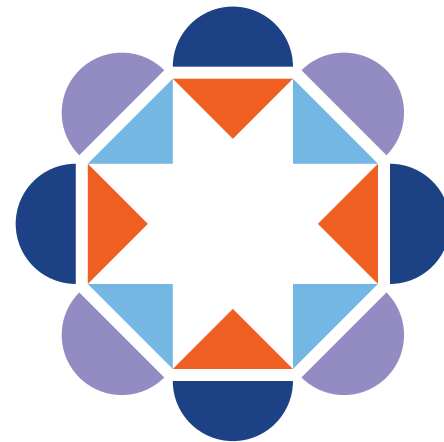


Illinois Final Statewide Transition Plan

Public Education Webinar



HFS

Illinois Department of
Healthcare and Family Services

Impacted Illinois HCBS Waivers

- **The Illinois Department of Healthcare and Family Services (IDHFS) operates the Supportive Living Program (SLP) Waiver**

- **IDHFS delegates operations of eight waiver programs to these sister agencies:**

Illinois Department of Human Services' Division of Developmental Disabilities (IDHS-DDD)

- HCBS waiver for Adults with Developmental Disabilities
- Residential Services for Children and Young Adults with Developmental Disabilities
- Support Services for Children and Young Adults with Developmental Disabilities

Illinois Department of Human Services' Division of Rehabilitation Services (IDHS-DRS)

- HCBS waiver for Persons with HIV or AIDS
- HCBS waiver for Persons with Brain Injuries
- HCBS waiver for Persons with Disabilities

Illinois Department on Aging (IDoA)

- HCBS Waiver for Persons who are Elderly

University of Illinois at Chicago, Division of Specialized Care for Children (DSCC)

- HCBS Waiver for Children who are Medically-Fragile, Technologically-Dependent

Upcoming Forums for Public Input on Illinois' Statewide Transition Plan (STP)

Webinars for Public Comments on Illinois Department of Human Services' Division of Developmental Disabilities (IDHS-DDD)

- Tuesday, October 11, 2022—4:00 pm to 5:00 pm
- Wednesday, October 12, 2022—9:00 am to 10:00 am

Webinar for Public Comments on Illinois Department of Human Services' Division of Rehabilitation Services (IDHS-DRS), Illinois Department on Aging (IDoA), Illinois Department of Healthcare and Family Services' Supportive Living Program (IDHFS-SLP), and Division of Specialized Care for Children (DSCC)

- Friday, October 14, 2022—10:30 am to 12:00 pm

Home and Community-Based Services (HCBS) Final Rule

79 FR 2947

- Addresses several sections of Medicaid law under which states may use Federal Medicaid funds to pay for HCBS
- Ensures that individuals receive HCBS in the most integrated settings and have full access to the benefits of community living
- Defines Person-Centered Planning requirements
- Defines requirements for HCBS Provider Settings
- Defines provider settings that are NOT Home and Community-Based

Focus of Statewide Transition Planning:

Compliance with HCBS **Settings** Requirements

- Deadline for full compliance: **March 17, 2023**
- States should already be compliant with Person-Centered Planning requirements.
- Statewide Transition Plans should include a state's discussion on the work they have done to comply with HCBS Settings requirements, how states are fixing non-compliance concerns, and how states are ensuring no disruption to customer services.
- States must ensure **Provider** locations that receive HCBS funding are compliant with HCBS Settings criteria and show evidence of compliance within their plans.
- Rules, case management work, forms, policies should also be compliant with HCBS Settings criteria.

