Indiana Family and Social Services Administration

Long Term Care Transformation Provider Controlled Congregate Settings

December 4, 2017





Agenda Overview

- Welcome and Meeting Purpose
- Introductions
- LTC Transformation Goals and Priorities
- Supported Services in Provider-Owned Congregate Settings
- Wrap-Up and Next Steps



Definitions

- Provider owned or controlled settings housing
 Setting Housing that is not owned, co-owned, operated or managed by the participant, or a relative of the participant
- Provider owned or controlled residential settings housing
 Setting Housing that is not owned, co-owned, operated or
 managed by the participant, or a relative of the participant,
 in which the participant lives and receive services

Room and Board



- Provision of:
 - Two meals per day Raw food costs equivalent to three meals a day and
 - Housing accommodations for rent or purchase, including costs of building maintenance, upkeep, and improvement
- Any Medicaid per diem does not include payment for room and board
- Providers must cover the minimum definition of room and board within the current maximum Federal Supplemental Security Income (SSI) after ensuring that the participants retain the PNA
- Participants are responsible for paying room and board directly to the provider
- Participants or their families may elect to pay more for a larger unit or other enhancements not covered under the minimum room and board definition



Supported Services

- Supported services are available in housing with services establishments
- Services can be offered or provided directly by the housing establishment or by another provider

Supported Services in Provider-Owned or Controlled Settings



Includes but not limited to:

- Health-related services
 - Attendant care services
 - Medication oversight as permitted under state law

Supported Services in Provider-Owned or Controlled Settings (cont.)



- Supportive services
 - Companion services
 - Homemaker services, including laundry and housekeeping services
 - Preparing, serving, and cleaning up after meals
 - 24-hour on-site response capability to meet unanticipated and unscheduled resident needs and to provide supervision, safety and security
 - Transportation for community activities that are therapeutic in nature or assist with maintaining network of supports in the community
 - Personal emergency response system
 - Participant-focused activities appropriate to the needs, preferences, age,
 and condition of the individual resident
 - Assistance with correspondence and bill-paying, if requested by the resident.

Supported Services in Provider-Owned or Controlled Settings



- Supported services in provider-owned or controlled settings provide a minimum of:
 - X times per week of housekeeping and laundry
 - X hours per week of supportive services
 - X hours per week of health-related services
 - X times per week of transportation for community activities under the basic monthly payment
- Participants' assessed need determines the additional payment provided for a higher intensity of supports
- Participants may elect to pay more for service enhancements not covered by Medicaid

Supported Services in Provider-Owned or Controlled Settings Supporting Individuals with Dementia or Cognitive Impairment



- An individualized evaluation of each individual's:
 - Past and current interests
 - Current abilities and skills
 - Emotional and social needs and patterns
 - Physical abilities and limitations
 - Adaptations necessary for the individual to participate
 - Identification of activities for behavioral interventions
- An individualized activity plan developed for each individual based on their activity evaluation that includes both structured and non-structured activities a minimum of three times within a 24-hour period, seven days per week



Supported Services in Provider-Owned or Controlled Settings Supporting Individuals with Dementia or Cognitive Impairment

Provide on a daily basis:

- Meaningful person directed activities that promote or help sustain the physical and emotional well-being of residents
- Offer opportunities for activities that accommodate variations in a resident's mood, energy and preferences





Provide on a daily basis:

- Opportunities for individuals to be outdoors, weather permitting, with appropriate and sufficient supervision
- Service modifications to meet the needs of the population such as:
 - Making appropriate activities available at different times of day based upon individual schedules and interests
 - Providing visual contrast between plates, eating utensils, and the table to maximize the independence of each resident
 - Providing adaptive eating utensils for those residents who have been evaluated as needing them to maintain their eating skills

Provider Certification

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Providers must provide copies of the following:

- Setting floor plan
- Corporate, partnership, and ownership structure;
- Staffing plan
- Documentation in support of compliance with fire prevention and building rule commission
- Documentation in support of compliance with state sanitary code certificates and permits
- Completed supported services in provider-owned, congregate setting selfsurvey

Providers must complete an on-site survey within 30 days to ensure compliance and assess experience of consumers

- An on-site survey will be required for each three year HCBS provider renewal process
- DA staff maintain the flexibility to waive the on-site requirement based on successful provider performance during the previous certification period

Provider Certification (cont.)

