



Health & Human Services

**FROM:** Kathryn Good  
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**TO:** Ebenezer Foster Home #2  
ATTN: Wilton Travers  
6721 67<sup>th</sup> Street South  
Horace ND 58047

**DATE:** January 20, 2026

**RE:** HCBS Settings Rule Compliance

Wilton Travers:

The North Dakota Department of Health and Human Services (HHS), Home and Community-Based Services (HCBS), has determined that the above-listed setting is in compliance with the HCBS Settings Final Rule for the Medicaid Waiver 1915(c) to provide HCBS Residential Habilitation and/or Community Supports services.

If you have any questions, please feel free to contact me to set up a meeting to discuss.

Thank you,

A handwritten signature in black ink that reads "Kathryn Good".

Kathryn Good  
HCBS Program Administrator

## Summary of CMS Home and Community Based Services (HCBS) Settings Rule Site Visit

<b>Location</b>	Horace
<b>Type</b>	Agency Foster Home for Adults
<b>Name</b>	Ebenezer Foster Home #2
<b>Visit Date</b>	12/1/2025
<b>State Staff</b>	Kathryn Good, HCBS Program Administrator, others present: Nicolette Schaefer-Vrchota, Amanda Hayenga
<b>Specialized Services</b>	Traumatic Brain Injury & Memory Loss
<b>License</b>	Agency Foster Home for Adults Licensing Policy 670-05-20
<b>Capacity</b>	3
<b>Medicaid Consumers</b>	0
<b>Education Provided</b>	Information and education regarding the Home and Community Based Services Settings requirements published in the Federal Register on January 16, 2014, was emailed to the AFHA owner. An assessment tool was developed by the state that was based on the settings criteria and the exploratory questions provided by CMS. State staff utilized North Dakota Century Code Chapter 50-10.2 Rights of Health Care Facility Residents, and Chapter 75-03-23 Provisions of Home and Community Based Services Under the Service Payments for Elderly and Disabled Program and the Medicaid Waiver for the Aged and Disabled Program as resources to provide education.
<b>Technical Assistance</b>	The State provided technical assistance upon request and the provider submitted an evidence package for the State to review prior to onsite visit. The evidence package was used by the State to prove compliance with setting requirements. The assessment tool was completed onsite, and the State then held a Settings Review Committee meeting to provide a written summary of suggestions and areas that needed change to come into compliance.
<b>Settings Experience Interviews</b>	Thirty days after the first Medicaid consumer admission a Settings Experience Review will be completed by the State. Survey questions focused on the quality of the individual's experiences, integration into the broader community, options for choice in where to live, ensuring the individuals rights of privacy, dignity, and respect, freedom from coercion and restraint, ensuring the individual has initiative, autonomy, and independence in making choices to include but not limited to activities, cares, and services along with who provides them.

HCBS Settings Requirements	Review of Facility
<p><b>Facility is selected by the individual from among settings options including non-disability specific settings and an option for a private unit in a residential setting.</b></p>	<p>The home is open for tours prior to the decision to reside in the home. There are other options for residential services in the area to choose from. Main entrance to the home goes to options to take stairs to basement or stairs to first level where the kitchen and living room is located. There are stairs to go up to second level where there are bedrooms, bathroom, and laundry area. A legally enforceable agreement following ND landlord tenant laws. There are no cameras inside the home.</p> <p><b>Supporting Documentation:</b> Lease agreement, onsite visit and observation by state staff</p>
<p><b>Provides opportunities to seek employment and work in competitive integrated settings, engage in community life, and control personal resources.</b></p>	<p>Consumers can continue employment or volunteering based on their person-centered goals. The consumers, power of attorney, or family control finances and keep their funds in their own possession. Ebenezer Foster Home staff will aid with money management if requested.</p> <p><b>Supporting Documentation:</b> Resident Handbook</p>
<p><b>Is integrated in and supports access to the greater community</b></p>	<p>There is a calendar in the dining room to inform consumer and family of activities within the facility or community. Per Resident Handbook, the family/natural supports are encouraged to take the consumer out into the broader community. The consumer can utilize the internet, phone, or newspaper to determine activities outside the home. Public Transportation is available, and staff will assist with coordination. Ebenezer does have a vehicle that may also be used for transportation but needs to be scheduled. A social history form is filled out at admission to determine the likes and dislikes of the consumer and to develop an Individual Program Plan (IPP) for everyone. Everyone accesses the building and units the same way. Each consumer is asked to sign out/in for accountability and safety of each consumer. During the night, the front entrance to the home is locked, but they may ring the front doorbell at any time, and staff will assist them. The patio door in the open concept dining room that opens to the patio and backyard. Consumers have 24/7 access.</p> <p><b>Supporting Documentation:</b> Resident Handbook, onsite visit and observation by state staff</p>