Recap of Requirements under the Settings Rule FOR RESIDENTIAL AND NON-RESIDENTIAL PROVIDER SETTINGS

42 CFR 441.301(c)(4)(i)-(v)

Residential and Non-Residential HCBS Settings must have the following qualities:

- **Be integrated in and support full access to the community, including**
 - Opportunities to seek employment and work in competitive integrated settings
 - Engage in community life
 - Control personal resources
 - Receive services in the community
- **Be selected by the person from among settings options including non-disability specific settings, option for private bedroom in a residential setting**
- **Ensure individual rights of privacy, dignity and respect, and freedom from coercion and restraint**

Recap of Requirements under the Settings Rule FOR RESIDENTIAL AND NON-RESIDENTIAL PROVIDER SETTINGS

42 CFR 441.301(c)(4)(i)-(v)

Residential and Non-Residential HCBS Settings qualities continued:

- **Optimizes, but does not regiment:**
 - Individual initiative
 - Autonomy
 - Independence in making life choices, including but not limited to:
 - Daily activities
 - Physical environment, and
 - With whom to interact
- **Facilitates individual choice regarding services and supports, and who provides them**

Requirements under the Settings Rule FOR PROVIDER-CONTROLLED SETTINGS

42 CFR 441.301(c)(4)(vi)(A-E)

- **Residential Provider-Controlled Settings Must Ensure:**
 - A. - A lease or other legally enforceable agreement providing similar protections to local and municipal rules and laws
 - B. - Individual privacy with lockable doors, choice of roommate(s), and freedom to furnish or decorate the unit
- **ALL Provider-Controlled Settings Must Ensure:**
 - C. – Individual customer control of own schedule including access to food at any time
 - D. – Customer access to visitors at any time
 - E. – The setting is physically accessible

Modifications to HCBS Settings Requirements A-E FOR PROVIDER-CONTROLLED SETTINGS

42 CFR 441.301(c)(4)(vi)(F)

“Modification” means the HCBS provider settings does not follow a Settings requirement and/or implements a restriction for a customer.

Modifications must:

- Be supported by an individually assessed need
- Justified in the individual customer’s Person-Centered Plan

Providers must document:

- The individually assessed need, previously used positive interventions/supports and less intrusive methods to address the need that did not work
- A clear description of the condition that is directly proportionate to the specific assessed need
- Include regular collection and review of data to measure the ongoing effectiveness of the modification.
- Established time limits for periodic reviews to determine if the modification is still necessary or can be terminated
- The informed consent of the individual
- An assurance that interventions and supports will cause no harm to the individual

Federal Centers for Medicare and Medicaid Services (CMS) Assert the Below Settings as NON-COMPLIANT with HCBS Settings Requirements:

- A nursing facility
- An institution for mental diseases
- An intermediate care facility for individuals with intellectual disabilities (ICF/DDs/SODCs)
- A hospital

42 CFR 441.301(c)(5)(i)-(iv)

Heightened Scrutiny

PROVIDER SETTINGS PRESUMED TO HAVE THE QUALITIES OF AN INSTITUTION

42 CFR 441.301(c)(5)(v)

The following three categories or “prongs” of residential or non-residential settings are presumed to have the qualities of an institution:

- **Prong 1:** Settings that are located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment;
- **Prong 2:** Settings that are in a building located on the grounds of, or immediately adjacent to, a public institution; and
- **Prong 3:** Any other settings that have the effect of isolating individuals receiving Medicaid home and community-based services (HCBS) from the broader community of individuals not receiving Medicaid HCBS.

In the heightened scrutiny process, the State may present evidence to CMS to argue that such sites are community-based and, if CMS accepts the State’s presentation, those sites will be allowed to continue as HCBS waiver settings.

Illinois Heightened Scrutiny Locations

2022

page 9-14

Illinois previously identified approximately 50 HCBS Provider Settings as Heightened Scrutiny locations through provider response to self-surveys and on-site assessments conducted by State HCBS Waiver Operating Agency staff.

Beginning in 2021, the State worked to refine their list of Heightened Scrutiny locations through clarification from Federal CMS, provider outreach, and collaboration with State Quality Assurance staff. The State also accounted for HCBS provider settings that have closed, become vacant, are individually-controlled, and are 100% State-Funded.

