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Jim Pillen, Governor

HCBS Final Settings Rule

State Transition Plan Heightened Scrutiny Reviews

Provider: Skyview Villa

Date of Compliance: February 7, 2025

Service: Assisted Living

Address: 210 Harris Drive, Norfolk, NE 68701

Prong #1: Settings in a publicly or privately-operated facility providing inpatient institutional treatment.

HCBS Heightened Scrutiny Evidence Worksheet

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Jim Pillen, Governor

HCBS Heightened Scrutiny Evidence Worksheet

You are being asked to provide a package of evidence demonstrating how your facility meets the Medicaid Waiver Home and Community-Based Services (HCBS) settings requirements. Please provide the information requested below. Include any relevant information that supports or demonstrates that your facility is a true HCBS setting, in keeping with the intent of person-centeredness, independence and choice.

Please do NOT include any personally identifiable or protected information, including any photos of facility residents. Any attached documents should have personally identifiable and protected information redacted (e.g. blacked out) prior to submission.

Provider Name: St. Joseph's Rehab ^{Skyview Villa Assisted Living} Date of Submission: 12-18-2024

Provider Address: 210 Harris Dr., Norfolk, NE 68701

Capacity of Site: 20 Number of HCBS Waiver individuals at the site: 6

(Capacity amounts will not be published publicly on the "Heightened Scrutiny" spreadsheet.)

Type of institutional facility this setting is co-located in: (Check any that apply)

- Nursing home
- Hospital

I attest the following answers are true and provided to the best of my ability. I further attest that it is my plan to meet the criteria for continued certification as a Medicaid Waiver HCBS setting, prior to [date].

I give permission for DHHS to share my information with my statewide association, so they can assist and support my efforts to meet the HCBS criteria (check as many as apply):

- LeadingAge
- Nebraska Health Care Association

Provider Signature Blake Miller

Provider Printed Name Blake Miller Date 12-18-2024

Q1 – Physical Location

1. Describe the physical location of the site: (Include a description of the physical characteristics of where the site is located including zoning, proximity to neighbors and community services, etc.)

