

Aggregate Results of Provider Self-Assessments of Compliance with the HCBS Settings Rule

Supported Living and Supported Living with Transportation

Supported Living Service is provided by an agency in a home serving one to three persons. Supported Living is a blended service that covers habilitation, personal care, nursing, and other residential supports. Supported Living services can be provided either with or without transportation. A provider choosing to provide Supported Living services with transportation, must ensure the provision of transportation services are used to gain access to Waiver and other community services and activities for all persons living in the home. This table shows aggregated results for all Supported Living providers:

Aggregated Results for Supported Living Providers	
Question Category	Average Score
(a) The home ensures a person’s rights of privacy, dignity, respect and freedom from coercion and restraint.	4.473
(b) The home optimizes a person’s initiative, autonomy, and independence in making life choices.	4.422
(c) The home facilitates individual choice regarding services and supports, and who provides them.	4.377
(d) The home provides opportunities to seek employment and work in competitive integrated settings, engage in community life, and control personal resources.	4.238
(e) The home is integrated and supports access to the greater community.	4.122
(f) The home provides opportunities to engage in community life.	4.454
(g) The home provides opportunities to control personal resources.	3.933
(h) The home provides opportunities to receive services in the community to the same degree of access as individuals not receiving Medicaid HCBS.	4.488
(i) The home is selected by the person from among options including non-disability specific homes and a private unit in a residential setting.	3.75
(j) If provider-owned or controlled, the home provides a specific unit or dwelling that is owned, rented, or occupied under a legally enforceable agreement.	4.051

(k) If provider-owned or controlled, the home provides the same responsibilities and protections from eviction as all tenants under landlord tenant law of state, county, city or other designated entity.	3.925
(l) If the home is provider-owned or controlled and the tenant laws do not apply, the state ensures that a lease, residency agreement or other written agreement is in place providing protections to address eviction processes and appeals comparable to those provided under the jurisdiction's landlord tenant law.	4.05
(m) If provider-owned or controlled, the home provides that each person has privacy in their sleeping or living space.	4.522
(n) If provider-owned or controlled, the home provides units with lockable entrance doors, with appropriate staff having keys to doors as needed.	4.441
(o) If provider-owned or controlled, the home provides people who are sharing a place to live with a choice of roommates.	4
(p) If provider-owned or controlled, the setting provides people with the freedom to furnish and decorate their sleeping or living space within the lease or other agreement.	4.333
(q) If provider-owned or controlled, the home provides people with the freedom and support to control their schedules and activities and have access to food any time.	4.238
(r) If provider-owned or controlled, the home allows people to have visitors at any time.	4.340
(s) If provider-owned or controlled, the home is physically accessible to the person.	4.6

Host Home

Host Home providers enable people to live in the community in a family-type setting that will support them to achieve their goals, participate in community life and activities, maintain their health, and retain or improve skills that are important to them, which may include activities of daily living, money management, travel, recreation, cooking, shopping, use of community resources, community safety, and other adaptive skills they identify that are needed to live in the community. This table shows aggregated results for all Host Home providers.

Aggregated Results for Host Home Providers	
Question Category	Average Score
(a) The home ensures a person's rights of privacy, dignity, respect and freedom from coercion and restraint.	4.6

(b) The home optimizes a person’s initiative, autonomy, and independence in making life choices.	4.562
(c) The home facilitates individual choice regarding services and supports, and who provides them.	4.25
(d) The home provides opportunities to seek employment and work in competitive integrated settings, engage in community life, and control personal resources.	4.375
(e) The home is integrated and supports access to the greater community.	4.187
(f) The home provides opportunities to engage in community life.	4.25
(g) The home provides opportunities to control personal resources.	3.75
(h) The home provides opportunities to receive services in the community to the same degree of access as individuals not receiving Medicaid HCBS.	4.5
(i) The home is selected by the person from among options including non-disability specific homes and a private unit in a residential setting.	3.642
(j) If provider-owned or controlled, the home provides a specific unit or dwelling that is owned, rented, or occupied under a legally enforceable agreement.	4.8
(k) If provider-owned or controlled, the home provides the same responsibilities and protections from eviction as all tenants under landlord tenant law of state, county, city or other designated entity.	4.6
(l) If the home is provider-owned or controlled and the tenant laws do not apply, the state ensures that a lease, residency agreement or other written agreement is in place providing protections to address eviction processes and appeals comparable to those provided under the jurisdiction’s landlord tenant law.	4.8
(m) If provider-owned or controlled, the home provides that each person has privacy in their sleeping or living space.	4.812
(n) If provider-owned or controlled, the home provides units with lockable entrance doors, with appropriate staff having keys to doors as needed.	4.625
(o) If provider-owned or controlled, the home provides people who are sharing a place to live with a choice of roommates.	4

