



Olmstead Advisory Committee

Home and Community-Based Services Waivers

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Establishment of HCBS Waivers

- 1999 Olmstead decision
- The HCBS waiver program is a viable option to achieve the principle of Olmstead



HCBS Waiver Program Goals

- Protect people's health and welfare
- Provide adequate and reasonable provider standards to meet the needs of the target population
- Deliver services through an individualized and person-centered plan of care
- Demonstrate that providing waiver services won't cost more than providing these services in an institution



HCBS Waivers Administered by DHCS

- In-Home Operations (IHO) Waiver
- Nursing Facility/Acute Hospital (NF/AH) Waiver
- Assisted Living Waiver
- Pediatric Palliative Care

<http://www.dhcs.ca.gov/services/ltc/Documents/ReferenceMaterialandResources.pdf>

<http://www.dhcs.ca.gov/services/ltc/Pages/AssistedLivingWaiver.aspx>

<http://www.dhcs.ca.gov/services/ppc/Pages/default.aspx>



HCBS Waivers Administered by Sister Departments

- HCBS for Developmentally Disabled – CDDS
- HIV/AIDS – CDPH
- Multi-Purpose Senior Services Program – CDA
- San Francisco Community Living Support Benefit – SF Department of Public Health

HCBS Waiver Administered by Sister Departments



- **HCBS DD**
 - Statewide coverage
 - No Waitlist
 - Current Enrollment: 100,000
- **HIV AIDS**
 - Regional coverage (43 counties)
 - No Waitlist
 - Current Enrollment: 2,000
- **MSSP**
 - Statewide coverage
 - Waitlists managed by Sites
 - Current Enrollment: 11,000
- **SF-CLSB**
 - City and County of SF
 - No Waitlist
 - Current Enrollment: 17



Purpose of the HCBS Waivers

- Provide Medi-Cal beneficiaries and their families with choices
- Remain cost-neutral to care received in a facility
- Authorize services that support the beneficiary's medical care needs and are provided in a safe environment

Background of DHCS Administered Waivers



NF/AH and IHO:

- January 2007- consolidated the Nursing Facility A/B (NF A/B) Waiver, Nursing Facility Subacute (NF S/A) Waiver, and In-Home Medical Care (IHMC) Waiver into one waiver
- Offers the same services and includes community and habilitation services
- Expanded waiver capacity
- Included Habilitation and SNF Transition services
- 2nd renewal cycle

Background of DHCS Administered Waivers



ALW:

- CMS approved 1st 5 year renewal
- Expanded to CCI counties
- Included Adult Residential Facilities as provider types
- Expanded per diem service rate to persons with TBI



DHCS Administered HCBS Waiver Services

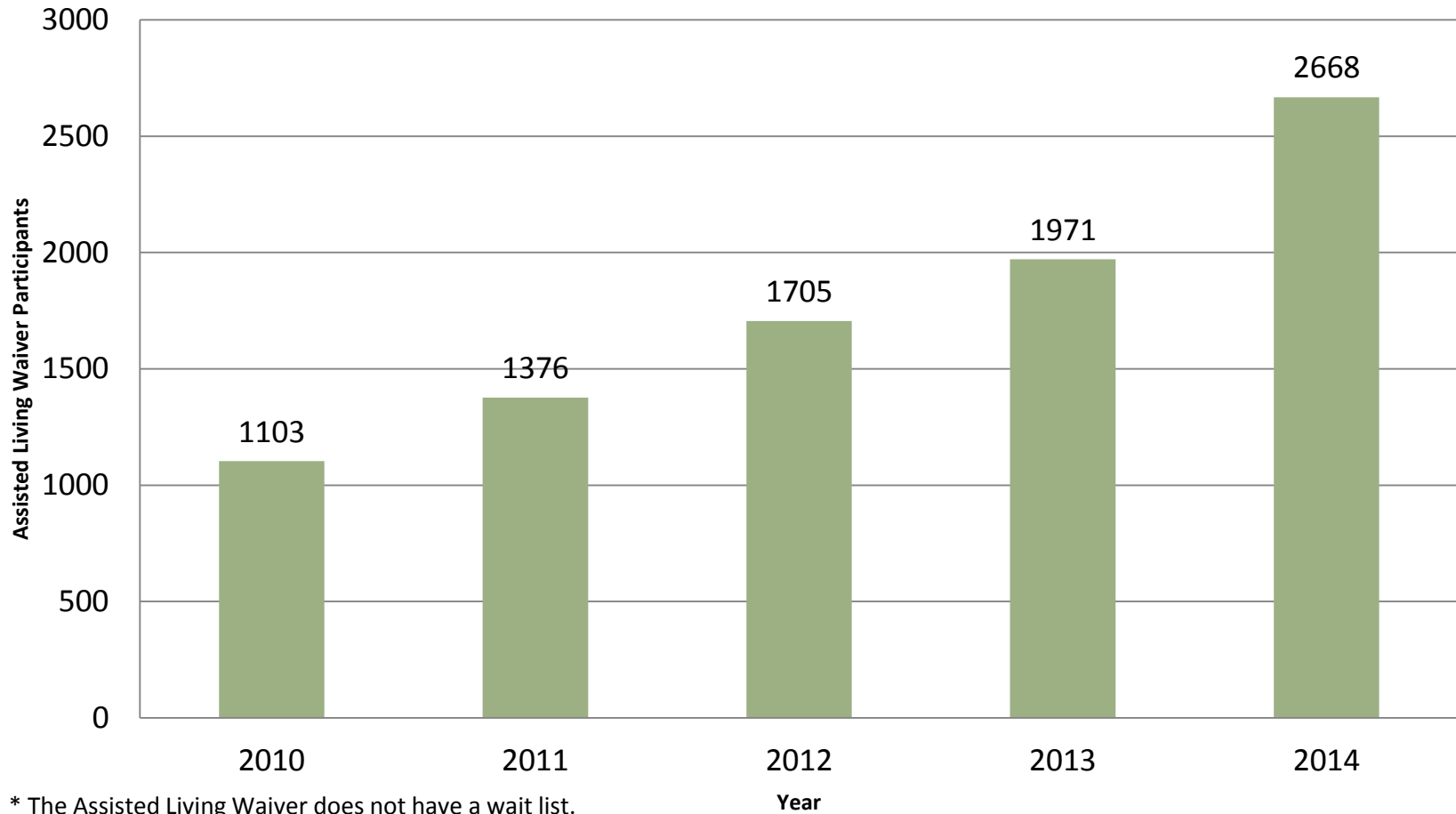
- Case Management
- Transitional Case Management
- Private Duty Nursing, including home health aide services
- Environmental Accessibility Adaptations
- Personal Care Services (Companion and Attendant Care)
- Community Transition Services
- Habilitation Services



