



Home and Community Based Settings (HCBS) Rules

Tribal Consultation
August 21, 2015



Agenda

- HCBS Rules Orientation
- Arizona's Systemic Assessment and Transition Plan
 - *EXAMPLE* Assisted Living Facility
- Public Comment Submissions

HCBS Rules

Intent of the HCBS Rules

- Purpose
 - Enhance the quality of HCBS
 - Provide protections to participants
 - Assure full access to benefits of community living
 - Receive services in the most integrated setting
 - Receive services to the same degree of access as individuals not receiving HCBS
- Scope
 - Licensed settings
 - Residential and Non-Residential

Settings that are not Home and Community Based

- A nursing facility
- An institution for mental disease
- An Intermediate Care Facility for individuals with intellectual disabilities
- A hospital
- Any other locations that have the qualities of a institutional setting, as determined by the Secretary

Assessed Settings

- Residential Setting:
 - Assisted Living Facilities (Home, Center, Adult Foster Care)
 - DDD Group Homes
 - DDD Adult & Child Developmental Homes
 - Behavioral Health Residential Facilities
- Non-Residential Settings
 - Adult Day Health
 - DDD Day Treatment and Training Programs
 - DDD Center - Based Employment Programs
 - DDD Group - Supported Employment Programs

Rules

1. The setting is integrated in and supports full access to the greater community, including opportunities to
 - a. seek employment and work in competitive integrated settings,
 - b. engage in community life,
 - c. control personal resources, and
 - d. receive services in the community to the same degree of access as individuals not receiving Medicaid HCB services.

Rules

2. The setting is selected by the individual from among setting options including
 - a. non-disability specific settings
 - b. an option for a private unit in a residential setting.
3. The setting options are identified and documented in the person-centered service plan and are based on the individuals needs, preferences, and, for residential settings, resources available for room and board.
4. Ensures individual rights of privacy, dignity and respect, and freedom from coercion and restraint

Rules

5. Optimizes , but does not regiment, individual initiative, autonomy and independence in making life choices including but not limited to, daily activities, physical environment, and with whom to interact
6. Facilitates individual choice regarding services and supports and who provides them.

Rules

7. In a provider-owned or controlled home and community-based residential settings, the following additional requirements must be met:
 - a. The individual has a lease or other legally enforceable agreement providing similar protections;
 - b. The individual has privacy in their sleeping or living unit including:
 - o Lockable doors by the individual with only appropriate staff having keys to the doors
 - o Individual sharing units have a choice of roommates in that setting
 - o Freedom to furnish or decorate the unit within the lease or agreement
 - c. The individual has freedom and support to control his/her own schedules and activities including access to food at any time
 - d. The individual can have visitors at any time; and
 - e. The setting is physically accessible.

Person-Centered Planning

Rights *may be* limited, on a case-by-case basis, if they jeopardize the health and safety of the member and/or others.

The following requirements must be documented in the person-centered plan:

- Identify a specific and individualized assessed need
- Document the positive interventions and supports used prior to any modifications to the person-centered plan
- Document less intrusive methods of meeting the need that have been tried but did not work
- Include clear description of the condition that is directly proportionate to the specific assessed need.

Person-Centered Planning

Continued...

- Include regular collection and review of data to measure the ongoing effectiveness of the modification
- Include established time limits for periodic reviews to determine if the modification is still necessary or can be terminated
- Include the informed consent of the individual
- Include an assurance that interventions and supports will cause no harm to the individual

Systemic Assessment and Transition Plan



Systemic Assessment

- Review and evaluation of standards and requirements for setting types
 - Arizona Revised Statutes
 - Arizona Administrative Code
 - AHCCCS and MCO Policy
 - AHCCCS Contracts with MCOs
 - MCO contracts with providers

Why a Systemic Assessment?