(p) If provider-owned or controlled, the setting provides people with the freedom to furnish and decorate their sleeping or living space within the lease or other agreement.	3.875
(q) If provider-owned or controlled, the home provides people with the freedom and support to control their schedules and activities and have access to food any time.	4.062
(r) If provider-owned or controlled, the home allows people to have visitors at any time.	4.125
(s) If provider-owned or controlled, the home is physically accessible to the person.	4.625

Residential Habilitation

Residential Habilitation Service is provided by an agency in a licensed home serving four to six persons that is owned or leased and operated by the agency. Residential Habilitation is a blended service that provides habilitation, personal care, nursing, other residential supports, and transportation to the persons living in the home. This table shows aggregated results for all Residential Habilitation providers:

Aggregated for Residential Habilitation Providers	
Question Category	Average Score
(a) The home ensures a person’s rights of privacy, dignity, respect and freedom from coercion and restraint.	4.512
(b) The home optimizes a person’s initiative, autonomy, and independence in making life choices.	4.125
(c) The home facilitates individual choice regarding services and supports, and who provides them.	4.093
(d) The home provides opportunities to seek employment and work in competitive integrated settings, engage in community life, and control personal resources.	3.875
(e) The home is integrated and supports access to the greater community.	3.906
(f) The home provides opportunities to engage in community life.	4.375

(g) The home provides opportunities to control personal resources.	3.812
(h) The home provides opportunities to receive services in the community to the same degree of access as individuals not receiving Medicaid HCBS.	4.625
(i) The home is selected by the person from among options including non-disability specific homes and a private unit in a residential setting.	3.718
(j) If provider-owned or controlled, the home provides a specific unit or dwelling that is owned, rented, or occupied under a legally enforceable agreement.	3.2
(k) If provider-owned or controlled, the home provides the same responsibilities and protections from eviction as all tenants under landlord tenant law of state, county, city or other designated entity.	3.166
(l) If the home is provider-owned or controlled and the tenant laws do not apply, the state ensures that a lease, residency agreement or other written agreement is in place providing protections to address eviction processes and appeals comparable to those provided under the jurisdiction's landlord tenant law.	3.181
(m) If provider-owned or controlled, the home provides that each person has privacy in their sleeping or living space.	4.375
(n) If provider-owned or controlled, the home provides units with lockable entrance doors, with appropriate staff having keys to doors as needed.	4.312
(o) If provider-owned or controlled, the home provides people who are sharing a place to live with a choice of roommates.	4
(p) If provider-owned or controlled, the setting provides people with the freedom to furnish and decorate their sleeping or living space within the lease or other agreement.	4.437

(q) If provider-owned or controlled, the home provides people with the freedom and support to control their schedules and activities and have access to food any time.	4.140
(r) If provider-owned or controlled, the home allows people to have visitors at any time.	4.562
(s) If provider-owned or controlled, the home is physically accessible to the person.	4.593

Day Habilitation

Day habilitation services are aimed at developing activities and skills acquisition to support or further integrate community opportunities outside of a person’s home and assist the person in developing a full life within the community. Day habilitation services are aimed at developing meaningful adult activities and skills acquisition to: support or further community integration, inclusion, and exploration, improve communication skills; improve or maintain physical, occupational and/or speech and language functional skills; foster independence, self-determination and self-advocacy and autonomy; support people to build and maintain relationships; facilitate the exploration of employment and/or integrated retirement opportunities; help a person achieve valued social roles; and to foster and encourage people on their pathway to community integration, employment and the development of a full life in the person’s community. Day habilitation can be provided as a one-to-one service to persons with intense medical/ behavioral supports who require a behavioral support plan or require intensive staffing and supports. Day habilitation services may also be delivered in small group settings at a ratio of one-to-three for people with higher intensity support needs. Small group day habilitation settings must include integrated skills building in the community and support access to the greater community. This table shows results for regular (not small group) Day Habilitation providers only:

