Remediation Strategies - BAS's overall strategy will rely heavily on its existing HCBS quality assurance processes to ensure provider compliance with the HCBS rule. This will include provider identification of remediation strategies for each identified issue and ongoing review of remediation status and compliance. BAS may also prescribe certain requirements to become compliant. BAS will also provide guidance and technical assistance to providers to assist in the assessment and remediation process. Providers that fail to remediate noncompliant settings in a timely manner may be subject to sanctions.

Unallowable Settings, Settings Presumed Not Eligible and All Settings Must Meet the Following Qualifications

Federal Requirement -

441.301(c) (5) - Home and Community-Based Settings do not include a nursing facility, institution for mental diseases, ICF/ID and hospitals.

441.301(c) (5) (v) – Settings in a publicly or privately owned facility that provide inpatient treatment;

441.301(c) (5) (v) – Settings on the grounds of or immediately adjacent to a public institution;

441.301(c) (5) (v) – Settings that have the effect of isolating individuals receiving HCBS from the broader community of individuals not receiving HCBS

441.301(c) (4) (i) - The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.

441.301(c) (4) (ii) – The setting is selected by the individual from among setting options including non-disability specific settings and an option for a private unit in a residential setting. The setting options are identified and documented in the person-centered service plan and are based on the individual's needs, preferences, and for residential settings, resources available for room and board

441.301(c) (4) (iii)—The setting ensures individual rights of privacy, dignity and respect, and freedom from coercion and restraint

441.301(c) (4) (iv) – The setting 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

441.301(c) (4) (v)— The setting facilitates choice regarding services and who provides them

<u>#</u>	Action Item	<u>Description</u>	Start Date	Target End	<u>Deliverable</u>
				<u>Date</u>	
1	Explore employment data collection system	Explore employment data collection systems that will capture information on individuals served in the waiver such as type of job, wages, benefits and length of employment as well as information on providers rendering employment services. Recommendations will then be made as to the feasibility of a system and finally a decision will be made regarding whether employment data collection system can be implemented.	November 2014	July 2015	Decision to determine if a system can be implemented
		Action Completed – ODP/BAS has determined that employment questions and responses will be captured in the Individual Monitoring tool used by Supports Coordinators.			

2	Draft Regulations	Create a draft of the 55 Pa. Code Chapter 6100 regulations with stakeholder input. These regulations will replace 55 Pa. Code Chapter 51 and govern home and community based services provided through the Adult Autism Waiver as well as other ODP programs. Create draft changes to 55 Pa. Code Chapters 2380 (relating to Adult Training Facilities), 6400 (relating to Community Homes for Individuals with Mental Retardation) and 6500 (relating to Family Living Homes). These changes will align with the CMS HCBS Final Rule and 55 Pa. Code Chapter 6100. Action Completed – ODP/BAS anticipates these drafts being released for	January 2015	September 2015	Draft regulations
		public comment in September 2016 (see number 8 below).			
3	Draft and Publish Executive Order on Employment	Collaborate with other state departments, including the Departments of Education and Labor and Industry, and the Governor's Offices of Administration and Policy to draft for Governor's consideration and publish the Executive Order on Increasing Competitive Integrated Employment for People with a Disability. This document will clearly articulate employment principles for people with all disabilities. Action Completed – March 10 th 2016 Tom Wolf, Governor signed Executive Order 2016-03 establishing "Employment First" policy which can be found at: https://www.governor.pa.gov/executive_orders/executive-order-2016-03-establishing-employment-first-policy-and-increasing-competitive-integrated-employment-for-pennsylvanians-with-a-disability/	January 2015	March 2016	Executive Order on Employment
4	Draft Waiver Service Definitions and Provider Qualifications	Draft waiver service definitions and provider qualification criteria with stakeholder input. This will include a two tiered set of standards: One that must be met by current providers and a different set of standards for providers that are newly enrolling to provide services.	April 2015	June 2016	Draft service definitions and provider qualifications
5	Implement In-	Engage the SELN to provide training, resources and technical assistance to	June 2015	December	Training Tools
	Person and On-	Supports Coordinators to engage in employment conversations.		2016	
	Line Training	Collaborate with OVR to develop local trainings for OVR counselors, ODP			
		staff, Supports Coordinators, Employment Providers, and Transition			
		Coordinators to increase competitive integrated employment outcomes			