DHCS Administered HCBS Waiver Operations



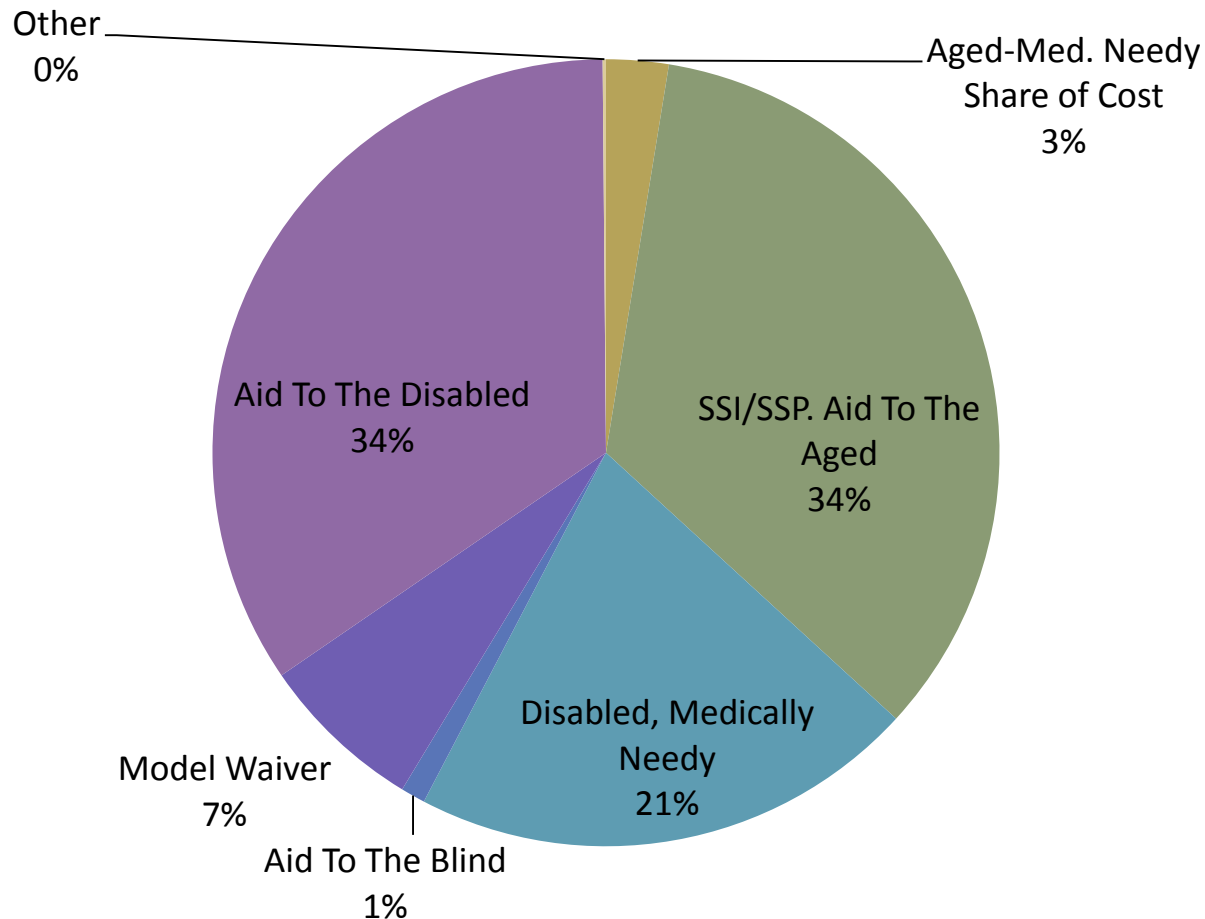
Assisted Living Waiver Enrollment December 31, 2010-2014



* The Assisted Living Waiver does not have a wait list.

