



## COLORADO DEPARTMENT OF HEALTH CARE POLICY & FINANCING

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John W. Hickenlooper, Governor • Susan E. Birch MBA, BSN, RN, Executive Director

June 20, 2014

The Honorable Crisanta Duran, Chair  
Joint Budget Committee  
200 East 14<sup>th</sup> Avenue, Third Floor  
Denver, CO 80203

Dear Representative Duran:

Enclosed please find a report to the Joint Budget Committee regarding the status of the transition of the Division for Intellectual and Developmental Disabilities, formerly the Division for Developmental Disabilities, from the Department of Human Services to the Department of Health Care Policy and Financing. This report is provided pursuant to Section 25.5-10-203 (5) (a), C.R.S. Communication from a provider agency and an advocacy group responsible for advocating for adults and children with developmental disabilities will be sent under separate cover.

In addition, the Community Engagement Report produced by the Civic Canopy is attached. As an enhancement to the report, the Department has added an update on the appointment of the Director of the Office of Community Living. Effective July 1, 2014, the Long Term Services and Supports Division will join the Division for Intellectual and Developmental Disabilities as business units under the Office of Community Living.

If you require further information or have additional questions, please contact the Department's Legislative Liaison, MaryKathryn Hurd, at [MK.Hurd@state.co.us](mailto:MK.Hurd@state.co.us) or 303-547-8494.

Sincerely,

A handwritten signature in black ink, appearing to read 'Susan E. Birch', written over a horizontal line.

Susan E. Birch, MBA, BSN, RN

Executive Director

*FOR SUSAN BIRCH*

SEB/zjl

Cc: Senator Pat Steadman, Vice-Chair, Joint Budget Committee  
Representative Jenise May, Joint Budget Committee  
Representative Bob Rankin, Joint Budget Committee  
Senator Mary Hodge, Joint Budget Committee  
Senator Kent Lambert, Joint Budget Committee  
John Ziegler, Staff Director, JBC  
Megan Davisson, JBC Analyst  
Henry Sobanet, Director, Office of State Planning and Budgeting  
Erick Scheminske, Deputy Director, Office of State Planning and Budgeting  
Bettina Schneider, Budget Analyst, Office of State Planning and Budgeting  
Katherine Blair, Health Policy Advisor, Governor's Office  
Legislative Council Library  
State Library  
John Bartholomew, Finance Office Director  
Suzanne Brennan, Health Programs Office Director  
Antoinette Taranto, Acting Client Services Eligibility & Enrollment Office Director  
Tom Massey, Policy and Communications Office Director  
Barbara D. Ramsey, Director, Division for Intellectual and Developmental Disabilities  
Emily Blanford, Assistant Director, Division for Intellectual and Developmental Disabilities  
Jed Ziegenhagen, Deputy Director, Health Programs Office  
John Barry, Office of Community Partnerships  
Laurel Karabatsos, Deputy Director, Health Programs Office  
Lori Thompson, Assistant Director, Division for Intellectual and Developmental Disabilities  
MaryKathryn Hurd, Legislative Liaison  
Rachel Reiter, Communications Director

**House Bill 13-1314**  
**Transfer Division for Developmental Disabilities from the Department of**  
**Human Services to the Department of Health Care Policy and Financing**  
**Quarterly Report**  
**June 20, 2014**

**Background**

House Bill 13-1314, “Concerning the Transfer of the Administration of Long-Term Services for Persons with Intellectual and Developmental Disabilities to the Department of Health Care Policy and Financing,” moved the statutory authority for the operation of the three Home and Community Based Waivers for Persons with Developmental Disabilities from the Department of Human Services to the Department of Health Care Policy and Financing. The three waivers are listed below.

