

WELCOME!

1915(i) HCBS Settings Rule Training

Medical Services Division
Revised 2/1/24

NORTH
Dakota Be Legendary.
Health & Human Services

STOP!

Please proceed to the **ND Department of Human Services (DHS) HCBS Settings Training** located here: [HCBS: Settings \(nd.gov\)](https://nd.gov/hcbs-settings)

YOU MUST REVIEW THE ABOVE TRAINING PRIOR TO PROCEEDING TO THE NEXT SLIDE.

STOP! Did You...

- Did you listen to the DHS HCBS Settings training?
- Did you take the quiz?
- Did you print off the completion certificate?
- Did you give the certificate to your human resources to place in your employee file?

If yes, please proceed to the remaining slides of this power point.

Summary of the HCBS Settings Rule

- ❑ Establishes requirements for the settings that are eligible for reimbursement for 1915(i) Medicaid Home and Community-Based Services.
- ❑ Requires states to ensure the 1915(i) HCBS benefit will be furnished to individuals in their homes and community, not in an institution.
- ❑ Ensures all individuals have personal choice and are integrated in and have full access to their communities including opportunities to engage in community life, work, attend school in integrated environments, and control their own personal resources.

This Power Point Overview

Will inform you of the:

- Resources used to verify settings compliance.
- Compliance Verification Process
- Categories of Settings & Compliance Measures Tiers

Federal Regulation

YOU MAY VIEW THE HOME AND COMMUNITY-BASED
SETTINGS REQUIREMENTS AT 42 CODE OF FEDERAL
REGULATIONS (CFR) 441.710(A)(1)-(2)

HCBS Settings Assessment Guide

This guide contains a short and long version of characteristics which are expected to be present in a HCBS setting.

This guide provides suggested questions to use in determining the presence or absence of each requirement in a setting while completing the Initial HCBS Setting Review form or Heightened Scrutiny Visit form during the site visit.

[HCBS Settings Assessment Guide](#)

HCBS Settings Rule Forms

[Initial 1915\(i\) HCBS Settings Review](#)

[HCBS 1915\(i\) Heightened Scrutiny Visit Form](#)

Person-Centered Planning & Self Assessment Guide

1915(i) [Person-centered Planning Guide](#)

This guide provides instructions on the self-assessment and how to weave HCBS settings compliance throughout the person-centered planning process.

Additional Training Resources

The [CMS Home & Community Based Settings Requirements Compliance Toolkit | Medicaid.](#)

CMS Training Resources here: [Home & Community Based Services Training Series | Medicaid.](#)

The Council on Quality and Leadership (CQL) Toolkit for States is located here: [HCBS Settings Rule: Toolkit for States - The Council on Quality and Leadership \(c-q-l.org\).](#) This toolkit provides detailed support using CQL tools and data elements to comply with CMS HCBS Settings Requirements.

Compliance Verification Process

Key Points

- Individuals residing in institutions are not eligible for 1915(i) services.
- The Person-Centered Planning Process & Self-Assessment must be completed for all 1915(i) individuals regardless of where they reside or where they receive services.
- No further Compliance Measures are required unless the individual will be receiving 1915(i) funded services within the setting they reside.
- At any point it is known the individual will be receiving 1915(i) services within the setting they reside, then the completion of a site visit and Initial 1915(i) HCBS Settings Review form and/or HCBS 1915(i) Heightened Scrutiny Visit Form and process. Initial Tier 1 or Tier 2 compliance measures is required.
- Correction is required at any point settings non-compliance is identified.

Initial Verification of HCBS Settings Compliance

The Care Coordinator verifies initial HCBS Settings Rule Compliance prior to the submission of the Care Coordination Plan of Care.

This includes:

- Verification the individual does not reside in an institution
- Completion of Tier 3 Compliance Measures - Person Centered POC & Self-Assessment.
- Completion of Tier 1 & 2 Compliance Measures IF it is known the individual will be receiving 1915(i) services in their residence.

Collaboration Efforts With C-Waivers

If the particular residential setting is known to be utilized by the department's Developmental Disabilities or Aging Divisions, or another C Waiver Authority, it has likely been previously reviewed.

Upon verification of the settings compliance with either division, the 1915(i) Care Coordinator may obtain verification of their compliant finding and determine it is not necessary for additional Tier 1 or Tier 2 verification to be completed.

Ongoing Verification of HCBS Settings Rule Compliance

The Care Coordinator verifies ongoing HCBS Settings Compliance throughout the individual's participation in the 1915(i). This includes at least quarterly face-to-face meetings with the individual to:

- Assess and monitor the physical environment of the client's residence where 1915(i) settings are provided.
- Review if applicable settings modifications are still appropriate and necessary, and make necessary changes to POC
- Identify potential areas of non-compliance and complete any required Tier 1 – 3 Compliance Measures
- Remediate non-compliance issues
- Complete a minimum of one annual Self-Assessment

Settings Categories & Compliance Measures Tiers

The table on the next slides identifies what type of Tier 1, 2, & 3 settings compliance verification is required for each of the 4 settings categories if the individual is receiving 1915(i) funded services in the residential setting.

Reminder: The Person-Centered POC & Assessment are always required regardless of where the individual will be receiving services.

Category 1 Settings

Category	Residential Setting Types	Tier 1 – Setting Compliance Measures 1915(i) Initial HCBS Settings Review Form & Site Visit Required?	Tier 2 – Setting Compliance Measures Heightened Scrutiny Required?	Tier 3 - Individual Compliance Measures Person-Centered Planning Process and Self-Assessment Required?
1	Private Residence: A private home or apartment that the individual lives in, which is rented or owned by the individual or legal guardian. Also, Respite Care Homes fall within this category.	No CMS says the state can presume that these settings are compliant, but if areas of concern are identified, they must be addressed.	Potentially	Yes – Tier 3 Compliance is completed and documented in the POC initially and at least annually thereafter for all 1915(i) individuals regardless of where they reside.

