



NC Department of Health and Human Services

Home and Community Based Services (HCBS) Monitoring

June 16, 2023

Presenters

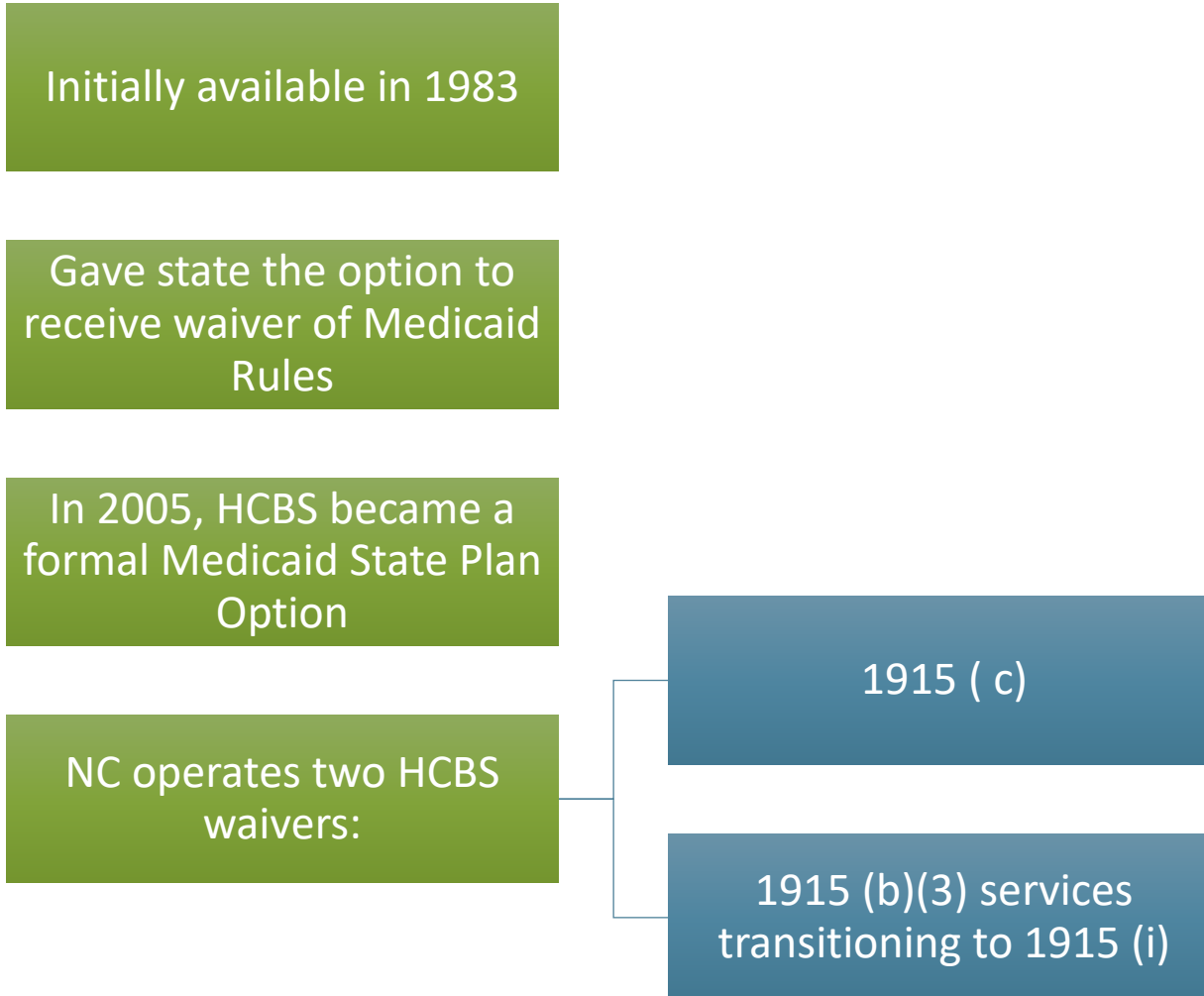
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| <p><i>Stephanie Jones, I/DD & TBI Policy Consultant Division of Mental Health, Developmental Disabilities and Substance Abuse Services</i></p> | <p><i>LaCosta D. Parker, IDD Policy Consultant, Division of Health Benefits</i></p> |
| <p>Stephanie Jones has dedicated her life to improving the lives of people with disabilities. Stephanie has worked for multiple governmental agencies in a range of capacities, from an Eligibility Specialist to Creating and Updating State-funded services for individuals with Intellectual and Developmental Disability and Traumatic Brain Injury. Stephanie joined NCDHHS in 2008 and has worked as an IDD/TBI Consultant with Division of Mental Health, Developmental Disabilities and Substance Use services with a focus on behavioral health services. Since the development of the Home and Community Based Services Transition Plan, Stephanie has been a key component in ensuring North Carolina meet all requirements.</p> <p>Stephanie has a Political Science degree from North Carolina Central University</p> | <p>LaCosta Parker has committed her professional career to support individuals in accessing better opportunities to improve their life outcomes. LaCosta has worked in the field of Human Services for 25 years in varying capacities, including direct care, Case Management, and Utilization Management. Since 2017, LaCosta has filled the role as an IDD Policy Consultant with the Division of Health Benefits. LaCosta works with the Department of Health and Human Services HCBS Internal Team to support North Carolina in aligning with The Centers for Medicare and Medicaid HCBS settings requirements.</p> <p>LaCosta has a Sociology degree with a concentration in Social Welfare from Winston-Salem State University and a Master’s in Social Work from North Carolina State University.</p> |