Current Total of Illinois Heightened Scrutiny Locations: 529

Illinois Heightened Scrutiny webpage: <https://www2.illinois.gov/hfs/MedicalClients/HCBS/Transition/Pages/HeightenedScrutiny.aspx>

Illinois Department of Healthcare and Family Services' Supportive Living Program (IDHFS-SLP) 2022 Heightened Scrutiny Locations

Page 12-13 of Final STP Draft

Total: 12

Prong 1: 11

Prong 2: 1

- SLP removed **11** Dementia Care SLP locations that were previously categorized as Prong 3. All customers now receive Elopement Risk Assessments. If there is not an individually assessed safety risk associated with freely entering and exiting the setting, delayed egress (controlled exit) cannot be imposed.
- SLP removed **12** SLP locations as it was determined that these locations were adjacent to PRIVATE institutions, not PUBLIC institutions.
- Two locations were removed due to withdrawal from the SLP waiver.
- The State has determined that all SLP Heightened Scrutiny locations are fully compliant with HCBS Settings requirements. The State presented evidence of compliance for all locations and did not receive public comment.

Illinois Department on Aging (IDoA)

2022 Heightened Scrutiny Locations

Page 13 of Final STP Draft

Total: 2

Prong 3: 2

- IDoA, in collaboration with HFS and IDHS-DRS, removed **2** Adult Day Service (ADS) locations from the Heightened Scrutiny list as they were determined to not have institutional or isolating characteristics.
- Six locations were removed from the list due to closure.
- The State has determined that both IDoA Heightened Scrutiny locations are fully compliant with HCBS Settings requirements. The State presented evidence of compliance for both locations and has not received public comment.

Illinois Department of Human Services' Division of Developmental Disabilities (IDHS-DDD) 2022 Heightened Scrutiny Locations

Page 13-14 of Final STP Draft

Total: 515

Prong 2: 2 CDS, 1 CILA

Prong 3: 183 CDS, 22 CGH, 296 CILA, 11 CLF

- From 2020 through 2021, IDHS-DDD release two provider self-surveys to identify sites with institutional and isolating characteristics. The Division conducted additional follow-up to providers and collaborated with Licensing and Quality Management staff to identify locations for placement on the State's Heightened Scrutiny list.
- Through enhanced validation efforts, the State identified and removed sites that were closed, became vacant/were not expected to re-open prior to March 2023, were determined to be 100% state-funded, and were determined to be individually-controlled.
- IDHS-DDD Heightened Scrutiny locations were reviewed through both desk audit and on-site assessments. The on-site assessments were completed by Public Consulting Group (PCG). The desk audits were completed by State agency staff and PCG.
- The State has consolidated compliance data on their IDHS-DDD Heightened Scrutiny locations and plans to post compliance findings on these locations for public comment before the end of October 2022.

2022 Settings Compliance Validation

page 14-16

Through feedback from CMS, the State identified a need to re-evaluate compliance of HCBS provider settings overseen by several HCBS Waiver Operating agencies. States must assess ALL brick-and-mortar HCBS provider settings; private residences presumed compliant.

- DSCC **excluded**—MFTD waiver services are delivered in the customer’s private residence.
- SLP **excluded**—annual and interim certification tools updated in 2017 to monitor for HCBS Settings compliance. All 155 SLP Provider sites assessed and determined compliant.

IDHFS partnered with IDoA, IDHS-DRS, and IDHS-DDD to develop Settings Compliance Validation tools.

- Process was informed through Technical Assistance from CMS contractor, New Editions, and through review of tools used by other states.
- Each HCBS Waiver Operating Agency tool had the same format, with IDHS-DDD’s accounting for Residential requirements.
- Three HCBS Settings requirements determined to be primarily the responsibility of case managers: opportunities for competitive-integrated employment, choice in HCBS provider setting (including non-disability setting options), and assurance of settings options that are based on customer need and preference.

2022 Settings Compliance Validation cont.

page 14-16

Conducting Assessments During the COVID-19 Pandemic

- State required to conduct on-site assessments for Heightened Scrutiny locations, but was permitted to conduct desk assessments for locations that were not presumptively institutional (Heightened Scrutiny). Two Heightened Scrutiny ADS sites previously received on-site visits, but were re-assessed. All IDHS-DDD Heightened Scrutiny sites received on-site visits.
- IDHFS collaborated with tech staff to build a web-based portal for ALL HCBS provider sites to submit evidence of compliance. The State built in compliance tracking tools to assess provider level of compliance with each

IDHFS partnered with IDoA, IDHS-DRS, and IDHS-DDD to develop Settings Compliance Validation tools.

