Date	Organization	Commenter Issue	Comment	Response	
12.24.2014	DRN	Assessment	The transition plan should indicate that the Provider Self-Assessment tool will be issued to every provider enrolled in each waiver to ensure a comprehensive assessment of settings.	OLTL plans to distribute the Provider self-survey to all OLTL waiver providers.	
12.24.2014	DRN	Assessment	DRN supports doing on site visits of every setting. The transition plan should be clear that pursuant to the new regulations, every setting in which any waiver service is provided-residential and non-residential, licensed and unlicensed-will be evaluated.		
12.24.2014	DRN	Assessment	DHS should issue a report of providers that share an address with or are immediately adjacent to an unallowable setting.	OLTL will share the results of assessment activities with the public through its website, advisory group meetings, and other venues as indicated in the transition plan. (section 2-Assessment # 8).	
12.24.2014	DRN	Assessment	On site visits should include participants, especially those in segregated settings such as personal care homes, sheltered workshops, and segregated day programs, this could be done with the participant monitoring tool.	OLTL intends to use the participant monitoring tool to ensure participants are receiving services in the most integrated settings that comport with the HCBS rule.	
12.24.2014	DRN	Assessment	Regarding assessment #8- DHS's reports of assessment results should include: provider, compliance status, location, services provided, waivers involved, number of participants served, and number of participants under 21. No personal identifiable or confidential information should be publically disclosed.	OLTL agrees and this was added to the transition plan. OLTL ensures that all materials are properly redacted prior to sharing with the public.	
12.29.2014	CLS	Assessment	In the Independence waiver transition plan: are Adult Daily Living services the only licensed setting in which Independence waiver services are provided? What unlicensed settings will be assessed for compliance? How will settings that present themselves as "independent housing" but more closely resemble provider-owned and controlled facility be identified and assessed? In addition the list of changes proposed to be made to licensing requirements should be open to stakeholder input for all four waivers.	OLTL will be assessing all providers through the Provider Self-Assessment tool, QMET on-site visits, and use of the participant monitoring tool. This will ensure that we are evaluating all settings. This will help identify all settings that are not in compliance regardless of licensure.	
12.29.2014	CLS	Assessment	More information needs to be provided to understand how the Department plans to use GIS.	GIS will assist OLTL in identifying HCBS providers that share an address with a institution as well as providers that are immediately adjacent to a public institution.	

12.29.2014	CLS	Assessment	We urge the Department not to rely primarily on self-reports concerning compliance, instead we urge you to consider licensing information, provider qualification reviews and support coordinator reports, conduct site visits as necessary: and solicit input from consumers and advocates.	OLTL agrees with this comment and will not be relying solely on the provider self-assessment. OLTL intends to use the self-assessment as an initial tool to evaluate and prioritize the on site visits. OLTL will be considering the use of the provider self-assessment tool as part of the regular ongoing monitoring to ensure ongoing compliance. In addition, OLTL will be utilizing the participant monitoring as a way to evaluate settings.
12.29.2014	CLS	Assessment	We also urge the Department to seek and consider input from stakeholders and the public as you gather data concerning whether services are being provided in unallowable settings and settings which are presumed not to be eligible. Consumers and disability and aging advocates (including ombudsman programs have knowledge gained from experience which should be included in the data under consideration.	S OLTL will offer opportunity for public input on its determination of compliant and non-complaint settings.
12.29.2014	CLS	Assessment	We are pleased that OLTL plans to share the results of its assessment activities with the public. In particular, there should be public notice of settings/providers that have been determine unallowable and ask that there be an opportunity for comment as well. We ask that there be an opportunity for comment on settings which are presumed unallowable (for example because they are co-located in a nursing facility) but the Department determines that the setting is in fact home and community based, including the plan to achieve compliance.	OLTL will comply with CMS requirements on disclosure of findings.
12.29.2014	CLS	Assessment	DHS needs to develop and implement processes to detect settings which may present themselves as "independent housing" but which in fact are provider-owned or controlled boarding homes.	OLTL will identify these settings through the Provider self-assessment and follow-up visit by our Quality Management Efficiency Teams (QMET).
12.29.2014	CLS	Assessment	For the AIDS and Attendant Care transition plan it is concerning that the intention is to skip much of the assessment and remediation processes. First, the information in the deliverable column indicates that only AIDS waiver participant who were agreeable to onsite visits were surveyed, how will DHS determine whether the others are receiving services in their own homes?	OLTL will incorporate the use of the Provider Self-Assessment tool into the AIDS and Attendant Care transition plans.
12.29.2014	CLS	Assessment	DHS should collaborate with the Department of Health to determine whether home health or personal care agencies which they license also provide housing to waiver consumers.	OLTL will consider this recommendation as we move forward with the Assessment phase of the transition plan.