Provide a copy of the residency agreement that addresses eviction procedures and is consistent with or comparable to applicable State and local landlord tenant laws. The residency agreement must:

- Designate a specific physical place that is owned, rented or occupied by the individual receiving services
- Ensure the individual has all the same rights, responsibilities, and protections from eviction as tenants under the Indiana Residential landlord-tenant statute
- Provide the individual notice of an intent not to renew the residency agreement, other than in an emergency, in accordance with the following notification periods:
 - If residency agreement is a month to month agreement, the agreement must contain automatic renewal language and a 45-day written notice of an intent not to renew.
 - If residency agreement is for a time period longer than month to month, the provider must give the individual at least 60 days to review any renewal agreement and a 30-day written notice of an intent not to renew.
- Provide for a set rent payment for the duration of the residency agreement





Ensure units have:

- A minimum of 220 square feet of living space including closets, excluding the bathroom. Residential settings limited to serving four (4) or fewer participants are exempted from this requirement
- Privacy in sleeping or living unit

Provider Certification (cont.)

Ensure units have access to the following in accordance with the participant's person-centered service plan:

- A bedroom or sleeping area in the case of a studio apartment;
- A private bathroom with toilet, sink, and shower;
- A living area
- A kitchen area that contains
 - a refrigerator
 - a food preparation area
 - a sink
 - a microwave or stovetop for hot food preparation

Provider Certification (cont.)

- Ensure units have access to the following in accordance with the participant's person-centered service plan:
 - The ability to control the temperature of their living unit.
 - Residential settings with certification prior to the effective date of this rule may receive an exception to the requirement to have a sink in the kitchen area. All other environmental design specifications are required.
 - Residential settings limited to serving four (4) or fewer participants are exempt from this clause.
- Develop, implement, and disclose to potential and current residents its pet policy, if pets are permitted in the setting

Provider Requirements for Provider-Owned or Controlled Settings Supporting Individuals with Dementia or Cognitive Impairment



Implement policies and procedures to assess and reduce the risk of potential hazards in the physical environment related to the special characteristics of the population. These policies and procedures must include:

- An annual written statement describing in detail how the physical characteristics of the setting have been or will be modified to promote the safety of individuals
- Procedures for addressing unsafe behaviors such as wandering, and verbally or physically aggressive behavior
- Procedures governing the transition of individuals moving in or out of the setting

Provider Requirements for Provider-Owned or Controlled Settings Supporting Individuals with Dementia or Cognitive Impairment (cont.)



- Provide an orientation and training for staff that includes information on current standards of practice and care for dementia and cognitive impairments, including a basic overview of the disease process, communication skills, emergency and evacuation procedures specific to the population, and behavioral management.
 - All staff working in the setting must complete at least two hours of dementia-specific orientation
 - All managers and service coordinators must complete an additional two hours of training devoted to dementia-specific topics

Provider Requirements for Provider-Owned or Controlled Settings Supporting Individuals with Dementia or Cognitive Impairment (cont.)



- All direct care staff must complete an additional eight hours of training on the specialized needs of the population, which may include on-the-job shadowing of more experienced employees within the first five days of employment following orientation.
 Topics can include, but are not limited to:
 - Promoting resident dignity, independence, individuality, privacy and choice
 - Planning and facilitating appropriate activities
 - Creating a therapeutic environment
 - Reducing safety risks
 - Dealing with difficult behaviors
 - How to partner with families and the community

Provider Requirements for Provider-Owned or Controlled Settings Supporting Individuals with Dementia or Cognitive Impairment (cont.)



- Ongoing in-service education and training on dementia/cognitive impairment topics
 - All staff working in the setting must annually complete at least two hours of refresher training on dementia/cognitive impairment topics
 - All managers and service coordinators must annually complete an additional two hours of continuing education regarding dementia care
 - All direct care staff must annually complete an additional six hours of in-service education regarding dementia and other cognitive impairments

Next Steps and Wrap-Up



• Questions or Comments: Indiana-HCBS@Lewin.com

Happy Holidays!