



ODP Announcement

Home and Community Based Services (HCBS) Settings Self-Assessment Period

ODP Communication Number 035-18

The mission of the Office of Developmental Programs is to support Pennsylvanians with developmental disabilities to achieve greater independence, choice and opportunity in their lives.

AUDIENCE: Providers of Residential Services, Community Participation Support and Day Habilitation Services in the Adult Community Autism Program (ACAP) and Consolidated, Community Living, Person/Family Directed Support and Adult Autism Waivers

PURPOSE: The purpose of this announcement is to inform providers that the period for required completion of the Home and Community Based Services (HCBS) Settings Provider Self-Assessment is from April 11 – June 12, 2018 and to provide guidance for completion of the self-assessments.

BACKGROUND: In preparation for the HCBS Provider Self-Assessment process, ODP piloted draft HCBS Provider Self-Assessment tools for non-residential and residential services in January 2018. Adjustments to these tools were made based on feedback received through the pilot. ODP then published the draft HCBS Provider Self-Assessment tools for public comment from February 22 through March 16, 2018. Again, revisions were made to both tools based on public comment.

Providers of the following services are required to complete the online HCBS Provider Self-Assessment in response to the HCBS Settings Rule, published by the Centers for Medicare and Medicaid Services (CMS) in 2014:

- Community Participation Support in the Consolidated, Person/Family Directed Support and/or Community Living waivers.
- Day Habilitation in the Adult Autism Waiver and/or Adult Community Autism Program.
- Residential Habilitation in the Consolidated Waiver and/or Adult Autism Waiver.

- Life Sharing in the Consolidated and/or Community Living waivers.
- Family Living in the Adult Autism Waiver.

Compliance with the HCBS Settings Rule for service settings for all other ODP waiver services will be completed through the Quality Assessment and Improvement (QA&I) process.

The HCBS Settings Rule requires that states assess all residential and non-residential settings which receive funding or payment through an approved HCBS waiver. The intent of the HCBS Settings Rule is to:

- Ensure individuals receiving HCBS have full access to benefits of community living and the opportunity to receive services in the most integrated setting appropriate;
- Enhance the quality of HCBS; and
- Provide protections to participants.

This includes opportunities to seek employment, work in competitive and integrated settings, engage in community life, control personal resources and receive services in the community to the same degree as people who do not receive HCBS.

CMS required states to develop a Statewide Transition Plan describing the process for bringing all HCBS settings into compliance with the rule no later than March 17, 2019. As part of the Statewide Transition Plan; for which Pennsylvania has received initial approval from CMS; ODP must initially assess each HCBS setting to determine compliance. ODP has chosen a self-assessment for non-residential and residential service providers.

This HCBS Provider Self-Assessment will assist in identifying potential areas of non-compliance and allow the provider to develop a corrective action plan outlining how they plan to achieve full compliance. While CMS has given states an extension to ensure all settings have achieved compliance with the rule by March of 2022, various requirements and effective dates have been built into ODP's waivers and upcoming regulations which will impact the dates by which compliance must be achieved.

It is important to note that the intent of the self-assessment is not to close or terminate any home or community-based services but instead, to work with individuals, providers, and other stakeholders to transition these waiver services to meet compliance with the HCBS Settings Rule and the vision of ensuring individuals are fully integrated into the community, afforded choice, and have their health and safety needs met.

DISCUSSION:

One HCBS Provider Self-Assessment must be completed for each service location enrolled for the following services:

- Community Participation Supports
- Day Habilitation
- Residential Habilitation
- Life Sharing
- Family Living

HCBS Provider Self-Assessments must be completed by 11:59pm on June 12, 2018. Service locations for which ODP has not received a completed self-assessment will be deemed non-compliant.

For the purposes of the non-residential self-assessment:

- “Services” refers to Community Participation Support and Day Habilitation services.
- “Service location” refers to the address identified in HCSIS by a provider where services are provided or managed.
- “Setting” refers to the physical location/specific address where the service is delivered.

For purposes of the residential self-assessment:

- “Services” refers to the array of services a participant may receive as part of their Residential Habilitation or Life Sharing service.
- “Service location” refers to the address of the participant’s home.
- “Residential habilitation” services are the direct and indirect services provided to participants who live in licensed or unlicensed provider owned, rented or leased residential settings.
- “Life Sharing” services are direct and indirect, provider agency managed services that occur in the licensed or unlicensed home of a host family or the participant.

The HCBS Provider Self-Assessments are organized by section of the applicable HCBS Settings federal regulations and the accompanying federal regulation citations are included in the self-assessment tools. Please note that because ODP has included numerous provisions in our HCBS waivers to support compliance with the federal regulations, many questions that appear are specific to implementation of ODP waiver requirements and are aimed at getting a broader picture of provider efforts toward integration in each setting. For additional guidance on responding to specific questions, please review the accompanying Question and Answer document.

The following documents are attached to support the provider self-assessment process:

- PA HCBS Residential Provider Self-Assessment (Attachment 1)
- PA HCBS Non-Residential Provider Self-Assessment (Attachment 2)
- HCBS Provider Self-Assessment Question and Answer Document (Attachment 3)

Please note that the PDF versions of the self-assessments were included for ease of use. **The actual HCBS Provider Self-Assessments must be completed using a web-based electronic format.** If an accessible format is needed, contact PAODPHCBS@pcgus.com to request.

The below links have also been provided via email to each provider of the above listed services.

PA HCBS Residential Provider Self-Assessment

<http://www.surveygizmo.com/s3/3879582/PA-HCBS-Residential-Provider-Self-Assessment>

PA HCBS Non-Residential Provider Self-Assessment

<http://www.surveygizmo.com/s3/3537943/PA-HCBS-Non-Residential-Provider-Self-Assessment>

Steps for completing the HCBS Provider Self-Assessments:

1. Providers of the above listed services will receive an email that includes a link(s) to the PA HCBS Residential Provider Self-Assessment and/or the PA HCBS Non-Residential Provider Self-Assessment. Emails will be sent to the contacts providers identified as the contact person for QA&I. If an email was not received directly, providers may use the links provided in this communication. Links are not unique so it is not essential that the provider receive the link directly.
2. Providers should follow the instructions included on the Residential or Non-Residential Self-Assessment, as appropriate, *for each enrolled service location as described above.*
3. Providers are encouraged as best practice to conduct each self-assessment on-site at the actual service location by people directly supporting individuals and operations at that location. Self-assessments may be prepared on printed versions of the attached self-assessment tools and entered on-line after each applicable question has been answered.

4. Since most providers will be completing more than one self-assessment, ODP encourages providers to establish a tracking system to ensure that a self-assessment is completed for each enrolled service location.
5. Self-assessment results for each service location must be entered into the appropriate on-line self-assessment tool no later than 11:59pm on June 12, 2018.

For information and assistance completing HCBS Provider Self-Assessments:

The Department is holding a webinar to provide instruction on the HCBS Provider Self-Assessment process and tools.

Webinar: April 18, 2018 2:00- 3:30pm

Registration Link:

<https://pcgus.webex.com/pcgus/onstage/g.php?MTID=eadd91431ce67f62db761208fa796bceb>

For technical assistance in completing the HCBS Provider Self-Assessments, please contact the **Help Desk: 866-444-1264**

HCBS Provider Self-Assessment Callers should select: **Option #2**

All calls and voicemails will be processed in the order received. Callers will have the option of leaving a voicemail for callback if they do not wish to wait on hold.

Providers can also email questions to PAODPHCBS@pcgus.com