		for students and adults.			
6	Revise SC Monitoring Tool	Revise the tool used by Supports Coordinators when monitoring individuals to capture employment data and begin implementation of the revised tool.	November 2015	July 2016	Individual Monitoring Tool used by SCs
7	Build Provider Capacity for Competitive Integrated Employment	Provide comprehensive strategic consulting and mentoring of provider organizations shifting from a focus on facility-based service provision to supports aligned with competitive integrated employment in collaboration with the Office of Disability Employment Policy's Employment First State Leadership Mentoring Program.	December 2015	December 2017	Training Tools
8	Public Comment on Regulations	Draft regulations will be published through notice in the Pennsylvania Bulletin for public comment.	September 2016	October 2016	Pennsylvania Bulletin Notice
9	Public Comment on Waiver Amendment	Draft waiver amendment changes will be published through notice in the Pennsylvania Bulletin for public comment.	October 2016	December 2016	Pennsylvania Bulletin Notice
10	Submit Final Waiver Changes to CMS	Submit final waiver amendment to CMS for approval.	January 2017	January 2017	Waiver Amendment
11	Identify where new required information is included in the ISP	 Identify where the following will be documented in the ISP: Setting options provided to individuals will be documented in the ISP Modifications to one of the requirements when needed 	January 2017	July 2017	HCBS IT Changes List, Document setting options
12	Develop communication	Develop and publish communication regarding required ISP documentation. This communication will include the additional information that must be included in the ISP when a modification to a requirement is needed.	January 2017	July 2017	Policy Document
13	Issue Regulations	Issue final regulations.	June 2017	October 2017	Pennsylvania Bulletin Notice

14	Enrollment process for new providers and service location move	Develop and implement a process to ensure new providers enrolling to render waiver services, existing providers moving their service locations and provider requests for expansion are not unallowable.	March 2017	June 2017	Enrollment Process
15	Review/Revise Provider Agreement	Review provider agreement and revise if necessary.	March 2017	June 2017	Provider Agreement
16	Provider Service Alignment with Waiver	Time for providers to analyze services rendered and make changes to comply with waiver.	March 2017	July 2017	No Deliverable For This Item
17	Develop/Distribut e Training Tools and Policy Updates	Identify, develop, and distribute training tools and policy updates that are needed for compliance.	July 2017	March 2019	Training tools and policy updates
18	Revise Provider Monitoring Tool	Revise provider monitoring tool to capture new requirements in waiver amendments and regulations.	March 2017	July 2017	Provider Monitoring Tool
19	Provider Self- Assessment	All Adult Autism Waiver providers will complete a self-assessment of their compliance with current applicable waivers, regulations and policies.	September 2017	November 2017	Provider Tracking Tool
20	On-site Reviews of Providers	An onsite monitoring of all residential and day habilitation providers that serve participants in the Adult Autism Waiver will be conducted. An onsite review will also be completed for all waiver providers who either did not complete a self-assessment or whose self-assessments indicate noncompliance.	September 2017	June 2018	Provider Tracking Tool
		The onsite review results will identify each of the areas of noncompliance identified during the monitoring process. The monitoring results are issued electronically, via email, by BAS. The monitoring results will identify each of the areas of noncompliance identified during the monitoring process. Once the monitored provider receives the monitoring results and Plan of Correction form, the monitored provider is			

