



GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT ON DISABILITY SERVICES

MEMORANDUM

To: DDA HCBS Waiver Day and Residential Providers

From: Erin Leveton, Program Manager, State Office of Disability Administration

Date: August 12, 2015

Re: Provider Self-Assessments & Provider Transition Plans

I. Introduction & Background

I am writing to follow-up on the discussion at the July Provider Leadership meeting regarding HCBS Settings Provider Self-Assessments and the requirement for Provider Transition plans. As you know, the Centers for Medicare & Medicaid Services (CMS) issued a final rule effective March 17, 2014, that contains a new, outcome-oriented definition of home and community-based services (HCBS) settings (HCBS Settings Rule). The purpose of the federal regulation, in part, is to ensure that people receive Medicaid HCBS in settings that are integrated in and support full access to the greater community. This includes opportunities to seek employment and 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.

The HCBS Settings Rule requires each state to conduct a comprehensive assessment of potential gaps in compliance with the new regulation, as well as provide strategies, timelines, and milestones for becoming compliant with the rule's requirements. In response to the HCBS Settings Rule, District of Columbia has filed with CMS a Transition Plan for the HCBS Waiver for People with Intellectual and Developmental Disabilities (IDD), available on-line at: <http://dds.dc.gov/page/waiver-amendment-information>. Our plan describes the process we plan to use for bringing all of our HCBS settings into compliance with the rule. We understand and expect that our system and providers will not be fully compliant with the rule today. Instead, we need to know our baseline and plan together for systems change.

This is where you come in. Provider self-assessments, along with our state self-assessment and personal experience assessments will help us understand where we are now in terms of compliance with the HCBS Settings Rule; what capacity building and technical assistance would





be helpful; and what we, as a system, need to do next to reach compliance with the rule. We have asked every provider who operates an HCBS service within a “setting” to conduct an honest and critical self-assessment of your organization’s compliance with the rule. Once you have completed the self-assessment, you are asked to engage in strategic planning on how your organization will reach full compliance with the requirements of the HCBS Settings Rule. You will write and submit to us a Provider Transition Plan identifying the areas where you need to reach full compliance with the HCBS Settings Rule and describing your proposed plan. All of this is discussed in further detail below.

II. Overdue Provider Self-Assessments (Enter in MCIS by August 21, 2015)

DDS’s Transition Plan and our corresponding HCBS Settings Rule Compliance policy requires that:

All active HCBS residential, day and vocational services providers shall conduct a critical and honest self-assessment in accordance with the process and timelines set out by DDS; cooperate fully with the assessment and transition process; and demonstrate on-going efforts, cooperation and progress towards compliance with the HCBS Settings Rule.

<http://dds.dc.gov/publication/hcbs-settings-rule-compliance-policy>.

We asked that all residential and day/ vocational providers who have programs that use a building (setting), complete self-assessment tools by July 15, 2015 and enter them into MCIS. (Please note that provider self-assessments are only required for services with settings. They are not required for Individualized Day Supports; Supported Employment; In Home Supports; or any other Day or Vocational Program that operates totally in the community.) To date, we have received some, but not all required provider self-assessments. Providers who fail to conduct self-assessments and enter them into MCIS will be subject to sanctions in accordance with the DDS Imposition of Sanctions policy and procedure. The self-assessment tools are available on our website at: <http://dds.dc.gov/page/waiver-amendment-information> and are programmed in MCIS. **These are overdue and must be entered into MCIS as soon as possible, and no later than August 21, 2015.**

III. How to Enter Provider Self Assessments into MCIS (By August 21, 2015)

All provider self-assessments must be completed and entered into MCIS, as described below. If you completed an assessment and sent it via email or uploaded it into another section of MCIS, please enter it into MCIS as soon as possible, and no later than August 21, 2015.



Screen Shot:

MCIS → Provider → **Waiver Transition Provider Residential Assessment**

Waiver Transition Provider Residential Assessment

Cancel View Edit New

Select	Assessment Tool Date	Tool type	Assessment Entered By	Assessment Completed Date	Status
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No results returned.

Click on New select program type (SL, Res hab, etc) , assessment date and answer questions and save.