Agenda

- **History of Home and Community Based Services**
- **Conflict Free Care Management**
- **Final Settings Rule**
- **HCBS Impacted and Non-Impacted Services**
- **HCBS Ongoing Monitoring**
- **HCBS Monitoring Examples**
- **DHHS Quality Assurance**
- **Resources**

History of Home and Community Based Services

History of Home and Community Based Services



Conflict Free Care Management

Conflict Free Care Management

Promotes
consumer choice
and independence

Protection for
individuals
receiving services

Limits conscious
or unconscious
bias

Final Settings Rule

Purpose of Final Settings Rule: Statewide Transition Plan

CMS required a Statewide Transition Plan (STP)

STP addressed only settings requirements

STP ensures individuals access to their communities

STP ensures opportunities to seek

Competitive Integrated Employment

Select services/supports

Choice in Provider

Access to community life as others

Final Settings Rule: Living Standards



Home and Community Based Settings Requirement.

Individuals are provided opportunities to seek employment and work in competitive integrated settings engage in community life and control personal resources.



The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community.

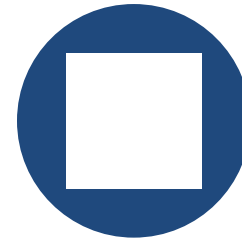


Individuals receive services in the community to the same degree of access as individuals not receiving Medicaid HCBS.

Final Settings Rule: Living Standards



Settings must optimize individual initiative, autonomy, and independence in making life choices.



Ensure everyone's rights of privacy, dignity, respect and freedom from coercion, and restraint are protected.



Individuals must have the rights to select the setting from among available options.



Settings must optimize individual autonomy, and independence in making life choices.

HCBS Impacted and Non-Impacted Services

HCBS Impacted and Non-Impacted Services

Impacted Services:

- Residential Supports (provided in 5600 b and c group homes, licensed 5600(f), AFLs, and unlicensed AFLs).
- Day Supports (provided in 2300 licensed day programs and adult day health/care programs certified under 131D).
- Supported Employment

Non-Impacted Services:

- Services provided under the CAP/C waiver.
- Services provided in privately owned homes.

HCBS Ongoing Monitoring

HCBS Ongoing Monitoring

Care Management Monitoring

Care Management Monitoring Expectations

Addressing HCBS Setting Non-Compliance

HCBS Monitoring Tool

DHHS Quality Review

HCBS Care Management Monitoring



Care Management monitoring ensures all individuals are receiving services in appropriate HCBS settings.



HCBS settings elements were added into existing Care Coordination monitoring tools.

