



DDS CT STATE PLAN FOR ASSESSING HCB SETTINGS COMPLIANCE

Purpose

In January 2014, the Centers for Medicare and Medicaid Services (CMS) announced a requirement for states to review and evaluate current home and community based (HCB) service settings, including residential and nonresidential settings, and to demonstrate how our waivers comply with the new federal HCB Settings requirements that went into effect March 17, 2014. States are expected to develop a transition plan that reflects compliance by March 17, 2019. The federal regulations are 42 CFR 441.301(c)(4)-(5). CMS posted additional guidance to help states assess compliance and remediate areas that are not fully in compliance.

More information on the rules can be found on the CMS website at www.medicare.gov/hcbs. The Arc <http://www.thearc.org/document.doc?id=4596>

Visit the DDS website Waiver Information page to view this information:

<http://www.ct.gov/dds/cwp/view.asp?a=2042&q=332294>

or

<http://www.ct.gov/dds/cwp/view.asp?a=2042&q=548534>

Overview

The waivers being reviewed for compliance include the Comprehensive Supports Waiver, Individual and Family Supports Waiver and the Employment and Day Supports Waiver, Home and Community Supports Waiver for Persons with Autism Waiver and Early Childhood Autism Waiver. In a report to CMS under this new requirement, the state must include:

- A plan for assessing all HCB settings, including a 30-day public comment period (*this document*);
- A response summary of public comment received;
- An inventory and description of all HCB service settings by size, type, location, and service delivery characteristics;
- A summary of how each setting meets or does not meet the federal HCB settings requirements;
- A list of any areas of non-compliance that need to be addressed;
- A transition plan and process for bringing all HCB settings into compliance; and
- A plan for ensuring the health and safety of participants who reside in locations that need to meet corrective action requirements for the setting to come into compliance during the state's specified transition timeline.

Assessment Plan

The Connecticut Department of Developmental Services in collaboration with the Department of Social Services (DSS), the State Medicaid Agency, will work with the various providers, participants, guardians, and other stakeholders involved in the waiver programs to gather the information needed to assess our current compliance with HCB setting regulations through surveys, interviews, site visits, self- assessment and data analysis.

Below is a summary of the assessment plan activities that DDS CT will use to develop and implement the transition plan:

Assessment Activity	Start Date	End Date
Convene a Transition Oversight Team (including stakeholders) to review information gathered and provide input on a state HCB Setting Transition Plan	6/15/2014	12/31/2014
Issue surveys to providers to evaluate their own settings by type and location (excluding services provided in the waiver participant's own home or family home).	7/1/2014	8/31/2014
Provide a survey to waiver participants, guardians, and other stakeholders to evaluate and give input on provider settings by type and location.	7/1/2014	8/31/2014
Conduct a review on a representative sample of settings to evaluate locations, characteristics, qualities.	7/1/2014	8/31/2014
Evaluate state services, policies, provider training, certification and licensing requirements to ensure compliance with the HCBS settings.	7/1/2014	9/15/2014
Summarize all HCB settings and areas of compliance and non-compliance	9/15/2014	10/31/2014
Draft transition plan to submit for state and federal approval	9/1/2015	10/31/2014

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