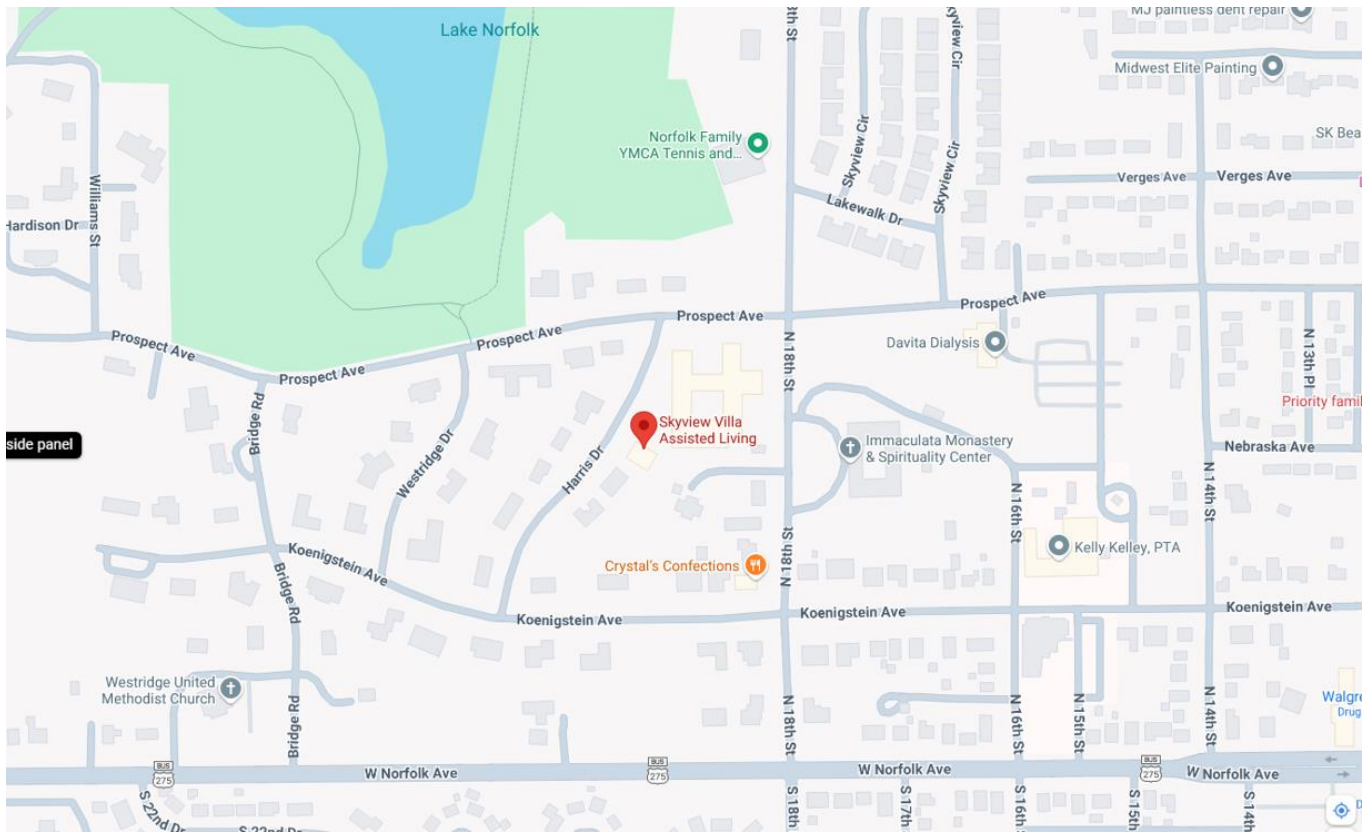
The facility is located in a nice, quiet neighborhood. It is attached to the skilled nursing facility St. Joseph's Rehabilitation and Care Center. It rests on a hill above the SNF. It is a short drive to the hospital, shopping center, multiple churches and other healthcare providers. There is also a chapel in the SNF which assisted living residents are free to use. There are houses located next to and across the street from the facility. There is a monastery across the street as well.











Q2. Community Access

2. Describe how the setting supports consumers in accessing community activities and locations, including the frequency and nature of community activities accessed by consumers residing in the site: (Include a description of how often consumers are engaging in activities or using services outside the site. Where are consumers going and for what purpose? (e.g., employment, recreation, medical care, grocery shopping (IADLs), etc.) Are the activities individual, small group, or include all consumers residing in this setting? Are consumers involved in or encouraged to choose the activities, including where, when, and with whom an activity occurs? Are consumers encouraged to work or seek day service activities outside of the site? Do consumers have customized personal schedules that reflect their preferences and opportunities for community access?)

The facility is located within 1-2 miles of shopping centers, restaurants, medical centers and churches.

Residents are encouraged to use these services for activities.



Residents are invited to all SNF activities and ~~functions~~ functions including church services and holiday parties.

Residents also have ALF only activities such as card games, board games, etc. There is a large

collection of books that residents can read at their leisure.

Residents are given the choice to choose the activities they participate in. They can customize their personal schedules as well.