12.13.2014	Barb Dively	Barb Dively	Assessment	Having consumer satisfaction assessed by the Supports Coordinator seems unwise if you expect waiver participants to speak freely. And written surveys are unlikely to be returned by those with brain injury. What is your objection to having an outside organization perform a phone survey of all participants?	The participant monitoring tool referenced in the transition plan is not intended to measure only consumer satisfaction. OLTL has a separate participant satisfaction survey that we issue directly to participants on a quarterly basis. The participant monitoring tool is to assess whether participants are receiving the services that are needed and are residing in a compliant setting.
12.29.2014	PA Adult Day Services Association (PADSA)		Assessment	PADSA strongly urges OLTL to take full advantage of the discretion it has to present evidence to CMS that certain non-residential Adult Daily Living service settings meet the HCBS requirements regardless of their physical location.	OLTL will take this comment into consideration. OLTL will look at each setting on a case by case basis.
12.29.2014	PADSA		Assessment	We recommend OLTL to define the term "greater Community" which is referenced but undefined by CMS.	OLTL will work with other Department of Human Services offices in further defining terms as they relate to the HCBS final rule and the statewide transition plan.
12.29.2014	PADSA		Assessment	PADSA urges OLTL to include an action step that would establish a mechanism to share the consumers ISP with each of the consumer's providers to ensure continuity of services.	OLTL does not require service coordinators to provide the entire service plan to all providers to protect participant privacy. However, they are required to provide a Service Authorization Form that contains the information related to the services required from that specific provider.
12/24/2014	DRN		Education/Outreach	Use plain, first person language and all communications should be accessible. Email lists, service coordinator visits, local meetings, work groups and advisories should be part of education and outreach. DHS should involve self-advocates and peer training.	OLTL currently uses email lists and webinars to provide education and outreach to our stakeholders. OLTL will seek input from stakeholders on the best way to reach participants for comment on the HCBS transition plan. OLTL will use our key stakeholders to assist in identifying ways to reach and involve participants in the process.
12.24.2014	DRN		Education/Outreach	Stakeholders need to be involved before policies become final. The plans should state that DHS will notify the public about proposals to revise policies and have public comment periods. All proposed changes should go through public comment via the PA Bulletin and regulatory review process.	OLTL currently circulates all drafted policies and procedures to the Long-Term Care Sub Committee of the MAAC for stakeholder review and comment as well as distributing materials through our list serve for public review and comment. OLTL will utilize the PA Bulletin to communicate substantive changes to the HCBS transition plan.

12.24.2014	DRN	Education/Outreach	All tools and materials should go through the public comment process this includes all deliverables within the transition plan.	OLTL has received public input through the LTCS on the participant monitoring tool and we will continue to use that process in addition to using our email list serves for the Provider self survey and any subsequent materials.
12.29.2014	CLS	Education/Outreach	We urge the Department to seek input from consumers and advocacy groups about areas in which community integration should be strengthened and which the transition plan could address. For example, employment related services.	Once the Assessment phase is completed, OLTL will seek stakeholder input on further changes.
12.13.2014	Barb Dively Barb D	ively Education/Outreach	The methods for maintaining stakeholder contact do not seem relevant for the brain injury families and survivors on the Independence Waiver. Can you circulate your information through the Disability Rights Network which reaches many people who could share the information with their networks?	Network.
12.29.2014	PADSA	Education/Outreach	PADSA recommends including an action step to form a work-group of non-residential stakeholders and providers to serve as an advisory body for the implementation of the transition plan.	OLTL currently uses the LTC Sub Committee of the MAAC as the venue in which to solicit input on policy and operational matters. OLTL also uses small stakeholder workgroups when developing policies. During the transition process, use of these workgroups will continue and public input meetings will be held to garner additional input.
12.24.2014	DRN	Identification	The plans should describe how key stakeholders were identified	OLTL will use its current LTCS in addition to distributing materials to our list serves for review and comment, and hosting webinars for public review and comment.
12.29.2014	Community Legal Services (CLS)	Identification	List of key stakeholders should be made public. All assessment findings of policies etc. should be made public.	OLTL will make assessment findings available to the public. Stakeholders include all OLTL providers, members of the Long- Term Care Sub Committee of the MAAC, and other interested individuals who self-identify. In addition, depending on the action step within the transition plan, the stakeholders involved may differ.