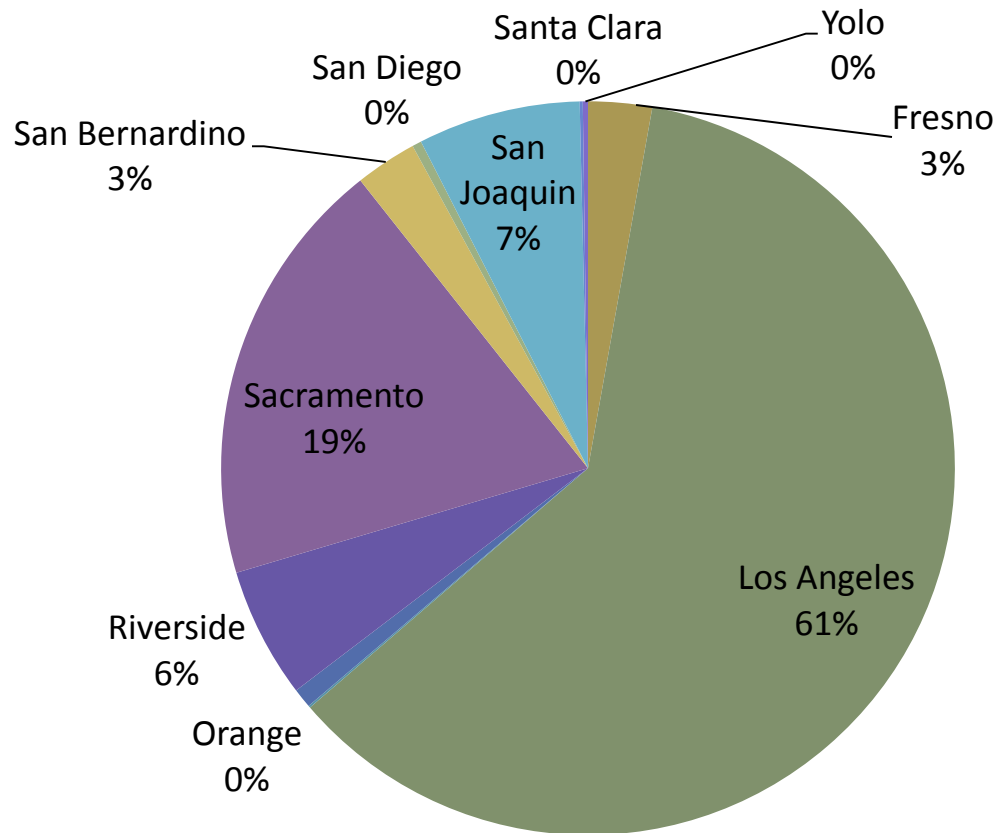


Assisted Living Waiver Target Population by Full Scope Aid Code December 31, 2014



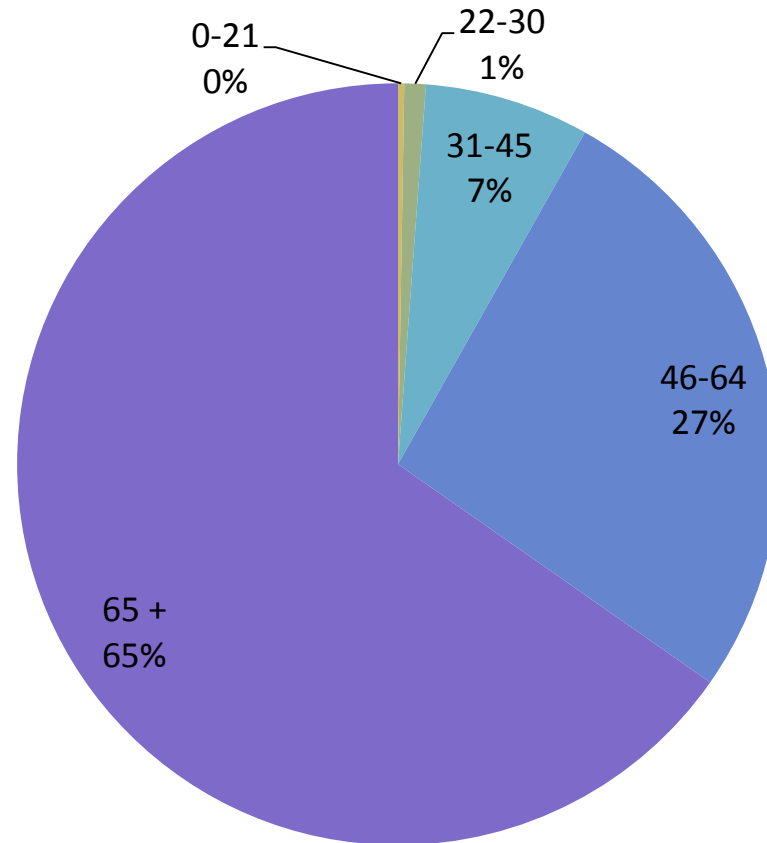


Assisted Living Waiver Members by County December 31, 2014





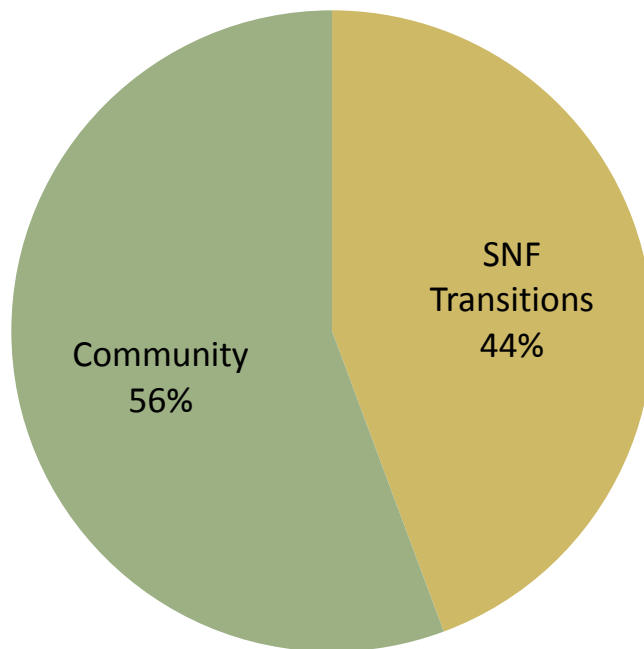
Assisted Living Waiver Participant Age December 31, 2014