- Process was informed through Technical Assistance from CMS contractor, New Editions, and through review of tools used by other states.
- Each HCBS Waiver Operating Agency tool had the same format, with IDHS-DDD's accounting for Residential requirements.
- The State engaged Public Consulting Group (PCG) to conduct on-site assessments for 515 IDHS-DDD Heightened Scrutiny sites.

Validation of IDHS-DDD Group Supported Employment Program (SEP) Providers

page 16-17

Enclave Employment Sites

- Through assistance from CMS contractor, New Editions, the State identified a need to evaluate Group SEP provider organizations for compliance with applicable HCBS Settings requirements because customers who participate in Group SEP belong to an enclave of up to 6 customers and Group SEP settings may involve work that occurs after normal business hours.

Twenty Group SEP provider organizations were evaluated for compliance with the following HCBS Settings requirement:

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

DDD Residential Provider

1. The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including:	N/A	Received	Sufficient	Insufficient
1b) Engage in community life	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
1c) Control Personal Resources	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
1d) Receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
3.	N/A	Received	Sufficient	Insufficient
3a) Ensures an individual's rights of privacy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
3b) Ensures and individual's rights of dignity and respect.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
3c) Ensures an individual's right of freedom from coercion.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
3d) Ensures an individual's right of freedom from restraint.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
4.	N/A	Received	Sufficient	Insufficient
4a) The setting optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to daily activities.	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
4b) Optimizes, but does not regiment individual autonomy, and independence in making life choices, including but not limited to physical environment.	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
4c) Optimizes, but does not regiment individual autonomy, and independence in making life choices, including but not limited to with whom to interact.	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>

2022 Compliance Results

page 17-20, Appendices A 1-4 and K

IDoA and IDHS-DRS

Total sites: 65; 62 ADS sites and Three Traumatic Brain Injury (TBI) Day Habilitation and Pre-vocational sites

Heightened Scrutiny: Two ADS sites fully compliant

Fully Compliant: 62

Could Come Into Compliance: Two ADS sites (fully remediated by July 2022)

Unable to Comply: One TBI Pre-Vocational Service site (no evidence submitted/non-responsive to outreach)

Non-Compliance Concerns

- Two ADS sites did not submit sufficient evidence of compliance with HCBS Settings requirements related to:
 - engagement in community life
 - assurance of individual rights such as right to privacy
 - Promoting individual autonomy in decision-making
 - Physical accessibility of the setting

2022 Compliance Results

page 17-20, Appendices A 1-4 and K of Final STP Draft cont.

IDHS-DDD

Group SEP

Total provider organizations: 20

Fully Compliant: 17

Will Come Into Compliance: Five organizations

Withdrawal as Provider: One organization

Unable to Comply: Two organizations

Five Group SEP Provider Organizations had one or more non-compliance concerns. The State expects these organizations to remediate all non-compliance concerns by October, 2022.

2022 Compliance Results

page 17-20, Appendices A 1-4 and K of Final STP Draft cont.

IDHS-DDD

CDS	CILA	CGH	CLF
Total sites: 284 Heightened Scrutiny: 185 Fully Compliant: 75 Will Comply: 209 Unable to Comply: 0	Total sites: 1,778 Heightened Scrutiny: 296 Fully Compliant: 701 Will Comply: 1,077 Unable to Comply: 0	Total sites: 27 Heightened Scrutiny: 22 Fully Compliant: 6 Will Comply: 21 Unable to Comply: 0	Total sites: 16 Heightened Scrutiny: 12 Fully Compliant: 3 Will Comply: 13 Unable to Comply: 0