Aggregated for Day Habilitation Providers	
Question Category	Average Score
(a) The setting ensures a person’s rights of privacy, dignity, respect and freedom from coercion and restraint.	4
(b) The setting optimizes a person’s initiative, autonomy, and independence in making life choices.	3.25
(c) The setting facilitates individual choice regarding services and supports, and who provides them.	3.75

(d) The setting provides opportunities to seek employment and work in competitive integrated settings, engage in community life, and control personal resources.	4
(e) The setting is integrated and supports access to the greater community.	4.375
(f) The setting provides opportunities to engage in community life.	3
(g) The setting provides opportunities to control personal resources.	2.67
(h) The setting provides opportunities to receive services in the community to the same degree of access as individuals not receiving Medicaid HCBS.	4.25
(i) The setting is selected by the person from among options including non-disability specific settings and a private unit in a residential setting.	3.25
(m) If provider-owned or controlled, the setting provides that each person has privacy in their sleeping or living space.	3.625
(n) If provider-owned or controlled, the setting provides units with lockable entrance doors, with appropriate staff having keys to doors as needed.	2.75
(q) If provider-owned or controlled, the setting provides people with the freedom and support to control their schedules and activities and have access to food any time.	3.875
(r) If provider-owned or controlled, the setting allows people to have visitors at any time.	3.75
(s) If provider-owned or controlled, the setting is physically accessible to the person.	4.875

Employment Readiness

Employment Readiness (also known as Prevocational supports) services are designed with the intent to assist persons to learn basic work-related skills necessary to acquire and retain competitive employment based on the person's vocational preferences and abilities. Services include teaching concepts such as following and interpreting instructions; interpersonal skills, including building and maintaining relationships; Communication skills for communicating with supervisors, co-workers, and customers; travel skills; respecting the rights of others and understanding personal rights and responsibilities; decision-making skills and strategies; support for self-determination and self-advocacy; and budgeting and money management. Developing work skills which include, at a minimum, teaching the person the appropriate workplace attire, attitude, and conduct; work ethics; attendance and punctuality; task completion; job safety; attending to personal needs, such as personal hygiene or medication management; and interviewing skills. Services are expected to specifically involve strategies that enhance a person's employability in integrated community settings. Competitive employment or supported

employments are considered successful outcomes of Employment Readiness services. This table shows results for Employment Readiness providers only:

Aggregated for Employment Readiness Providers	
Question Category	Average Score
(a) The setting ensures a person’s rights of privacy, dignity, respect and freedom from coercion and restraint.	4.385
(b) The setting optimizes a person’s initiative, autonomy, and independence in making life choices.	4.25
(c) The setting facilitates individual choice regarding services and supports, and who provides them.	3.821
(d) The setting provides opportunities to seek employment and work in competitive integrated settings, engage in community life, and control personal resources.	4.153
(e) The setting is integrated and supports access to the greater community.	4
(f) The setting provides opportunities to engage in community life.	3.75
(g) The setting provides opportunities to control personal resources.	4.4
(h) The setting provides opportunities to receive services in the community to the same degree of access as individuals not receiving Medicaid HCBS.	4.416
(i) The setting is selected by the person from among options including non-disability specific settings and a private unit in a residential setting.	4.285
(m) If provider-owned or controlled, the setting provides that each person has privacy in their sleeping or living space.	4.392
(n) If provider-owned or controlled, the setting provides units with lockable entrance doors, with appropriate staff having keys to doors as needed.	4
(q) If provider-owned or controlled, the setting provides people with the freedom and support to control their schedules and activities and have access to food any time.	3.964
(r) If provider-owned or controlled, the setting allows people to have visitors at any time.	4.928

(s) If provider-owned or controlled, the setting is physically accessible to the person.

4.607