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		responsible to complete a Plan of Correction and return it to BAS within			
		15 calendar days. If the monitored provider does not return it in 15			
		calendar days, BAS will send a directed Plan of Correction within 10			
		calendar days. BAS will then review and return the Plan of Correction			
		indicating that the plan has been approved or that further clarification			
		and/or correction is required. If further clarification is required, the			
		monitored provider will have 15 calendar days to revise it and return it to			
		BAS.			
		All monitored providers completing a POC are advised to maintain			
		documentation of the corrective actions taken. This information will be			
		used for future validation activities. The type of documentation required			
		should be in accordance with the specific monitoring process. In some			
		cases, these corrective actions will be validated during future monitoring			
		activities, or the monitored entities may be asked to submit			
		documentation to the appropriate reviewing entity.			
21	Notify Providers of	After the completion of the onsite monitoring reviews, settings that are	August 2018	September	Notification to
	Decision	presumed to have institutional qualities per the Centers for Medicare and		2018	providers
		Medicaid Services (CMS) requirements will be identified. When such			
		settings are determined to have the qualities of a home and community-			
		based setting, information on these settings will be submitted to CMS for			
		heightened scrutiny. Providers will be notified of BAS' initial decision			
		regarding the setting's eligibility. Providers determined to be ineligible			
		will be provided appeal rights. Providers will be expected to comply with			
		applicable 55 Pa. Code Chapter 6100 requirements.			
22	Notify Participant	Individuals served by providers determined to be ineligible will be	August 2018	September	Notification to
	of Decision	notified of the provider's ineligibility and what actions participants may	7108001 2010	2018	participants
	of Beelsloff	expect. Supports Coordination agencies will also be notified. This initial		2010	participants
		monitoring process will be complete in the summer of 2018.			
		monitoring process will be complete in the summer of 2010.			
		The ISP team must discuss the option of other willing and qualified			
		providers or other services that will meet the individual's needs and			
		ensure their health and safety. The Supports Coordinator will be			
		responsible for documenting this discussion.			
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23	Public Notice	A public notice will be published which will list the provider name, the county in which the setting is located, the waiver service(s) provided at the setting, and the number of individuals authorized to receive services in the setting along with the determination that the setting falls into one of the following categories: • Ineligible for waiver reimbursement as of March 2019, • Eligible for waiver reimbursement, or • Eligible for waiver reimbursement and meets criteria for CMS heightened scrutiny process.	November 2018	December 2018	Public Notice
24	Access Issues	Determine whether access issues may be created by providers who are no longer eligible/willing to provider waiver services. Access issues are defined as the inability of an individual/family to locate a willing and qualified service provider and/or the inability of a Supports Coordination Agency to secure a willing and qualified provider for individuals requesting services.	November 2018	December 2018	Provider Tracking Tool
25	Transition Participants	Ensure that individuals who receive services in ineligible settings transition to willing and qualified providers, if necessary. (This timeframe does not include individuals impacted by an access issue.)	December 2018	March 2019	Provider Tracking Tool
26	CMS Heightened Scrutiny	Send list of settings/providers determined eligible in accordance with the waiver to CMS for Heightened Scrutiny process.	March 2019	March 2019	List of Eligible Providers
27	Ongoing Monitoring	All waiver providers are continuously monitored for compliance per waiver requirements. Providers will be monitored for compliance with applicable waivers, regulations and policies which will include compliance with the CMS HCBS Final Rule.	March 2019	Ongoing	Provider Tracking Tool
28	Public Notice of CMS Heightened Scrutiny Determination	Notice will be published in the Pennsylvania Bulletin regarding the settings/provider CMS accepted as being home and community based and those that CMS denied as being home and community based.	As determined by CMS	Ongoing	Public Notice

Requirements for Provider-owned or Controlled Home and Community Based Residential Settings

Federal Requirement-

42 CFR 441.301(c) (4) (vi) (A)- In a provider-owned or controlled residential setting, the unit or dwelling is a specific physical place that can be owned, rented, or occupied under a legally enforceable agreement by the individual receiving services, and the individual has, at a minimum, the same responsibilities and protections from eviction that tenants have under the landlord/tenant law of the State, county, city, or other designated entity. For settings which landlord tenant laws do not apply, the State must ensure that a lease, residency agreement, or other form of written agreement will be in place for each HCBS participant, and that the document provides protections that address eviction processes and appeals comparable to those provided under the jurisdiction's landlord tenant law.

