

South Carolina Department of Health and Human Services  
Intellectually Disabled and Related Disabilities (ID/RD) Waiver  
Transition Plan Outline  
September 2014

I. Introduction

The Center for Medicare and Medicaid Services (CMS) issued a final rule on Home and Community Based Services (HCBS) establishing certain requirements for home and community based services that are provided through Medicaid waivers, like the ID/RD Waiver. There are specific requirements for where home and community based services are received called “settings requirements.”

CMS requires that each state submit a “Transition Plan” for each waiver renewal or amendment between March 2014 and March 2015. The Transition Plan outlines how the state will come into conformance and compliance with the HCBS Rule. Once any waiver renewal or amendment is submitted to CMS with the waiver specific Transition Plan, the state must then submit, 120 days later, a “Statewide Transition Plan” that outlines how the state will come into conformance with the new requirements of the HCBS Rule. States must come into full compliance with HCBS Rule requirements by March 17, 2019.

This is the Transition Plan for the ID/RD Waiver Renewal. Per CMS requirements, this is available for the public to read and comment on before being submitted to CMS for review when the renewal is submitted.

The Transition Plan, even once submitted, may need to change and evolve as the state goes through the process of coming into compliance with the HCBS Rule. If the Transition Plan does change after submission to CMS, the state will make it available again for public comment and input.

II. Home and Community Based Settings Requirements

CMS has listed the following as the requirements of settings where home and community based services are provided. They must have the following qualities:

- Be integrated in and support full access of individuals receiving Medicaid HCBS to the greater community
- Include opportunities to seek employment and work in competitive integrated settings
- Allow individuals to control personal resources
- Setting must be selected by the individual from among setting options, including non-disability specific settings (this includes an option for a private unit in a residential setting)
- Setting options are identified and documented in the person-centered service plan
- Ensures an individual’s rights of privacy, dignity and respect, and freedom from coercion and restraint
- Optimizes individual initiative, autonomy, and independence in making life choices

- Facilitates individual choice regarding services and supports and who provides them
- A. Assessment of Facilities to determine HCBS Rule compliance
1. Development of the assessment tool and criteria
 

Two assessment tools are under development: one for residential facilities and another for day facilities. The criteria being used are those outlined in the 42 CFR Part 430. 431, et al, along with the exploratory questions issued by CMS for the settings requirements. They are designed to be a self-assessment of the facilities, completed by the providers. They will be online assessment tools. For providers who may not have internet access, paper copies will be provided.
  2. Resources to conduct assessment
 

It is anticipated that the assessments will be sent electronically to providers in January 2015. For providers who may not have internet access, paper copies will be mailed to them.
  3. Timeframe to conduct assessment
 

Providers will be given 30 days to complete the self-assessment and return it to SCDHHS.

SCDHHS will review all assessments individually to determine where each provider is or is not in compliance. SCDHHS' goal is to complete the assessment review within six months. Once the individual assessments are reviewed, a priority list for conducting site visits will be created based on the responses on the assessments. This list will address the providers needing the most correction first. Site visits are estimated to be completed within one year of the assessment review.
  4. Corrective Action plan for providers deemed not in compliance
    - a. SCDHHS will develop general guidelines for providers to come into compliance with the new settings requirements. For each provider, an individualized response to their self-assessment will be developed indicating the specific requirements that they do not meet and where they need to come into compliance.
    - b. Providers must then create their own corrective action plan indicating how they will come into compliance with the requirements. This must include a timeframe within which to complete it. This plan must be submitted to and approved by SCDHHS.
  5. Timeframe for providers to come into compliance
 

SCDHHS anticipates that providers, depending on the severity of their non-compliance, will take no more than two years to come into compliance. This may be adjusted as necessary depending on the provider and the resources needed to complete this.
- B. Assessment of Regulations, Standards, Policies, Licensing Requirements, and other Provider Requirements
1. As part of the larger scope of the Statewide Transition Plan, SCDHHS will be reviewing all policies, procedures, and provider requirements to ensure compliance with the new settings standards and the person-centered planning standards.

2. The review of policies will include those from other state agencies that set standards for providers.

C. Day Programs:

1. There are approximately 90 day program facilities across the state that provide various day services to ID/RD waiver participants. This does not include Adult Day Health Care facilities.
2. There are approximately 3000 waiver participants who use day program facilities to facilitate the use of various day services assessed in their service plan.

D. Adult Day Health Care:

1. There are currently 81 Adult Day Health Care facilities that are available for ID/RD waiver participants to use across the state.
2. There are approximately 200 waiver participants who use ADHC as part of their service plan.

E. Residential:

Participants in this waiver have options as to where they live, based on need and availability. Participants can live at home, or in a residential placement like a Community Training Home (CTH) or a Supervised Living Program (SLP).

