

Note: This document has been superseded by Wisconsin’s Statewide Transition Plan published on the HCBS webpage (www.dhs.wisconsin.gov/hcbs).

FAMILY CARE HOME & COMMUNITY BASED SETTINGS TRANSITION PLAN

Per CMS Instruction Amended and Resubmitted to CMS: December 12, 2014

Purpose

The Department of Health and Human Services’ Centers for Medicare and Medicaid Services (CMS) published regulations in the Federal Register on January 16, 2014, effective March 17, 2014, which, among other things, changed the definition of home and community-based services settings for 1915(c) and (i) Medicaid Home and Community Based Services (HCBS) Waivers. These new rules allow for a transition plan of up to five years for full compliance. The new rules also require that, at the time HCBS Waiver renewals are submitted to CMS, the State of Wisconsin must also develop and submit a transition plan identifying how the HCBS Waivers will be brought into compliance with the new outcome-oriented definition of home and community based services settings. The federal regulations are 42 CFR 441.301(c)(4)-(6). More information can be found on the CMS website at www.medicaid.gov/hcbs.

WISCONSIN’S HOME & COMMUNITY BASED SETTINGS TRANSITION PLAN

ACTIVITY	DESCRIPTION	TARGET START DATE	TARGET END DATE
Public Notice & Input			
Stakeholder Meeting	State will hold stakeholder meeting to announce C waiver renewal and transition plan. State will indicate where C waiver renewal application and transition plan can be found on State’s website and the 30 day public input process.	July 30, 2014	July 30, 2014
Website Posting	State will post C waiver renewal application and transition plan on website for 30 days for public comment.	July 30, 2014	September 2, 2014
Newspaper Notice	State will post notice of C waiver renewal and transition plan in major newspapers. Notice will indicate where C waiver renewal application and transition plan can be found on website and the 30 day public input process.	July 30, 2014	July 30, 2014
Public Comment	30 day public comment period	July 30, 2014	September 2, 2014
C Waiver Renewal and Transition Plan			
State Analysis of Public Comment	State will analyze public comments and revise application and transition plan based on that analysis.	September 3, 2014	September 23, 2014
Revised Transition Plan Posting	State will post revised transition plan on website for public information.	October 2, 2014	October 2, 2014
Submission to CMS for Approval	State submits the C Waiver Renewal Application and HCBS Transition Plan to CMS.	October 2, 2014	October 2, 2014

ACTIVITY	DESCRIPTION	TARGET START DATE	TARGET END DATE
Preliminary Assessment			
Preliminary Assessment of HCB Services	<p>State will conduct a state-directed preliminary assessment of existing HCB services for compliance with HCBS characteristics (Yes, No, or Needs Provider Self-Assessment Verified by MCO/State). State will consider any services provided in the waiver participant's own or family home as home and community-based.</p> <p>For residential settings, preliminary assessment will be based upon a cross walk of the State's existing certification and regulatory requirements with the CMS regulations and guidance.</p> <p>For day and vocational settings, preliminary assessment will be based upon the language of the HCBS settings regulations and a cross walk of the State's existing regulatory requirements.</p>	Dependent upon approval of transition plan by CMS	December 31, 2014
Distribute Preliminary Residential Assessment to Stakeholders	State will share preliminary residential assessment with stakeholders for input.	January 1, 2015	February 27, 2015
Review of Stakeholder Input of Preliminary Residential Assessment	State will review stakeholder input and make adjustments as necessary.	March 2, 2015	March 31, 2015
Provider Self-Assessment/MCO & State Validation			
Development – Preliminary Provider Self-Assessment Tools	State will develop a residential provider self-assessment tool to compile baseline information on individual HCBS settings compliance.	August 11, 2014	November 12, 2014
	State will develop a day and vocational provider self-assessment tool to compile baseline information on individual HCBS settings compliance.	January 1, 2015	April 1, 2015
Distribute Preliminary Provider Self-Assessment Tools to Stakeholders	State will share preliminary residential self-assessment tool with stakeholders for input.	November 26, 2014	December 26, 2014
	State will share preliminary day and vocational self-assessment tool with stakeholders for input.	April 1, 2015	April 16, 2015

ACTIVITY	DESCRIPTION	TARGET START DATE	TARGET END DATE
Review of Stakeholder Input of Preliminary Provider Self-Assessment Tools	State will review stakeholder input on residential self-assessment tool and make adjustments as necessary.	January 1, 2015	January 30, 2015
	State will review stakeholder input on day and vocational self-assessment tool and make adjustments as necessary.	April 20, 2015	May 4, 2015
Implementation - Provider Self-Assessments	State will implement the residential provider self-assessment tool to compile baseline information on individual HCBS settings compliance. The DHS designee will be responsible for distributing and collecting the tool.	February 9, 2015	May 11, 2015
	State will implement the day and vocational self-assessment tool to compile baseline information on individual HCBS settings compliance. The DHS designee will be responsible for distributing and collecting the tool.	May 25, 2015	July 24, 2015
MCO Quality Control - Provider Self-Assessments	MCO will conduct a review on a representative sample of settings to evaluate validity of provider self-assessments. The MCO will use a stratified representative sample so that all settings types are included. MCO will report results to the State. This review will include on-site visits.	May 25, 2015	November 25, 2015
State Quality Control - Provider Self-Assessments	State will conduct a review on a representative sample of MCOs' quality control to evaluate validity of provider on-site surveys/self-assessments. The state will use a stratified representative sample so that all settings types are included. This review will include on-site visits.	December 9, 2015	April 11, 2016
Analysis of Provider Self-Assessments	Analyze the results of the on-site survey assessment (after verification) to identify specific issues and challenges that will need to be addressed through the 5-year transition period.	April 25, 2016	May 25, 2016
Distribute Analysis of Provider Self-Assessments to Providers, MCOs and Stakeholders	Distribute analysis of provider self-assessment to providers, MCOs and stakeholders.	June 8, 2016	June 8, 2016