Highest Areas of Non-Compliance

<ul style="list-style-type: none"> • Right to Dignity and Respect (51% non-compliance) • Access to Food at Any Time (67% non-compliance) • Right to Visitors at Any Time (57% non-compliance) 	<ul style="list-style-type: none"> • Initiative/Autonomy/Independence—Physical Environment (52% non-compliance) • Individual Choice—Services and Supports (53% non-compliance) • Access to Food at Any Time (57% non-compliance) 	<ul style="list-style-type: none"> • Freedom from Coercion (100% non-compliance) • Initiative/Autonomy/Independence—Physical Environment (76% non-compliance) • Initiative/Autonomy/Independence—Whom to Interact (86% non-compliance) 	<ul style="list-style-type: none"> • Initiative/Autonomy/Independence—Physical Environment (38% non-compliance) • Access to Food at Any Time (38% non-compliance) • Right to Visitors at Any Time (38% non-compliance)
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Remediation for HCBS sites/Compliance Action Plans

page 22-26 and Appendices F1-F4

Across All HCBS Waiver Operating Agencies, Sites Were Notified of one or more non-compliance concerns by way of Compliance Action Plan (CAP) templates.

- CAPs accompanied by instructions for completion and due dates.
- ADS providers were informed of each non-compliance concern as well as methods and deadlines for remediation. These providers had 60 days to submit evidence of remediation and did so by July of 2022.
- All IDHS-DDD providers, including Group SEP Provider organizations, were required to notify IDHS-DDD by e-mail of their remediation plans within 14 days of receiving their CAP. After submission of CAP plans, providers had 60 days to submitted evidence of remediation.
- The State expects IDHS-DDD Group SEP Provider organizations to fully remediate by October 2022.
- IDHS-DDD sites have begun to submit evidence of remediation. The State anticipates all sites with non-compliance concerns will have fully remediated by January of 2023.

Beneficiary Resolution

page 27-28

State Plans For Addressing Sites Who Are Unable to Comply

- Locations who do not submit completed CAPs and evidence of remediation
- Goal of Limiting Disruption to customers and ensuring preference
- IDHS-DDD will identify providers unable to comply by end of October 2022
- IDHS-DDD administrative staff and Independent Service Coordination (ISC) case managers will meet and work with impacted customers through February of 2023.
- Transitioning non-compliant sites to new management; allowing customers the option to stay in place or move to alternate compliant site.
- Intensive on-site visits to sites with new management, ensuring compliance with HCBS Settings prior to Final deadline.

Ongoing Compliance Monitoring

page 28-29

HCBS Waiver Performance Measures

- Across all HCBS Waiver Programs, the State has updated Performance measures to align with HCBS Person-Centered Planning and Settings requirements.
- MFTD Waiver Performance measures are centered on Person-Centered Planning given that services are provided in private residences.
- Managed Care Organizations have been training on new performance measures. Appendix H reflects action steps taken by the plans to monitor for compliance.

Annual and Interim Compliance Assessment Tools

- All HCBS Waiver Programs have updated their annual provider compliance monitoring tools to monitor for compliance with HCBS Settings and Person-Centered Planning requirements.
- All HCBS Waiver Programs have processes in place to ensure prospective provider sites do not have institutional or isolating qualities.

Ongoing Compliance Monitoring^{cont.}

Case Manager Responsibilities and Settings

- Community Care Unit (CCU) case managers for IDoA, Home Services Program Counselors (for IDHS-DRS), Independent Service Coordination (ISC) case managers (for DDD), Managed Care Organization case managers (for DRS, IDoA, and SLP).
- Responsible for opportunities for competitive-integrated employment, choice of settings options (including non-disability settings options), settings based on customer preference and need.
- Appendix E reflects Waiver Operating Agency Quality Assurance processes for monitoring case manager compliant.
- Division of Specialized Care for Children (DSCC) not included, but do ensure compliance with Person-Centered Planning requirements.

Training

- Annual and new provider and case manager trainings updated to include HCBS Settings requirements.
- Advancements to State agency staff training to include comprehensive HCBS Settings requirements.
- Advancements to Managed Care Organization training to include HCBS Settings requirements.

Systemic Remediation

page 20-21, Appendices B1-B5

Division of Specialized Care for Children (DSCC)

- HCBS Settings requirements are not applicable; HCBS services delivered in home.
- Continuous Care Coordination through DSCC
- Administrative rules, Compliance Monitoring tools, and forms previously updated to align with HCBS Person-Centered Planning requirements.
- Family Surveys are distributed when services begin, annually, at transition, and upon exit from the waiver program. These are used to gauge customer and family satisfaction.

