

CEO Report for August 2020
Submitted by Tara Kiene, President/CEO

This report is a summary of key activities and highlights impacting the agency from the perspective of the President/CEO. While it is addressed to and aimed at the agency’s Board of Directors, it is also shared with CCI employees to offer and overview of things happening in the agency.

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State—HCPF/DHS/Alliance.

Department of Health Care Policy and Financing (HCPF)—

- Retainer Payments—Retainer Payments ended on July 17th, and our revenue has certainly felt the hit. Our Congressional contingent, the American Network of Community Options and Resources (ANCOR—a national network of IDD providers), and HCPF have all pressed CMS to reinstate retainer payments for the duration of the pandemic. HCPF is also working on some ideas to replace retainer payments in some way. They were as unprepared as we were for the sudden announcement from CMS,

so they are scrambling to find new ways to support providers through these difficult times. They have assured us that they are working through the details and should have something in place to bolster day program billing in the next couple of weeks. In the meantime, we are hesitant to make staff reductions just to have to recruit again in coming weeks. This is exactly the situation where the PPP Loan is useful.

- **EVV**—Electronic Visit Verification went live August 3rd. It will not be tied to billing until January 2021, although there are efforts underway to lobby the feds for an implementation extension due to the fact that so many of the services that EVV is intended to cover are being offered remotely instead of in peoples’ homes. A huge thanks to our Adult Services Directors Julie Ferguson and Matt Payne and our Director of Children and Family Services Pat Smith for all their work figuring out how to implement this unpopular program.
- **Contract Deliverables**—This is the time of year when my main portion of our contract deliverables are due (poor Shannon and Elizabeth have deadlines throughout the year). Contract deliverables are items that are required by our CCB Contract (and now our SEP Contract as well). We have deadlines to turn those in, and many of those deadlines fall in July and early August. Fortunately, there is significant crossover between the two contracts. However, it does end up being a lot of work creating and/or revising a collection of documents, including our Communication Plan, Business Continuity Plan, Closeout Plan, Outreach Plan, and Long Range Plan update. I suppose I should feel better about not accomplishing much in July because I did so much “planning!”
- **New Billing Processes**—On July 1, we began new rate methodologies (i.e. ways of getting paid) for several of our programs. This applied to both our case management programs, our Community Centered Board responsibilities, family support and State General Fund SLS (Supported Living Services). Not only did the change in rate methodologies result in a net loss of revenue for these programs, the billing reconciliation process is significantly more laborious for our finance department and case management. I suspect that after a few months, our team will find some ways to make the process as efficient as possible. It’s still really bad timing to add more to the workload, though. Of course, it’s never good timing to pile more on our overly-stretched administration.
- **SEP Transition**—We successfully completed the emergency transition of the Single Entry Point (SEP) program from San Juan Basin Public Health on July 1st. That current contract is good through June 30, 2021. If we wish to continue the contract, we will be required to go through the formal application process (we got to skip that piece for this year because of the quick turnaround). I was hoping we would have a few months of data under our belts before we had to make this decision. But for once,

HCPF is early! The Board will need to discuss, and I am gathering some feedback from a few stakeholders to report back as well. This will be an item on the agenda for our meeting, but my initial recommendation is to submit the application for a few reasons:

1. We have already invested resources into making this transition. It would be nice to realize the outcomes we were hoping for before giving up on this project. Those outcomes include streamlining Waiver program access for community members, aligning case management systems to the strengths of each program, increasing the economy of scale in case management and increasing our internal expertise and capacities.
 2. We do not know the final outcome of the case management system redesign, and it would be beneficial to be positioned to pivot easily in either direction.
 3. The SEP Program is one of the few programs that is budgeted to realize a surplus. While not entirely pandemic-proof, it is also one of the programs least impacted by the change in that utilization does not fluctuate like many of our direct services.
 4. Though the application is due October 23, the final decision will not occur till the end of the year. We will have time to pull our application if necessary.
- *Colorado Department of Public Health and Environment*—
 - **Infection Control surveys for IRSS**—To date, group homes and other congregate settings have been the focus of CDPHE’s efforts to assess and booster infection control for people with IDD. Now they are shifting their attention to smaller settings and providers with host homes and other individualized residential settings. They will be doing these surveys with all 260 providers across the state over the next few months. The surveys will be all on telephone, and they are not generating deficiencies or plans of correction. The intent is to provide technical assistance. I have asked for them to provide some of that technical assistance, resources and best practices prior to the surveys so we aren’t receiving the study guide after taking the test. CDPHE leadership seemed open to that idea and are going to see what they can provide.

Local Community

- *Disability Law Colorado visit*—Our friends at Disability Law Colorado have received a grant to look into accessible housing initiatives in a few rural communities across the state. One of those communities is Durango. (I’m not sure how they chose; I should have asked. I just assumed it’s because we’re such a stellar community.) They are hosting a workshop on accessible housing and service animals on the same evening as our board meeting. The DLC team

members are also seeking input on what our local residents see as our biggest needs. We've been promoting this opportunity on social media.

