

# Indiana Family and Social Services Administration

## HCBS Statewide Transition Plan



Division of Aging | Division of Disability and Rehabilitative Services | Division of Mental Health and Addiction | Office of Medicaid Policy and Planning

## IN FSSA Home and Community-Based Settings Statewide Transition Plan Newsletter

DECEMBER 2016

### Newsletter, Issue 5

The Indiana Family and Social Services Administration (FSSA) produces a Home and Community-Based Services (HCBS) newsletter on a quarterly basis. The newsletter's purpose is two-fold:

1. To provide a modest amount of background and some additional resources about the purpose of the HCBS Statewide Transition Plan (STP).
2. To provide updates on the development of the HCBS Statewide Transition Plan rollout and the individual milestones reached by the Division of Aging (DA), the Division of Mental Health and Addiction (DMHA) and Division of Disability and Rehabilitative Services (DDRS).

Please distribute this newsletter to your agencies, organizations, and networks.

### Overview of the HCBS STP key elements



### UPDATE: Statewide Transition Plan Receives Initial Approval

**In March of 2014**, the Centers for Medicare & Medicaid Services (CMS) established the HCBS Settings Final Rule, which set forth new requirements for several Medicaid authorities under which states may provide home and community-based long-term services and supports. The purpose of these regulations is to ensure that members receive Medicaid HCBS in settings that are integrated in and support full access to the greater community. This includes opportunities to seek employment and work in competitive and integrated settings, engage in community life, control personal resources and receive services in the community to the same degree as individuals who do not receive HCBS. CMS expects all states to review current HCBS programs and to develop a transition plan providing an assessment, strategies and timelines for compliance with the HCBS Settings Final Rule. The FSSA has created a Statewide Transition Plan (STP) to assess compliance with the HCBS Settings Final Rule and identify strategies and timelines for coming into compliance with the new rule as it relates to all FSSA HCBS programs. Indiana's initial STP was submitted to CMS for review and approval in December 2014. In October 2015, CMS responded to Indiana's STP with a request for supplemental information, noting the STP was not approved by CMS at that time. Through guidance from CMS, Indiana submitted a second version of the STP to CMS in April 2016 that incorporated Indiana's systemic assessment of rules, codes, policies and licensure requirements. In September 2016, FSSA submitted a third version of the STP incorporating site-specific assessment results for Indiana's HCBS programs. Per CMS guidance, Indiana submitted a fourth version of the STP with technical corrections in October 2016. CMS responded in November 2016 requesting additional revisions. A fifth version with technical corrections was submitted to CMS which received initial approval on November 8, 2016. The technical corrections versions did not require public comment, but are available online at <https://secure.in.gov/fssa/4917.htm>. Additionally, CMS requested further revisions to the site-specific assessments within Indiana's STP in order to receive final approval. Once revisions are complete, FSSA will give public notice and the sixth version of the STP will be posted for public comment prior to submission to CMS for final approval.

## FSSA Division Updates

### *Division of Aging (DA)*



The Division of Aging is pleased that Indiana has received initial approval of the systemic portion of the Statewide Transition Plan. The DA will continue to make updates to this document as the transition process continues. The focus now is on working with providers to bring DA's programs into compliance.

Updated information about the Settings Rule, the Statewide Transition Plan, and the transition timeline will be shared at a provider training scheduled for December 13 in the Indiana Government Center South Building. The DA is strongly encouraging all providers of assisted living, adult day and adult family care services to attend this training. The morning session will include updates on the state's efforts to come into compliance with the Settings Rule, an overview of the heightened scrutiny process and deadlines, and the remediation process. The afternoon session will include breakouts for each provider type, and allow providers to engage and ask questions specific to their service area. Location and registration information are as follows:

**Date:** Tuesday, December 13, 2016  
**Time:** 10 a.m. to 3:30 p.m. EDT (Sign in begins at 9:30 a.m.)  
**Location:** Conference Center - Auditorium  
Indiana Government Center South  
402 W. Washington Street, Indianapolis, IN 46204

Providers must register online at: <http://www.in.gov/fssa/5266.htm>

Letters will go out to all providers in early 2017 identifying their areas of operation that need to be remediated in order to come into compliance with the Rule.

As part of the transition process, the DA implemented a brief hiatus on the certification of new residential and adult day service providers for the Aged & Disabled (A&D) and Traumatic Brain Injury (TBI) waivers. The DA anticipates that this will last no longer than the end of February of 2017. The DA is using this time to re-write the waiver certification requirements in the Aging Rule, develop the templates and forms that we will need to support the remediation process for providers, and develop the staff capacity to support the remediation and certification processes.

Two collaborative workgroups have been formed by the DA, one each for Assisted Living and Adult Day Care. These groups consist of representatives of providers and their trade associations, case managers, and consumer advocates. These groups are working alongside the state to re-write the rules and regulations for provider certification. These new requirements will be the basis for certification of new providers and for the remediation activities for all existing providers.