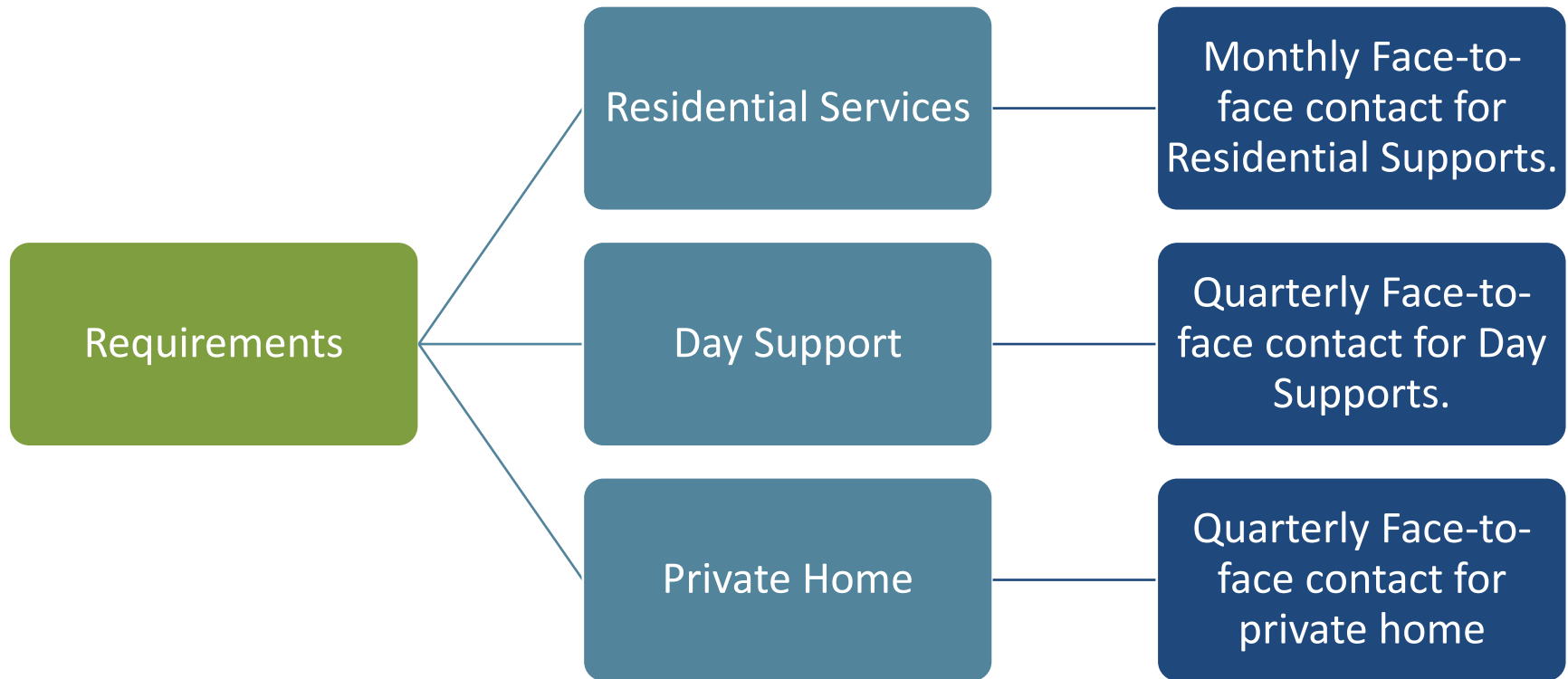


Care Management Monitoring delivers continuous monitoring and oversight system.

