

HCBS Settings Webinar

October 4, 2022



Purpose

 The purpose of this webinar is to provide information about the federal HCBS Settings Rule and upcoming assessment process for adult foster care (AFC) providers in the STAR+PLUS HCBS program.



Agenda

- Overview of HCBS Settings Rule
- Upcoming Assessment Process
 - Provider Self-Assessment
 - Virtual Visit with HHSC Staff
- Assessment Timeline
- Next Steps/What to Expect
- 10-Minute Break
- Q&A Session



HCBS Settings Rule



Background

- The Centers for Medicare & Medicaid Services (CMS) issued federal regulations governing settings where Medicaid home and communitybased services (HCBS) are provided.
 - These regulations are collectively referred to as the HCBS Settings Rule.
 - The HCBS Settings Rule applies to AFC settings in the STAR+PLUS HCBS program.
- CMS has given states until March 17, 2023, to ensure all Medicaid HCBS providers comply with the HCBS Settings Rule.



Overview

- The HCBS Settings Rule requires that a Medicaid HCBS setting support a person's full access to the community.
- This includes opportunities to:
 - Engage in community life
 - Work in competitive integrated settings
 - Control personal resources

42 Code of Federal Regulations (CFR) 441.301(c)(4)(i)-(v)



All Settings

- All Medicaid HCBS settings must also have the following qualities:
 - Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.
 - Optimizes individual initiative, autonomy, and independence in making life choices.
 - Facilitates individual choice regarding services and supports, and who provides them.

42 CFR 441.301(c)(4)(i)-(v)



Access to the Community

Federal Requirement:

- The member has access to the community, including opportunities to:
 - Engage in community life,
 - Control personal resources, and
 - Receive services in the community.

- No policies in place that restrict community access
- Support the member to participate in community activities when they wish
- Provide or help arrange transportation

Employment

Federal Requirement:

The member has opportunities to seek employment and work in competitive, integrated settings.

- If a member expresses interest in employment, connect them with their MCO service coordinator for access to Medicaid employment services
- Providing transportation or helping arrange transportation





Privacy, Dignity & Respect

Federal Requirement:

The member has the rights of privacy, dignity and respect, and freedom from coercion and restraint.

- Keeping health and personal information private
- Speaking respectfully to the member and addressing them as they would like to be addressed
 - e.g. by first name or as Ms./Mr. Last Name
- Providing information to the member about how to file a complaint and contact the HHS Ombudsman



Initiative, Autonomy & Independence

Federal Requirement:

Optimize, but do not regiment, the member's initiative, autonomy, and independence in making life choices.

- Allow the member to make choices about their daily activities and who they interact with
- Get input from the member when making activity schedules
- Support the member in working toward their goals
- Do not force the member to participate in an activity when they do not wish to, or punish the member for not participating in an activity

Choice of Services and Supports

Federal Requirement:

 The member has choice regarding services and supports, and who provides them.

- Supporting the member to go into the community to receive services, including providing transportation or helping arrange transportation.
- Supporting the member's preferences regarding care delivered in the AFC setting.





Provider-Owned & Controlled Settings

Additional requirements for providerowned and controlled residential settings.



Provider Owned & Controlled Settings

- Additional requirements for these settings:
 - The member has a residential agreement with the provider that offers the same protections against eviction that tenants have under state landlord/tenant law.
 - The member has privacy in their sleeping or living unit, including:
 - Lockable doors
 - Choice of room or roommate
 - Freedom to furnish and decorate



Provider Owned & Controlled Settings (cont.)

- The member has freedom and support to control their own schedules and activities and have access to food at any time.
- The member is able to have visitors of their choosing at any time.
- The setting is physically accessible to the individual.
- Any modifications to these conditions are documented in the member's person-centered service plan.



Residential Agreement

Federal Requirement:

- The member resides in a place that can be owned, rented or occupied under a legally enforceable agreement by the member.
- The member has the same responsibilities and protections from eviction that tenants have under the Texas Property Code.

What does this look like in practice?

 Execute HHSC Form 2327, Individual/Member and Provider Agreement



Door Locks

Federal Requirement:

The member has privacy in their bedroom, including that the room has an entrance door lockable by the member, with only appropriate staff having keys.

- The member can lock their bedroom door from the inside.
- The AFC provider staff knock on the member's bedroom door and wait to receive permission before entering.

Choice of Room and Roommate

Federal Requirement:

The member has a choice of roommate in the setting.

- When moving into the AFC, the member is given a choice of room and roommate.
- The member can request a change of room or roommate.



Room Furnishing & Decoration

Federal Requirement:

The member has the freedom to furnish and decorate their sleeping or living space.

- The member can bring furniture and other items when moving into the setting.
- The member can decorate their bedroom as they wish, such as displaying pictures, books, and memorabilia.



