

FROM: Erica Reiner, RN
HCBS Program Administrator
Aging Services Section
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Bismarck, ND 58501
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TO: Roots Community Care, LLC
ATTN: Lavonda Taylor
6757 67th Ave. S.
Horace, ND 58047

DATE: March 2 , 2026

RE: HCBS Settings Rule Compliance

Lavonda Taylor:

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,



Erica Reiner
HCBS Program Administrator

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Summary of CMS Home and Community Based Services (HCBS)

Location	6757 67 th Ave. S. Horace, ND 58047
Type	Agency Foster Home for Adults
Visit Date	February 17, 2026
State Staff	Erica Reiner, Nicolette Schaefer-Vrchota, and Amanda Hayenga
Specialized Services	Residential Habilitation and Community Support Services
License	Agency Foster Home for Adults N.D.A.C. § 75-03-21.1 and Agency Foster Home for Adults Licensing Policy 670-05-20
Capacity	4
Medicaid Consumers	0
Education Provided	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 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, Home and Community-Based Services (HCBS) Settings Rule 525-05-44, and technical assistance information from the CMS website as resources to provide education.
Technical Assistance	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.
Settings Experience Interviews	Ninety 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.

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Settings Rule Site Visit

HCBS Settings Requirements	Review of Facility
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.	Roots Community Care Agency Foster Home setting is open for tours prior to the decision The agency along with the HCBS case manager will assist with providing options for residential services in the area to choose from. The agency foster home setting is located in Horace, ND in a residential area. The agency provides a legally enforceable agreement following ND landlord tenant laws. There are no cameras in the home. Supporting Documentation: Lease agreement, onsite visit and observation by state staff
Provides opportunities to seek employment and work in competitive integrated settings, engage in community life, and control personal resources.	The agency will provide assistance in accessing employment or volunteer opportunities. The agency will not control finances for individuals, but will assist when needed. The agency will coordinate with the representative payee and/or guardian when applicable. Supporting Documentation: Resident Handbook, onsite visit and discussion
Is integrated into and supports access to the greater community	The agency will review the individual's preferences for activities in the community when they move into the home and will provide a schedule of activities in the community. The agency provides internet and a phone in the home that is accessible to the residents. Public Transportation is available and the agency provides accessible transportation as needed. The agency has an accessible van. The agency will develop an individual program plan for each individual receiving services. Each individual will have a key or code to get into the agency home. Agency home has a patio in the backyard of the home that is accessible to the residents. No current restrictions in the setting. Supporting Documentation: Resident Handbook, onsite visit and observation by state staff

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Optimizes individual initiative, autonomy, and independence in making life choices	There are no visiting hours. Guests may stay overnight in the consumers' private living unit. 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 No locked areas in the kitchen. The menu for meals is posted on the refrigerator. The agency will ensures resident involvement with meal planning. There will be another option for meals if needed and food is accessible at any time. 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 counter provided to fold clothes. Supporting Documentation: Resident Handbook, onsite visit and observation by state staff
Ensures an individual's rights of privacy, respect, and freedom from coercion and restraint	There are private rooms with lockable doors and the resident is provided with a key. The home is a one-level home with two bathrooms. Couples are not required to share a bedroom, but there is one bedroom available for 2 individuals if they request this. Residents can furnish and decorate their room if desired. There is a phone for residents to use so they can receive or make private phone calls. Mail will be received at the home and distributed to the residents. Staff training includes Resident Rights and topics of dignity and respect. Care and medications will be provided in private. Medications will be stored in a closet in the home with controlled substances locked as per policy/procedure. Residents may keep their medications in their room if they are able to take these independently. Staff will be trained to knock before entering resident rooms. Supporting Documentation: Resident Handbook, Resident Rights, Grievance Policy, onsite visit and observation by state staff

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Facilitates individual choice regarding services and supports and who provides them	Individual has a choice about who cares for them. Agency provides the resident information regarding filing a grievance The agency will assist the individuals in accessing church and beautician services. Medical care is provided per the individual's preference. The agency will assist individuals in medical coordination and escort. Supporting Documentation: Resident Handbook, Grievance policy, onsite visit and observation by state staff
Ensures the individual receives services in the community to the same degree of access as individuals not receiving Medicaid HCBS	All residents are treated the same. Residents may eat where they choose to include their room. Residents are able to access the broader community for services if desired. Supporting Documentation: Resident Handbook, onsite visit and observation by state staff
Person-centered service plan	The registered nurse (RN) develops Individual Program Plans or facility care plan to include behaviors, restrictions, and methods that have been tried before. The individual's 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. Care planning includes health care needs, nutrition needs, and mental health needs. Employment, volunteering options, behavior, cognitive, and safety will be reviewed at the quarterly meetings. Supporting Documentation: Individual Program Plan Policy, onsite visit and observation by state staff

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.

The individual has a lease or other legally enforceable agreement providing similar protections 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. Supporting Documentation: Lease Agreement
The individual has privacy in their unit including lockable doors, choice of roommates and freedom to furnish or decorate unit. At the site visit it was observed that the bedrooms are private. Locks with keys were added to each room after site visit and education provided to the QSP agency. There are 2 private bedrooms, and one bedroom that could be shared if the individuals request this. It was

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discussed that this bedroom would be used for two family members or a couple that requests a shared room. The residents are encouraged to decorate their apartment to reflect personal taste, hobbies, and interest. Supporting Documentation: Resident Handbook, Lease agreement, onsite visit and observation by state staff
The individual controls his/her own schedule including access to food at all times 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
The individual can have visitors at any time Overnight guests are allowed and there are no designated visiting hours. Supporting Documentation: Resident handbook
The setting is physically accessible The setting is in a residential area of Horace. The setting has 1 level. Supporting Documentation: Onsite visit by state staff
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.
The <u>Person-Centered Service Plan</u> 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 resident 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. Agency staff will work with the consumer and their party responsible to ensure all care planning meetings are at a convenient time for the party responsible. Agency 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. Person-Centered Service Plan (PCSP): The PCSP addresses community integration and is updated as consumers goals or preferences change.
Includes strategies for solving disagreement. The PCSP discusses strategies to assist the consumer in addressing any disagreements by implementing activities that the consumer enjoys.

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Offers choices to the individual regarding services and supports the individual receives and from whom. The PSCP 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. HCBS Case Manager will set up a care plan meeting if consumer requests a meeting or updates prior to quarterly visit.
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 Setting staff and HCBS Care planning include identified goals and preferences related to values. PSCP is created relating to the individual's hopes, dreams and values.
Signed by all individuals and providers responsible for implementation and a copy provided to all chosen by the beneficiary PCSP is signed by the HCBS Case Manager and the responsible party, if applicable.
Date of Review of Evidence Packaging by the Aging Services Section: 03/02/2026
Reviewed by the following staff: Erica Reiner, HCBS Program Administrator Kathryn Good, HCBS Program Administrator
Recommendations to Meet Compliance Agency QSP added locks to each bedroom door after additional education was provided. Each resident will be provided with a key to their bedroom.

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Date of Compliance with above Recommendations
03/02/2026
Aging Services Decision
Setting Fully Complies

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