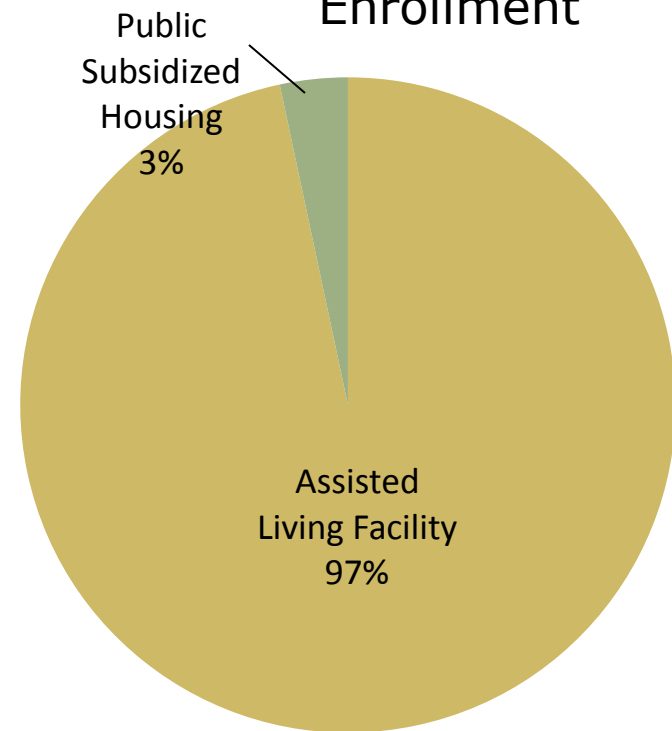


Assisted Living Waiver Members Enrollment and Housing December 31, 2014

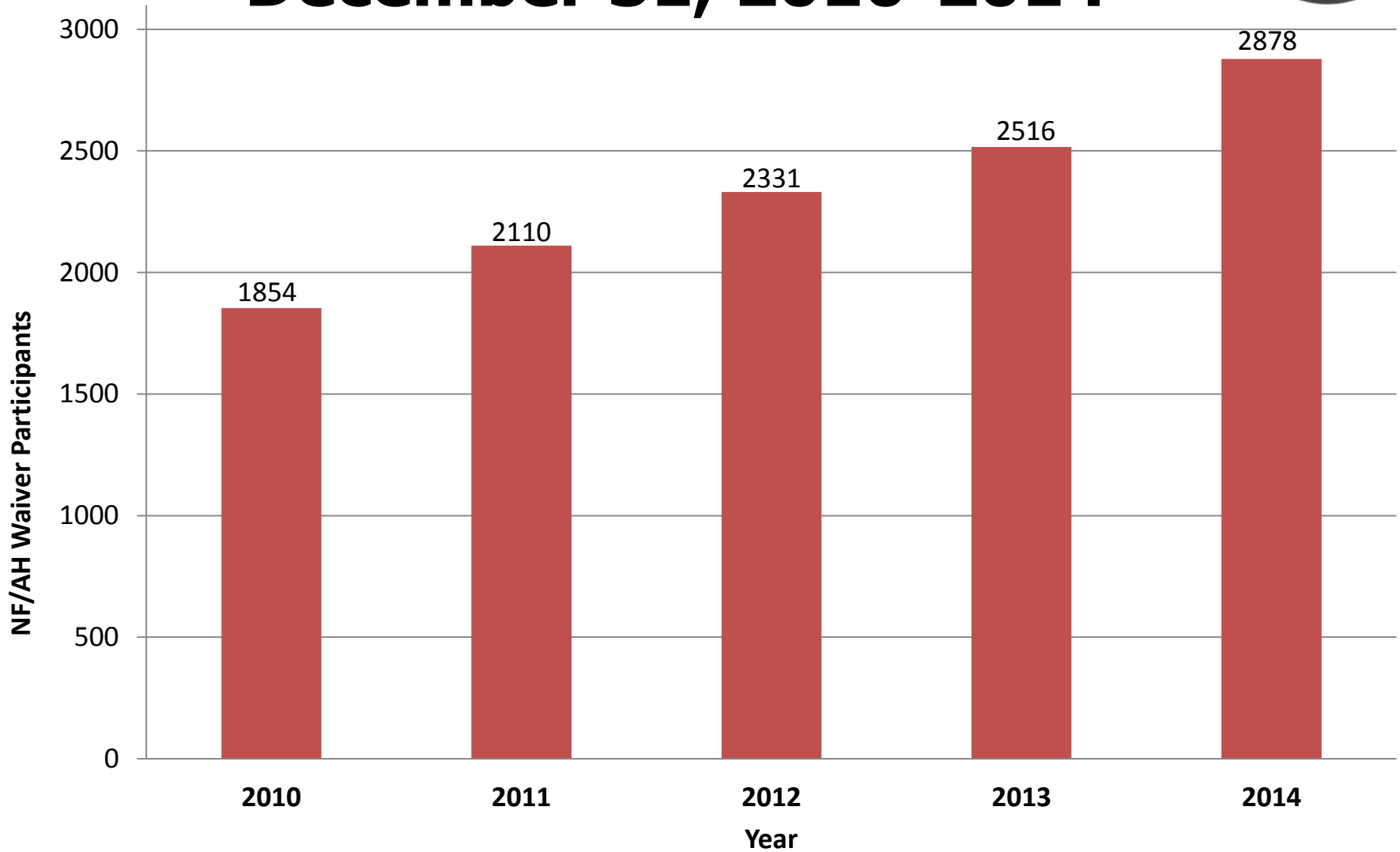
Member Residency at time
of Waiver Enrollment



