Notice is hereby given that the Indiana Family and Social Services Administration will resubmit to the Centers for Medicare and Medicaid Services a revision to Version 9 of Indiana’s Statewide Transition Plan for compliance with the Home and Community-Based Services regulations of 42 CFR 441.301(c)(4)-(5), and Section 441.710(a)(1)-(2).

PURPOSE

Effective March 17, 2014, CMS has issued regulations that define the settings in which it is permissible for states to pay for Medicaid HCBS. The purpose of these regulations is to ensure that individuals receive Medicaid HCBS in settings that are integrated and that 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. These changes will maximize the opportunities for participants in HCBS programs to have access to the benefits of community living and to receive services in the most integrated setting.

States must ensure all HCBS settings comply with the federal requirements by completing an assessment of existing state standards including rules, regulations, standards, policies, licensing requirements and other provider requirements.

FSSA has created a statewide transition plan to assess compliance with the federal regulations and identify strategies and timelines for coming into compliance with the regulations as they relate to all FSSA HCBS programs. States must be in full compliance with the federal requirements by March 17, 2022.

FSSA PROGRAMATIC IMPACT

The programs currently under review include 1915(c) HCBS Waivers and 1915(i) State Plan benefits administered by the following divisions within FSSA:

Division of Aging

- Aged & Disabled Waiver – IN.210
- Traumatic Brain Injury Waiver – IN.4197
Division of Disability and Rehabilitative Services

- Community Integration and Habilitation Waiver – IN.378
- Family Supports Waiver – IN.387

Division of Mental Health and Addiction

Youth Services:
- Child Mental Health Wraparound Services – TN 12-013

Adult Services:
- Behavioral and Primary Healthcare Coordination – TN 13-013
- Adult Mental Health Habilitation – TN 12-003

SUBMISSION OF COMMENTS

Additional information on the statewide transition plan for compliance with the federal regulations of 42 CFR 441.301(c)(4)-(5), and Section 441.710(a)(1)-(2) can also be found on Indiana’s Home- and Community-Based Services Final Rule Statewide Transition Plan site. Copies of the updated statewide transition plan will also be made available at local DFR offices and at the address contained herein.

The public comment period for the resubmission of version nine of the statewide transition plan will run from January 29, 2020, to February 28, 2020. All comments must be received during the comment period.

Written comments may be sent via email to: HCBSrulecomments@fssa.in.gov or by mail to:

State of Indiana Family and Social Services Administration
Office of Medicaid Policy and Planning
Attn: HCBS Final Rule – BreAnn Gross Teague, Sr. Manager, Program Administration
402 W. Washington St., Rm. W374 MS-07
Indianapolis, IN 46204-2739

All comments will be tracked and summarized. The summary of comments as well as a summary of changes made in response to public comments will be added to the revised STP.

In cases where the state’s determination differs from public comment, the additional evidence and rationale the state used in the final decision will be added to the STP. The final STP will be posted on the Final Rule site after it is submitted to CMS. A posted copy will be available at your local Division of Family Resources office. Paper copies are available upon request.

Jennifer Walthall, MD, MPH
Secretary
Family and Social Services Administration

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1 https://www.in.gov/fssa/da/4917.htm