42 CFR 441.301(c) (4) (vi) (B) (1) – In a provider-owned or controlled residential setting, each individual's units has an entrance door lockable by the individual, with only appropriate staff having keys to the door

42 CFR 441.301(c) (4) (vi) (B) (2)— In a provider-owned or controlled residential setting, individuals sharing units have a choice of roommates

42 CFR 441.301(c) (4) (vi) (B) (3) – In a provider-owned or controlled residential setting, individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.

42 CFR 441.301(c) (4) (vi) (C) – In a provider-owned or controlled residential setting, individuals have the freedom and support to control their own schedules and activities and have access to food at any time.

42 CFR 441.301(c) (4) (vi) (D) – In a provider-owned or controlled residential setting, individuals are able to have visitors of their choosing at any time.

42 CFR 441.301(c) (4) (vi) (E) – In a provider-owned or controlled residential setting, the setting is physically accessible to the individual.

#	Action Item	<u>Description</u>	Start Date	Target End	<u>Deliverable</u>
				<u>Date</u>	
1	Analyze PA's	Analyze PA's landlord tenant law and determine what constitutes comparability for	December	March	Revised Room
	Landlord Tenant	residential settings.	2015	2016	and Board
	Law				Contract
2	Draft Regulations	Create a draft of the 55 Pa. Code Chapter 6100 regulations with stakeholder input.	January	September	Draft
		These regulations will replace 55 Pa. Code Chapter 51 and govern home and	2015	2015	regulations
		community based services provided through the Adult Autism Waiver as well as			
		other ODP programs.			
		Create draft changes to 55 Pa. Code Chapters 6400 (relating to Community Homes			
		for Individuals with Mental Retardation) and 6500 (relating to Family Living Homes).			
		These changes will align with the CMS HCBS Final Rule and 55 Pa. Code Chapter			
		6100.			
		Action Completed – ODP anticipates these drafts being released for public			
		comment in September 2016 (see number 5 below).			

3	Draft Waiver Service Definitions and Provider	Draft waiver service definitions and provider qualification criteria with stakeholder input. This will include a two tiered set of standards: One that must be met by current providers and a different set of standards for providers that are newly	April 2015	June 2016	Draft service definitions and provider
	Qualifications	enrolling to provide services.			qualifications
4	Determine which providers allow for a shared bedroom	Determine providers who allow for a shared bedroom. Initial action complete through provider survey released in April 2015. The report can be accessed at http://www.dhs.pa.gov/cs/groups/webcontent/documents/document/c 209647.pdf	April 2015	June 2015 and ongoing	Provider Survey Results and Provider Tracking Tool
5	Public Comment on Regulations	Draft regulations will be published through notice in the Pennsylvania Bulletin for public comment.	September 2016	October 2016	Pennsylvania Bulletin Notice
6	Revise Room and Board Contract	Revise and distribute updated Room And Board Contract.	March 2016	January 2017	Room and Board contract
7	Public Comment on Waiver Amendment	Draft waiver amendment changes will be published through notice in the Pennsylvania Bulletin for public comment.	October 2016	December 2016	Pennsylvania Bulletin Notice
8	Submit Final Waiver Changes to CMS	Submit final waiver amendment to CMS for approval.	January 2017	January 2017	Waiver Amendment
9	Identify where new required information is included in the ISP	Identify where the following will be documented in the ISP: • Setting options provided to individuals will be documented in the ISP • Modifications to one of the requirements when needed	January 2017	July 2017	HCBS IT Changes List, Document setting options
10	Develop communication	Develop and publish communication regarding required ISP documentation. This communication will include the additional information that must be included in the ISP when a modification to a requirement is needed.	January 2017	July 2017	Policy Document
11	Issue Regulations	Issue final regulations.	June 2017	October 2017	Pennsylvania Bulletin Notice
12	Enrollment process for new providers and service location move	Develop and implement a process to ensure new providers enrolling to render waiver services, existing providers moving their service locations and provider requests for expansion are not unallowable.	March 2017	June 2017	Enrollment Process

