STATE OF MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE

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Statewide Transition Plan for Compliance with Home and Community-Based Setting Final Rule

Public Meetings and Webinar Presentation - January 2015

- HCBS Settings Final Rule
 - o CMS issued this final rule on January 16, 2014
 - ▼The final rule lists many items HCBS providers must comply with to receive Medicaid payment under federal HCBS waivers.
 - *The new items relate more to outcomes, making sure individuals are getting the most out of community living and are getting services in integrated settings.



- The New HCBS Rule Affects
 - Participants receiving HCBS
 - Medicaid providers providing HCBS
 - People involved in developing HCBS service plans
 - Residential settings where HCBS participants live
 - Non-residential settings where HCBS are provided
 - How HCBS service plans are developed
 - The documentation HCBS service plans must contain



- The Final Rule establishes:
 - Qualities of HCBS settings
 - Settings that are not HCBS
 - Settings that are presumed not to be HCBS
 - State compliance and transition requirements

- The Final Rule excludes the following settings:
 - Nursing facilities
 - Institutions for mental disease
 - Intermediate care facilities for individuals with intellectual disabilities
 - o Hospitals (CMS, 2014)

New Rules



All HCBS settings:

- Are integrated in and support full access to the community
- Support seeking employment in integrated settings
- Are picked by the individual from among different options
- Protect individual rights of privacy, respect, and freedom from bullying and restraint
- Increase freedom and independence in making life choices
- Support choice in picking services and providers





Statewide Transition Plan Overview

- Transition Advisory Teams
- Community Supports Standards
- Participant and Provider Surveys
- Community Pathways Waiver Review
- Waiver Amendments
- Pilot Waiver-specific Survey
- Lease or Other Legally Enforceable Agreement
- On-site Specific Assessments
- Comprehensive Settings Results Report

- DDA Rate Study
- Maryland Law
- Regulations
- Program Polices, Procedures, Service Plans and Forms
- Provider Training
- Provider Transition Symposium
- Provider Transition Plans
- Provider Sanctions and Disenrollment
- Participant Transitions
- Ongoing Compliance and Monitoring

Transition Plan Format



- Section 1: Assessment of Maryland's HCBS Programs
 - Autism Waiver
 - Brain Injury Waiver
 - Community Pathways
 - Home and Community-Based Options Waiver
 - Model Waiver
 - Medical Day Care Waiver
 - o 1915(i) State Plan
- Section 2: Remediation Strategies
- Section 3: Public Comment

Programs



Comments

Remediation Strategies Format

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- Topic
- Description
- Strategy
- Timeline for completion
- Milestone
- Monitoring

Topic

Description

Plan (Strategy)

Due Date

Result (Milestone)

Monitoring

Transition Advisory Teams



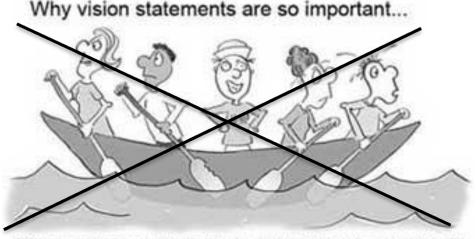


- Creation of teams for each program to help guide DHMH during the transition (not limited to the following):
 - 1. DDA Transition Team
 - 2. Assisted Living Transition Team
 - 3. Autism Transition Team

Community Supports Standards



• DHMH will communicate Maryland's HCBS vision, expectations and standards in compliance with the CMS rule to all stakeholders.



"C'mon, put some muscle into it...we're not getting anywhere!"

Participant and Provider Surveys

- Develop program-specific surveys that will provide data to assess compliance with the new rule based on results of the preliminary survey.
 - Will develop surveys for each licensed site
- Includes identifying supports for participants completing the survey.

Community Pathways Waiver Review



• The DDA has procured independent consultants to review the Community Pathways Waiver for compliance with the Final Rule.



Waiver Amendments (Changes)



 Based on assessment of waiver programs, independent consultant findings, and stakeholder input, amend or change waiver programs to comply with the new rule.