2. Evidence – Activities Calendar

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
<h1>January 2025</h1> <p>St. Joseph's Rehabilitation & Care Center & Skyview Villa Activity Calendar</p>			<p>1 New Year's Day </p>	<p>2 10:30 Exercises 1:30 Christ Lutheran Service 2:30 Bird Bingo </p>	<p>3 9:30 Rosary & Mass 10:30 1:1 Bingo Visits 2:30 Jeopardy</p>	<p>4 6:00 Lawrence Welk: Channel 19</p>
<p>5 9:30 Rosary & Mass 1:30 Pitch Card Game</p>	<p>6 9:45 First Christian Service 10:45 Pampered Nails 3:30 Piano Music with Bill </p>	<p>7 10:30 Exercises 11:00 Bible Study 1:30 Catholic Communion Service 2:30 Bingo</p>	<p>8 10:30 Coffee & Donuts 11:00 Resident Council 2:00 Craft with Gracefully Giving Back <i>Elvis's B-Day!</i></p>	<p>9 10:30 Exercises 1:15 St. John's Bible Study & Communion 2:30 Elvis Bingo </p>	<p>10 9:30 Rosary & Mass 10:30 1:1 Bingo Visits 2:30 Happy Hour with Elvis Request</p>	<p>11 6:00 Lawrence Welk: Channel 19</p>
<p>12 9:30 Rosary & Mass</p>	<p>13 9:45 First Christian Service 10:45 Kings in the Corner 2:30 Poker Run</p>	<p>14 10:30 Exercises 11:00 Bible Study 1:30 Catholic Communion Service 2:30 Bingo <i>National Hat Day - Wear your best hat!</i></p>	<p>15 10:30 Dominoes 2:30 Yahtzee </p>	<p>16 10:30 Exercises 11:00 Methodist Service 2:30 Pokeno</p>	<p>17 9:30 Rosary & Mass 10:30 1:1 Bingo Visits 2:00 Music by Dan Reding</p>	<p>18 9:30 Pet Visits 6:00 Lawrence Welk: Channel 19</p>
<p>19 9:30 Rosary & Mass <i>Actully Professionals Week</i></p>	<p>20 9:45 First Christian Service 10:45 Pampered Nails 2:30 Horse Races </p>	<p>21 10:30 Exercises 11:00 Bible Study 1:30 Catholic Communion Service 2:30 Frost Bingo</p>	<p>22 10:30 "Golf" Card Game 2:30 Auction!! </p>	<p>23 10:30 Exercises 2:30 Bingo 3:15 Pie Social <i>National Pie Day!</i></p>	<p>24 9:30 Rosary & Mass 10:30 1:1 Bingo Visits 2:30 "Happy Days" TV Show 3:00 Popcorn Delivery</p>	<p>25 2:30 "5 Card" Bingo 6:00 Lawrence Welk: Channel 19 </p>
<p>26 9:30 Rosary & Mass <i>Australia Day (Observed)</i></p>	<p>27 9:45 First Christian Service 10:30 "Golf" Card Game 6:45 Bonus Bingo Night <i>Martin Luther King Jr. Day</i></p>	<p>28 10:30 Exercises 11:00 Bible Study 1:30 Catholic Communion Service 2:30 Music Just for Fun with Root Beer Floats!</p>	<p>29 10:30 "Suit Up" Card Game 2:30 Chinese New Year Bingo <i>Chinese New Year (Year of the Snake)</i></p>	<p>30 10:30 Exercises 2:30 Roll & Bowl Dice Game</p>	<p>31 9:30 Rosary & Mass 10:30 1:1 Bingo Visits 2:30 January Birthday Party! </p>	

All activities are subject to change. Please watch & listen for any changes. For questions, contact Robin in Activities!