Residency after Waiver
Enrollment

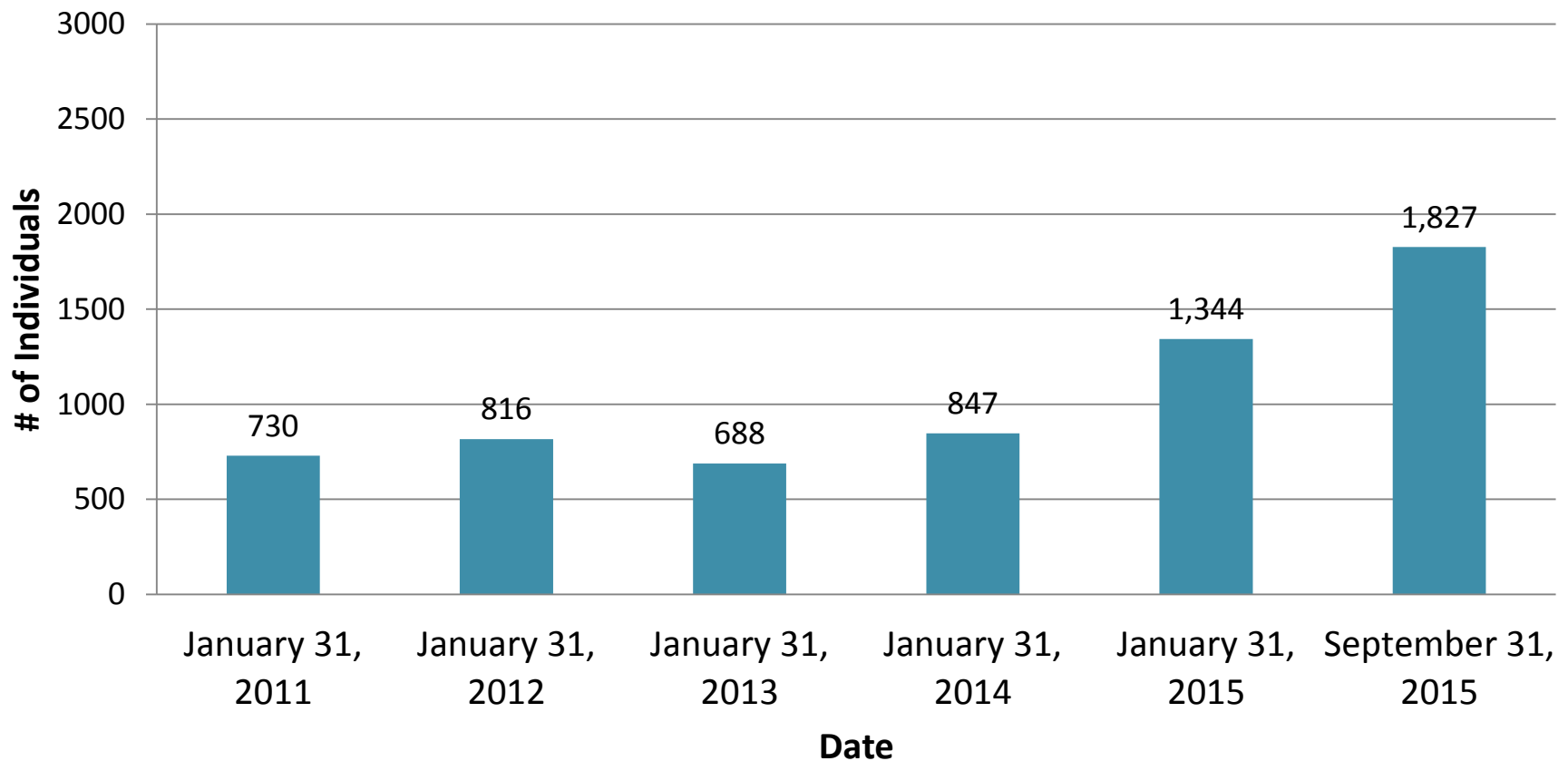


NF/AH Waiver Enrollment December 31, 2010-2014



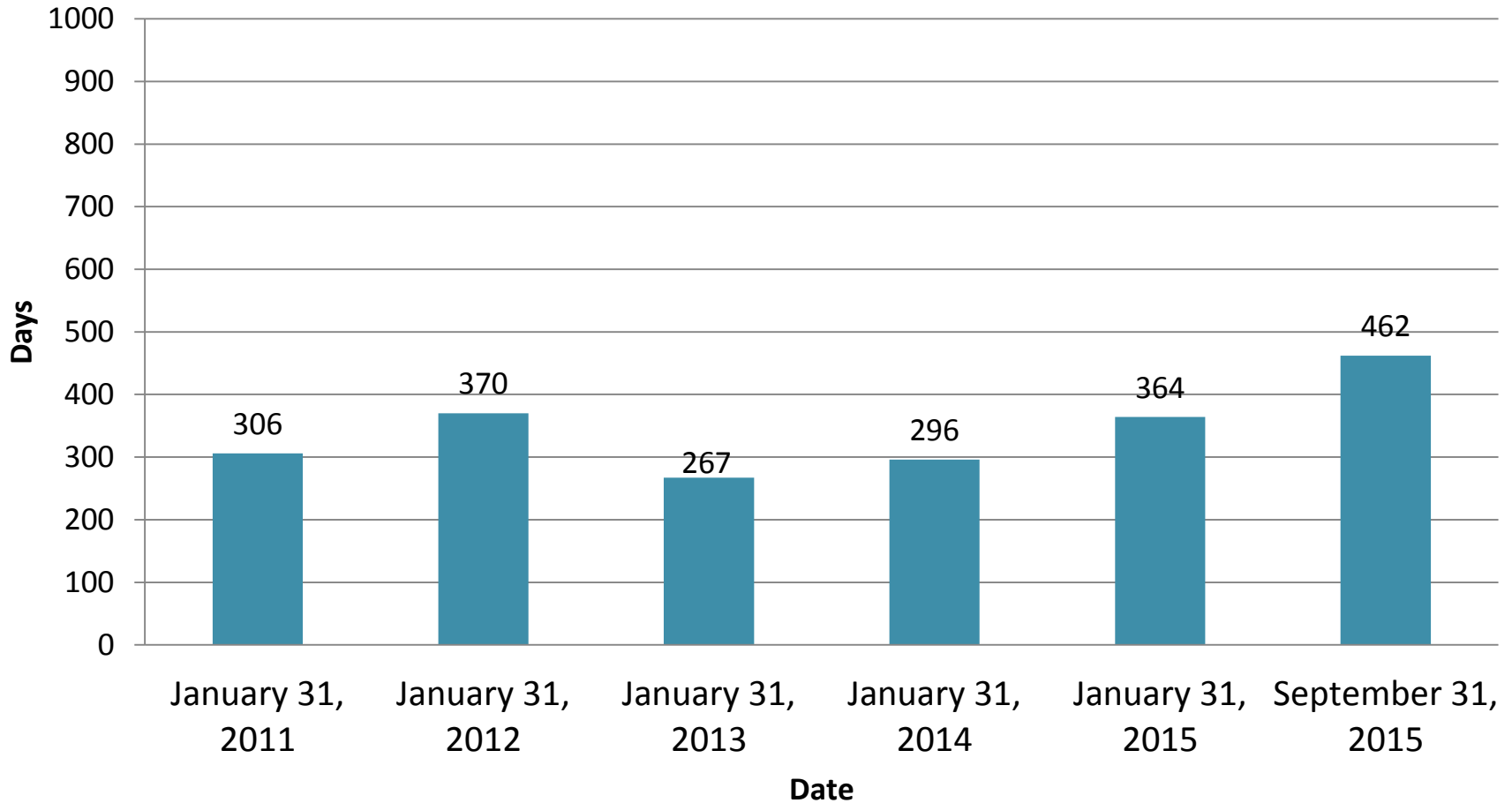