Pilot (Test) Waiver-specific Survey



• Maryland will administer the program specific surveys using a pilot group in order to assess the validity and reliability of the survey.

 Will include stakeholder transition teams input.



Participant and Provider Surveys



- Maryland will implement system-wide surveys for participants and providers with advice from program transition teams.
- The Hilltop Institute will analyze the data and provide a report on the survey results.





Lease or Other Legally Enforceable Agreement

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Maryland will review lease agreements across programs.

Home Rights?



On-Site Specific Assessments





- Maryland will identify specific provider sites that will need further review based on the results of the preliminary assessment and CMS guidance regarding:
 - o what is and is not a community setting
 - o settings that have the effect of isolating individuals receiving Medicaid HCBS from the broader community
- Will include feedback from stakeholder transition teams.

Comprehensive Settings Results Report



- Maryland will develop a comprehensive setting results document, which identifies program-specific level of compliance with HCBS standards.
- Report will be shared with stakeholders.



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- As per legislation recently passed, the DDA shall
 - 1. Procure a contractor to conduct an independent costdriven rate setting study
 - 2. Develop a strategy for assessing the needs of individuals receiving services
 - 3. Develop a sound fiscal billing and payment system
 - 4. Obtain input from stakeholders including individuals receiving services and providers
- The analysis must adhere to the CMS final rule, all "Relevant Regulations Regarding DDA Rates," and should seek to maximize federal match during and post implementation.

Maryland Law



• Maryland will propose legislation changes to comply with the new HCBS rule.





Regulations



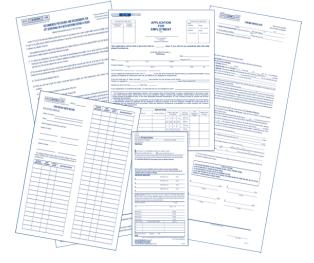
- Maryland will review and revise all applicable regulations to meet the new HCBS rule:
 - Crosswalk of program regulations
 - Review preliminary findings legally
 - Develop regulation revisions to comply and allow for enforcement of HCBS rule
 - Amend regulations according to stakeholder process

Program Policies, Procedures, Service Plans, and Forms

 Review and revise all applicable internal and external program policies, procedures, plans and forms, including settings questionnaires.

Will include feedback from stakeholder transition

teams.



Provider Enrollment and Training



• Review and revise the program provider enrollment and recertification processes.

Provide training to new and existing providers.



Provider Transition Symposium (Conference)

- Conduct a symposium to share transition strategies from Maryland service providers and national entities.
- Provide technical assistance for providers to transition current service delivery system to comply with new HCBS rule.







Provider Transition Plans



- Stakeholder transition teams will provide guidance on remediation processes and format of provider transition plans.
- Providers interested in continuing to provide services shall develop transition plans to comply with the new rules.
- Plans will be reviewed and monitored for implementation.

Provider Sanctions and Disenrollment



• In the event a provider either chose not to transition, or has gone through remediation activities and continues to demonstrate noncompliance with HCBS requirements, the State will develop a specific process for issuing provider sanctions and disenrollments.

Participant Transitions

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• When providers are disenrolled, participants will be assisted by their person-centered team in exploring new provider options.

• The State will report the number of participants

impacted.



Participant Transitions





- When a participant must relocate, the State, or its designated agent, will provide:
 - 1. Reasonable notice to the individual and due process;
 - 2. A description of the timeline for the relocation process; and
 - 3. Alternate setting that aligns, or will align, with the regulation, and that critical services/ supports are in place in advance of the individual's transition.

Ongoing Compliance and Monitoring



• Quality reviews and verification of ongoing provider compliance with the Final Rule will be assessed by the program administering agency and its agents, such as the Office of Health Care Quality.



Questions and Comments



Full report available at:

https://mmcp.dhmh.maryland.gov/waiverprograms/SiteAssets/Site Pages/Community%20Settings%20Final%20Rule/Draft%20Trans ition%20Plan.pdf

Public comments due by Sunday, February 15, 2015

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