Fundraising/Development

- *Festival of Trees*—COVID-19 is making a right mess of pretty much everything we're trying to do, but we're not letting it mess with Festival of Trees! At least, we're planning for a Festival of Trees that will be appropriate to the environment of COVID-19, including plans for integrating a virtual event. A few of us did some brainstorming around the high level plans, and I wrote up some notes for your Board packet. There are still plenty of details to work out, but at least we've sketched out the forest. (You can take that pun as far as you like, but just remember I didn't explicitly *say* it.)

Internal CCI highlights

- *COVID situation update*—We seem to have reached a new stasis in the COVID response situation. General status by Department:
 - CCM and SEP case management—Still under guidance from HCPF to provide all support and monitoring remotely unless there is an emergency.
 - Early Intervention and Family Support—EI Service Coordination and Family Support case management is still under guidance to provide remote services and meetings until at least September 1st (for Service Coordination). Early Intervention services may be offered in person if outside and physically distanced and if certain criteria are met.
 - Administration—Admin are working remotely or secluded in their offices. Administrative Buildings are not open to the public. Calls are being answered 8-4:30 Monday through Friday.
 - Residential Services—Our host homes continue to be rock stars, hanging in there and supporting the health and safety for their families, including the adults with IDD who live with them.
 - Day Program—Community Connection services are pretty limited, though a few people are taking us up on some outdoor, physically distanced activities. Our Adult Services staff have done an excellent job of putting together a robust menu of classes on Zoom (I think they are up to 19 classes per week). Attendance at these is pretty low, however. The managers are also looking at plans for how we could reopen the Day Program sites, including physically distanced check-in and screening procedures, maximum numbers that can safely be in the space at any one time and cleaning procedures.
 - CES and SLS—CES and SLS services are being provided as requested and as safe. Most CES clients are using their respite services, and SLS family

caregivers are providing services as usual. Other clients are choosing to pause services until the community spread of COVID decreases.

Facilities

- *Pagosa Office Open House*—The Pagosa Chamber of Commerce is doing a ribbon cutting ceremony and “open house” via Facebook Live on August 25th. We aren’t open to the public at this point, but it’s an excellent chance for some free publicity and increased awareness of our presence.

Other

- *Goal Progress:*
 - Strategic Plan—We have new workgroups working on this year’s action items toward our strategic plan. This will include some of our business planning ideas from last winter that we’ve either already implemented (the pandemic pushed some things forward due to necessity) or are low hanging fruit. We should have drafts of those to share with the Board at our September meeting.
 - Strategic Leadership Certificate—At my current pace, I believe I will be completely finished with my program by the end of August. I have completed all of the coursework and am past the halfway mark on my capstone project. I’m looking forward to celebrating this with you all in September!
- *Out of office*—I will be taking off the second week of September to hit my reset button a little bit. We are just going up to our family cabin near Silverthorne (unless they don’t get that fire under control!) But I won’t have cell service or internet up there, so I will be completely out of pocket. I have perfect faith in Matt, Julie, Elizabeth and the rest of the Executive Team to keep things rolling along while I’m gone.

Acronym Cheat Sheet

- ART (Administrative Review Team) –The Executive Team and Program Directors oversight of Quality Indicators
- The Arc – advocacy organization for people with intellectual disabilities
- ANCOR (American Network of Community Options and Resources)
- BHO (Behavioral Health Organization)
- CCB (Community Centered Board) we are 1 of 20 in the state
- CCI (Community Connections, Inc.)
- CDLE (Colorado Department of Labor and Employment)

- CFCM (Conflict-Free Case Management) Federal mandate that the provision case management must be separated from direct program services.
- CES (Children’s Extensive Services)
- CHCBS (Children’s Home and Community Based Services)
- CMS (Centers for Medicare & Medicaid Services) Federal
- CORA (Colorado Open Records Act)
- DHS or CDHS (Colorado Department of Human Services)
- DSP (Direct Support Professional) – field staff working with clients
- DVR (Department of Vocational Rehabilitation)
- EI (Early Intervention) Developmental services for kids Birth to 3
- FOT (Festival of Trees)
- HCPF (Health Care Policy and Financing) State Medicaid office
- I/DD (Intellectual and Developmental Disabilities)
- JBC (Joint Budget Committee at the Colorado legislature)
- MOU (Memorandum of Understanding)
- PASAs (Program Approved Service Agencies) agencies approved to provide Medicaid Waiver services across the state
- PCA (Personal Care Alternative) residential services not in a host home
- RAE (Regional Accountable Entity) Medicaid Care Management organization
- Residential (a.k.a. Comprehensive – our adult 24/7 support)
- ROI (Return on Investment)
- SJBPH (San Juan Basin Public Health)
- SLS (Supported Living Services) – Services for adults living independently or with family
- TCM (Targeted Case Management)