1. There are five types of residential facilities available through the ID/RD waiver.

They are:

Supported Living Program II (SLP II): This model is for individuals who need intermittent supervision and supports who are able to achieve most daily activities independently but periodically may need advice, support and supervision. It is typically offered in an apartment setting that is integrated into a community. Staff is available on-site or in a location from which they may be on the site within 15 minutes of being called, 24 hours daily.

Supported Living Program I (SLP I): This model is similar to the Supervised Living Model II; however, individuals generally require only occasional support. It is offered in an apartment setting and staff are available 24 hours a day by phone.

Community Training Home I (CTH I): In the Community Training Home I Model, personalized care, supervision and individualized training are provided, in accordance with a person-centered service plan, to a maximum of two people living in a support provider's home where they essentially become one of the family. Support providers are qualified and trained private citizens.

Community Training Home II (CTH II): The Community Training Home II Model offers the opportunity to live in a homelike environment in the community under the supervision of qualified and trained staff. Care, supervision and skills training are provided according to individualized needs as reflected in the person-centered service plan. No more than four people live in each residence.

Community Residential Care Facility (CRCF): This model, like the Community Training Home II Model, offers the opportunity to live in the community in a homelike environment under the supervision of qualified, trained caregivers. Care, supervision and skills training are provided according to identified needs as reflected in the service plan.

The number of each type of facility and the number of waiver participants served is provided in the table below:

Table 1.1 Residential Type and Approximate Number of Participants served

<b>Residential Type</b>	<b>Number of Residences</b>	<b>Approximate Number of Waiver Participants Served</b>
SLP II	413	461
SLP I	219	200
CTH I	159	174
CTH II	666	2,511
CRCF	49	402
<b>TOTAL</b>	<b>1506</b>	<b>3748</b>

III. Communications

A. Initial Plan Development

SCDHHS formed a Workgroup to address and solicit input on how the state could come into compliance with the HCBS rule, including the ID/RD waiver renewal.

This group is composed of members of:

SC Department of Health and Human Services

SC Department of Mental Health

SC Department of Disabilities and Special Needs

SC Vocational Rehabilitation

Advocacy groups:

AARP

Family Connections

Protection & Advocacy

Providers:

Local Disabilities and Special Needs Boards

Housing providers for the Mentally Ill population

Adult Day Health Care Providers

Private Providers of Medicaid and HCBS services

Beneficiaries and family members, along with other advocacy groups, have also been recently added to the workgroup membership.

The large workgroup broke into smaller workgroups to address different tasks of coming into compliance with the HCBS Rule, including a waiver renewal workgroup.

The large group meets monthly to discuss the progress of the smaller workgroups and to discuss issues and concerns and the overall vision of how the state can come into compliance with the new regulation.

B. Public Notice and Comment on Waiver Renewal

1. SCDHHS has developed policy to provide multiple methods of public notice and input on waiver renewals which also includes its accompanying transition plan.

- The Medical Care Advisory Committee (MCAC) was provided advisories on the HCBS Rule and the ID/RD waiver renewal and transition plan on May 13, 2014 and July 8, 2014.

- Tribal Notification was provided on June 5 and June 23, 2014. A Tribal Notification conference call for the waiver renewal and transition plan was held June 25, 2014.
- Public notice for comment on the ID/RD waiver renewal and transition plan was posted on the SCDHHS website on August 6, 2014.
- Public notice for comment on the ID/RD waiver renewal and transition plan was sent out via the SCDHHS listserv on August 6, 2014.
- Several public meetings were held to discuss the ID/RD waiver renewal and its transition plan, as well as the HCBS Rule and what it means for South Carolina beneficiaries.

Four public forums were held in August 2014 on the ID/RD waiver renewal and the HCBS Rule in the following cities:

Columbia, SC (Aug. 12, 2014)	Charleston, SC (Aug. 14, 2014)
Florence, SC (Aug. 19, 2014)	Greenville, SC (Aug. 21, 2014)

- Public comments were gathered from the public meetings listed above, from electronic communications sent to SCDHHS and from communications mailed to SCDHHS. They were compiled into a document and attached here.
- SCDHHS reviewed the comments and incorporated any appropriate changes to the waiver renewal and its transition plan based on public comments.

