systematic improvement plans. Some of the key measurements are percent of infants and toddlers with IFSP's who receive services on their IFSP's in a timely manner, percent of infant and toddlers who demonstrate improved social emotional skills, acquisition and use of knowledge and skills and use of appropriate behaviors to meet their needs. Percent of all children who received timely transition planning prior to existing Part C. CDHS EI Program also tracks and monitors any complaints and their resolution.
Financial Statement Audit	FIN		External Audit Firm (Eide Bailly)	Annually, with primary fieldwork commencing in September	Onsite/Remote	An independent audit of Developmental Pathways' financial statements is performed in accordance with auditing standards generally accepted in the United States of America. The audit is performed to obtain reasonable assurance about whether the financial statements are free from material misstatement. An audit involves performing procedures to obtain audit evidence about the amounts and disclosures presented within the financial statements. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements. This results of this audit are made publicly available.
US Census Bureau Annual Services Report	FIN	US Census Bureau	US Gov	Annually	Submitted via internet	Questionnaire which discloses financial/payroll/location information. This information is used by the US Government for statistical purposes only.
A-133 Single Audit	FIN		External Audit Firm (Eide Bailly)	Annually	Onsite/Remote	A Single Audit, previously known as the OMB Circular A-133 audit, is a financial statement and federal awards audit of a non-federal entity that expends \$750,000 or more in federal funds in one year. Within the context of Developmental Pathways, the external audit firm performing this audit will typically select each year the program that expended the most federal funds (the major program), and will audit that program for compliance. The results from the A-133 audit must be submitted to each non-federal agency that passes federal awards through to our organization. This results of this audit are also made publicly available.
Colorado Department of Human Services EI Year End Revenue and Funding Reporting	FIN	Colorado Department of Human Services		Annually		Early Intervention reporting of revenue and funding.
Mill Levy Report	FIN	Arapahoe County		Annually		Report to Arapahoe County to summarize all programs, the quality of services, and the infrastructure that the Mill Levy supports.
Mill Levy Report	FIN	Douglas County		Annually		Report to Douglas County to summarize all programs, the quality of services, and the infrastructure that the Mill Levy supports.
Mill Levy Agreed Upon Procedures (AUP)	FIN	Douglas/Arapahoe County		Annually	Onsite/Remote	Agreed upon procedures performed by external audit firm to review and report on Mill Levy spending based on the procedures defined by the Counties.
Annual Financial Statement Audit Provided to HCPF	FIN	Colorado Department of Health Care Policy & Financing		Annually		As part of the Developmental Pathways OCL/HCPF contract we are required to provide HCPF with a copy of the annual financial statement audit.
EI Fiscal Site Visit	FIN	Colorado Dept. of Human Services	Early Intervention	Periodically	Onsite/Remote	To ensure contract compliance
Annual Financial Statement Audit Provided to EI Colorado	FIN	Colorado Department of Early Childhood		Annually		As part of the Developmental Pathways contract we are required to provide EI Colorado with a copy of the annual financial statement audit.
Annual Financial Statement Audit Provided to Office of the state auditor	FIN	Office of the state auditor		Annually	Submitted via internet	DP is required to provide a copy of the annual financial statement audit.
ACA- Employee Reports	HR		Paycom	As required		1094-C Employer Provided Health Offer and Coverage document to employees
ACA- Employer Reports	HR		Paycom	As required		1094-C IRS Filing Transmittal of Employer Provided Offer and coverage to IRS
OSHA Posting	HR		Internal	As required		Required posting of work place injuries
EEO- Filing	HR		Internal	As required		Required submission of employee demographics
CMS Medicare Survey	HR		State of Colorado	As Requested		Throughout the year, CMS sends online requests to verify primary medical coverage for employees.

Community Outreach Surveys and Audit FY 2016-2017

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SS Survey	HR		US Gov	As Requested		Throughout the year, SS Administration sends requisitions for verification of employment and salary for both persons in service and occasional employees.
401K Annual Audit	HR		External Audit Firm (Eide Bailly)	Annually	Onsite/Remote	Developmental Pathways has a 401K plan that is required to have an annual audit by an independent auditor. Our 401K administrator (Empower) supplies all the details of the plan for the calendar year to an external audit firm to audit. A sampling of data is selected and tested by the auditors for compliance. The audit typically lasts about 1 week. Once the audit is complete, the form 5500-Annual Return/Report of Employee Benefit Plan is filed with the IRS.
Workers Comp Audit	HR	Pinnacol Assurance		Annually	Onsite/Remote	A workers comp audit is performed to determine if premiums have been set according to the experience rating plan approved by Colorado's Commissioner of Insurance.
HCPF CCB/CMA Closeout Audit	FIN	Colorado Department of Health Care Policy & Financing	Health Care Policy and Financing (HCPF) and/or a 3rd party contractor	At Contract Closeout or As Requested	Onsite/Remote	At the completion of the contract, HCPF or an appointed third party agency will conduct a closeout audit of the contract, including determination of allowability of funding. The purpose is to ensure compliance with 2 CFR 200 and contract guidelines for the entire contract period. Upon completion, an audit report is provided to HCPF and DP documenting the findings. HCPF or the state's auditor are permitted to conduct such audits or reviews intermittently throughout the contracted period as deemed appropriate.