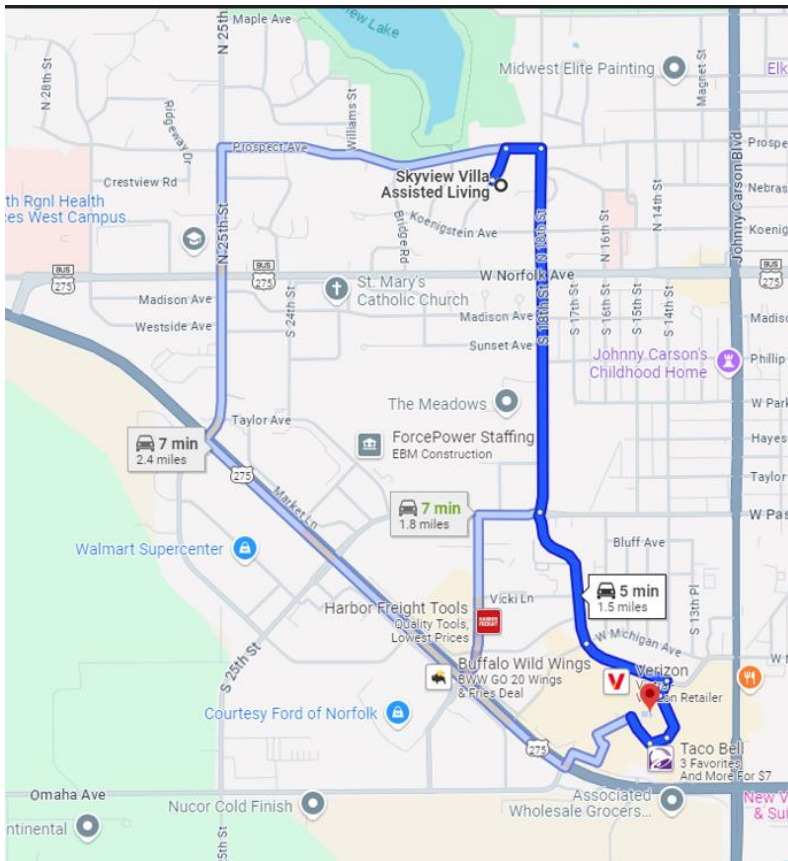
Q3. Transportation Source and Utilization

3. Describe the typical source and utilization of transportation by the residents of the site: *(Include a description of accessible public transportation specific to the site's location such as bus lines, taxi, Uber etc. Describe how consumers in the site typically get to and from community locations. What is the typical length and nature of commute for consumers residing in the site to get to work or day services, and is this consistent with the experience of members of the local community?)*

The facility provides transportation to resident appointments.
There are also transportation services provided by the community called North Folk Area Transit.
Residents can also utilize taxi, uber or family members for transport. This is consistent with the experience of members of the community.

3. Evidence – Area Maps

Route to Shopping Center



Q4 – Staff Training

4. Describe qualifications and training for the nursing home, hospital and assisted living staff related to the requirements of HCBS and philosophies of community-based living: (Describe your policies related to staff qualifications and training relevant to HCBS- this may include Person-Centered Thinking and practices. Provide information related to the resources or efforts to support person-centered practices and HCBS concepts.)

Each staff member is required to have an ^{active} med aide license.

Staff members are trained on passing meds, providing bathing services, and dining room service.

Staff are trained to make it a person-centered environment where residents can make their own choices.

Job Title: Medication Aide (Tech)

Classification: Non-Exempt (Hourly)

Reports to: Wellness Director

- Observe residents for changes in condition or behavior and promptly report changes to the appropriate licensed nursing personnel, Supervisor, or appropriate medical personnel.
- Perform first aid and initiates emergency response procedures as required.
- Follows and supports community fire safety and infection control practices and promptly reports any unsafe conditions or equipment to immediate supervisor.
- Greets residents, visitors, and staff courteously and answers phones when assigned.
- Attends and participates in required training, in-services, staff meetings and online training.
- Performs other related duties and responsibilities as reasonably assigned by the Supervisor or Executive Director.

Supervisory Responsibility

- None

Work Environment

- Works in office area(s) as well as throughout the community/facility
- Moves intermittently during working hours.
- Is subject to frequent interruptions.
- Is involved with residents, personnel, visitors, government agencies/personnel, etc., under all conditions and circumstances.
- Is subject to hostile and emotionally upset residents, family members, personnel, and visitors.
- Is involved in community/civic health matters/projects as appropriate.
- Is subject to injury from falls, burns from equipment, odors, etc., throughout the work day, as well as to reactions from dust, disinfectants, tobacco smoke, and other air contaminants.
- Is subject to exposure to infectious waste, diseases, conditions, etc., including TB and the AIDS and Hepatitis viruses.
- May be subject to the handling of and exposure to hazardous chemicals.