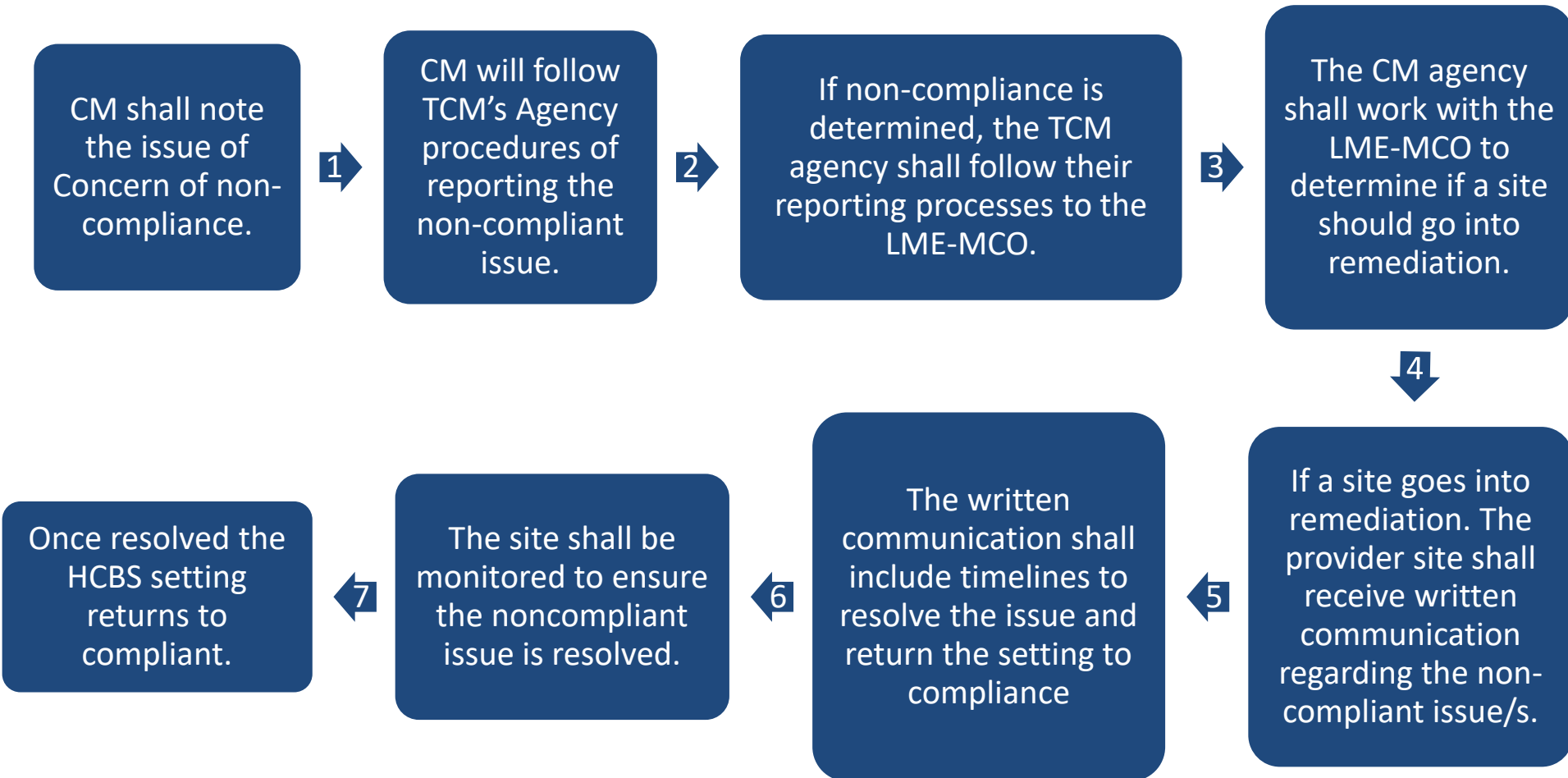


Impacted and non-impacted services will be monitored.

HCBS Care Management Monitoring Expectations



Addressing HCBS Setting Non-Compliance



HCBS Monitoring Tool

LME/MCO

Care Coordinator/Case Manager:

Site Name:

Site Address:

Site: AFL Unlicensed AFL Licensed Group Home (license: 5600) Adult Day Health

HCBS: LME/MCO TP CAP/DA

| | | |
|------------------------------------|--------------------|----------------------------|
| HCBS MONITORING CHECK SHEET | | |
| PROVIDER: | INDIVIDUAL: | DATE OF MONITORING: |



Minimum responsibility for general monitoring is to be alert for these items, ask individual about items, discuss with provider QP as applicable to confirm that all requirements are met, follow-up further as indicated. Items marked as unmet will require a comment.

| Standard | Type of Setting | Met/Unmet | Comments |
|--|------------------|-----------|----------|
| Does the individual live/receive services in the same areas of setting as an individual not receiving Medicaid HCBS (Individual receiving waiver services is not separated or unable to interact with other individuals in the setting.) | | | |
| Does the setting fit in with surrounding neighborhood? (no permanent parking spaces; no signs in yard indicating the home is a group home; another group home or day program is not located on the same property or immediately adjacent.) | Residential Only | | |