13	Review/Revise Provider Agreement	Review provider agreement and revise if necessary.	March 2017	June 2017	Provider Agreement
14	Provider Service Alignment with Waiver	Time for providers to analyze services rendered and make changes to comply with waiver.	March 2017	July 2017	No Deliverable For This Item
15	Develop/Distribute Training Tools and Policy Updates	Identify, develop, and distribute training tools and policy updates that are needed for compliance.	July 2017	March 2019	Training tools and policy updates
16	Revise Provider Monitoring Tool	Revise provider monitoring tool to capture new requirements in waiver renewals and regulations.	March 2017	July 2017	Provider Monitoring Tool
17	Provider Self- Assessment	All Adult Autism Waiver providers will complete a self-assessment of their compliance with current applicable waivers, regulations and policies.	September 2017	November 2017	Provider Tracking Tool
18	On-Site Reviews of Providers	An onsite monitoring of all residential and day habilitation providers that serve participants in the Adult Autism Waiver will be conducted. An onsite review will also be completed for all waiver providers who either did not complete a self-assessment or whose self-assessments indicate noncompliance. The onsite review results will identify each of the areas of noncompliance identified during the monitoring process. The monitoring results are issued electronically, via email, by BAS. The monitoring results will identify each of the areas of noncompliance identified during the monitoring process. Once the monitored provider receives the monitoring results and Plan of Correction form, the monitored provider is responsible to complete a Plan of Correction and return it to BAS within 15 calendar days. If the monitored provider does not return it in 15 calendar days, BAS will send a directed Plan of Correction within 10 calendar days. BAS will then review and return the Plan of Correction indicating that the plan has been approved or that further clarification and/or correction is required. If further clarification is required, the monitored provider will have 15 calendar days to revise it and return it to BAS. All monitored providers completing a POC are advised to maintain documentation of the corrective actions taken. This information will be used for future validation activities. The type of documentation required should be in accordance with the specific monitoring process. In some cases, these corrective actions will be validated	September 2017	June 2018	Provider Tracking Tool

		during future monitoring activities, or the monitored entities may be asked to submit documentation to the appropriate reviewing entity.			
19	Notify Providers of Decision	After the completion of the onsite monitoring reviews, settings that are presumed to have institutional qualities per the Centers for Medicare and Medicaid Services (CMS) requirements will be identified. When such settings are determined to have the qualities of a home and community-based setting, information on these settings will be submitted to CMS for heightened scrutiny. Providers will be notified of BAS' initial decision regarding the setting's eligibility. Providers determined to be ineligible will be provided appeal rights. Providers will be expected to comply with applicable 55 Pa. Code Chapter 6100 requirements.	August 2018	September 2018	Notification to providers
20	Notify Participant of Decision	Individuals served by providers determined to be ineligible will be notified of the provider's ineligibility and what actions participants may expect. Supports Coordination agencies will also be notified. This initial monitoring process will be complete in the summer of 2018. The ISP team must discuss the option of other willing and qualified providers or other services that will meet the individual's needs and ensure their health and safety. The Supports Coordinator will be responsible for documenting this discussion.	August 2018	September 2018	Notification to participants
21	Public Notice	A public notice will be published which will list the provider name, the county in which the setting is located, the waiver service(s) provided at the setting, and the number of individuals authorized to receive services in the setting along with the determination that the setting falls into one of the following categories: • Ineligible for waiver reimbursement as of March 2019, • Eligible for waiver reimbursement, or • Eligible for waiver reimbursement and meets criteria for CMS heightened scrutiny process.	November 2018	December 2018	Public Notice
22	Access Issues	Determine whether access issues may be created by providers who are no longer eligible/willing to provider waiver services. Access issues are defined as the inability of an individual/family to locate a willing and qualified service provider and/or the inability of a Supports Coordination Agency to secure a willing and qualified provider	November 2018	December 2018	Provider Tracking Tool

		for individuals requesting services.			
23	Transition	Ensure that individuals who receive services in ineligible settings transition to willing	December	March	Provider
	Participants	and qualified providers, if necessary.	2018	2019	Tracking Tool
24	CMS Heightened	Send list of settings/providers determined eligible in accordance with the waiver to	March 2019	March	List of Eligible
	Scrutiny	CMS for Heightened Scrutiny process.		2019	Providers
25	Ongoing	All waiver providers are continuously monitored for compliance per waiver	March 2019		Provider
	Monitoring	requirements. Providers will be monitored for compliance with applicable waivers, regulations and policies which will include compliance with the CMS HCBS Final Rule.		Ongoing	Tracking Tool
26	Public Notice of CMS Heightened Scrutiny	Notice will be published in the Pennsylvania Bulletin regarding the settings/provider CMS accepted as being home and community based and those that CMS denied as being home and community based.	As determined by CMS	Ongoing	Public Notice
	Determination				