ACTIVITY	DESCRIPTION	TARGET START DATE	TARGET END DATE
Provider Remediation			
Non-Compliant Providers Who Wish to Come Into Compliance Will Submit a Compliance Plan to MCO for Approval	Plan must identify action steps and dates to come into compliance for all items identified as non-compliant on the Provider-Self Assessment Analysis. Compliance Plan may not extend beyond June 9, 2017.	June 9, 2016	August 9, 2016
MCO Quality Control - MCOs Evaluate Whether Non-Compliant Providers Are Now Compliant	MCOs will conduct on-site visits of all non-compliant providers using the Provider Self-Assessment Analysis to determine if non-compliant providers are now in compliance.	June 10, 2017	December 31, 2017
State Quality Control – Evaluation of Non-Compliant Providers	State will conduct on-site visits using a representative sample of MCOs’ quality control to evaluate validity of remediation compliance assessments. This review will include on-site visits.	September 1, 2017	December 31, 2017
Member Transitions			
Member Transitions to HCB Compliant Settings	When necessary, the state will work with MCOs to ensure that members are transitioned to providers meeting HCBS setting requirements. Members will be given, at minimum, a 30-day notice pursuant to the DHS-MCO contract. However, the Department anticipates being able to identify non-compliant providers early in the process and expects the MCO to start the relocation process as appropriate. Members will have a choice of alternative providers through a person-centered planning process. Transition of the members will be comprehensively tracked to ensure successful placement and continuity of service.	MCOs and the State will know which non-compliant providers are not willing or are unable to come into compliance as of August 9, 2016. Transitions for individuals in these settings will begin immediately and will be completed within one calendar year (August 9, 2017). Willing providers will be given the opportunity to bring their settings into compliance. Throughout the process, as soon as it is identified that a setting will be unable to timely come into compliance, members will begin to be transitioned immediately.	September 30, 2018

ACTIVITY	DESCRIPTION	TARGET START DATE	TARGET END DATE
		Individuals in non-compliant settings as of December 31, 2017 will be transitioned to compliant settings by September 30, 2018. It is expected that individuals will be transitioned not later than September 30, 2018 to compliant settings.	
Participant Survey			
Participant Survey – Analysis	State will analyze requirements for annual MCO member survey for inclusion of questions regarding HCBS settings.	January 1, 2016	June 1, 2016
Participant Survey – Development & Implementation	State will modify and implement participant survey requirements dependent on analysis.	June 2, 2016	January 1, 2017
Participant Survey – Quality Control	State will monitor participant survey results to flag member experience that is not consistent with assuring control over choices and settings with community access. State will conduct necessary follow-up with MCOs. Activity will occur annually.	January 1, 2017	March 17, 2019
Regulations			
Wisconsin Administrative Code & Statutes – analysis	State will analyze programmatic rules for compliance with HCBS final regulations.	October 12, 2014	December 1, 2014
Wisconsin Administrative Code & Statutes – implementation	If necessary, State will work to revise programmatic rules to reflect final regulations on HCBS setting requirements.	Not applicable. State will not revise licensing regulations as they are applicable to non-waiver individuals. HCBS setting compliance will need to be at the program (contract) level. Family Care regulations have been found to be compliant or silent on the settings	Not applicable.

ACTIVITY	DESCRIPTION	TARGET START DATE	TARGET END DATE
		requirements. No revisions are necessary and federal requirements will be reflected in the DHS-MCO contract.	
Contract			
DHS-MCO Contract Revisions – Analysis	State will analyze current contract for compliance with new HCBS waiver regulations.	October 12, 2014	December 1, 2014
DHS-MCO Contract - Development & Implementation	<p>State will amend contract to comply with new HCBS waiver regulations.</p> <p>The 2015 DHS-MCO Contract will incorporate new HCBS waiver regulations. MCOs that cannot immediately comply effective 1/1/15 are required to submit a compliance plan outlining steps to achieve compliance by 12/31/15. The 2019 DHS-MCO Contract will prohibit providers/sites that have an institutional or isolating quality effective March 17, 2019</p>	<p>January 1, 2015</p> <p>March 17, 2019 (contract effective January 1, 2019)</p>	<p>January 1, 2015</p> <p>March 17, 2019 (contract effective January 1, 2019)</p>
Member Handbooks			
Member Handbooks – Analysis	State will analyze member handbook for compliance with new HCBS waiver regulations.	January 1, 2016	June 1, 2016
Member Handbooks – Development & Implementation	State will amend member handbook to comply with new HCBS waiver regulations. Activity will occur annually.	June 2, 2016	March 17, 2019
Other			
The State will submit an amendment to the waiver, if necessary, due to any changes to comply with the HCBS settings rule.			