HCBS Monitoring Tool

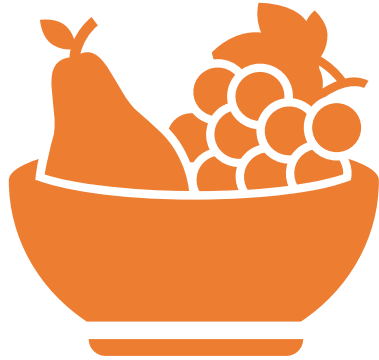
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| Is the home in location that supports full access to the greater community or is transportation available to access the community? | Residential Only | | |
| Observation/report that individual is involved in meal planning | Residential Only | | |
| Observation/report indicates individuals are not required to sit at an assigned seat in the dining area and may choose with whom to eat; individuals are not required to wear bibs, clothing protectors, or use disposable cutlery, plates and cups (in their home). | Residential Only | | |
| Observation/report that individual has access to food/snacks of their choosing at the time of their choosing | Residential Only | | |
| There is "NOT" evidence/report that visitors are restricted to specified visiting hours or restricted to a specific 'visitors' area. | Residential Only | | |
| Observation/report that individual has privacy in their living space. | Residential Only | | |
| Do staff or other residents always knock and receive permission prior to entering an individual's living space? | Residential Only | | |
| Observation that the individual has a key to the home and their room. | Residential Only | | |
| Observation/report that the individual can lock their bedroom door | Residential Only | | |
| Do staff only use a key to enter a living area or privacy space agreed upon with the individual? | Residential Only | | |
| Observation/report that furniture arranged as individual prefers in his/her living space and they are allowed to decorate? | Residential Only | | |
| Does the individual have telephone or other technology in their own room or in a location that has space around it to ensure | Residential Only | | |

HCBS Monitoring Tool

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|---|---------------------------|--|--|
| Observation indicates the individual is working in an integrated setting. | Supported Employment Only | | |
| Observation/report that there are NO changes in appearance since last visit. | | | |
| Observation/report at site indicates that schedules of individuals for physical therapy (PT), occupational therapy (OT), medications, restricted diet, etc., are not posted in a general area for all to view. | | | |
| Evidence/Observations of personal preference assessments to identify the kinds of work and activities individual wants to participate in? | | | |
| Observation indicates that the individual has unrestricted access in the setting (there are no gates, Velcro strips, locked doors, or other barriers preventing individuals' entrance to or exit from certain areas of the setting (excluding staff office/staff living quarters; individual has unscheduled access to food, phone, internet, etc.) | | | |
| Observation/report indicates that tables and chairs are at a convenient height and location so that individuals can access and use the furniture; that appliances are accessible to individuals (e.g., the microwave at any site is accessible or the home washer/dryer are front loading for individuals in wheelchairs). | | | |
| Observation indicates that staff communicate with individuals in a respectful manner with individuals in the setting while providing assistance and during the regular daily activities. | | | |

HCBS Monitoring Examples

HCBS Monitoring Examples



You are monitoring a visit and you see an individual go for a Snack.



You witness the staff responding “no, you cannot have a snack now.”

HCBS Monitoring Examples



A MIE survey was received at a site that you are responsible for monitoring. The survey indicates the provider agency does not support choice for employment options.



You arrive at the monitoring site and notice signage informing guests of visiting hours between 10 am- 5 pm.

HCBS Monitoring Examples



You conducting a monitoring visit in an AFL setting. You and the member arrive at the same time. The member states, they have a new TV and would like for you to see it. The member asks the staff to unlock the front door.



When asked, the member states they do not have key, and staff confirms.

Staff further states they do not have a key due to safety concerns. The TCM notes the safety issue is not documented in the ISP

HCBS Monitoring Examples

What should you do?

- A. Ask the staff what the agency policy regarding the non-compliant issue.
- B. Note the staff's response and interaction.
- C. Document the monitoring non-compliance.
- D. Address non-compliance with their supervisor.
- E. Report the non-compliance to LME-MCO/TP.
- F. LME-MCO/TP shall confirm provider policy and procedure aligns with HCBS settings rule.
- G. The LME-MCO/TP will determine setting compliance.
- H. If setting is not complaint the LME-MCO/TP will formally advise the provider agency of the non-compliant issue.
- I. Provide technical assistance (if requested).
- J. Provide timeframe for the provider to remediate to compliance.
- K. TCM/CC will revisit the setting to monitor compliance.

DHHS Quality Assurance

DHHS Quality and Assurance

HCBS Internal team will complete QA reviews quarterly.

QA will be completed on a sample of provider self assessments.

HCBS Internal Team will work with the Plans when Provider self assessments are out of compliance.

Resources

Resources



[GUIDANCE ON CONFLICT-FREE CARE
MANAGEMENT FOR TAILORED PLAN
MEMBERS](#)



[HCBS STATEWIDE TRANSITION PLAN](#)

Questions?