Comments on OPWDD 2026-ADM-01, Contemporaneous Definition for Documenting Daily Service Notes and Monthly Summary Notes for HCBS

Comments Submitted – 8/24/2026
by
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On behalf of Cerebral Palsy Associations of New York State (CP State), a provider association representing more than 30 not-for-profit Affiliate agencies that provide essential support and services to over 100,000 New Yorkers with intellectual and developmental disabilities (I/DD) and their families for the past eighty years, we respectfully submit the following comments to the New York State Office for People With Developmental Disabilities (OPWDD) in response to 2026-ADM-01, Contemporaneous Definition for Documenting Daily Service Notes and Monthly Summary Notes for HCBS.

Our Affiliates have asked for a clear, working definition for "contemporaneous" documentation for years, and they are grateful to see OPWDD provide one. The specific time frames in Sections III(A) and III(B), two business days for daily service notes and end of the following month for monthly summaries, are a genuine improvement over the undefined standard that has driven inconsistent audit outcomes for similar documentation practices. CP State offers the comments below to help the final ADM provide additional clarity for efficient adoption and implementation in the field.

Address Instances When the Two-Day Window is Problematic

The two-business-day standard in Section III(A) is workable for most documentation, but it does not address several routine situations that providers cannot fully prevent through sound management alone. These include:

- Staffing shortages or emergencies which can occur in several scenarios: where a call-out pulls a staff member into direct coverage and documentation is delayed beyond two business days, where a staff member works unplanned overtime prior to paid time off extending beyond two-business days and it is unrealistic to expect documentation to be completed at the end of the unexpected extra shift or hours, and unexpected staff absences in which someone is unable to return to work in time to meet the billing standard due to an unforeseen circumstance;
- EHR or system outages, where the documentation platform itself is unavailable through no fault of the provider. Given the field's ongoing workforce shortage, an outage or staffing coverage crisis that runs longer than two-business-days is not a rare event for many disability service providers;
- Natural disasters or extreme weather events, and declared states of emergency; and
- Delays tied to the supervisory review process itself, where a program requires supervisory review and sign-off as a condition of a note being considered complete, and that review, rather than the staff member's original entry, is what pushes completion past the standard window.

CP State asks OPWDD to add a narrow exception or flexibility for these circumstances, built on the same framework Section IV already establishes for amendments. That is, when a documented staffing issue, system outage, or emergency prevents completion within the standard window, the entry may be completed once the emergency or outage is resolved, provided the entry identifies the reason for delay, the date and time of the underlying service,

and the date and time of actual completion. These are the same identifying details required by Section IV for corrections and would extend the "identifiable" and "permanently denoted" standard to cover delayed initial entries, not only later amendments.

Define "Business Day" for Services Delivered Seven Days a Week

Section III(A) lists examples of how the two-business-day standard should be calculated, and while helpful, there are services covered by this ADM, Residential Habilitation and Respite in particular, that are delivered on weekends and holidays. CP State asks OPWDD to confirm explicitly that "business day" refers to the provider's standard administrative business days, Monday through Friday, excluding holidays, regardless of the day the service was delivered. This should be applied uniformly across all services covered by this ADM whether a program is in operation seven days per week or traditional Monday through Friday administrative hours.

Clarify How the Standard Applies to Independent Support Brokers

Support Brokerage is among the services covered by this ADM, but support brokers are often independent of the agency responsible for billing and are not always subject to the agency's direct supervision or internal timelines. An agency may have limited ability to compel a support broker to complete documentation within the same two-business-day window that applies to its own employed staff. We would ask OPWDD to clarify how the contemporaneous standard is intended to apply in this context. Specifically, what obligation an agency has to ensure a support broker's timely completion, and what standard governs when a support broker's documentation is late for reasons outside the agency's control. Given the support broker billing cadence requires a monthly invoice, we ask that OPWDD hold support broker documentation to the monthly standard set forth in this ADM.

Confirm the Scope of this Definition

This ADM's stated purpose is limited to HCBS waiver documentation. On its face, the contemporaneous documentation standard described appears intended to apply to OPWDD-funded HCBS waiver documentation only. Many CP State Affiliates operate OPWDD programs, in addition to HCBS, Article 16 clinics and Intermediate Care Facilities for example, as well as programs certified or funded through other New York State agencies such as the Department of Health, the Office of Mental Health, the Office of Children and Family Services, and the State Education Department. CP State asks OPWDD to clarify whether this definition governs OPWDD HCBS waiver documentation only or if this standard will be adopted for all OPWDD programs and by other state agencies. If it hasn't already, we ask that OPWDD coordinate with those other agencies towards a uniform standard for providers operating across multiple programs.

Provide a 60-Day Implementation Period and Confirm Prospective Application

Finally, CP State asks that the final ADM include a defined implementation period of at least 60 days from the date of issuance before the standard takes effect. Bringing documentation policies, EHR practices, staff training, and internal quality review procedures into alignment with a new

contemporaneous standard requires real time across a provider agency's workforce, and a set onboarding window will allow providers to implement thoughtfully.

CP State also asks OPWDD to state explicitly that this standard applies prospectively only, that is, to services delivered on or after the ADM's implementation date and will not be applied retroactively to documentation completed under prior, undefined contemporaneous practices.

We appreciate OPWDD's action to bring clarity to a term that has generated confusion and inconsistent audit outcomes for providers. We welcome any opportunity to discuss these comments further. Thank you for considering our input.