Physical Demands and Sensory Requirements

(With or Without the Aid of Mechanical Devices)

- Must be able to move frequently throughout the workday.
- Must be able to cope with the mental and emotional stress of the position.
- Must be able to see and hear or use prosthetics that will enable the senses to function adequately to ensure that the requirements of this position can be fully met (e.g.: accurately read measurements on resident related equipment such as thermometers, monitors, gauges).
- Must be able to function independently, have personal integrity, flexibility and the ability to work effectively with residents, employees, visitors and support agencies.
- Must be in a good general health and demonstrate emotional stability.
- Must be able to relate and work with the disabled, ill, elderly, emotionally upset and at times, hostile people within the facility.
- Must be able to lift, push, pull and move a minimum of 50 pounds.
- Must be able to assist with the evacuation of residents.

Specific Requirements

- Ability to communicate with residents and nursing staff.

Job Title: Medication Aide (Tech)
Classification: Non-Exempt (Hourly)
Reports to: Wellness Director

Skyview Villa Assisted Living

Position Summary

The primary purpose of the Medication Aide job position is to administer or assist with the administration of prescribed medications to residents and to maintain related medical records in accordance with current federal, state, and local standards, guidelines, and regulations governing our facility, and as may be directed by the Wellness Director, to assure that our facility is maintained in a safe and comfortable manner.

Essential Duties and Responsibilities

- Ensure the CAPLICO Core Values and Code of Conduct are adhered to at all times.
- Ensure compliance with Resident Rights and HIPAA policies at all times.
- Ensure that all medication administration procedures are followed in accordance with established policies.
- Assume the authority, responsibility and accountability of Medication Aide.
- Administers prescribed medications and treatments as defined by state regulations in accordance with company policy and procedure.
- Verifies identity of resident receiving medication and records name of drug, dosage, and time of administration on resident's chart.
- Presents medication to resident and observes ingestion or other application, or administers medication.
- Takes vital signs or observes resident to detect response to specified types of medications and prepares report or notifies designated personnel of unexpected reactions.
- Reports to Wellness Director and documents reasons prescribed drugs are not administered.
- Receives supply of ordered medications for administration to residents.
- Records and restocks medication inventories.
- Counts narcotics at the beginning and end of shift and records on appropriate forms. Notifies Wellness Director immediately of any discrepancies.
- Assists Caregivers during meal times with tray passing, picking up trays and feeding as applicable.
- Responds to call lights in a timely manner.
- Monitors for effectiveness of PRN medications and reports and documents outcomes to the Wellness Director.
- Attend to the needs of residents, which includes assistance with activities of daily living (i.e. personal hygiene and grooming, feeding and ambulation, medical monitoring, and other health care related tasks) within the confines of state regulations.
- Ensure resident safety and maintain a safe environment.
- Promote self-help and independence by encourage residents to maintain or attain the highest physical, mental and psychosocial well-being.

Job Title: Medication Aide (Tech)
Classification: Non-Exempt (Hourly)
Reports to: Wellness Director

- Ability to read and write English.
- Possess the ability to make independent decisions when circumstances warrant such action.
- Possess the ability to deal tactfully with personnel, residents, visitors, and the general public based on whatever maturity level they are currently functioning.
- Ability to be calm and level-headed in emergencies.
- Well groomed, professional and possess ability to work harmoniously with other personnel.
- Ability to seek out new methods and principles and be willing to incorporate them into existing admission practices.
- Follows written and oral instructions.
- Knowledgeable in the use of computers, e-mail, spreadsheets and document word processing.
- Maintain patience, tact, cheerful disposition and enthusiasm, as well as ability to handle residents, staff, and visitors, based on whatever maturity level they are currently functioning.

Education and Experience Requirements

- Must possess, as a minimum, a High School Diploma or Equivalent.
- Must have current CPR/First Aid certifications.
- Must have current, RN approved, Medication Administration Delegation as required by state regulation.
- Completion of state approved Caregiver program as required by state of residence.
- Completion of state approved Medication Aide program as require by state of residence.

Acknowledgement

The above statements are intended to describe the general nature and level of work performed by employees assigned to this classification. They are not intended to be construed as an exhaustive list of all job duties and responsibilities performed by the employees so classified. Management reserves the right to revise or amend responsibilities and duties at any time.