- Home and Community Based Services Children’s Extensive Support (CES) waiver (Children)
- Home and Community Based Services Developmental Disabilities (DD) waiver (Adults)
- Home and Community Based Services Supported Living Services (SLS) waiver (Adults)

In addition, the legislation transferred the administration of state-only, General Fund programs operated by the Division for Developmental Disabilities. The legislation required the movement of staff positions related to the administration of the waivers from the Department of Human Services into the newly created Division for Intellectual and Developmental Disabilities into the Office of Community Living at the Department of Health Care Policy and Financing. The bill directed that the powers, duties, and functions of the Division for Intellectual and Developmental Disabilities (the Division) also be moved to the Department of Health Care Policy and Financing (the Department) on or after March 1, 2014 as a Type 2 transfer.

Identified benefits of moving the administration of waiver programs to the Department include the realignment and simplification of Colorado’s Home and Community Based Services Medicaid waiver system. Specific advantages include:

- Improving system navigation for clients and caregivers
- Reducing duplication or variances in program rules
- Allowing Colorado to better leverage federal funding opportunities available through health care reform
- Aligning planning and implementation efforts across programs and grant initiatives.

The approval of 1331 Supplemental “Leased Space” in June of 2014 by the Joint Budget Committee provided funding to lease office space for the Department that allowed for the co-location of Division staff with their counterparts in the Long Term Services and Supports Division as well as other staff in the Health Programs Office at the Department. Additionally, the

Supplemental provided one-time funding to perform stakeholder engagement around the movement of the Division to the Department.

The funding paid for engagement activities including a contract with a vendor to facilitate public forums. These forums were designed to collect public input and discuss updates and concerns about the transition. In addition, the forums afforded the opportunity to collect feedback from a wide range of stakeholders in a consistent manner. The vendor was also responsible for crafting a report regarding the stakeholder meetings. The final report is attached.

### **Implementation Timelines**

In implementing House Bill 13-1314, the following target dates for major components of the transition were identified. All tasks were completed on the anticipated dates.

- June 2013 – Leased Space and Community Engagement Funding approved
- February 2014 – Co-location of Division staff with Department staff at 303 E. 17<sup>th</sup> Avenue completed
- April 1, 2014 – Legal and Administrative Transfer

### **Planning and Logistics**

In preparation for the February 2014 co-location of staff at the 303 E. 17<sup>th</sup> Avenue location, transition subgroups were formed. All groups were comprised of appropriate staff from the Department, the Department of Human Services, and the Governor’s Office of Information Technology. The groups managed their tasks with project plans and met frequently to ensure the smooth transition of staff, supplies, electronic files, and other documents and materials to the Department. A list of the groups can be found below.

- Information Technology
- Finance
- Contracts
- Communications and Engagement

### **Outreach and Engagement**

The Department entered into a contract with Civic Canopy to manage the stakeholder engagement process. This ensured that a neutral third party collected stakeholder concerns as well as completed the final report on the transition. Throughout February, five meetings were held in the following locations:

- Denver
- Pueblo,
- Ft. Collins,
- Grand Junction,
- Teleconference only (Denver)

Notification of the meetings was provided via email lists and at provider and stakeholder meetings. Attendees included individuals from the following groups:

- Individuals receiving services
- Families and caregivers
- Advocates
- Community Centered Boards (CCBs)
- Providers

In collecting stakeholder feedback, a listening log format was used where stakeholders' comments were recorded and staff responses were then provided.

### **Operational Status and Unresolved Issues**

At the time of this report, there are no unresolved issues around the transfer of powers, duties, and functions from the Department of Human Services to the Department. The final report, which is attached, will be distributed the last week of June to all stakeholders across the Office of Community Living, along with a copy of the Department's Organizational Chart without names. Effective July 1, 2014, the Office of Community Living will be comprised of the Division for Intellectual and Developmental Disabilities and the Long Term Services and Supports Division.

All staff are established at the new location. The move has allowed for collaboration with other staff at the Department, most notably counterparts in the Long Term Services and Supports Division. Further, staff have been able to work more closely with Accountable Care Collaborative (ACC) staff to strengthen the continuity of care across all programs. The implementation of the new Dental benefit has been aided and sped along by the co-location of staff in one space. Lastly, staff across both Divisions have attended training on Person Centered Thinking.