Category 2 Settings

Category	Residential Setting Types	Tier 1 – Setting Compliance Measures 1915(i) Initial HCBS Settings Review Form & Site Visit Required?	Tier 2 – Setting Compliance Measures Heightened Scrutiny Required?	Tier 3 - Individual Compliance Measures Person-Centered Planning Process and Self- Assessment Required?
2	<p>Provider Owned or Controlled Residential Setting: A setting where the individual is living with an unrelated caregiver in a provider-owned or controlled residential setting. (Example: Sober Living/Recovery Homes, Group Homes, Foster Homes, Treatment Foster Homes, Transitional Living Homes)</p>	Yes (Requires a lease)	Potentially	Yes – Tier 3 Compliance is completed and documented in the POC initially and at least annually thereafter for all 1915(i) individuals regardless of where they reside.

Category 3 Settings

Category	Residential Setting Types	Tier 1 – Setting Compliance Measures 1915(i) Initial HCBS Settings Review Form & Site Visit Required?	Tier 2 – Setting Compliance Measures Heightened Scrutiny Required?	Tier 3 - Individual Compliance Measures Person-Centered Planning Process and Self- Assessment Required?
3	<p>Residential Settings Presumed to have Qualities of an Institution:</p> <ul style="list-style-type: none"> •A setting that is located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment. •A setting that is located in a building on the grounds of, or immediately adjacent to, a public institution. •Any other setting that has the effect of isolating individuals from the broader community. 	Yes (Requires a lease)	Yes - Always	Yes – Tier 3 Compliance is completed and documented in the POC initially and at least annually thereafter for all 1915(i) individuals regardless of where they reside.

Category 4 Settings

Category	Residential Setting Types	Tier 1 – Setting Compliance Measures 1915(i) Initial HCBS Settings Review Form & Site Visit Required?	Tier 2 – Setting Compliance Measures Heightened Scrutiny Required?	Tier 3 - Individual Compliance Measures Person-Centered Planning Process and Self- Assessment Required?
4	<p>Institutions</p> <p>(i) A nursing facility</p> <p>(ii) An institution for mental diseases</p> <p>(iii) An intermediate care facility for individuals with intellectual disabilities</p> <p>(iv) A hospital</p> <p>*The department has further defined Institutions as: incarceration (jail or prison), Nursing Facility (NF), Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID), Institution for Mental Diseases (IMD), Qualified Residential Treatment Program (QRTP), Psychiatric Residential Treatment Facility (PRTF), and hospitals including the ND State Hospital which is an IMD.</p>	<p>N/A</p> <p>Individuals residing in an institution are not eligible for the 1915(i) and cannot receive 1915(i) services.</p>	<p>N/A</p> <p>Individuals residing in an institution are not eligible for the 1915(i) and cannot receive 1915(i) services.</p>	<p>N/A</p> <p>Individuals residing in an institution are not eligible for the 1915(i) and cannot receive 1915(i) services.</p>

HCBS Settings Rule Sections in the Plan of Care

The Care Coordinator will complete the following sections in the POC:

1. HCBS Settings Rule Verification of Compliance Section
2. Modifications Section
3. Self-Assessment Section

Heightened Scrutiny Process

The care coordinator will:

- utilize the 1915(i) Heightened Scrutiny form to evaluate all regulations and identify any institutional characteristics.
- use provider policy review, observation and discussion with individuals, guardians, and provider staff as needed.
- collaborate with the provider to identify any areas of noncompliance, remediation efforts, and timelines for completion.

See the 1915(i) HCBS Settings Rule Policy for additional information.

HCBS Settings Rule Remediation

If settings non-compliance is discovered, the care coordinator will initiate the appropriate settings verification process to determine if remediation is possible.

If remediation of the setting is a possibility, the care coordinator will initiate remediation using the person-centered plan of care process. An advocacy organization may be contacted for issues not able to be remediated by the team.

If the setting cannot be remedied, the care coordinator issues a 30-day advance written notice to the individual informing them they are not able to receive 1915(i) services in that setting and must relocate to a compliant setting within 30 days if they wish to continue to receive 1915(i) services in their place of residence. The care coordinator will provide assistance to the individual with finding other HCBS settings options that comply with the rule.

See 1915(i) HCBS Settings Rule Policy for details.

Other 1915(i) Service Provider Responsibilities

1. Develop and implement agency policies and procedures that are aligned with the HCBS Settings Rule.
2. Provide initial and annual training on the HCBS Settings Rule to their staff who are responsible for service delivery as necessary.
3. Collaborate with the care coordinator during site visits, heightened scrutiny processes, person-centered planning process, and complete required remediation.

NDDHS Responsibilities

1. Utilize the Quality Improvement Strategy process.
2. Provide policy and educational materials for care coordinators.
3. Participate in the internal HCBS settings committee.
4. Participate in the heightened scrutiny process.

HCBS Settings Compliance Impact on Provider Reimbursement

Required HCBS settings compliance measures must be completed, and verification of compliance documented in the POC by the care coordinator prior to submission of the POC and approval of service authorizations.

Providers can't be reimbursed for 1915(i) services provided to an individual in a non-compliant HCBS Setting or for services provided prior to Settings Compliance Verification.

Questions?



You may view many 1915(i) related resources on our website:
<https://www.hhs.nd.gov/1915i/resources>