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
  o Enhance the quality of HCBS
  o Provide protections to participants
  o 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
  o Rules are rights afforded to members; they don’t have to be “earned”
  o 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
  o When individuals express an interest in employment, does the setting refer them for employment services or schooling?
  o Do individuals have access to transportation to and from work/volunteering activities?
  o Does the program support individuals to have career exploration opportunities?
HCBS Rule 1b in Practice Cont.

• Engagement in Community Life
  o Do individuals have staff support to assist them in participating in activities in the community (i.e. personal care assistance)?
  o 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.)?
  o 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
  o Do individuals have someone assist them in managing their personal funds?
  o Do individuals decide how to spend their money, earned or unearned?
  o 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
  o Are members given the choice and opportunity to freely exit the facility, free from a curfew or other requirements for a scheduled return home?
  o Are individuals given the choice and opportunity to freely come and go from the setting?
  o Do individuals have access to transportation (provider-related or otherwise) to and from the setting for the purposes of engaging in community life?
HCBS Rule 2

• The setting is selected by the individual from among setting options including
  o non-disability specific settings
  o 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:
  o The individual has a lease or other legally enforceable agreement providing similar protections;
  o 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
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
  o Calendars
  o 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
  o Ensuring members are not isolated by understanding:
    ▪ Community Engagement Opportunities and Experiences
    ▪ Strategies to maximize independence
    ▪ Transportation resources

• MCO on-sight validation including:
  o Observations
  o Member interviews
  o 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:
  o How are you teaching individuals to advocate for themselves to be able to determine what risks they are willing to take?
  o 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.).
  o 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

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<tr>
<th>Payer Source</th>
<th>Program Assessor Use</th>
<th>For Interviewer Purposes Only</th>
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<tbody>
<tr>
<td>Please select whether the following occurs.</td>
<td>Yes/No</td>
<td>Documentation supporting the self-assessment response</td>
</tr>
<tr>
<td>Do all individuals participating in programs at the setting have the same activities, services, and amenities regardless of who pays for the service?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Points Possible: 1</td>
<td>Points Received: 0</td>
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<table>
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<tr>
<th>Program Selection</th>
<th>Program Assessor Use</th>
<th>For Interviewer Purposes Only</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please select whether the following will occur when safe to do so.</td>
<td>Yes/No</td>
<td>Documentation supporting the self-assessment response</td>
</tr>
<tr>
<td>Describe how the setting will allow individuals to visit the program prior to choosing to receive services there (i.e. tours, meet &amp; greet, participate in an activity, etc.).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Points Possible: 1</td>
<td>Points Received: 0</td>
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</tbody>
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Re-Imagining the Quality Monitoring Process: Observations and Member Interviews

• Used to validate the provider’s self assessment

• Modifications
  o Group member interviews
  o Photos
  o Videos
  o 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
  o Age appropriateness or
  o Health and safety reasons.
• Restrictions need to be individualized using the person centered planning process.
Tips for HCBS Rules Compliance

• Be creative with:
  o Developing new practices to support compliance
  o 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](http://www.azahcccs.gov/hcbs)
  - Please be sure to sign up for the Constant Contact email list under Stay Informed
- [hcbs@azahcccs.gov](mailto:hcbs@azahcccs.gov)
  - Submit questions to the AHCCCS team
Thank You.