Division staff continue to work closely with staff from the Department of Human Services in the areas of Supported Employment, child welfare, and community transitions from the Regional Centers. Despite the move, these working relationships remain strong and will continue to be leveraged to ensure clients receiving services provided by both Departments receive such services in a coordinated, cost-effective manner.

### **Update on the Appointment of the Office of Community Living Director Position**

During March and April of 2014, the Department requested input from appointed members of the Community Living Advisory Group on the draft of the job description for the Director, Office of Community Living position via email. A link to the draft document was also posted on the Community Living Advisory Group web page. Members were given a 30-day period ending April 15, 2014, to submit comments or questions. Several of the members submitted comments and suggestions. These comments were all considered and resulted in a number of changes to the draft job description.

The job was posted to the Department of Personnel website as a Senior Executive Service position on Friday June 13, 2014. The posting closes on Friday June 20, 2014.



# Community Engagement Report for HB13-1314 Transfer of the Division for Developmental Disabilities to HCPF

## EXECUTIVE SUMMARY

On July 5, 2012, Governor John Hickenlooper issued Executive Order D-2012-027, which established an Office of Community Living (OCL) and a Community Living Advisory Group (CLAG) within the Department of Health Care Policy and Financing (HCPF). The Order states:

*"All Coloradans—including people with disabilities and aging adults—should be able to live in the home of their choosing with the supports they need and participate in communities that value their contributions. To help meet these needs, we are creating an Office of Community Living within the Department of Health Care Policy and Financing with the goal of increasing access to community-based supports for long-term care that will focus attention and resources on the unique needs of aging Coloradans and people with disabilities."*

The full Executive Order is available on the Governor's website at (PDF) [Executive Orders](#).

During the 2013 legislative session, House Bill 13-1314 was introduced (sponsors were: Senator Mary Hodge (D) and Representatives Claire Levy (D) and Cheri Gerou (R)). The Bill – which aligns with the Executive Order – was designed to eliminate system fragmentation and improve program efficiency. Specifically, the bill sought to transfer the programs relating to services and supports for persons with intellectual and developmental disabilities from the Department of Human Services (DHS) to HCPF. HB13-1314 was enacted by the legislature and signed by Governor Hickenlooper on May 28, 2013.

## STAKEHOLDER ENGAGEMENT

HCPF and DDD (now DIDD, the Department for Intellectual and Developmental Disabilities – DIDD) have been committed to ensuring that the services for people with intellectual and developmental disabilities are designed and implemented in accordance with the needs of the people who require the support. In addition, both the Department and the Division have been committed to ensuring that no harm is done to clients or providers during transition process. Toward these ends, both HCPF and DDD/DIDD have:

- Discussed the transition at **more than 50 Stakeholder Meetings** with individuals who receive services, families and caregivers, HCPF/DDD staff, advisory group members, advocates, service providers, and representatives of Community Centered Boards;
- Conducted **15 Telephone Interviews** with stakeholders (Discovery Interviews);
- Developed and distributed **Transition FAQs** based on the discovery process;
- Conducted **5 Community Engagement Meetings** informed by the Discovery process;
- Utilized **periodic Communication Briefs** to provide transition news to stakeholders; and
- Developed and distributed comprehensive **Listening Logs** based on the engagement meetings.

## Discovery Interviews

In early January 2014, The Civic Canopy conducted 15 telephone interviews with key stakeholders to gather input on the transition, set goals for the engagement process, and inform the agenda for the community

meetings. Interviewees included family members of people with disabilities, service providers, advocates, and employees of Community Centered Boards. Each interview was approximately 35 minutes long.

