



Implementing the HCBS Rules in a COVID World

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Session Objectives

- Provide an overview of the HCBS Rules and what they look like on a day-to-day basis.
- Provide an orientation to the provider-self assessment
- Outline the changes to the provider assessments for compliance as a result of COVID
- Provide an orientation to the new COVID Transition Plan
- Present a timeline for provider compliance and health plan quality monitoring visits to assess compliance

Intent of the HCBS Rules

- Purpose
 - Enhance the quality of HCBS
 - Provide protections to participants
 - Assure full access to benefits of community living
 - Receive services in the most integrated setting
 - Receive services to the same degree of access as individuals not receiving HCBS
- Culture Shift
 - Rules are rights afforded to members; they don't have to be “earned”
 - Services, supports and restrictions are individualized

Arizona's Opportunity

- New standard set of basic rights afforded to all members
- Reinforce priority of serving members in the least restrictive setting
- Formalize new priority to ensure members are actively engaged and participating in their communities

HCBS Rule 1

The setting is integrated in and supports full access to the greater community, including opportunities to

- a) seek employment and work in competitive integrated settings,
- b) engage in community life,
- c) control personal resources, and
- d) receive services in the community to the same degree of access as individuals not receiving Medicaid HCB services.

HCBS Rule 1a in Practice

- Employment services and supports
 - When individuals express an interest in employment, does the setting refer them for employment services or schooling?
 - Do individuals have access to transportation to and from work/volunteering activities?
 - Does the program support individuals to have career exploration opportunities?

HCBS Rule 1b in Practice Cont.

- Engagement in Community Life
 - Do individuals have staff support to assist them in participating in activities in the community (i.e. personal care assistance)?
 - Do individuals have regular (more than once per week) opportunities for contact with people who don't live in the home and not receiving services (family, friends, neighbors, etc.)?
 - Do individuals participate in activities in integrated settings (i.e. religious, social, cultural, recreational, etc.) comparable to peers (i.e. people of similar age, people without disabilities)?

HCBS Rule 1c in Practice Cont.

- Control Personal Resources
 - Do individuals have someone assist them in managing their personal funds?
 - Do individuals decide how to spend their money, earned or unearned?
 - Do individuals access the community to purchase goods and services?

HCBS Rule 1d in Practice Cont.

- Receive services in the community to the same degree of access other people
 - Are members given the choice and opportunity to freely exit the facility, free from a curfew or other requirements for a scheduled return home?
 - Are individuals given the choice and opportunity to freely come and go from the setting?
 - Do individuals have access to transportation (provider-related or otherwise) to and from the setting for the purposes for engaging in community life?

HCBS Rule 2

- The setting is selected by the individual from among setting options including
 - non-disability specific settings
 - an option for a private unit in a residential setting.

HCBS Rule 2 in Practice

- Does the setting allow individuals to visit the setting prior to choosing to live there (i.e. tours, share a meal, participate in an activity, offer respite stay, etc.)?

HCBS Rule 3

- The setting options are identified and documented in the person-centered service plan and are based on the individuals needs, preferences, and, for residential settings, resources available for room and board.

HCBS Rule 3 in Practice

- Does the setting provide supports so that individuals can participate in the Person-Centered Service Plan meetings?
- Does the setting participate in the Person-Centered Service Plan meetings?

HCBS Rule 4

- Ensures individual rights of privacy, dignity and respect, and freedom from coercion and restraint

HCBS Rule 4 in Practice

- Do individuals receive personal care assistance in private?
- Do individuals receive information about their rights in plain language?
- Do individuals know who to contact if they have concerns or complaints?
- Do individuals have protection against restrictive measures, including isolation and chemical/pharmacological and physical restraints?

HCBS Rule 5

- Optimizes , but does not regiment, individual initiative, autonomy and independence in making life choices including but not limited to, daily activities, physical environment, and with whom to interact

HCBS Rule 5 in Practice

- Do individuals get to make informed decisions about what they want to do every day, including scheduling changes?
- Is the setting accessible for people to safely and freely move around the home including entering and exiting the setting?

HCBS Rule 6

- Facilitates individual choice regarding services and supports and who provides them.

HCBS Rule 6 in Practice

- Do individuals have the option to make requests for an alternate staff member to assist them?
- Are requests for an alternative staff member honored when the setting can accommodate due to staffing constraints?
- Can individuals freely make requests for changes in the way their services and supports are delivered?

