EXPANDED
Developmental Disability/Delay
Acronym Index
Expanded Developmental Disability/Delay Acronym Index
**BI Waiver:** “Brain Injury Waiver” – Provides home and community based Medicaid benefits as an alternative to hospital or specialized nursing facility care for persons with brain injuries.

**The Bridge:** A subsystem of the Department of Health Care Policy and Financing’s (HCPF) new Colorado InterChange system that supports service planning and prior authorization.

**BUS:** “Benefits Utilization System” – The Department of Health Care Policy and Financing’s electronic client record and database system regarding long term care eligibility and continuing stay reviews for all Home and Community Based Services Medicaid Waivers.

**CBMS:** “Colorado Benefits Management System” – The Department of Health Care Policy and Financing’s computerized system for managing Medicaid eligibility and re-determinations.

**CCB:** “Community Centered Board” – A special designation given to a locally based non-profit entity contracting with the State to coordinate and purchase services for persons with intellectual/developmental disabilities. There are 20 CCBs in the state of Colorado.

**CCMS:** “Community Contract Management System” – The Division for Developmental and Intellectual Disabilities’ (DIDD) database which houses individual contact and demographic information as well as waitlist information for individuals.

**CES Waer:** “Children’s Extensive Support Waiver” – Provides home and community based Medicaid benefits as an alternative to hospital or specialized nursing facility care for children with developmental disabilities and delays that are most in need due to the severity of their disability.

**CHCBS Waiver:** “Children’s HCBS Waiver” – Provides home and community based Medicaid benefits as an alternative to hospital or specialized nursing facility care for children with developmental
disabilities who would otherwise be ineligible for Medicaid due to excess parental income and/or resources.

**CHRP Waiver:** “Children’s Habilitation Residential Program Waiver” – Provides home and community based Medicaid benefits as an alternative to hospital or specialized nursing facility care for children with developmental disabilities who are also in foster care.

**CLLI Waiver:** “Children with a Life Limiting Illness Waiver” – Provides home and community based Medicaid benefits as an alternative to hospital or specialized nursing facility care for children (birth-18) with a prognosis of death that is highly probable before the child reaches adulthood.

**CM:** “Case Management or Case Manager” – Coordination and monitoring of services for individuals enrolled in the Home and Community Based Services Medicaid Waivers with Developmental Pathways.

**CMHS Waiver:** “Community Mental Health Supports Waiver” – Provides home and community based Medicaid benefits as an alternative to hospital or specialized nursing facility care for individuals with major mental illness who are 18 years and older.

**CMS:** “Centers for Medicare and Medicaid Services” – Federal agency authorizing and overseeing Medicaid Services, including State Medicaid Waivers.

**CWA Waiver:** “Children With Autism Waiver” – Provides home and community based Medicaid benefits as an alternative to hospital or specialized nursing facility care for children (birth through age 5) with a medical diagnosis of Autism who are most in need due to the severity of their disability. *This Waiver will be phased out by 2018.*

**DD:** “Developmental Delay” – For an infant or toddler (birth to age five) with delays in primary developmental areas when compared with
typical development for the child’s chronological age; or an infant or toddler living with a parent who has a developmental disability.

**DD:** “Developmental Disability” – Often used interchangeably with ID and I/DD. Please see I/DD for definition.

**DD Waiver:** “Persons with Developmental Disabilities Waiver” – Previously referred to as the “Comprehensive or Comp Waiver”, it provides home and community based Medicaid benefits as an alternative to hospital or specialized nursing facility care for adults with developmental disabilities requiring 24-hour supervision and support. It includes residential services to support individuals to live safely and participate in the community.

**DHSS:** “Day Habilitation Services and Supports” – Also known as Day Program or Day Habilitation. Services offered to adults enrolled in HCBS-DD or HCBS-SLS Waiver programs during the day and outside of the person’s residential setting. Activities should promote independence in the community or build on skills related to socialization, self-help, or adaptive skills.

**DIDD:** “Division for Intellectual and Developmental Disabilities” – A division of the Department of Human Services which is responsible for services to persons with intellectual and developmental disabilities in Colorado.

**DOH:** “Division of Housing” – Receives federal funds from the U.S. Department of Housing and Urban Development and contracts with public housing authorities and non-profit organizations to administer the HCV (Housing Choice Voucher) Program throughout the state of Colorado.