Based on feedback from the stakeholder interviews, the Community Engagement meetings were designed to:

- Provide stakeholders with information/clarification about the transition;
- Provide multiple ways to participate and provide feedback;
- Involve key HCPF/DDD staff;
- Foster an atmosphere of trust and transparency;
- Reassure stakeholders of HCPF’s commitment to DDD;
- Reassure stakeholders that communication will be ongoing; and
- Ensure appropriateness of setting (stakeholder’s concerns about accessibility led to the relocation of two Community Engagement meetings).

### Community Engagement Meetings – Stakeholder Participation and Representation

HCPF and DDD/DIDD hosted five community engagement meetings that were designed to provide information about the transfer of the DDD system to HCPF, and gather stakeholder feedback. All meetings were held between January and March 2014. Four of the meetings took place in locations across the state; the fifth was conducted online. Each meeting included a call-in number, a webinar link, and accommodations (if needed) for language and deaf-and-hard-of-hearing. In total, 151 stakeholders participated in the meetings.

See below Table 1.1: Stakeholder Participation.

COMMUNITY ENGAGEMENT MEETINGS – STAKEHOLDER PARTICIPATION			
Meeting Location	In-Person Participants	Remote Participants	Combined – In-Person & Remote
Denver – January 24, 2014	48	27	75
Grand Junction – February 21, 2014	10	1	11
Pueblo – February 25, 2014	23	2	25
Fort Collins – February 28, 2014	18	1	19
Online / Phone Based – March 6, 2014	21	0	21
<b>Total</b>	120	31	151

Table 1.1: Stakeholder Participation

All of the meetings benefited from broad stakeholder participation that included representation from individuals receiving services, caregivers/family members, service providers, advocates, and representatives of Community Centered Boards. See below Chart 1.1: Stakeholder Representation.

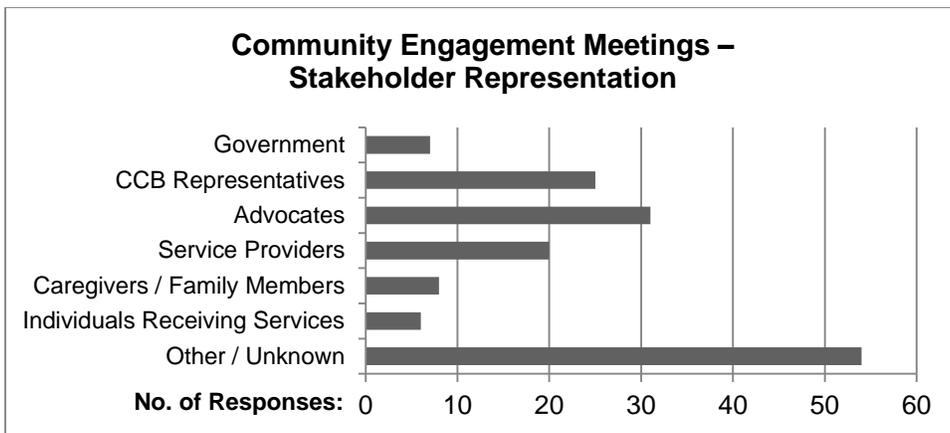


Chart 1.1.1: Stakeholder Representation

### Community Engagement Meetings – Content

**Agenda** – It was clear during the Discovery Process that stakeholders still had many questions about the transition, and often lacked sufficient understanding of the transition to be able to provide meaningful feedback to inform it. The agenda at the engagement meetings was adapted accordingly, devoting roughly half of the meeting to providing information about the transition, and the other half to gathering feedback relating to it. *See Attachments 1-5: Annotated Agendas*

**FAQs** – To address stakeholder questions that arose during the Discovery Process, FAQs were developed and made available to stakeholders at each meeting. *See Attachment 6: Transition FAQs*

**Presentation** – Each meeting included a presentation designed to inform stakeholders about the purpose, scope and benefits of the transition, and a timeline for DDD’s physical move from 4055 S. Lowell Blvd to 303 E. 17<sup>th</sup> Ave. The presentation was followed by a question-and-answer period and small-group discussions on two key questions designed to gather stakeholder feedback about the transition. *See Attachment 7: PowerPoint*