<p><b>Optimizes individual initiative, autonomy, and independence in making life choices</b></p>	<p>There are no visiting hours and guests can stay overnight in the consumers’ private living unit. There is a voluntary check in and out process to ensure safety and accountability in an emergency or fire. The Resident Handbook under Resident Rights states the resident has the right to choose who gives them care, how they are approached, choose all aspects of their care and right to determine schedule for waking, bathing, eating and activity participation. The kitchen is open to anyone. There are no locked areas in the kitchen. The menu is available, and the cook ensures consumer involvement with meal planning. Individuals can request another option if they do not like the scheduled meal. Individuals have access to the kitchen at any time for snacks. There are no more than 14 hours between supper and breakfast meals. The laundry room is available for consumers to do their laundry with a table provided to fold clothes. There are no locked areas in the laundry room.</p> <p><b>Supporting Documentation:</b> Resident Handbook, onsite visit and observation by state staff</p>
<p><b>Ensures an individual’s rights of privacy, respect, and freedom from coercion and restraint</b></p>	<p>Medicaid consumers have private rooms with lockable doors. There is one bathroom in the basement and one bathroom on the second floor. Couples are not required to share a bedroom. Consumers can furnish and decorate their unit as desired. There is a great room available in the basement and on the first floor. Consumers may visit privately in their living unit. There is a phone for consumer use so that residents can receive or make private phone calls. Staff can assist residents in making phone calls when they are requested. Mail is hand delivered to the resident. Staff training includes Resident Rights and topics of dignity and respect. The resident handbook reflects care and medications are given in private. Medications are stored in an unlocked cupboard. Each consumer has their own medication box with a lock that staff and consumer will have the lock code. Staff will be trained to knock before entering consumers rooms.</p> <p><b>Supporting Documentation:</b> Resident Handbook, Grievance Policy, onsite visit and observation by state staff</p>
<p><b>Facilitates individual choice regarding services and supports and who provides them</b></p>	<p>The consumer has a choice about who cares for them. The facility provides the consumer information regarding filing a grievance. Individuals go out to the community for church and beautician services. Consumer medical care is provided per own preference.</p> <p><b>Supporting Documentation:</b> Resident Handbook, Grievance policy, onsite visit and observation by state staff</p>
<p><b>Ensures the individual receives services in the community to the same degree of access as individuals not receiving Medicaid HCBS</b></p>	<p>All consumers are treated the same. Consumers can eat in place of their choice. The consumer can access the broader community for services if desired.</p> <p><b>Supporting Documentation:</b> Resident Handbook, onsite visit and observation by state staff</p>

<b>Person-centered service plan</b>	<p>Ebenezer Foster Home registered nurse (RN) develops Individual Program Plans to include behaviors, restrictions, and methods that have been tried before. Clients’ goals, values, beliefs, and how the client would like to live are reviewed and goals established. Community Integration and social supports are reviewed to determine options available for the client. Level of family support and involvement is reviewed. Care planning includes health care needs, nutrition needs, and mental health needs. Employment, volunteering options, behavior, cognitive, and safety are reviewed at the quarterly meetings.</p> <p><b>Supporting Documentation:</b> Individual Program Plan Policy review by state staff</p>
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**Additional Requirement for HCBS Residential Settings—Any modifications to these must be supported by a specific assessed need and justified in the person-centered service plan.**