HCBS Rule 7

- In a provider-owned or controlled home and community-based residential settings, the following additional requirements must be met:
 - The individual has a lease or other legally enforceable agreement providing similar protections;
 - The individual has privacy in their sleeping or living unit including:
 - a) Lockable doors by the individual with only appropriate staff having keys to the doors
 - b) Individual sharing units have a choice of roommates in that setting
 - c) Freedom to furnish or decorate the unit within the lease or agreement

HCBS Rule 7 Cont.

- d) The individual has freedom and support to control his/her own schedules and activities including access to food at any time
- e) The individual can have visitors at any time; and
- f) The setting is physically accessible.

HCBS Rule 7 in Practice

- Do individuals have access to a key to their bedroom/unit?
- Are individuals allowed to decorate their own room including moving furniture and hanging up items on the walls?
- Do individuals get to choose their roommates?
- Do individuals have access to a key/code to the front door/entrance of their home/setting?
- Do individuals have a choice in what time they want to eat?

HCBS Rule 7 in Practice Cont.

- Do individuals have an opportunity to buy their own food/snacks/drinks?
- Are individuals free from restrictions (visiting hours) on when they can have family and friends to visit?
- Do individuals, or representative, have a written agreement in place providing protections to address termination of residency agreement and due process and appeals?

Documentation Examples

- Policies and Procedures
- Copies of flyers, emails, social media posts, sign in sheets
- Pictures
 - Calendars
 - Signage

Reminder: Anything containing member information must be sent in a secure method that meets HIPAA requirements.

Quality Monitoring Process: Pre-COVID Plan

- Provider Self-Assessments
 - Ensuring members are not isolated by understanding:
 - Community Engagement Opportunities and Experiences
 - Strategies to maximize independence
 - Transportation resources
- MCO on-sight validation including:
 - Observations
 - Member interviews
 - Community interviews

Re-Imagining the Quality Monitoring Process: COVID Transition Plan

- An opportunity for providers to explain modifications made to service delivery in order to mitigate COVID risk including:
 - How are you teaching individuals to advocate for themselves to be able to determine what risks they are willing to take?
 - Describe how you will communicate the safety efforts that your staff will be taking to individuals and family members (i.e. wearing masks, temperature checks, etc.).
 - Describe how individuals are being assisted to purchase goods in the current environment (online shopping, family member shopping, etc.).

Re-Imagining the Quality Monitoring Process: COVID Transition Plan, Continued

- Describe how the setting is accommodating individual's needs to see family members and friends in the current environment (i.e. visiting through non-contact means, pictures, and phone calls).
- Develop a communication plan for members and family members
- Develop a phased plan (not timeline) to integrate individuals back into their community to the pre-COVID level or better

How do we get back to normal, or better than normal?

Re-Imagining the Quality Monitoring Process: Provider Self-Assessment

Payer Source				
Please select whether the following occurs.		Program Assessor Use	For Interviewer Purposes Only	
	Yes/No	Documentation supporting the self-assessment response	Examples supporting the self-assessment response	Comments
25	Do all individuals participating in programs at the setting have the same activities, services, and amenities regardless of who pays for the service?			
Points Possible: 1		Points Received: 0		

Program Selection				
Please select whether the following will occur when safe to do so.		Program Assessor Use	For Interviewer Purposes Only	
	Yes/No	Documentation supporting the self-assessment response	Examples supporting the self-assessment response	Comments
26	Describe how the setting will allow individuals to visit the program prior to choosing to receive services there (i.e. tours, meet & greet, participate in an activity, etc.).	Please refer to the Companion Guide on how to address these standards in the COVID-19 Transition Plan.		
Points Possible: 1		Points Received: 0		

Re-Imagining the Quality Monitoring Process: Observations and Member Interviews

- Used to validate the provider's self assessment
- Modifications
 - Group member interviews
 - Photos
 - Videos
 - Virtual Platforms
- Some MCOs may work with providers to determine if there is an opportunity to conduct a onsite review

Tips for HCBS Rules Compliance

- These are baseline standards for a normative lifestyle
- Accommodations for these standards can be made for
 - Age appropriateness or
 - Health and safety reasons.
- Restrictions need to be individualized using the person centered planning process.

Tips for HCBS Rules Compliance

- Be creative with:
 - Developing new practices to support compliance
 - Documenting or demonstrating how you meet or will meet the standard
- View and use the Transition Plan as a tool to highlight the efforts you have made to meet member's needs during the Public Health Emergency.

HCBS Rules Resources

- www.azahcccs.gov/hcbs
 - Please be sure to sign up for the Constant Contact email list under Stay Informed
- hcbs@azahcccs.gov
 - Submit questions to the AHCCCS team

Thank You.