

Transition Plan Overview

Ohio | Department of
Developmental Disabilities



The Regulation

The Regulation

- Effective March 17, 2014
- Identifies the characteristics of home and community based services (HCBS) settings
- Identifies settings that are not home and community based
- Outlines timelines for states to submit transition plans to the Centers for Medicare and Medicaid Services (CMS) to ensure compliance

HCBS Characteristics

- Integrated in and supports full access to the greater community
- Selected by the individual among setting options including non-disability-specific settings
- Ensures the rights of privacy, dignity and respect, and freedom from coercion/restraint
- Optimizes, but does not regiment, individual initiative, autonomy, and independence in life choices
- Facilitates choice in services and who provides them

Provider Owned/Controlled

- Legally enforceable or other written agreement
- Privacy in living/sleeping unit
- Freedom to control schedules and access food at any time
- Have visitors at any time
- Be accessible to the individual
- Meet additional requirements if any modifications to the above are implemented

Settings not HCB

- Nursing facilities
- Institutions for mental disease
- Intermediate care facilities for individuals with intellectual disabilities (ICF/IIDs)
- Hospitals
- Any other setting with the qualities of an institutional setting

Institutional Qualities

- Located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment
- Located in a building on the grounds of or adjacent to a public institution
- Any other setting that has the effect of isolating individuals from the broader community **UNLESS** the Secretary determines through heightened scrutiny that the setting does not have institutional qualities and does have home and community-based qualities

Compliance

- Transition plan must detail how the state will comply with the HCBS settings requirements
- All transition plans are due within one year of the effective date of the regulation (3/17/15)

The Transition Plan

The Plan

- Must be a comprehensive plan addressing compliance for all HCBS waivers in Ohio
 - Nursing facility level of care waivers administered by the Ohio Departments of Aging and Medicaid
 - Developmental disabilities level of care waivers administered by DODD
- Development included representation from the three state agencies above and from the Governor's Office of Health Transformation (OHT)

Our Process

Transition Plan Committee

- Ohio Association of County Boards of Developmental Disabilities
- Ohio Provider Resource Association
- The Arc of Ohio
- Values and Faith Alliance
- Ohio Superintendents' Association
- Ohio Self-Determination Association
- Advocacy and Protective Services, Inc.
- People First
- Ohio Waiver Network
- Self-advocates
- Ohio Department of Medicaid

Our Process

4 sub-committees

- Person-centered planning
- State systems
- Residential settings
- Day settings

Person-centered Planning

- All states are presumed compliant.
- Transition plan elements focus on settings requirements in plans
 - Were alternative settings presented to individuals?
 - What setting did the individual choose?

Person-centered Planning

- Areas of compliance
 - OAC 5123:2-1-11
- Recommendations
 - Revise compliance tool to ensure plans include documentation of alternatives presented and chosen setting

State Systems

- Reviewed infrastructure supporting all 4 waivers administered by DODD
 - Rules
 - Service definitions
 - Provider qualifications
 - Rate methodologies

State Systems

- Areas of compliance
 - OAC 5123:2-1-11 (SSA Rule)
 - OAC 5123:2-2-06 (Behavior Support)
 - ORC 5123.022 (Employment First)
 - ORC 5123.62 (Individual Rights)
 - Annual review requirements for individuals and staff

State Systems

- Recommendations
 - Implement new Home and Community Based Services (HCBS) Administration rule
 - Specify settings in which HCBS may be provided
 - Promote least-restrictive services in most integrated settings
 - Clarify implications of choosing licensed setting for homemaker/personal care
 - Amend Free Choice of Provider rule

State Systems

- Recommendations
 - Include requirement for lease or other written agreement
 - Include other requirements of provider-owned or controlled settings

State Systems

- Recommendations
 - Revise homemaker/personal care definition
 - Re-brand Adult Foster Care as “Shared Living”
 - Redesign adult day waiver service definitions, provider qualifications, and rate methodologies to support service provision in integrated settings

State Systems

- Recommendations
 - Proceed with phase-out plan of TDD Waiver and offer individuals opportunity to enroll in IO, Level One, or SELF Waivers
 - Amend compliance tool to include elements of new regulation
 - Alternative settings in person-centered plans
 - Lease or other written agreement in provider-owned or controlled settings