**Responding to Stakeholder Questions** – All stakeholder questions and comments from these events were collected and incorporated into “listening logs.” Participants at the first meeting (Denver) specifically requested that listening logs not be shared until all of the meetings were finished. (Their intent was that the feedback from one meeting would not influence the content of a subsequent one). For this reason, the listening logs (one per meeting) were released as a group in March 2014. *See Attachments 8-12: Listening Logs*

**Summarizing Stakeholders’ Concerns, Hopes and Values** – From the community engagement process, HCPF and DDD/DIDD were able to summarize and verify what stakeholders find to be of greatest value in the Division, and what stakeholders perceive to be the strengths and opportunities for improvement in the post-transition period.

## KEY FINDINGS

### Open-Ended Questions from Stakeholders

Consistent with the findings from the Discovery Process, participants at the Community Engagement meetings voiced questions about the transfer. They did so in front of the group, and/or anonymously in writing. The most frequent theme of the questions across all five meetings related to the goals and logistics surrounding the transition. In addition, there were many questions related to waivers and to process/systems improvement. *See chart 1.2: Participant Questions (Open-Ended).*

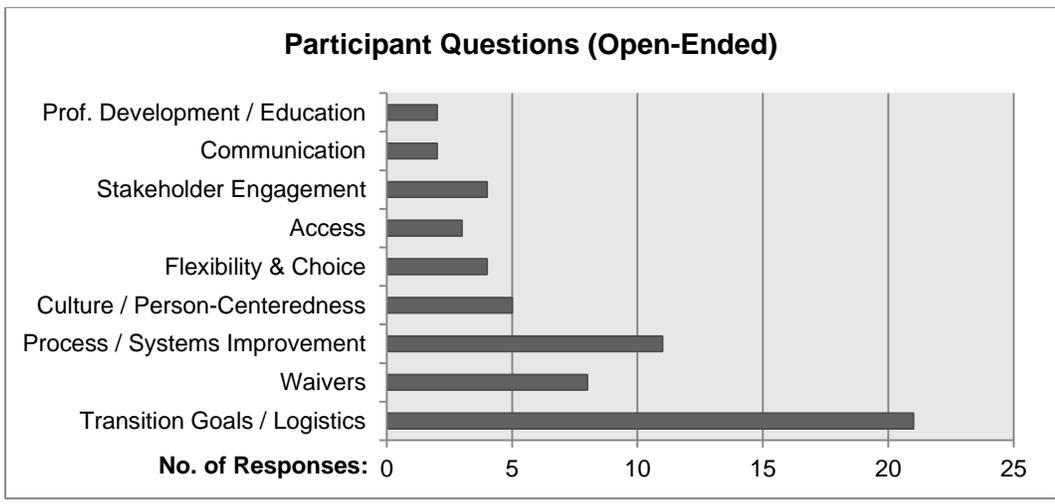


Chart 1.2: Open-Ended Participant Questions by Category

### Understanding Stakeholders' Hopes and Concerns

During their small-group work, participants reflected on the question, “What do you think is important for HCPF to think about as we move through the transition?” The question was designed to uncover what stakeholders perceive as risks and opportunities regarding the transition. Stakeholders indicated that the following areas warranted the most attention: process/systems improvement; communication; culture/person-centeredness; and flexibility & choice.

