

HCBS Final Settings Rule Self Assessment Tips and Tricks

February 21, 2023

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Agenda

- HCBS Final Settings Rule and State Transition Plan (STP)
- Process
- Expectations
- Helpful Hints and Tips
- Trends
- Questions & Answers

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The Final Settings Rule

- The Centers for Medicare and Medicaid Services (CMS) published a final rule for Medicaid Home and Community-Based Services (HCBS) effective March 14, 2014.
- The intent of the rule is to ensure people receiving services and supports through Medicaid HCBS programs have full access to the benefits of community living and are able to receive services in the most integrated setting.
- The rule supports enhanced quality in HCBS programs and adds protections for people receiving services.

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Final Settings Emphasis

The HCBS Final Settings Rule emphasizes:

- Person-centered planning;
- Conflict-free case management; and
- Provider-owned, controlled, and operated settings where HCBS are provided.

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Statewide Transition Plan (STP)

CMS required each state to create a Statewide Transition Plan (STP) reviewing policies, practices, and settings where HCBS are provided, including:

- Requirements for all settings;
- Additional requirements for provider-owned or operated residential settings;
- A plan explaining updates to policies and regulations;
- A plan to determine if service settings are meeting requirements; and
- A plan to remedy when settings do not meet requirements.

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Evaluated Settings for Nebraska Waivers

AD Waiver	DD Waivers	TBI Waiver
Assisted Living Facilities	Host Home/Shared Living	Assisted Living Facilities
Adult Day Health	Group Home	
Extra Childcare for Children with Disabilities	Centers for Developmental Disabilities (CDDs)	
Respite Settings	Adult Day Settings	
	Other Settings	
	Day Support (Workshop)	

DD Self-Assessment Process

- All new settings must be self-assessed by the DD agency provider with validation activities completed by DDD (Division of Developmental Disabilities) staff, as necessary.
 - Shared living settings must ensure that when a Shared Living Provider (SLP) changes addresses or selects a new agency provider, a new self-assessment is completed.
 - Settings selected for validation activities will be notified through a separate process.
- Self-Assessment Surveys are administered through Survey Monkey.
 - Paper copies of the surveys are available upon request.
 - Paper copies are only for reference and will not be accepted by DDD.

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DD Self-Assessment Links

Non-Residential Self-Assessment:

<https://www.surveymonkey.com/r/Non-ResidentialSelf-Assessments>

Residential Self-Assessment:

<https://www.surveymonkey.com/r/ResidentialSelfAssessments>

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Expectations – Timeline

- The Self-Assessment must be submitted 15 business days before opening.
- DDD Quality staff have 15 business days to review and email a notification letter.
- When the setting is found to be Fully Compliant, the agency can begin providing services upon receipt of their Fully Compliant letter from DDD.
- When the setting is found to be Partially Compliant, the agency is required to correct the identified issues and submit evidence of remediation to DDD.
 - Services may not begin until the setting is found to be “Fully Compliant.”

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Expectations – Initial Questions

- Address: Both the agency and setting addresses need to be listed.
 - It is important to list the name of the Shared Living Provider (SLP), so DDD can check Maximus affiliation.
 - Anytime an SLP moves to a different address, Maximus needs to be contacted to update their information, so the SLP is affiliated with the correct agency and setting address.
- The email of the contact person listed on the assessment will receive the response letter.

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Expectations – Federal Questions

- Answers to federal questions must include comments describing the evidence of compliance.
- Federal questions refer to the setting, so responses should also consider the setting.
 - Question examples sometimes include specific information about participants as evidence of compliance.
 - The response should include how the home will accommodate individuals needs.
 - Agency policies and processes can also be listed in the response.
- When four or more responses need additional information, the assessment is considered incomplete and DDD will return it for re-entry.

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Helpful Hints and Tips

- Consider the intent of the entire question.
- Provide complete responses.
- Refer to the example section for ideas of what is being looked for in a response but refrain from copying and pasting.
- Rather than listing, “refer to policies and procedures,” or “there is a policy,” state briefly how the policy/procedure addresses the question.
- Survey Monkey allows the ability to record and save responses and come back to complete.

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Most Common Questions Requiring Remediation

- 1.7 Public transportation.
- 3.4 Anonymous complaint process.
- 3.7 Personal care needs.
- 3.10 Individual/guardian informed consent.
- 4.4 Activities alone in community.
- 6.1 Lease/residency agreement.
- 7.2 Allowing married couples to share same room.
- 7.4 Locking bedroom doors.

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Questions?

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View the State Transition Plan webpage:

<https://dhhs.ne.gov/Pages/HCBS-Statewide-Transition-Plan.aspx>



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