**South Carolina Home and Community Based Services Transition Plan Timeline  
Intellectually Disabled and Related Disabilities (ID/RD) Waiver Renewal**

<b>Section 1. Identification</b>						
<i><b>Action Item</b></i>	<i><b>Description</b></i>	<i><b>Start Date</b></i>	<i><b>End Date</b></i>	<i><b>Sources</b></i>	<i><b>Stakeholders</b></i>	<i><b>Intervention/Outcome</b></i>
Identify Day Programs	Identify the number of Day programs serving individuals in waiver	March 2014	April 2014	SCDDSN	SCDHHS, SCDDSN	Number of facilities to assess identified
Identify Adult Day Health Care Providers	Identify the number of ADHC's serving individuals in waiver	March 2014	April 2014	SCDDSN, SCDHHS	SCDHHS, SCDDSN	Number of facilities to assess identified
Identify Residential programs	Identify the number and type of residential programs serving individuals in waiver	March 2014	April 2014	SCDDSN	SCDHHS, SCDDSN	Number of facilities to assess identified
<b>Section 2. Assessment</b>						
<i><b>Action Item</b></i>	<i><b>Description</b></i>	<i><b>Proposed Start Date</b></i>	<i><b>Proposed End Date</b></i>	<i><b>Sources</b></i>	<i><b>Stakeholders</b></i>	<i><b>Intervention/Outcome</b></i>
Develop Residential assessment tool	Create an assessment tool for providers to evaluate compliance with settings requirements	June 2014	September 2014	CMS Guidance, CFR, State developed assessment tools (Iowa, Kansas, Florida)	SCDHHS, SCDDSN, providers	Assessment tool developed
Develop Day facility assessment tool	Create an assessment tool for providers to evaluate compliance with settings requirements	July 2014	September 2014	CMS Guidance, CFR, State developed assessment tools (Iowa, Kansas, Florida)	SCDHHS, SCDDSN, providers	Assessment tool developed

<b>Section 2. Assessment <i>continued</i></b>						
<b><i>Action Item</i></b>	<b><i>Description</i></b>	<b><i>Proposed Start Date</i></b>	<b><i>Proposed End Date</i></b>	<b><i>Sources</i></b>	<b><i>Stakeholders</i></b>	<b><i>Intervention/Outcome</i></b>
Submit assessment tools for review	Both Assessment tools will be submitted to CMS and the large Stakeholder workgroup for review and feedback	August 2014	September 2014	Draft assessment tools	SCDHHS, SCDDSN, Providers, Advocacy groups, beneficiaries, families	Incorporate appropriate revisions into tool
Conduct pilot test of assessment tools	Each assessment tool will be sent to a sample of providers to test the tool and determine where revisions need to be made. Clear instructions on completion of the tool will be developed from this pilot	October 2014	November 2014	Draft assessment tools	SCDHHS, SCDDSN, Providers	Test assessment tool to ensure data gathered is accurate
Revise assessment and develop instructions	After the pilot test, the assessment tools will be revised as needed and clear instructions will be developed for completion of the assessment	December 2014	December 2014	Draft assessment tools	SCDHHS, SCDDSN, Providers	Finalize tool for distribution
Distribute Assessment Tool to providers	Providers will complete the self-assessment tool to determine compliance with HCBS rule	Mid-January 2015	Mid-February 2015	Assessment Tool	SCDHHS, Providers, SCDDSN	Providers complete assessment

<b>Section 2. Assessment <i>continued</i></b>						
<b>Action Item</b>	<b>Description</b>	<b>Proposed Start Date</b>	<b>Proposed End Date</b>	<b>Sources</b>	<b>Stakeholders</b>	<b>Intervention/Outcome</b>
Review of self-assessment data	SCDHHS will review self-assessment data of providers to determine who is in compliance and who is not	Mid-February 2015	May 2015	Assessment results	SCDHHS; SCDDSN, providers,	Results identify in priority order provider site visits, steps needed to come into compliance
Response to providers from assessment	Providers will be notified of their assessment results and any areas of correction for compliance with HCBS Rule	March 2015	June 2015	Assessment results	SCDHHS, SCDDSN, Providers, Advocacy groups, beneficiaries, families	Providers aware of deficiencies regarding compliance with HCBS Rule
Conduct site visits to provider facilities	SCDHHS will conduct site visits to follow up the self-assessments done by providers to verify information and assist in determination of corrective action needed to meet new standards	April 2015	October 2015	Assessment results; enrolled providers; HCBS Standards	SCDHHS, SCDDSN, Providers, Advocacy groups, beneficiaries, families	Confirm compliance standing of providers
Review existing policies, procedures, and other standards for providers	Review existing policies, procedures, qualification standards, licensure regulations, provider training, and other related policies to determine conformance to HCBS rule.	October 2014	January 2015	SCDHHS Policies, SCDDSN policies, SCDHEC regulations, SCDHHS provider enrollment	SCDHHS, SCDDSN, SCDHEC,	Determine policy compliance with standards