12.24.2014	DRN	Remediation	The transition plan should provide for a policy that no new participant can get services in a non-compliant or presumptively non-compliant setting.	OLTL agrees that for any provider that is determined non-complaint as a result of the assessment process a corrective action plan will be developed which may or may not include a moratorium on serving new participants.
12.24.2014	DRN	Remediation	The plan should state that DHS will not allow new provider, provider moves, or expansion of providers in settings that are non-compliant or presumed non-compliant.	OLTL will look at this on a case by case basis based on the outcome of the assessment and provider circumstances. For example, a provider may need to move operations to bring them into compliance. However, OLTL agrees that new providers will not be enrolled if they are non-compliant or presumed non-compliant.
12.24.2014	DRN	Remediation	Presumptively non-compliant settings should not remain in the system. The QMET on-site monitoring tool to be used should be revised through a public comment process to include all regulatory requirements. DHS should share with the public the evidence it intends to submit to CMS and follow all public notice and public comment requirements for settings presumed non-compliant.	findings.
12.24.2014	DRN	Remediation	The transition plan should have steps to develop services, supports, and opportunities for people with disabilities to seek and obtain competitive employment.	As stated in the transition plan, OLTL will review policies, regulations, and procedures including evaluating waiver service definitions related to employment.
12.24.2014	DRN	Remediation	OLTL should specify concrete actions to build provider capacity rather than vaguely stating "it will develop a strategy to expand the provider base"	OLTL believes an assessment is necessary to inform our strategy moving forward with the assistance of stakeholder involvement.
12.24.2014	DRN	Remediation	# 10 should state that persons who will have to transfer from non-compliant or presumed non-compliant settings will get advance, accessible notice through a phone call and/or visit from the Service Coordinator in addition to a letter, which will ensure that this important information is received and understood.	OLTL has modified the plan to include this language. In addition, § 52.61. provider cessation of services, outlines requirements for provider cessation of services.

12.24.2014	DRN	Remediation	#11 section should be revised to "Service Coordinators will work with participants to offer choices of qualified waiver providers that comply with the new regulations and to choose from among integrated settings to receive services, through person-centered planning, and facilitate a safe, timely transition to the chosen new provider. OLTL will work directly with providers to develop programs and services in compliant settings when needed to ensure participants' access to services in the community.	OLTL agrees with the comment and has added it to the transition plan.	
12.24.2014	DRN	Remediation	The participant monitoring tool needs revision.	The participant monitoring tool will go through a pilot phase beginning January 5, 2015 through March 2015. OLTL will be revising the participant monitoring tool as a result of any findings and suggestions in the pilot phase.	
12.24.2014	DRN	Remediation	OLTL (DHS) should use Relay and other effective communication to ensure access to its hotline for reporting non-compliance. DHS should also allow for email and communication with service coordinators for reporting non-compliance.	OLTL will take this comment into consideration moving forward.	
12.29.2014	CLS	Remediation	Proposed changes to licensing requirements, policies or provider standards should be shared with stakeholder groups for comment.	OLTL currently circulates all drafted policies and procedures to the Long-Term Care Sub Committee of the MAAC for stakeholder review and comment.	
12.29.2014	CLS	Remediation	It is essential that the quality assurance process operate in a timely and effective manner to require compliance and relocate consumers if OLTL plans to rely on its existing quality assurance structure.	OLTL will take this comment into consideration as we move forward with the transition plan.	
12.29.2014	PADSA	Remediation	PADSA encourages OLTL to include rate reviews and adjustment where necessary as a specific action step to address developing and maintaining an adequate provider base.	OLTL will work with other Department of Human Services Offices on provider capacity issues as relate to the HCBS final rule and the statewide transition plan.	
12.13.2014	Barb Dively	Barb Dively Transition Plan	The vagueness of the CMS settings requirements means that each person may need to be interviewed to understand how they are meeting the government's goals – whether they want to be integrated within their local community or not. What about people who choose not to integrate? How will that affect the rating of the provider's compliance? Brain injury families and survivors on the Independence Waiver were just recently relocated – and now may face another move. Can you provide 6 months' notice for any required moves?	OLTL is required to follow all of CMS requirements in determining allowable settings. Timeframes for transition will be determined based on person centered service planning and provider circumstances.	