

Survey/Audit	Company	Department	Division	Who	When	Where	What/Why	Additional Information
Family Support Services Program Audit	DP	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.	
Family Support Services Program Satisfaction Survey	DP	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.	
Post Payment Reviews aka Payment Error Rate Measurements (PERMs)	DP	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.	
Quality Improvement Strategy (QIS) for I/DD	DP	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 both the state and Community Centered Board staff.	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 the I/DD waivers (HCBS-CES, HCBS-DD, and HCBS-SLS), each Community Centered Board (CCB) will be given a random sample of clients to review for the previous fiscal year; CCB staff will go through a training hosted by Health Care Policy and Financing (HCPF), the CCB staff will complete the reviews on a standard review tool, and submit results to HCPF for validation/review. HCPF will then review and request remediation on any open issues. The project takes several months from start to finish. The desk review process includes 1.) reporting pulled and analyzed by HCPF 2.) client-specific surveys completed by staff at each CCB based on a sample pulled by HCPF (which are then reviewed/validated by HCPF) 3.) Remediation by the CCB on open issues For our CCB, the Quality Assurance department coordinates the CCB-portion of the project for work completed by the Case Management department.	
Client Satisfaction Survey I/DD for Individuals receiving Case Management with Developmental Pathways	DP	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 Community Centered Boards (CCBs) is to require an annual satisfaction survey. This requirement is outlined within the waiver document. Additionally, the Colorado Code of Regulations (CCR) (10 CCR 2505-10 8.600) requires that both case management and provider agencies conduct an evaluation of consumer satisfaction no less than every three (3) years. Our agency typically uses online software called Survey Monkey to conduct our surveys. Overall satisfaction with DP Case Management services has historically ranged in the 88-93% range. For our CCB, the Quality Assurance team in the Program Quality department coordinates client satisfaction surveys for individuals receiving supports through the Case Management department. Note: Surveying was paused in FY23 due to Case Management Redesign (CMRD) planning; surveying will start up again (likely) in FY25	Surveys are in English & Spanish
National Core Indicator (NCI) Survey I/DD	DP	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 CCBs 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	
Contract Deliverables for I/DD	DP	Case Management 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 CCB and sent to the OCL/HCPF for review.	Each year, each Community Centered Board (CCB) enters 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 the following I/DD programs: HCBS-CES, HCBS-CHRP, HCBS-DD, HCBS-SLS, State General Funded programs including State SLS, OBSS, and Family Support Services Program (FSSP). The contract has a robust statement of work attached in which CCBs are asked to both complete and report on the commitments outlined therein. On a set schedule, which is governed by HCPF, CCBs 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.	
Annual Request for Proposal (RFP) Reporting	DP	Case Management and Program Quality	Waiver Programs, (some) State General Fund Programs	Conducted by Program Quality team; Developmental Pathways	Annually, between Sept and Oct for the previous fiscal year	Reporting and analytics are completed by the Quality Assurance department based on annual tracking on all RFPs sent the previous fiscal year.	Each year, our Community Centered Board (CCB) commits to providing reporting on Request for Proposal (RFP) outcomes for all individuals receiving case management supports for the following programs: HCBS-CES, HCBS-CHRP, HCBS-DD, HCBS-SLS, and State SLS. The reporting looks at the outcomes for every single RFP sent and determines trends across outcomes (placed, withdrawn, no placement found, etc.), as well as by program, and services. The report gives specific information on how many RFPs were placed with a commonly controlled entity as our case management department(s) and, in recent years, has also provided some information on trends by city and zip code. This report takes a 3-6 weeks to develop and is released annually to all program approved service agencies (PASAs) in our catchment area and is available on our website. This report and all analytics are completed by the Program Quality Department/team based on work completed by the Case Management department. Note: This reporting was paused in FY23 due to Case Management Redesign (CMRD) planning; due to system changes, this may or may not restart	

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Office of the State Auditor (OSA) Survey	DP	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 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 sare effectively and efficiently fulfilling their statutory obligations. State auditors worked with HCPF and leadership from Developmental Pathways to gather data and complete an in-dept 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.	
Continuous Quality Improvement Plan	DP	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 is 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.	
Program Quality Review	DP	Case Management and Program Quality	Colorado Department of Health Care Policy & Financing	Program Quality	3 years	Onsite/Remote	The Department staff completes surveys of CCBs 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.	
CCB Performance Audits	DP	Community Affairs	Waiver Programs, State General Fund Programs, Administrative and Case Management Functions	Office of Community Living (OCL), a Division under Health Care Policy and Financing (HCPF)	3 year cycle	Performance Audits are completed on-site at each CCB's administrative offices and also involve desk review activities.	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 (HCPF) provides oversight over Community Centered Boards (CCBs) is to complete the performance audits. This requirement is outlined within the waiver document. Historically, these performance audits have occurred approximately once every three years. DP had their most recent PQRS in the spring of 2020.	
Local Funding Program Satisfaction Surveys	DP	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.	
Transition Fair Survey	DP	Community Engagement	Waiver Programs, Family Support Services Program, Community Outreach Program	Community Outreach Department & Case Management Department	During/after the Transition Fair that occurs annually.	Paper surveys are handed out to families upon entering the Transition Fair. They will alternate between the Inverness and Aurora offices.	We are seeking to evaluate the effectiveness and satisfaction level of the Fair. The Fair is geared towards individuals of transition age (and their parents), between the ages of 16 and 22. Results are reviewed by leads from Case Management and Community Outreach for future improvements.	Surveys are in English & Spanish
CDEC EI Program Supervision	DP	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	DP	EI	Colorado Department of Early Childhood (CDEC) EI Program		Upon exiting EI	Emails and mailings 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	DP	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	DP	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 CCB 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	DP	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	DP	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	DP	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	DP	FIN	Colorado Department of Human Services		Annually		Early Intervention reporting of revenue and funding.	
Mill Levy Report	DP	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	DP	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)	DP	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	DP	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	DP	FIN	Colorado Dept. of Human Services	Early Intervention	Periodically	Onsite/Remote	To ensure contract compliance	
Annual Financial Statement Audit Provided to EI Colorado	DP	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	DP	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	DP	HR		Paycom	31-Mar		1094-C Employer Provided Health Offer and Coverage document to employees	
ACA- Employer Reports	DP	HR		Paycom	31-May		1094-C IRS Filing Transmittal of Employer Provided Offer and coverage to IRS	
OSHA Posting	DP	HR		Internal	1-Feb		Required posting of work place injuries	
EEO- Filing	DP	HR		Internal	Annually		Required submission of employee demographics	
CMS Medicare Survey	DP	HR		State of Colorado	As Requested		Throughout the year, CMS sends online requests to verify primary medical coverage for employees.	
SS Survey	DP	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.	

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401K Annual Audit	DP	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	DP	HR	Pinnacle 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.	