<b>Section 3. Corrective Action</b>						
<b>Action Item</b>	<b>Description</b>	<b>Proposed Start Date</b>	<b>Proposed End Date</b>	<b>Sources</b>	<b>Stakeholders</b>	<b>Intervention/Outcome</b>
Develop Corrective Action plan	SCDHHS informs providers to create their own corrective action plan outlining how they will come into compliance. It will be submitted to SCDHHS to review and approve	March 2015	June 2015	Assessment results, information from SCDHHS, CMS guidance	SCDHHS, Providers	Each provider develops an approved corrective action plan
Policy Revisions	SCDHHS will review and revise policies to reflect HCBS regulations as well as ongoing monitoring and compliance	January 2015	December 2015	CMS Guidance, CFR, SCDHHS policy manuals	SCDHHS, Partner agencies, providers, beneficiaries, families, advocacy groups	Policies reflect HCBS requirements
Provider follow up	SCDHHS will follow up with providers to determine status of corrective action and if HCBS requirements are met based on timeframe in their Corrective Action Plan	April 2015	March 2019	Assessment results, Provider corrective action plans, CMS Guidance, CFR, SCDHHS policies	SCDHHS, Providers	Providers come into compliance with HCBS rule
Provider Training and Education	SCDHHS will develop and provide training and education to providers to ensure understanding of HCBS rule requirements, ensure ongoing	January 2015	December 2015	CMS Guidance, CFR, SCDHHS policies,	SCDHHS, partner agencies, providers	Educate providers on HCBS rule and its requirements

	compliance with requirements					
<b>Section 4. Communications</b>						
<b>Action Item</b>	<b>Description</b>	<b>Proposed Start Date</b>	<b>Proposed End Date</b>	<b>Sources</b>	<b>Stakeholders</b>	<b>Intervention/Outcome</b>
Form Stakeholder workgroup	Invited various stakeholders to come together to address new HCBS Final Rule and provide input on plans to come into compliance	February 26, 2014	December 2015	Partner Agencies, Advocacy groups, providers, beneficiaries, and families	Partner Agencies, Advocacy groups, providers, beneficiaries, and families	Monthly Workgroup meetings; more frequent subgroup meetings on Waiver renewals
Form Waiver Renewal Subgroup	Participants from larger group invited to participate on waiver renewal subgroup to address proposed waiver changes, content of waiver renewal transition plan	March 18, 2014	July 28, 2014	CMS Guidance, CFR	SCDHHS, SCDDSN, SCDMH, Providers, Advocacy groups	Weekly subgroup renewal meetings  Draft Transition Plan developed for Waiver renewals  Draft HIPAA Form developed for Person-centered planning
Provide Notice to MCAC	Provide notice of the Waiver Renewals and the Transition plan at two MCAC meetings	May 13, 2014	July 8, 2014	Advisories to MCAC	SCDHHS, SCDDSN, Providers, Beneficiaries, Advocacy groups	MCAC advised of Waiver renewals and when will be submitted per agency policy
Tribal Notification	Notice is provided to the Catawba Indian Nation on the renewal of the waiver and a conference call is held to discuss	June 5 & 23, 2014	June 25, 2014	Proposed waiver renewal changes	SCDHHS, Catawba Indian Nation	Any questions or concerns about waiver renewals addressed on phone call

<b>Section 4. Communications <i>continued</i></b>						
<b>Action Item</b>	<b>Description</b>	<b>Proposed Start Date</b>	<b>Proposed End Date</b>	<b>Sources</b>	<b>Stakeholders</b>	<b>Intervention/Outcome</b>
Public Notice provided	Notice of the waiver renewals posted to the SCDHHS website, sent out via listserv to any interested parties, and shared with members of the large Stakeholder Workgroup	August 6, 2014	September 5, 2014	Public notice document, ID/RD Transition plan Draft document	SCDHHS, SCDDSN, Beneficiaries, families, Providers, Advocacy Groups	Public notice posted with transition plan for ID/RD waiver
Public comment – waiver renewals and transition plan	SCDHHS gathered public comments for review through multiple methods and made appropriate changes to the waiver renewals and transition plan. Comments were gathered via mail, email, and in person.	August 6, 2014	September 5, 2014	Public notice document, ID/RD Transition plan Draft document	SCDHHS, SCDDSN, Beneficiaries, families, Providers, Advocacy Groups	Public notice posted with transition plan for ID/RD waiver
Public meetings conducted on Waiver Renewals and Transition Plan	4 public meetings held throughout state for public to comment on proposed waiver renewal changes and waiver transition plan	August 12, 2014	August 21, 2014	Public notice document, ID/RD Transition plan Draft document	SCDHHS, SCDDSN, Beneficiaries, families, Providers, Advocacy Groups	Public notice posted with transition plan for ID/RD waiver
Public Comment collection and revisions	SCDHHS reviews all comments on the waiver renewals and transition plan and make appropriate changes to both documents	September 6, 2014	September 30, 2014	Public comments and any state response documents	SCDHHS	Public comments considered and appropriately incorporated into documents