I have read this job description and fully understand the requirements set forth therein. I hereby accept the position of Medication Aide (Med Tech) and agree to perform the identified essential functions in a safe manner and in accordance with the facility's established procedures. I understand that as a result of my employment, I may be exposed to blood, body fluids, infectious diseases, air contaminants (including tobacco smoke), and hazardous chemicals and that the facility will provide to me instructions on how to prevent and control such exposures.

I further understand that my employment is at-will and thereby understand that my employment may be terminated at-will either by the facility or myself, and that such termination can be made with or without notice.

Date

Signature—Medication Aide (Med Tech)

Date

Signature—Wellness Director/Coordinator

Q5 – Interconnectedness

5. Describe the interconnectedness of your site and the institutional facility: (Including administrative and financial.)

The assisted living and SNF are connected. There is an elevator/stairs connecting the two.

The SNF + ALF have shared services like admissions, coordinating/marketing, activities, social services, ~~and~~ administration and human resources.

Q6 – Staffing

6. Describe to what extent are any of the institutional facility staff assigned to this setting: (Including any limited basis to support or back up assignments.)

The SNF staff who work at the ACF also include:

Administrator

Clinical Resources

Human Resources

Marketing

Admissions Coordinator

Activities

Social Services.

Evidence – Provider Setting Final Rule Checklist-Assisted Living Facility

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Jim Pillen, Governor

Provider Setting Final Rule Checklist-Assisted Living Facility

ONSITE VISIT INFORMATION

Assisted Living name: Ravenscroft Healthcare, L.L.C.

Resource Developer: Jennifer DeWalt

Onsite Visit Date: February 26, 2025

POLICY REVIEW

	YES	NO	DESCRIBE EVIDENCE	
1. Are the individuals able to independently enter and leave the building at any time? <i>Guidance: Are any doors locked that prevent entry/exit, are there any rules in place that limit hours/time residents can leave?</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	per Blake Miller, Administrator	
2. Are the individuals able to choose to come and go without a required scheduled return? <i>Guidance: Is there a curfew?</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	↓	
3. Are the individuals able to have visitors at a time of their choosing? <i>Guidance: Can visitors be there any time of day, early/late as long as it's not infringing on the rights and safety of other residents in the facility?</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
4. Are visitors allowed to stay overnight without restrictions? <i>Guidance: Does the ALF have restrictions on visitors? Can visitors stay overnight in the individuals apartments?</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
5. Do the individuals have a choice in where they sit in the dining room? <i>Guidance: Can the individuals choose where and who they sit with? Is there a seating chart?</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
6. Are individuals able to eat privately, if they choose? <i>Guidance: Can individuals eat alone or at different times than others?</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
7. Are the individuals able to choose their own provider? <i>Guidance: Can individuals choose their own hairdresser or physician? Do they have to use providers the ALF provides?</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
8. Do the individuals choose their wake/sleep times? <i>Guidance: Are individuals required to get up at a certain time/or go to bed at a certain time?</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		per Blake Miller, Administrator

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9.	Do the individuals choose their bath times and frequency? <i>Guidance: Can individuals bathe when and how often as they would like?</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	per Blake Miller, Administrator
10.	Does the assisted living follow the HCBS policy which provides for multiple occupancy only on an exceptional basis? <i>Guidance: Are individuals allowed to share a room with a person of that residents choosing, upon consent of that person?</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	↓
11.	If the individual would like to work, is there activity that ensures that the option is pursued? <i>Guidance: Are individuals encouraged to work in the community if they desire to do so?</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	per Blake Miller, Administrator