ł	Action Item	<u>Description</u>	Start Date	Target End Date	<u>Deliverable</u>
	Develop Communication Materials	Create Transition Plan Website links, link to register for webinars, public comment mailbox, information handouts, public communication brief	December 2014	December 2014	Communication Materials
		Action Complete – ODP specific documents can be accessed at			
		http://dhs.pa.gov/learnaboutdhs/dhsorganization/officeofde			
		velopmentalprograms/ODPHCBS/index.htm			
		Statewide documents can be accessed at			
		http://www.dhs.pa.gov/citizens/hcbswaiver/			
	Public Notice &	Official notification through PA Bulletin to begin the public	December 2014	February 2015	Public notice
	Comment	comment period on waiver amendments/revisions and			
		published draft transition plan including: submission,			
		consolidation, documentation, and review of public comments			
	Stakeholder	Two webinars held to obtain public comment on proposed	January 2015	January 2015	Public Notice, Notes
	Webinars	Adult Autism Waiver transition plan.			from Webinar
		Action Complete - The notice above shows that webinars			
		were held on January 14, 2015 from 1pm to 4pm and January			

		15, 2015 from 9am to 12pm.			
4	Transition Plan Revision	Incorporation of stakeholder comment and feedback on the Adult Autism Waiver transition plan, submission of final waiver amendment and transition plan to CMS, and publication of submitted plan and comments received and BAS responses.	February 2015	March 2015	Waiver Amendment, Transition Plan, Comment and Response Document
		Action Complete – The ODP public comment and response document as well as the summary of changes made to the			
		ODP transition plans can be accessed at			
		http://dhs.pa.gov/learnaboutdhs/dhsorganization/officeofde			
		velopmentalprograms/ODPHCBS/index.htm			
5	ODP Stakeholder	Provide stakeholders with an overview of the CMS HCBS Final	April 2015	April 2015	Summary of
	Meetings	Rule and obtain feedback from stakeholders to help in the			Stakeholder Input
		development of recommendations to help Pennsylvania come into compliance with the CMS final rule.			
		into compliance with the civis final rule.			
		Action Complete – Meetings were held April 6 – 8, 2015.			
6	ODP Stakeholder	ODP stakeholder workgroup will be developed to assist ODP in	October 2015	March 2016	Draft service
	Workgroup	drafting waiver service definitions and provider qualification			definitions and
		criteria.			provider qualifications
7	Provider &	On-going engagement highlighting updates and revisions to	April 2015	March 2019	Training, Stakeholder Involvement Plan
	Stakeholder Training	Pennsylvania's regulations, policies, and procedures; training on compliance to the HCBS Final Rule and transitioning activities			involvement Plan
		for individuals with an intellectual disability, families, supports			
		coordinators, providers, and staff.			
		,,			
		A webcast providing an overview of the CMS HCBS Final Rule			
		was released in September 2015 and can be accessed at			
		http://www.odpconsulting.net/resources/webcasts-			
	O	videos/cms-final-rule/	D	March 2040	Chalabalda
8	Ongoing Stakeholder Engagement	Continued engagement with stakeholder community on regulations and department updates, sustaining an inclusive,	December 2014	March 2019	Stakeholder Involvement Plan
	Liigageiiieiit	person-centric focus that is transparent to individuals and the			mivolvement Flan
		community while providing accountability to all parties			
		involved.			
9	Develop Provider	Provide ongoing engagement with service providers to help	January 2016	March 2019 and	Strategy document for

Base	build capacity for provision of services in more integrated	ongoing	developing an
	settings.		enhanced provider
			base