Number of Individuals on NF/AH Waiver NF A/B Waitlist



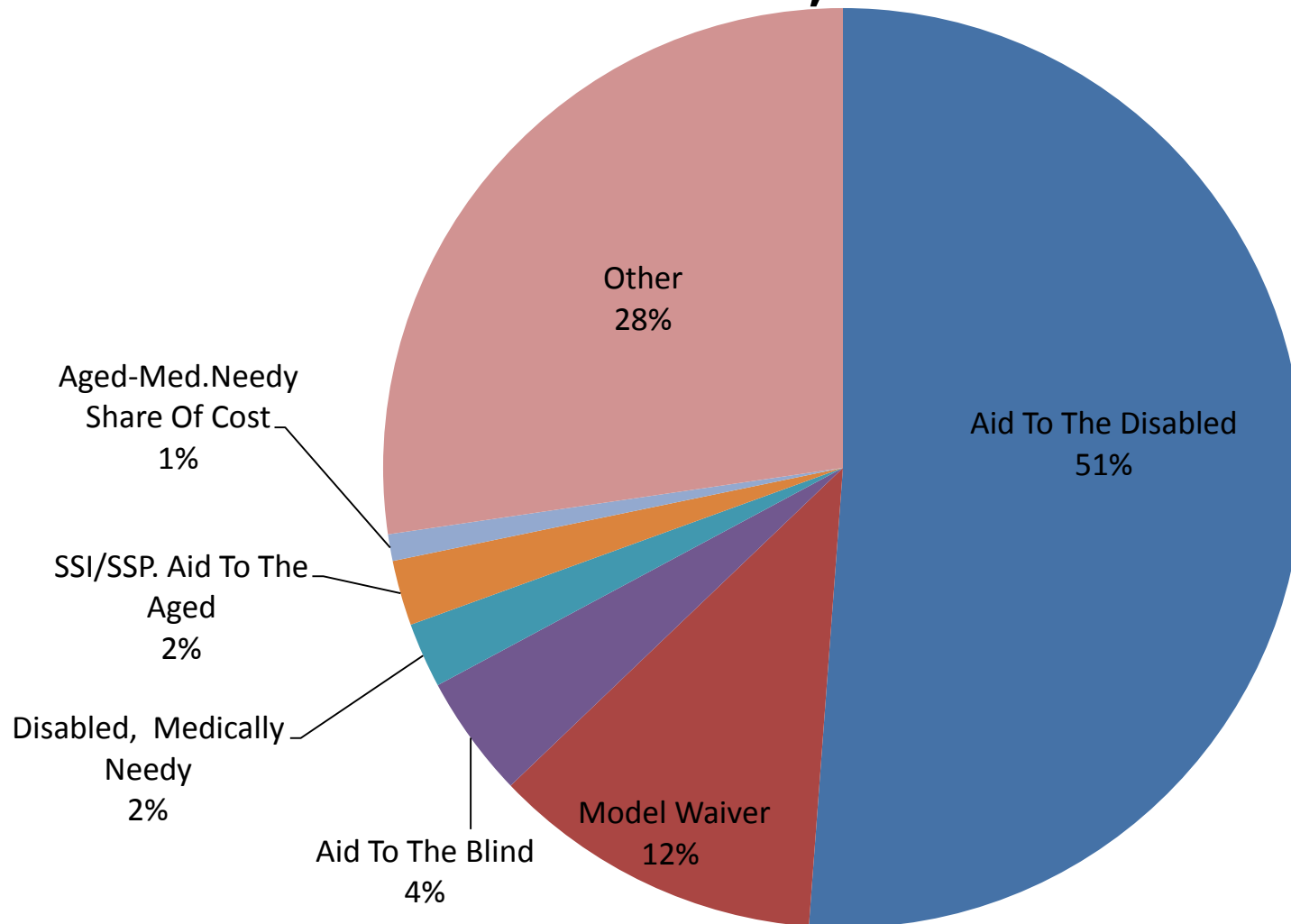


Average Days on NF/AH Waiver NF A/B Waitlist