Residential Settings

- Settings presumed compliant – 24,243
 - Level One – 13,591 individuals
 - SELF – 320
 - IO family homes
 - Children – 732
 - Adults – 5,170
 - IO shared living – 1,130
 - IO enrollees living alone – 3,300

Residential Settings

- Surveys targeted to providers serving individuals enrolled in IO in congregate (2 or more) settings
 - Licensed settings – 2,200
 - Unlicensed settings – 5,246

Residential Settings

- Survey response

	# settings	# individuals
Licensed settings	665	2,698
Unlicensed settings	1,498	4,305
Total	2,163	7,003

Residential Settings

- Survey results

Setting size	# settings	# individuals
> 16 individuals	9	32+
8 – 16 individuals	59	584
4 – 8 individuals	151	840
2 – 4 individuals	1,881	5,484
1 (Licensed)	63	63
Total	2,163	7,003

Residential Settings

- Survey results

Categories requiring scrutiny	requires relocation				
	settings	individuals	one year	five years	
Farmstead or farm-based community	4	43	0	0	4
Inside or on the grounds of public institution	0	0	0	0	0
Disability specific campus setting	1	7	0	1	0
Other requiring further review					
Other - Large isolated setting	2	30	0	2	0
Other - Separated disability specific complex, e.g. apartments, cul-de-sac, etc.)	44	157	1	43	0
Other - Adjacent to private institution (NF, ICF)	12	77	3	9	0
Other - Needs review - isolating	13	55	0	13	0

Residential Settings

- Proposed next steps
 - Conduct site reviews
 - Settings that will require heightened scrutiny
 - Settings that are unable to comply
 - Submit evidence to CMS for settings for which heightened scrutiny will be requested
 - Work with individuals, families, boards, and providers to develop remediation and/or relocation plans

Day Settings

- Settings presumed compliant
 - Integrated employment settings (SELF)
 - Supported employment – community (IO/LV1)
 - Supported employment – enclave (IO/LV1)

Day Settings

- Survey response

Operators	Settings	Individuals
County	115	12,768
Private Agency	349	12,279
Total	464	25,047

Day Settings

- Survey results

Setting Size	Settings	Individuals
1 to 8	71	318
9 to 20	110	1,611
21 to 40	101	2,990
41 to 60	45	2,255
61 to 100	64	4,987
> 100	73	12,886

Day Settings

- Survey results

246	Facility-based combination of work/non-work
153	Facility-based non-work setting (a facility-based service that congregates individuals with I/DD for non-work, non-paid activities)
65	Facility-based work (i.e. sheltered workshop, a facility-based service that congregates individuals with I/DD who perform work tasks inside of the facility)

Day Settings

- Proposed steps
 - Complete redesign workgroup sessions in February 2015
 - Obtain stakeholder feedback on workgroup proposal and edit, as needed
 - Develop timeline to transition from legacy to new day services
 - Submit amendments to CMS by September 2015 to incorporate new day services in IO, Level One, and SELF

Information Sharing

- A copy of the draft transition plan is posted on the Office of Health Transformation website

healthtransformation.ohio.gov/CurrentInitiatives/ExpandandStreamlineHCBS.aspx

- DODD to conduct 4 – 5 regional forums

Public Input Options

- Public input is being sought through January 23, 2015
- Send an email to
HCBSfeedback@medicaid.ohio.gov
- Send written comments to:
Ohio Department of Medicaid
ATTN: HCBS Transition Plan
P.O. Box 182709, 5th Floor
Columbus, Ohio 43218
- Call 800-364-3153 to leave a voicemail

Public Input Options

- Submit testimony in person or in writing at a public hearing. People are required to bring written copies of their testimony.

January 7, 1:00 p.m., Rhodes State
Office Tower Lobby Hearing Room, 30 E.
Broad Street, Columbus, Ohio 43215

January 15, 1:00 p.m., Rhodes State
Office Tower Lobby Hearing Room, 30 E.
Broad Street, Columbus, Ohio 43215

Final Submission

- All public input will be reviewed and summarized
- OHT to review/approve final plan the end of February
- Final plan, including response to stakeholder input, will be submitted to CMS in early March