OBSERVATION REVIEW		YES	NO	DESCRIBE EVIDENCE
1.	No gates, Velcro strips, locked doors, or other barriers are preventing individuals' entrance to or exit from certain areas of the setting? <i>Guidance: The common areas of the assisted living facility are accessible to all individuals. The only locked doors are rooms such as the nurse's station, mechanical closet, etc.</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	per observation during ALF tour
2.	Are appliances accessible to individuals and are they able to use them? <i>Guidance: Refrigerator/microwave available in room or easily accessible? Are there any restrictions on usage?</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	↓
3.	Are tables and chairs at a convenient height and location so that individuals can access and use the furniture comfortably? <i>Guidance: The height of appliances, tables and chairs are at appropriate heights so all individuals can easily access and use them.</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	per observation during ALF tour
4.	Do staff protect information about the individuals' care by not posting their information and/or discussing their services in public? <i>Guidance: Identifying information is not posted in public areas; private and health matters are discussed in a confidential manner.</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	per Blake Miller, Administrator
5.	Are the individuals' privacy protected during medication distribution? <i>Guidance: All information is kept private, names are not used if distributing medications in common areas with others around (such as at mealtimes).</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	↓
6.	Do individuals have a means of private conversation, including the use of a facility phone or computer in a private area, for those without their own means of communication? <i>Guidance: There is privacy in written communication, including sending and receiving mail and email. There is a telephone with auxiliary aides where calls can be made without being overheard.</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	per Blake Miller, Administrator
7.	Are individuals' nails trimmed and clean? <i>Guidance: Are there any concerns with the individual's hygiene?</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	per observation during ALF tour

8.	Does the setting provide opportunities for regular, meaningful activities in integrated community settings for the period of time desired by the participant? <i>Guidance: What are the regular activities and how are activities planned?</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	per Blake Miller, Administrator
9.	Are individuals dressed in clothes that fit, are clean, and are appropriate for the time of day, weather, and preferences? <i>Guidance: Was the individual the key decision maker with their attire?</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	per observation during ALF tour
10.	Do the individuals have access to materials to learn of activities in the community? <i>Guidance: Community activities are posted on bulletin boards, calendar of activities in monthly newsletter, access to newspaper, internet access, etc.</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	per observation during ALF tour
11.	Do staff converse with individuals in the setting while aiding and during the regular course of daily activities? <i>Guidance: Does staff engage in meaningful conversations with the individuals?</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	per Blake Miller, Administrator
12.	Does staff address individuals in a manner in which the person would like to be addressed as opposed to routinely addressing individuals as "hon" or "sweetie"? <i>Guidance: Staff interact with individuals in a respectful manner and call them by their preferred/chosen name.</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	↓
13.	Does the participant have full access to the common areas of the ALF? <i>Guidance: All common areas should be physically accessible to all participants. If there are common areas not physically accessible to the participant, and the participant wishes to access these areas, accommodations must be made for access</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	per Blake Miller, Administrator
14.	Are bus and other transportation schedules and telephone numbers posted in a convenient location (where applicable)? <i>Guidance: Public transportation contact numbers and schedules in the area should be posted in a common area. Rural communities might not have public transport, so transportation should be available in other ways.</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	per observation during ALF tour
15.	Is information about filing a complaint posted in an obvious location and in an understandable format? <i>Guidance: Information is posted or given to residents when moving in/annually.</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	↓
16.	Do the individuals in the setting have different haircut/hairstyle and hair color? <i>Guidance: Individuals choose their hairstyle/color, as well as where to have this done. They are not limited to an in-house stylist.</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	per observation during ALF tour
17.	Does the individual converse with others during meal times? <i>Guidance: If individuals want to engage with others during mealtimes, they feel comfortable and free to do so.</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	per Blake Miller, Administrator
18.	Does the dining area afford dignity to the diners and are individuals not required to wear bibs or use disposable cutlery, plates, and cups? <i>Guidance: Dignity is afforded to residents in the dining room. Food is presented on reusable dinnerware.</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	per Blake Miller, Administrator

19.	Are the individuals able to furnish and decorate their apartments as they choose? <i>Guidance: Individuals have personal possessions, including furniture, and decorate their apartment as desired.</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	per Blake Miller, Administrator
20.	Are the apartment doors lockable by the individual? <i>Guidance: Individuals have a key to their apartment and are able to use the key to lock and unlock their room freely.</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	↓
21.	Are apartments for Medicaid individuals distributed throughout the assisted living? <i>Guidance: Are waiver participants integrated within the rest of the individuals residential areas?</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	per Blake Miller, Administrator

Comments

AD Waiver initial certification site visit
 February 26, 2025 8:30AM - 9:30AM

This ALF is attached to a NF; doors between ALF and NF are kept closed.