**DVR:** “Division of Vocational Rehabilitation” – A State agency that assists eligible individuals with disabilities to find employment in the community.
**EBD Waiver:** “Elderly, Blind, and Disabled Waiver” – Provides home and community based Medicaid benefits as an alternative to hospital or specialized nursing facility care for adults who are elderly with a functional impairment (aged 65+), blind, or disabled (aged 18-64).

**EPSDT:** “Early and Periodic Screening, Diagnosis, and Treatment” – Benefit program that provides comprehensive and preventative health care services for Health First Colorado (Colorado’s Medicaid Program) members age 20 and under along with pregnant adults.

**EI:** “Early Intervention” – Program providing service coordination and additional supports for families with infants and toddlers (birth through age 3) with developmental delays.

**FSP:** “Family Support Plan” – Annual plan completed by Service Coordinator with family and individual enrolled in Family Support Services Program to determine strengths and needs.

**FSSP:** “Family Support Services Program” – A State funded program that offers support to families who have a child or adult with developmental disabilities who is living at home. The supports are intended to assist families in finding and/or funding some of the resources and services that are needed when parenting their child or assisting an adult family member with developmental disabilities.

**GRSS:** “Group Residential Services and Supports” – Residential services and supports in group home settings that are licensed by the CDH, for individuals enrolled in HCBS-DD Waiver program. These settings have four or more individuals.

**HCBS:** “Home and Community Based Services” – Services and supports provided in community settings to an individual who requires a level of institutional care that would otherwise be provided in a hospital, nursing facility, or Intermediate Care Facility for the those with Intellectual/Developmental Disabilities (ICF-IDD). These services are funded through Medicaid Waivers.
**HCPF:** “Department of Health Care Policy and Financing” – Department of Colorado State government responsible for the administration of Medicaid.

**HCV:** “Housing Choice Voucher” – Formerly known as Section 8, this program helps low income, elderly and disabled individuals afford decent, safe, and sanitary housing. Administered by Developmental Pathways through a contract with DOH.

**HHP:** “Host Home Provider” – A subcontracting vendor providing residential services within their own home to no more than two individuals at a time.

**HRC:** “Human Rights Committee” – A committee of volunteers comprised of professionals in the community, parents, client representatives, and advocates, which reviews psychototropic medications, rights suspensions, and restrictive procedures, and makes recommendations.

**HUD:** “Housing and Urban Development” – Federal department responsible for several grant programs available to CCBs.

**ICF-IDD:** “Intermediate Care Facility for the Intellectually and Developmentally Disabled” – Medicaid funded residential facility for persons with intensive needs.

**ID:** “Intellectual Disability” – A medical diagnosis often used interchangeably with DD (developmental disability) and I/DD. Please see I/DD for definition.

**I/DD:** “Intellectual/Developmental Disability” – A funding or legislative term for children over age five and adults. It is an umbrella term that includes intellectual disability as well as other neurological and physical diagnoses such as autism, cerebral palsy, and epilepsy. Each of the following criteria must be met: 1) condition manifests prior to age 22,
and 2) results in IQ of 70 or below or limited adaptive behavior skills (e.g. conceptual skills, social skills, and practical skills).

IDT: “Inter-Disciplinary Team” – A team of individuals involved in support, assessment, and recommendations for persons with disabilities.

InterChange: The Colorado InterChange is HCPF’s new group of provider-facing databases that support PAR information, provider billing, Medicaid eligibility, and provider enrollment.

IFSP: “Individual Family Service Plan” – Plan for infants and toddlers in the Early Intervention Program. It details current levels of development and outcomes/goals to be reviewed every 6 months.

IRSS: “Individualized Residential Services and Supports” – Residential services and supports in small settings of three or less individuals enrolled in HCBS-DD Waiver program. This includes Personal Care Alternatives, apartment settings, and host homes.

IP: “Individualized Plan” – See definition for SP.

ISSP: “Individualized Service and Support Plan” – A specific and written goal/program developed by a Service Agency to address prioritized needs for an individual in services related to areas such as skill acquisition; personal, physical, or social development, and/or training.

LTC: “Long Term Care” – The length of care approved through Medicaid waiver programs and for those in nursing homes, intermediate care facilities, and community based settings.

LTHH: “Long Term Home Health” – Skilled services such as Certified Nursing Aide or Nursing (i.e. RN, LPM) services provided by a Home Health Agency (HHA) for individuals who need Intermittent Home Health Services.
MANE: “Mistreatment, Abuse, Neglect, and Exploitation” – Term used when referring to types of abuse that are suspected, investigated, and/or perpetrated against at-risk individuals (such as the elderly and those with disabilities). This term is being replaced by the umbrella term “Mistreatment” which refers to any and all types of abuse.