- All services are provided under the 1115 Waiver authority
- Licensing rules create uniform standards across settings
- Working knowledge and understanding of the operations for each setting type
- Important to assess the “system” and not just providers

Systemic Assessment - Process

- Assessed each specific rule requirement for each setting type
- Answered the question “What is culturally normative for individuals not receiving Medicaid HCBS?”
- Utilized exploratory questions provided by CMS

Systemic Assessment - Process

- Only captures what is outlined on paper
- The HCBS Rules may be implemented in practice
- Site specific assessments will be implemented as part of the Transition Plan
- Includes policies that are not specific to the setting type (i.e. role of the Case Manager)

Systemic Assessment - Findings

- **Compliant** – The minimum standards of the rule requirements have been met
- **Compliant with Recommendations** – The minimum standards of the rule have been met and, in addition, it was determined that a remediation strategy was in order to exceed the standards and meet the intent of the rule
- **Partial Compliance** – Some of the minimum standards of the rule requirements were met
- **Not Compliant** – The minimum standards of the rule requirements were not met

Systemic Assessment - Findings

Setting	Compliant	Compliant with Recommendations	Partial Compliance	Not Compliant	Totals
Residential Settings					
Assisted Living Facilities	5	3	6	1	15
Group Homes	5	5	5		15
Adult and Child Developmental Homes	6	4	5		15
Behavioral Health Residential Facilities					
Residential Total	16 (36%)	12 (26%)	16 (36%)	1 (2%)	45
Non-Residential Settings					
Adult Day Health Facilities	1		4	4	9
Day Treatment and Training Programs	2	2	4	1	9
Center-Based Employment Programs	2	1	4	2	9
Group-Supported Employment Programs	7	2			9
Non-Residential Total	12 (33%)	5 (14%)	12 (33%)	7 (20%)	36
Grand Totals	28 (35%)	17 (20%)	28 (35%)	8 (10%)	81

Tribal Member Residential Placement – June 2015

Setting	% of Tribal Members	% of Total Population
Own Home	75%	68%
Assisted Living Facility	2%	11%
Group Home	.1%	5%
Skilled Nursing Facility	23%	13%
Behavioral Health Residential	.1%	.2%

Assisted Living Facilities – What will be different?

- Employment services and supports
- External engagement in community life
 - Experiential learning opportunities
 - Access to transportation and/or transportation training
- Maximizing Independence and Choices
 - Flexibility of alternate schedules
 - Full access to all areas of the setting at any time
- Updates to the Facility Service Plan
- Customer satisfaction practices

Assisted Living Facilities – What will be different?

- Lockable doors (bedrooms and units)
- Freedom to furnish
- Choice in roommates
- Freedom to come and go at any time
 - Key to the front door
 - Key code to the front door
 - Other measures to allow people to come and go at any time
- Access to meals and snacks at any time
- Option to have visitors at any time

Public Comment Period (August 2015)

- Statewide public forums
- Public comment
 - Written correspondence (email or mail)
- Check the AHCCCS website regularly for updates

www.azahcccs.gov/HCBS

www.azahcccs.gov/HCBS

The screenshot shows a web browser window displaying the AHCCCS website. The browser's address bar shows the URL <http://www.azahcccs.gov/hcbs/>. The website's navigation menu includes links for Applicants, Members, American Indians, Plans/Providers, Community Partners, Oversight/Reporting, and OIG/Report Fraud. The main header features the AHCCCS logo and the AZ.GOV logo. Below the header, a yellow banner reads "Reaching across Arizona to provide comprehensive, quality health care for those in need." The main content area is titled "CMS HCBS Rule" and includes an "Overview" section. The overview text states: "On January 16, 2014, the Centers for Medicare and Medicaid Services (CMS) released [final rule regarding requirements for home and community based services \(HCBS\) operated under section 1915 of the Social Security Act](#) [PDF]. The rules establish requirements for both residential and non-residential settings. The purpose of the rule is to ensure that individuals receiving HCBS are integrated into their communities and have full access to the benefits of community living. The rule does not address services that are provided in a member's home such as attendant care, personal care, homemaker and habilitation services." Below this, it states: "CMS is requiring compliance for all State Long Term Care home and community based settings including programs operated under section 1115 of the Act. Arizona operates its Medicaid program under an 1115 Waiver authority. To that end, AHCCCS has established a plan to comply with the rule on a timeline consistent with its 1115 Waiver renewal submission (effective October 2016)." The text continues: "In Arizona, these requirements impact Arizona Long Term Care Services (ALTCS) program members receiving services in the following settings:" followed by a bulleted list:

- Residential
 - Assisted Living Facilities
 - Group Homes
 - Adult and Child Development Homes
 - Behavioral Health Residential Facilities
- Non-Residential
 - Adult Day Health Programs
 - Day Treatment and Training Programs
 - Center-Based Employment Programs
 - Group-Supported Employment Program

The left sidebar contains sections for "News & Updates", "Most Popular", and "Active Topics". The right sidebar contains sections for "About", "Resources", and "Español".