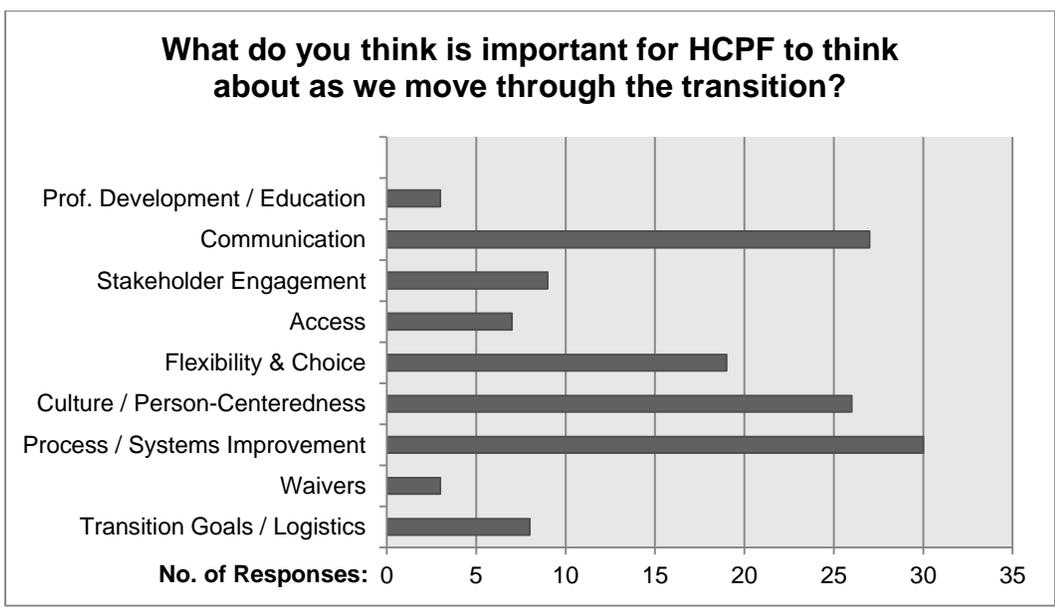


Chart 1.3: What participants hope HCPF will prioritize

### Understanding What Stakeholders Value About DDD

Participants were invited to reflect on the question, “What are the values represented in DDD that you want HCPF to keep in mind as we move through the transition?” The question was designed to uncover what DDD values/philosophies are important to stakeholders so that these values can be retained in the post-transition era. Overwhelmingly, the value that matters most to stakeholders is DDD’s friendly, accessible culture and emphasis on person-centeredness.

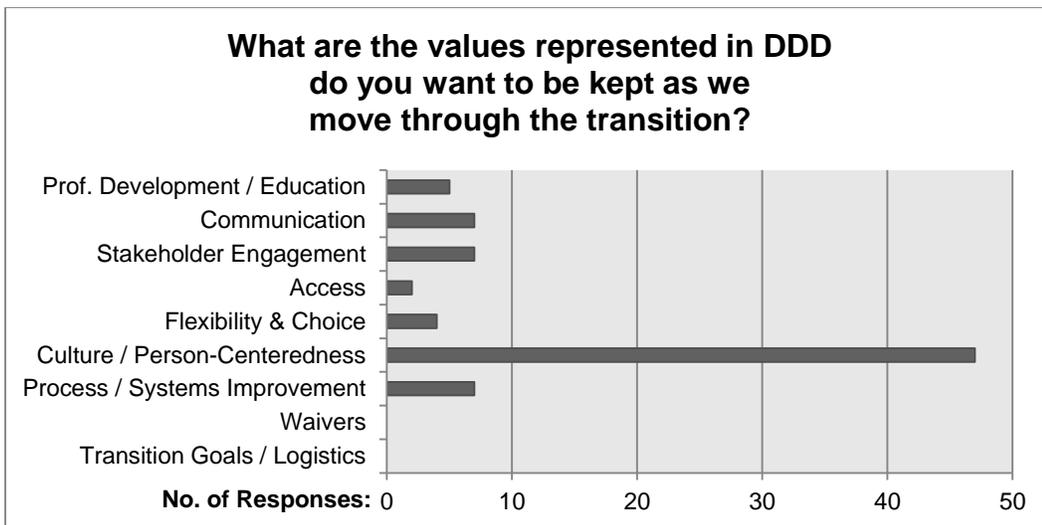


Chart 1.4: DDD values that are important to participants

### Salient Themes and Opportunities

- **Culture / Person-Centered Thinking**

Resoundingly, stakeholders voiced appreciation for the (pre-transition) culture of DDD, which they perceive to be “person-centered,” “friendly,” and “accessible.” The frequency of comments made about DDD being subsumed by an “insurance-agency” or “medicalized model” illuminates a primary stakeholder worry that the DDD culture they have come to rely upon might deteriorate under HCPF.