There are 3 AD Waiver residents in this ALF; 1 of these was interviewed today.

Resource Developer Signature: *J. Stewart* Date: 2-26-2025
 Provider Signature: *Blake Miller* Date: 2-26-2025

Compliance Letter

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Jim Pillen, Governor

February 7, 2025

Bryan Meagher
Skyview Villa Assisted Living
210 Harris Dr
Norfolk, NE 68701

Greetings,

Thank you for submitting your Heightened Scrutiny Evidence Worksheet for review as part of the Home and Community-Based Services (HCBS) Final Settings Rule. We appreciate the effort and detail you have provided in your submission. Upon reviewing your evidence, we have assessed the compliance of your settings with the HCBS Final Settings Rule. Below is a summary of our findings and recommendations, after review of the three prongs of the heightened scrutiny process:

Summary of Findings

Prong 1: Location in a Building Providing Inpatient Institutional Treatment

- o Evidence Provided: The documentation provided by Skyview Villa indicates the Assisted Living Facility exists in a building connected to a skilled nursing facility.
- o Assessment: The setting overcomes the institutional presumption, as it is located on a separate floor of the building from the inpatient institutional treatment area.

Recommendations

We commend your agency's commitment to ensuring that your Assisted Living Facility meets the requirements of the HCBS Final Settings Rule. Thank you for your cooperation and dedication to providing high-quality home and community-based services.

If you have any questions or need further clarification, please do not hesitate to reach out to our office. We are here to support you throughout this process and ensure successful compliance with the HCBS Final Settings Rule.

Thank you,

Wanda Kelley, DHHS Quality Assurance Coordinator
Developmental Disabilities & Home and Community-Based Services
Nebraska Department of Health and Human Services
wanda.kelley@nebraska.gov

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Non-Compliance Worksheet – NA, meets compliance requirements

Area of Non-Compliance	Information Needed for Compliance
Federal Requirement #1	
Provider Response:	
Federal Requirement #2	
Provider Response:	
Federal Requirement #3	
Provider Response:	
Federal Requirement #4	
Provider Response:	
Federal Requirement #5	
Provider Response:	
Federal Requirement #6	
Provider Response:	
Federal Requirement #7	
Provider Response:	
Federal Requirement #8	
Provider Response:	
Federal Requirement #9	
Provider Response:	
Federal Requirement #10	
Provider Response:	

CMS HCBS Final Rule: Federal Requirements for HCBS Settings

*Applies only to residential settings.

- **Federal Requirement #1:** The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.
- **Federal Requirement #2:** The setting is selected by the individual from among setting options including nondisability specific settings. The settings options are identified and documented in the person-centered plan and are based on the individual's needs, preferences, and resources.
- **Federal Requirement #3:** The setting ensures an individual's rights of privacy, dignity, and respect, and freedom from coercion and restraint.
- **Federal Requirement #4:** The setting 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.
- **Federal Requirement #5:** The setting facilitates individual choice regarding services and supports, and who provides them.
- ***Federal Requirement #6:** The setting provides for a legally enforceable agreement between the provider and the consumer that allows the consumer to own, rent, or occupy, the residence and provides protection against eviction.
- ***Federal Requirement #7:** The setting provides for privacy in units including lockable doors, choice of roommates/housemates, and freedom to furnish and decorate the sleeping or living units within the lease or other agreement.
- ***Federal Requirement #8:** The setting provides options for individuals to control their own schedules including access to food at any time.
- ***Federal Requirement #9:** The setting provides individuals the freedom to have visitors at any time.
- ***Federal Requirement #10:** The setting is physically accessible.