Control of Daily Schedule

Federal Requirement:

The member has the freedom and support to control their own schedules and activities and has access to food at any time.

- Have a process to discuss with the member their preferences for their daily schedule and activities
- Ensure the member can access food when they wish, including having snacks before and after mealtimes.





Curfew

Federal Requirement:

The member has the freedom and support to control their own schedules and activities and has access to food at any time.

- Ensure policies do not include any curfew expectations
- Encourage or recommend, but do not mandate, that member return to the setting by a certain time.



Federal Requirement:

The member is able to have visitors of their choosing at any time.

- The member to receive visitors at any time and provide a location where recipients can meet privately with their visitors.
- Make visitation policies available to the member.



Physical Accessibility

Federal Requirement:

The setting must be physically accessible to the member.

- There are no obstructions in the setting that make it difficult for the member to move around.
- There are supports available to help the member move around the setting.
 - For example: grab bars, seats in the bathroom, or ramps for wheelchairs.



Modifications to HCBS Settings Qualities

Federal Requirement:

Any modifications to these criteria must be supported by a specific need and justified in the member's person-centered service plan.

What does this look like in practice?

 When you identify a modification or restriction is needed, collaborate with the member and MCO to document the modification in the member's service plan.





Key Takeaways

- The HCBS Settings Rule creates new requirements to ensure Medicaid recipients' rights are upheld and recipients have opportunities to participate in the community.
- AFCs have to meet the HCBS Settings Rule requirements that apply to all settings, as well as the requirements that apply to provider-owned and controlled settings.
- The state must ensure each AFC meets the requirements of the HCBS Settings Rule by March 2023.



Assessment Process & Timeline



Assessment Requirement

- CMS requires states to assess each individual provider-owned or controlled residential setting to ensure the setting will meet all requirements of the HCBS Settings Rule by March 2023.
- This means HHSC needs to assess each AFC provider that participates in STAR+PLUS HCBS.



Step 1: Self-Assessment

- Providers will complete an online self-assessment
- The self-assessment consists of two parts:
 - A questionnaire with some yes/no questions and some open-ended questions
 - Questions will ask about the members' access to the community and how services are delivered
 - A section to submit copies of your policies and procedure documents
 - Residential Agreement or Form 2327 Individual/Member Agreement

Oct. 17 - Nov. 18, 2022



Step 2: Virtual Visit

- After completing the self-assessment, you will sign up for a 1-hour virtual visit with HHSC staff.
 - HHSC will provide a link for AFCs to sign up for a time slot.
 - Some evening and weekend time slots will be available.
 - HHSC will work with providers who do not utilize computers or internet to ensure they are able to participate in virtual visits.

Nov. 28, 2022 - Dec. 16, 2022



Step 2: Virtual Visit (cont.)

The virtual visit will include:

- 1. A desk review of the information submitted through the self-assessment.
- 2. A short interview with the provider.
- 3. A virtual tour of the setting.
 - Conducted using audio/visual
- 4. If needed, development of an action plan for the provider to achieve full compliance with the HCBS Settings Rule.



Step 3: Action Plan

- The provider completes the steps identified in the action plan.
- Activities on the action plan could include things like:
 - Installing locks on residents' doors
 - Updating your policies
 - Educating your members about their rights

Nov. 28, 2022 - Jan. 30, 2023



Step 4. Documentation

- Inform HHSC when your action plan has been implemented
 - Submit revised policies and procedures documents
 - Short follow-up virtual visit, if needed

Nov. 28, 2022 - Jan. 30, 2023



Assessment Timeline

Key Dates:

- Oct. 17 Nov. 18, 2022
 Providers complete online self-assessment form
 Providers sign up for virtual visit
- Nov. 28, 2022 Dec. 16, 2022
 Providers and HHSC staff meet for virtual visits
- Nov. 28, 2022 Jan. 30, 2023
 Providers complete any action steps needed to fully comply with HCBS Settings Rule



Reminders

- This is a collaborative process
- Reach out to us when you have questions
- The goal is to help everyone meet the federal requirements



FAQ - 1

- What if I'm not able to complete the selfassessment online?
 - If you're not able to complete the assessment online, reach out to HHSC to let us know.
 - We will conduct the assessment with you virtually or over the phone.



FAQ - 2

- How do I sign up for a virtual visit if I don't have access to a computer/internet?
 - If you are not able to sign up for a virtual visit, reach out to HHSC to let us know.
 - We will work with you directly to schedule a time for the virtual visit and determine how best to conduct the visit.



FAQ - 3

- What if none of the virtual visit time slots work for my schedule?
 - If none of the virtual visit time slots work for you, reach out to HHSC to let us know.
 - We will work with you to identify an alternative time for your virtual visit.



10-minute break

Questions will be addressed after break





Questions?

HCBS mailbox:

Medicaid HCBS Rule@hhsc.state.tx.us