Additional comments and suggestions relate to training opportunities in the areas of customer service, person-centered thinking, and flexibility and choice (as a reflection of person-centered philosophy).

- **Process / Systems Improvement**

Through their questions and suggestions, stakeholders expressed their regard for the transition as an opportunity to improve process and systems. For example data collection was noted as a strength of HCPF, and the observation was made that in the post-transition era, data-informed decision-making might be more prevalent – particularly in the area of changes to services. Additional suggestions related to clarification and simplification of waiver processes, and leveraging existing advisory groups (e.g., the Community Living Advisory Group) and sub-committees to ensure broad stakeholder inclusion.

- **Communication**

Communication is also a key theme. Comments and questions in this area reveal stakeholders’ desire for communication that:

- Is timely and more frequent
- Is more direct (e.g., not “third-party”)
- Utilizes broader/additional channels (e.g., YouTube, Instagram, Twitter, local media, etc.)
- Is accessible (e.g., to speakers of other languages)

## FINAL COMMENTS / RECOMMENDATIONS

### 1. Conduct Meaningful Follow-Up

Based on comments and feedback received to date, stakeholder reaction to the engagement process has been positive. To capitalize on this momentum and maintain goodwill, it is essential for HCPF/DIDD to follow up with participants. Meaningful follow-up will reassure participants that their contributions matter and are generating change.

Follow-up strategies and activities that both align with best practice and relate to specific stakeholder comments and suggestion include the following:

- Share “Listening Logs” that **answer participants’ questions**;
- Provide **updates on actionable items** including any changes that are planned, implemented, or under consideration as a result of participant feedback. Examples might include trainings on person-centered thinking, efforts to alleviate parking challenges, and approaches to waiver process simplification.
- Provide details of **subsequent engagement activities with other groups** (e.g., advisory groups and sub-committees);
- Share **findings from the formal transition evaluation** (what worked, what did not?);
- Notify stakeholders of upcoming **opportunities for additional engagement**.

## 2. Establish a Stakeholder Communication Plan

The volume and nature of stakeholder questions and comments relating to communication provide a strong case for the development of a Communication Plan. A well-developed plan will ensure that messaging is clear and focused, reduce stakeholder questions/confusion, provide broader outreach, and reinforce a strong sense of culture.

The Communication Plan should address the following areas:

**Target Audiences.** Which stakeholder subgroups will receive communications? Subgroups would include stakeholder roles (e.g., individuals who receive services, their families, advocates, providers, and Community Centered Boards) as well as geographic regions.

**Communication Frequency.** How often will information be communicated to each stakeholder subgroup? The frequency of communication might be customized for each subgroup.

**Communication Content.** Which type of information needs to be communicated to each stakeholder subgroup? Messaging can be tailored to maximize effectiveness.

**Communication Tools/Methods.** Which communication tools best suit each stakeholder subgroup? The plan should include a variety of outreach tools and activities – both traditional and technology-based. Stakeholders' specific recommendations for effective communication tools included community meetings, advisory committee meetings, radio, TV, newspaper, email, website updates, Facebook, YouTube, Instagram, and Twitter.

## 3. Continue Person-Centered Trainings

It is very apparent that the Department's training efforts around person-centered thinking are appreciated by the community and are contributing positively to the culture that the Department is working to build and maintain. Accordingly, opportunities for training and education in person-centered thinking should continue.