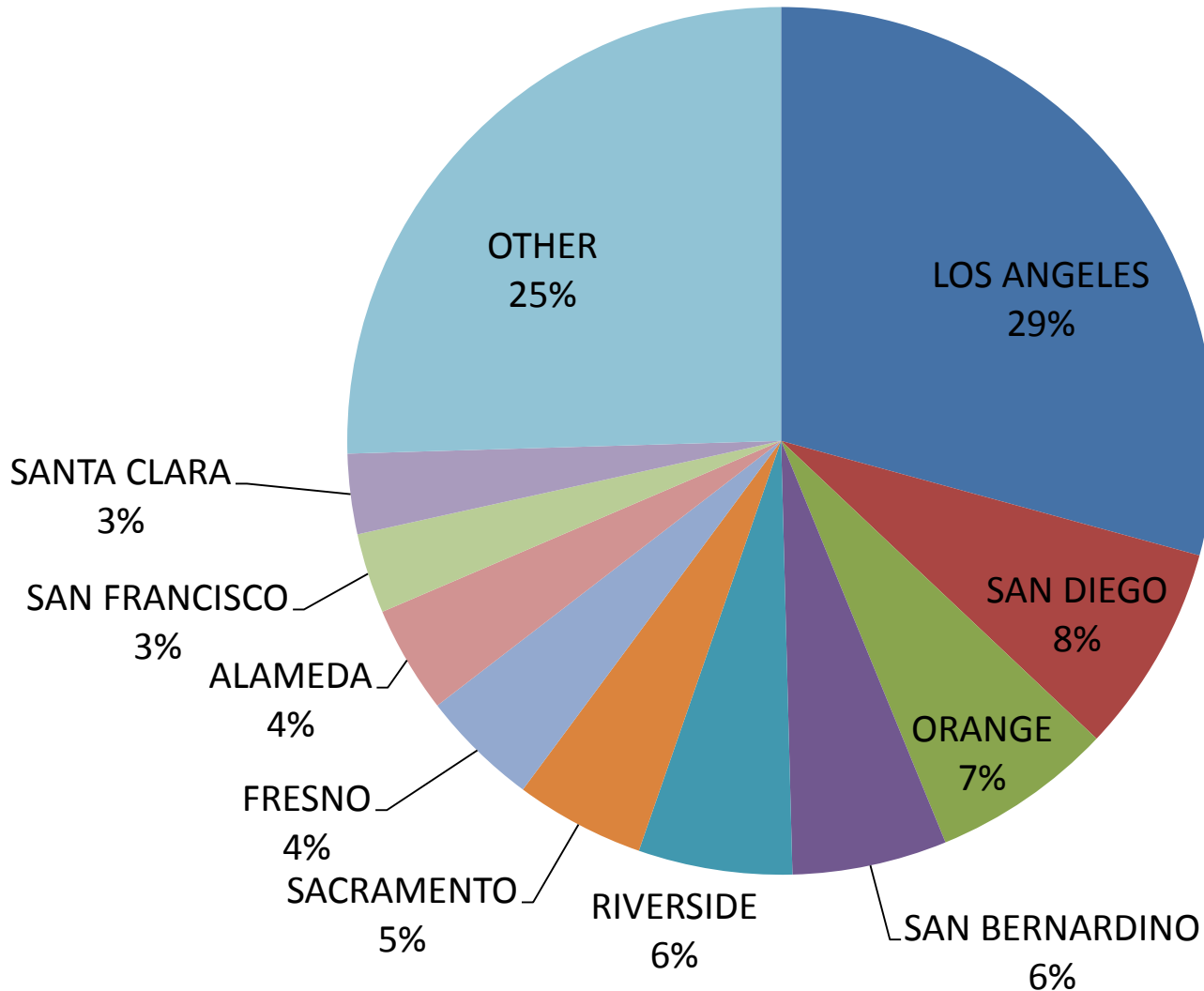




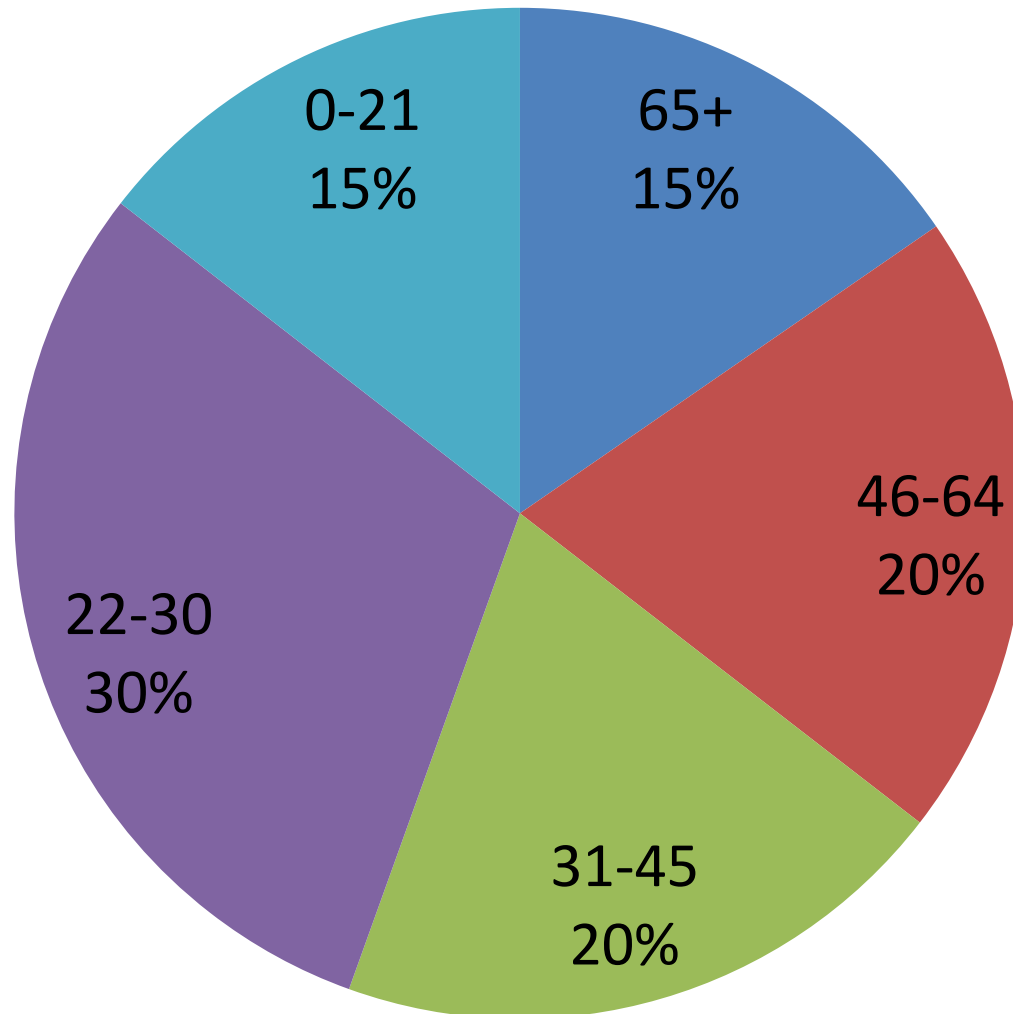
NF/AH Waiver Target Population by Full Scope Aid Code December 31, 2014