MIN: “Most in Need Survey” – A questionnaire completed in order to determine an individual’s spot on the Family Support Services waiting list.

NOA: “Notice of Action” – Notice of change in services (e.g. decreased, ended, or approved) completed on the Benefits Utilization System and then mailed to the individual impacted.

PAR: “Prior Authorization Request” – A request to the State or a private insurer that will permit an individual to receive services and allow for reimbursement of costs to a provider.

Part C: Federal funding for infant/toddler programs through the Division of Intellectual and Developmental Disabilities; also known in Colorado as Early Childhood Connections.

PASA: “Program Approved Service Agency” – An agency contracted to provided Medicaid Waiver services (residential, day program, behavioral) to individuals as outlined in their Service Plan. Continuum of Colorado is a PASA.

PCA: “Personal Care Alternative” – A residential setting based in an apartment setting or a home serving three or fewer clients.

PMIP: “Professional Medical Information Page” – A document signed by a medical professional indicating that an individual meets the medical criteria for Long Term Care services.

PM: “Program Manager” – A position that manages a residential, day service or work facility program for PASAs; PM indicates a level of
management within the CM, CO, and EI departments, usually responsible for the supervision of Service Coordinator, Case Manager, and Administrative level staff.

**RC**: “Regional Center” – State run facilities for persons with developmental disabilities. There are three in the state of Colorado located in Wheatridge, Grand Junction and Pueblo.

**RCCO**: “Regional Care Collaborative Organizations” – An organization that connects Health First Colorado (Colorado’s Medicaid Program) members to providers and helps members find community and social services in their area.

**RFP**: “Request for Proposal” – A request that is sent out to appropriate service agencies asking for proposals to serve specific individuals who are looking for a new service or service provider.

**SA**: “Service Agency” – See definition for PASA.

**SC**: “Service Coordinator” – Title for staff in the Community Outreach and Early Intervention Departments that support with coordination and monitoring of services to individuals and their families.

**SCI Waiver**: “Persons with Spinal Cord Injury Waiver” – Provides home and community based Medicaid benefits as an alternative to hospital or specialized nursing facility care for individuals with spinal cord injuries.

**SE**: “Supported Employment” – A service that assists people with developmental disabilities to find community based jobs.

**SEP**: “Single Entry Point” – An agency that is responsible for managing the implementation of several HCBS Waivers (CHCBS, CLLI, SCI, BI, CMHS, EBD). Colorado Access is the SEP for Adams, Arapahoe, Douglas, Denver, and Elbert counties.
**SIS:** “Support Intensity Scale” – A tool to measure the intensity of a person’s support needs, designed to provide information that can help planning teams, agencies and organizations understand the support need of people with intellectual/developmental disabilities.

**SLS Waiver:** “Supported Living Services Waiver” – Provides home and community based Medicaid benefits as an alternative to hospital or specialized nursing facility care for adults with developmental disabilities. This waiver is for adults who either can live independently with limited supports or who, if they need extensive support, are getting that support from other sources, such as their family.

**SP:** “Service Plan” – A written document developed by the individual and their interdisciplinary team which drives the programs, supports and services which will be delivered to the individual in the next year.

**SPAL:** “Service Plan Authorization Limit” – A financial spending limit in the SLS Waiver that includes most services with some exceptions. The SPAL is determined by the Support Level (1-6) that is calculated by the SIS assessment. Higher Support Levels have a larger budgetary limit.

**SSA:** “Social Security Administration or Act” – An agency of the federal government that administers Social Security, a social insurance program consisting of retirement, disability, and survivors’ benefits.

**SSDI:** “Social Security Disability Insurance” – Social Security benefit available to qualifying persons.

**SSI:** “Supplemental Security Income” – Federal monetary benefit available to qualifying persons.

**State SLS:** “State Supported Living Services” – Similar in services to the SLS Medicaid Waiver, except this is a State funded program for adults who are not eligible for Medicaid and who either can live independently with limited supports or who, if they need extensive support, are getting that support from other sources, such as their family.
**TCM:** “Targeted Case Management” – Services provided by a CCB that include facilitating enrollment; locating, coordinating, and monitoring needed developmental disability services; and coordinating with other non-developmental disability funded services.

**100.2:** Level of care assessment required for annual waiver program enrollment and eligibility. It is entered on the Benefits Utilization System.

Enriching lives. Strengthening communities.