Residential Waiver Transition Assessment

Cancel Save Commit

Program Type :*

Assessment Date:

Question Description	How Important is this to the Person?(1-5 or N/A)	Provide name and hyperlink, if available, for specific evidence of compliance. If no specific evidence is available, please indicate that	Comments & Feedback: Please use this section to help us identify systemic support and barriers to achieving compliance with the HCBS Settings Rule; areas in which training, technical assistance and capacity building would be helpful; explanations, if needed, of your self-assessment score; etc.
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IV. Provider Transition Plans (Enter into MCIS by September 21, 2015)

Once you complete your provider self-assessment, we are asking each provider to engage in strategic planning on how you will make organizational changes to reach full compliance with the HCBS Settings Rule within the next two and half years (by March 19, 2018). Provider Transition Plans must be entered into MCIS by September 21, 2015. We will include detailed information about where to upload this in the Provider Performance Review procedure and will also notify you via email. Please note that we are providing a three week extension from the initial due date to ensure that you have adequate time to plan, document, and submit your Transition Plan.

Your Transition Plan must be detailed and specific to include all issues identified in your self-assessment, including specific tasks and projected timelines for completion. As an example, if you identified that your organization does not have a policy that allows visitors at any time and you know that in at least some of your settings locations there are rules that restrict visiting hours, we would expect you: (1) tell us which service type this affects (*e.g.*, residential habilitation) and how many sites you have for that service type; (2) identify the issue; (3) tell us what you plan to do to correct it; (4) give us a projected timeline for completion; and (5) describe your plan for monitoring so that you will ensure ongoing compliance.

From our initial review of Provider Self-Assessments we note that some providers have rated themselves as fully compliant with the HCBS Settings rule. We plan to validate a number of those self-assessments. We expect that even if you rated yourself as fully compliant, you will engage in strategic planning and submit a Provider Transition Plan aimed at continuous quality improvement to advance rights and choice; support people to build and maintain relationships with and without people with disabilities; fully engage in self-determination and supported decision-making; work in competitive, integrated employment or engage in community-based, integrated retirement activities; participate in a variety of community activities based upon their interests; etc.

CMS has provided the following template as an example of what states can use to submit the results of their statewide assessment, which can be adapted for provider transition plans. While this format is not required, it may be helpful to understand and ensure that you meet expectations.



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file:///C:/Users/EMI/Downloads/Progress+in+HCBS+5+12+15+SOTA+presentation+final.pdf

Example of STP Chart for completed systemic assessment

Type of Setting	Issue	# of sites	Remedial Strategy	Lead Agency	Target Date	Ongoing Monitoring
I/DD Group Home	Lacks Food Access 24/7	15	Provider Education	I/DD Division	May 30, 2015	Case management visits (annual)
I/DD Group Home	Lacks Food Access 24/7	15	Change in licensure to require food availability	I/DD Licensure Division	April 30, 2018	Licensure Visits (bi-annual)

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Continuing with the example of access to visitors, that section of a Provider Transition Plan might look as follows:

Provider Name: _____

Type of Setting	Issue	# of Sites	Remedial Strategy	Lead Unit	Target Date	Ongoing Monitoring
Residential Habilitation	Access to Visitors	10	Issue policy	Operations	11/1/2015	Quarterly review of visitor logs and interviews with people who receive supports.
			Train staff	Training	12/1/2015	
			Inform and educate people we support and their families	Operations	12/1/2015	

Based upon recommendations by providers, DDS has agreed to modify our process for Provider Performance Review (PPR) and the requirement of Continuing Improvement Plans to incorporate Provider Transition Plans. We are drafting a revised version of PPR policy and procedure and will discuss that with our HCBS Settings Advisory Group on Tuesday, August 25, 2015. Details at: <http://dds.dc.gov/event/hcbs-settings-advisory-group-0>. You are welcome to join that conversation. We aim to publish a revised PPR policy next month and will share that



with you via email, discuss it at an upcoming Provider Leadership meeting, and publish it in our on-line policy manual at: <http://dds.dc.gov/page/policies-and-procedures-dda>.

V. Conclusion

While you are engaged in self-assessment and strategic planning, it is important to recognize that DDS and CMS do not expect that our settings will be in full compliance with the rule today. We expect and appreciate your honest and critical self-assessment, strategic planning, and feedback to us about your ideas on how we can move our system forward. If you have any questions on this process, please contact me at erin.leveton@dc.gov or (202) 730-1754.

Thank you!