<p><b>The individual has a lease or other legally enforceable agreement providing similar protections</b>  The consumer or legal decision maker signs a lease agreement when the decision has been made to move into the facility. The lease follows ND landlord tenant laws.  <b>Supporting Documentation:</b> Lease Agreement</p>
<p><b>The individual has privacy in their unit including lockable doors, choice of roommates and freedom to furnish or decorate unit</b>  At the site visit it was observed that the units are private with lockable doors. Medicaid consumers will have a private unit. The consumers are encouraged to decorate their apartment to reflect personal taste, hobbies, and interest.  <b>Supporting Documentation:</b> Resident Handbook, Lease agreement, onsite visit and observation by state staff</p>
<p><b>The individual controls his/her own schedule including access to food at all times</b>  Staff will plan meals with the consumers living in the home. Food is available at any time. There will be alternative meal choices available upon request. Food available at any time</p>
<p><b>The individual can have visitors at any time</b>  Overnight guests are allowed and there are no designated visiting hours.  <b>Supporting Documentation:</b> Resident handbook</p>
<p><b>The setting is physically accessible</b>  The setting is in a residential area of Horace. The setting has stairs to basement, first, and second level. A chair lift will be installed by the Ebenezer Foster Home owner.  <b>Supporting Documentation:</b> Onsite visit by state staff</p>
<p><b>HCBS Setting Requirements establish an outcome-oriented definition that focuses on the nature and quality of individuals experiences. The requirements maximize opportunities for individuals to have access to the benefits of community living and to receive services in the most integrated setting.</b></p>
<p>N/A</p>

**The *Person-Centered Service Plan* must be developed through an individualized planning process. It must be driven by the individual. Should include people chosen by the beneficiary and/or beneficiary's representative, which may include a variety of individuals that play a specific role in the beneficiary's life. Must be able to direct the process to the maximum extent possible.**

The consumer or legal decision maker directs all care plan meetings. The HCBS Case Manager assures that all components of the person-centered service plan are addressed and documented with the consumer and/or legal decision maker.

**Must be timely and occur at times/locations convenient to all involved.**

Ebenezer Foster Home staff will work with the consumer and their responsible party to ensure all care planning meetings are at a convenient time for the responsible party. Ebenezer staff will ensure each consumer is aware that they can invite family or friends to the meeting.

**Reflects cultural considerations/uses plain language.**

Yes

**Discusses individual preference for community integration within and outside the setting.**

**Individual Program Plan (IPP):** The IPP will list the consumers' preferences, dislikes, goals, etc.

**Includes strategies for solving disagreement.**

The IPP discusses strategies to assist the consumer in addressing any disagreements by implementing activities that the consumer enjoys.

**Offers choices to the individual regarding services and supports the individual receives and from whom.**

The IPP will indicate the type of services that are being provided are based on the consumers preference.

**Provides method to request updates.**

Resident Handbook states care meetings and updates can be requested at any time.

**Reflects what is important to the individual to ensure delivery of services in a manner reflecting personal preferences and ensuring health and welfare and ensuring health and welfare.**

Goals are determined by the consumer and/or legal decision maker during the Person-Centered care plan meeting with the HCBS Case Manager and setting staff.

**Identifies the individual's strengths, preferences, needs (clinical and support), and desired outcomes**

Care planning includes strengths, needs, goals and task.

**May include whether and what services are self-directed and includes risks and plan to minimize them.**

Care planning includes risks.

**Includes individually identified goals and preferences related to relationships, community participation, employment, income and savings, healthcare and wellness, education, and others**

Ebenezer Foster Home and HCBS Care planning include identified goals and preferences related to values. Individual Program Plan is created relating to the individuals hopes, dreams and values.

**Signed by all individuals and providers responsible for implementation and a copy provided to all chosen by the beneficiary**

HCBS care plan is signed by the HCBS Case Manager and the responsible party, if applicable.

**Date of Review of Evidence Packaging by the Aging Services Section:**

Ongoing through January 20, 2026

**Reviewed by the following staff:**

Kathryn Good, HCBS Program Administrator

Erica Reiner, HCBS Program Administrator

**Recommendations to Meet Compliance**

N/a

**Date of Compliance with above Recommendations**

01/20/2026

**Aging Services Decision**

Setting Fully Complies

**AGING SERVICES**

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