Sample Assessment

Residential Setting Type - Assisted Living Facilities [Read-Only] - Microsoft ...

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Assisted Living Facilities - Assessment

Rule	Considerations	Evidence	Compliance Level	Remediation Strategies
1. The setting is integrated in and supports full access to the greater community, including opportunities to:	<ul style="list-style-type: none"> The setting is located around private residences and businesses Individuals interact with and/or have relationships with persons not receiving Medicaid services (i.e. neighbors, friends, family, etc.) 	<p>AHCCCS Medical Policy Manual</p> <ul style="list-style-type: none"> Members are supported to live in the most integrated setting appropriate for their needs including the option to live in their own home [Chapter 1200 Overview] <p>AHCCCS Contractor Operations Manual</p> <ul style="list-style-type: none"> Assisted Living Homes and Adult Foster Care Homes are located in neighborhoods. ALTCS Contractors are required to develop and maintain a sufficient provider network. [Chapter 436] <p>Arizona Administrative Code</p> <ul style="list-style-type: none"> Assisted Living Centers are located within communities. Some Assisted Living Centers are co-located on the 	Compliant with Recommendations	<p>1) Incorporate language in the AHCCCS Medical Policy Manual (Section 1230-A) that outlines an Assisted Living Facility must be located in a neighborhood or located within a community near private residences and businesses. The language must stipulate facilities, co-located on the grounds of skilled nursing facilities, must be licensed and operate separate and apart from one another.</p> <p>2) Incorporate language AHCCCS Contractor Operations Manual (Chapter 436) that requires review of and compliance with this requirement in the annual Provider Network Development and Management Plan submission to AHCCCS.</p>

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Public Comment - Assessment

- Is the systemic assessment accurate?
 - Does it contain the appropriate references to statutes, rules, policies, contracts, etc.?
- Is the compliance level reflective of the evidence provided?
 - Compliant
 - Partial Compliance
 - Compliant with Recommendations
 - Not-Compliant
- What are some themes of compliance that may be implemented in practice and not reflected in the systemic assessment?

Sample Transition Plan

Residential Setting Type - Assisted Living Facilities - Microsoft Word

Table Tools: Design, Layout

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Assisted Living Facilities –Transition Plan					
#	Rule	Remediation Strategy	Lead Organization(s)	Target Date	Ongoing Monitoring
1	1. The setting is integrated in and supports full access to the greater community	1) Incorporate language in the AHCCCS Medical Policy Manual (Section 1230-A) and that outlines an Assisted Living Facility must be located in a neighborhood or located within a community near private residences and businesses. The language must stipulate facilities, co-located on the grounds of skilled nursing facilities, must be licensed and operate separate and apart from one another. 2) Incorporate language AHCCCS Contractor Operations Manual (Chapter 436) that requires review of and compliance with this requirement in the annual Provider Network Development and Management Plan submission to AHCCCS.	AHCCCS	September 2018 (Year2)	AHCCCS monitoring of MCO (annually)
2	1a. Seek employment and work in competitive integrated settings,	Create an employment services section in the AHCCCS Medical Policy Manual (Chapter 1200) to include an array of employment support services including options to support	AHCCCS	September 2018 (Year 2)	AHCCCS monitoring of MCO (annually)

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Public Comment

Transition Plan - Setting Type

- What entity does AHCCCS work with to ensure compliance for facilities on the reservation?
 - Owned and operated by Tribal Members (*Not Licensed*)
 - Owned and operated by Non-Tribal Members (*Surveyed*)
- Does the remediation strategy directly address the compliance issue?
- Is the timeline for the remediation strategy appropriate and realistic?
- Is the proposed monitoring method the most effective way to ensure ongoing compliance?

Thank You