

Chapter III: Community Options Plan

3.01 General Requirements

- A. Development The county Interagency Long-Term Support Planning Committee shall develop and ensure compliance with the county Community Options Plan. The county and the Interagency Long-Term Support Planning Committee shall have a process in place that obtains input for the Community Options Plan from consumers, providers, advocacy groups. Independent Living Centers, hospitals, nursing homes and the general public.
- B. Maintenance The lead agency shall assemble a record of the county's Community Options Plan and shall keep a copy of it within the agency. A current copy must be on file with the department.
- C. Availability The county's Community Options plan and the department's Community Options Guidelines and Procedures shall be made available to all interested parties and the general public upon request.
- Each county shall have a brochure available to potential Community Options applicants. This brochure shall give a description of the Community Options program, who is eligible for the program, and indicate a contact person. This brochure must be provided to current nursing home residents.
- D. Organization The required county Community Options plan is divided in two parts. The first part is the county's Community Options Plan. This is maintained within the county and does not need to be revised each year except as changes to it are made. The second part is the Community Options Plan Update that is submitted annually in a format specified by the department.

3.02 County Community Options Plan

- A. Referencing State Guidelines To the extent that policies are the same as the state Community Options Guidelines and Procedures, counties may simply reference the Guidelines in their Community Options Plan and Community Options Plan Update.

B. Contents

The county COP Plan shall, at a minimum, include a description of:

1. Policies and procedures used to inform potential Community Options participants about the program and any other outreach efforts, including a description of procedures for communication and coordination with the aging network, children's services and programs, hospitals, nursing homes and other institutions, and an assessment of how successful those efforts are and what might be done to improve access to the program;
2. The referral and intake process, including a description of how the process of eligibility determination will take place;
3. The assessment process, format, instrument and procedures used for assessments, designation of the agencies and staff performing assessments, and policies regarding whether the lead agency will require cost-sharing for assessments and care plans (see Section 2.05 B);
4. The identification of those nursing homes within the county for which an offer of a Community Options assessment will be required prior to a nursing home admission;
5. Procedures and criteria for allowing persons offered an assessment to waive the assessment;
6. Procedures for an offer of an assessment to current nursing home residents who apply for Community Options;
7. Selection policies/qualifications for assessment staff (see Section 5.05 H);
8. Procedures and expected timelines for development of care plans;
9. A directory of all available long-term support services, both public and private, within the county, and procedures for regularly updating the directory and for making it available to care managers;
10. Policies and procedures for the care management/ service coordination system;

11. Policies and procedures for coordinating Community Options, especially Community Options assessments, in order to meet 51 department responsibilities for nursing home prescreening of persons with developmental disabilities or mental illness;
12. Policies and procedures for coordinating Community Options with the Medicaid community waivers, especially for the use of Community Options assessment funds as part of applications for Medicaid community waivers;
13. The Community Options Uniform Eligibility and Cost-Sharing Plan;
14. The current grievance procedures, including procedures for notifying applicants/participants of the right to a state appeal, county grievance, and assistance from the BOALTC Ombudsman Program;
15. Policies and procedures for waiting lists for Community Options and Medicaid community waivers;
16. Required interagency agreements (see Section 2.03 E);
17. Policies and procedures for Interagency Long-Term Support Planning Committee approval of county approved variances (see Section 5.12 A) and for requesting state approved variances (see 5.12 B);
18. A description of a hospital link project if applicable (see Section 2.04 H);
19. The limit on the total amount of funding the lead agency will expend for community based services for residents of CBRFs.
20. Any restrictive conditions on use of funds for persons residing in CBRFs as authorized under §§ 46.27(7)(ck), 46.27(11)(c) 5p and 46.277(5)(d) 1p.

C. Monitoring Plan

A county Community Options Plan shall also include a county monitoring plan. This plan shall include an annual:

1. Review of the county's Community Options Plan;
2. Determination of client satisfaction at the assessment, care plan and service stages of the Community Options program (this, at a minimum, must involve contact with a random sample of persons who received assessments, care plans and services);
3. Review of any grievances, including revisions of policies and procedures where necessary;
4. Review of the number and type of variances under Section 5.12 which have been granted;
5. Review of any departures from significant proportions, their causes and actions planned to remedy the situation, if indicated;
6. Report and review of the number and types of denials of Community Options assistance (assessments, care plans and services), reasons for denial, and actions planned to address reasons for denial which may need correction;
7. Identification of the role of the Interagency Long-Term Support Planning Committee, lead agency and others involved in monitoring;
8. Review of current care management staff to participant ratio.

D. Training Plan

A County Community Options Plan shall include a long term support training plan which describes the activities, and budget for those activities, which will be undertaken to provide training for agency staff who are responsible for the performance of duties in the Community Options Program, including supervisory, fiscal and care management staff.

3.03 Community Options Plan Update

A. Contents

A written Community Options Plan Update must be submitted annually on a form prescribed by the department.

- B. Local Approval The Community Options Plan Update must be approved by the Interagency Long-Term Support Planning Committee and shall be signed by its chairperson and the lead agency director.
- C. Annual Submittal The Plan Update must be submitted at least 60 days prior to the beginning of the calendar year for which the Plan Update applies, unless a later date has been specified by the department.

3.04 Plan Approval

After receiving a complete or amended Community Options Plan or Community Options Plan Update, the department shall:

1. Review and approve the Community Options Plan or Community Options Plan Update and issue an approval letter; or,
2. Conditionally approve the Community Options Plan or Community Options Plan Update and issue a conditional approval letter. Conditions placed on the Community Options Plan Update must be met within a specified period of time as determined by the department; or,
3. Not approve the Community Options Plan or Community Options Plan Update. The department shall give reasons in writing for the non-approval.

3.05 Amendments

Significant changes to the Community Options Plan or Community Options Plan Update must receive prior departmental approval. An amended county Community Options Plan Update must be submitted to the department when a major program change is to be initiated during the course of the year. "Significant program change" means the elimination of any service, the imposition of service maximums, a reduction in the county expenditure review threshold, or a program change that will bring the county out of compliance with significant proportions or will adversely affect the county's plan of correction for achieving significant proportions.

Other changes to the Community Options Plan or Plan Update may be made at any time during the year. When such changes occur, updated copies of the Community Options Plan or Plan Update must be sent to the DCS Regional Office Area Administrator and the Bureau of Long Term Support.