Illinois Department on Aging (IDoA)

- Updated Health and Safety policy—requires individualized assessment in order to apply delayed egress (controlled) exit AND requires ADS provider sites to post community events, transportation resources, and job/volunteer opportunities
- Updated Illinois Administrative rules for ADS to incorporate HCBS Settings requirements.
- Person-Centered Plan of Care and ADS Person-Centered Plan of Care Addendum forms previously updated to align with HCBS Person-Centered Planning and Settings requirements

Systemic Remediation

page 20-21, Appendices B1-B5 cont.

Illinois Department of Human Services' Division of Rehabilitation Services (IDHS-DRS)

- Notification of required compliance with HCBS Settings requirements to all TBI Pre-Vocational, TBI Day Habilitation, and ADS provider settings utilized by DRS
- Updated Illinois Administrative rules for TBI/ADS providers and Customer Bill of Rights to incorporate HCBS Settings requirements. Posted to JCAR for 1st Notice in May 2022.
- Updated Home Services Program Service Plan to align with HCBS Person-Centered Planning requirements.

Illinois Department of Human Services' Division of Developmental Disabilities (IDHS-DDD)

- Updating Illinois Administrative rules for IDHS-DDD provider settings to incorporate HCBS Settings requirements. All rules expected to post to JCAR for 1st Notice by January 2023.
- Updated Personal Plan, Discovery Tool, and Provider Implementation Strategy forms to align with HCBS Person-Centered Planning and Settings requirements.
- Release of Informational Bulletins (policies) requiring Lease/Residency Agreements and Lockable Doors/Privacy

Systemic Remediation cont.

page 20-21, Appendices B1-B5

Illinois Department of Healthcare and Family Services' Supportive Living Program (IDHFS-SLP)

- Amending Illinois Administrative code for SLP providers to align with HCBS Settings requirements. The State anticipates JCAR 1st Notice to occur by January 2023.
- Implemented policy requiring individualized assessment in order to apply delayed egress (controlled exit).
- IDHFS-SLP waiver amendment to allow customers who do not require delayed egress, but who would otherwise qualify for residency, to reside in a Supportive Living Dementia Care setting.
- Previously updated Person-Centered Service Plan to align with HCBS Person-Centered Planning requirements.

Non-Disability Settings Options and Building Capacity

page 30-33

Illinois American Rescue Plan (ARP)

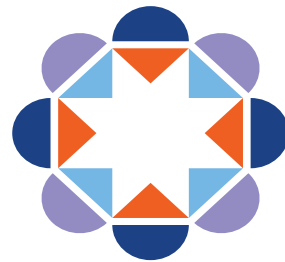
- One time spending/bonus pay and/or provider and/or case managers rate increases to address workforce stabilization and retention among all HCBS Waiver Operating Agencies.
- Allowance of unlicensed parents as paid caregivers for MFTD waiver customers.
- Improved training for in-home nurses serving MFTD waiver customers.
- DSCC will develop a portal in which nursing agencies can communicate needs for open shifts in need of coverage.
- IDHS-DRS will implement an application that allows customers to identify and begin the employment process with a verified Individual Provider.
- IDoA plans to add assistive technology and assistive devices as new HCBS waiver services, helping to combat social isolation and loneliness among older adult waiver customers.
- IDoA will enhance their Emergency Home Response Service (EHRS) by adding a mobile device with a fall detection feature. IDoA will also add Environmental Accessibility Modifications as a new HCBS waiver service.

Illinois Department of Human Services' Division of Developmental Disabilities (IDHS-DDD)

- Community Capacity Report and Recommendations through collaboration with UIC. Exploration of additional ways to support groups of waiver customers with increased support needs.
- Housing navigator pilot program in conjunction with ICDD—options for waiver customers to utilize non-disability specific housing.

Additional Questions?

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HFS

Illinois Department of
Healthcare and Family Services