## *Division of Mental Health and Addiction (DMHA)*

### **DMHA-Adult's Ongoing Outreach and Training for HCBS Providers**



The DMHA's Adult 1915(i) State Evaluation Team (SET) continues to assist providers of home and community-based services with implementation of the HCBS Statewide Transition Plan. An information session for provider agency CEOs and other involved staff was held on November 18, 2016 at Larue Carter Hospital in Indianapolis. The session focused on strategies that agencies can use to help their provider owned, controlled, or operated (POCO) residential settings become compliant with the requirements of the HCBS Settings Final Rule. DMHA shared many examples of policy statements and excerpts from leases/residency agreements which demonstrated compliance with the Final Rule. Strategies and examples for documenting modifications to any of the additional requirements for POCO residential settings were also presented. The presentation slides, as well as a narrated version of the

presentation, are available on multiple FSSA websites, including:

- [Adult Mental Health Habilitation](#)
- [Behavioral and Primary Healthcare Coordination](#)
- [FSSA Home and Community-Based Services Final Rule Statewide Transition Plan](#)

### **Site-Specific Assessments of POCO Settings**

Now that Indiana's Statewide Transition Plan has received initial approval from CMS, DMHA is focusing on site-specific assessments of POCO settings.

The number of POCO residential settings in Indiana continues to grow, as more settings are identified and assessed. As of November 30, 2016, 232 POCO residential settings have been identified statewide. DMHA is in the process of reviewing HCBS Setting Action Plans from those settings that require remediation to achieve full compliance with the HCBS Settings Final Rule, and has begun to provide feedback to provider agencies on the proposed remediation activities.

DMHA has assessed 188 identified POCO non-residential settings (these are provider-operated settings other than a member's residence where AMHH or BPHC services are or may be delivered - typically outpatient clinics, day service sites, office spaces, and so forth). With only a few exceptions, all of the identified POCO non-residential settings have been determined to be fully compliant with the HCBS Settings Final Rule requirements.

DMHA has completed on-site visits at 46 of 57 POCO settings (residential and non-residential) which were preliminarily designated "Potential Presumed Institutional". The remaining 11 sites will be visited before December 31, 2016. The purpose of the on-site visits was twofold: (1) to determine definitively whether the setting has qualities of an institution, and (2) to determine whether DMHA, in conjunction with the provider agency, will submit evidence to CMS for heightened scrutiny, to overcome the institutional presumption and have the setting deemed home and community-based. A summary of the results of the on-site visits is:

- POCO residential settings (42):
  - Settings determined to be NOT INSTITUTIONAL – 19
  - Settings determined to be PRESUMED INSTITUTIONAL – 12
  - Settings still to be assessed – 11

- POCO non-residential settings (15)
  - Settings determined to be NOT INSTITUTIONAL – 5
  - Settings determined to be PRESUMED INSTITUTIONAL – 10

DMHA plans to refer all of the settings that have so far been determined “Presumed Institutional” to CMS for review under the Heightened Scrutiny process, and is optimistic that each of the referred settings will ultimately be deemed home and community-based by CMS. DMHA will begin to compile evidence packets for those settings which will be referred for Heightened Scrutiny in January 2017.

Please continue to contact the DMHA Adult 1915(i) State Evaluation Team at [dmhaadulthcbs@fssa.in.gov](mailto:dmhaadulthcbs@fssa.in.gov) for all matters related to compliance with the CMS HCBS Settings Final Rule requirements.

## *Division of Disability and Rehabilitative Services (DDRS)*

### **Site-Specific Assessments**

DDRS continues with the assessment phase as outlined in the STP. All Non-Residential Day Service sites completed an online self-assessment in October. The self-assessment was designed to identify areas where a day service site is HCBS compliant as well as identify any gaps that would require modifications to become complaint. Waiver participants were not required to participate in the non-residential self-assessment.

In preparation for the assessment, DDRS hosted a webinar presented to all day service providers the second week of August. The recorded webinar can be located at [FSSA Webinars](#) titled *Non-Residential Self-Assessment HCBS Statewide Transition Plan*. There is also a Q&A, FAQ and resource document posted on the [Home and Community Based Services Final Rule Statewide Transition Plan](#) to supplement the webinar. A tutorial describing how to complete the non-residential self-assessment as well as a PDF version of the assessment have also been posted. In addition, two technical assistance webinars were conducted in September to assist providers in completion of the survey.

Since completion of the assessment, the results have been analyzed. The next step will be validating the responses. For some providers, this will consist of a documentation request. Once documentation has been reviewed, a final determination on compliance will be made. Site information will be verified, and in some cases an on-site visit will be scheduled to confirm the self-assessment responses.

DDRS will work with provider agencies to develop provider specific plans to ensure all sites become HCBS compliant by June of 2018. This timeframe is to provide necessary time and planning for providers to demonstrate compliance and ensure minimal interruption in service delivery to individuals being supported by an HCBS waiver service.

DDRS has also hosted Family Listening sessions throughout the state. These sessions allowed families an open forum to share their desired service needs for both the Community Integration and Habilitation (CIH) and Family Supports (FSW) waivers for input into any new HCBS services.