NF/AH Waiver Benes by County December 31, 2014



NF/AH Waiver Participant Age December 31, 2014



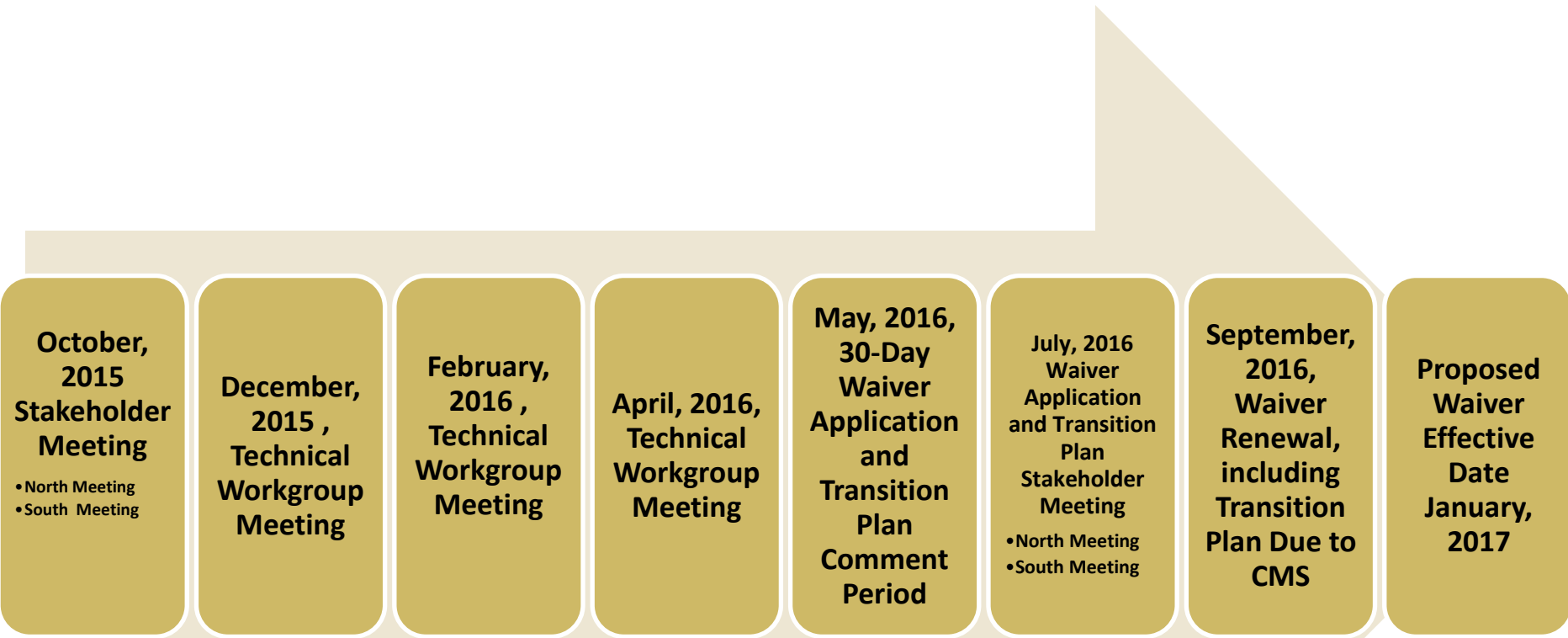


NF/AH Waiver Renewal and Transition Plan Public Comment Process

- DHCS will conduct a public comment period from May 1, 2016 through May 30, 2016 to allow stakeholders to comment on the NF/AH waiver and Transition Plan drafts.
- DHCS will collect and summarize stakeholders' input.
- Stakeholder input will be closely reviewed and considered for incorporation into the various components in the NF/AH Transition Plan.



NF/AH Waiver Renewal and Transition Plan Timeline





Background on Federal Ruling

- Home and Community-Based Settings Final Rule
 - In 2009, the Center for Medicare & Medicaid Services (CMS) published an advance notice of proposed rulemaking that indicated the federal government's intention to initiate rulemaking on number of areas within the section 1915(c) program.
 - By March 16, 2019 every HCBS program must be in compliance with the final rule and have a CMS approved transition plan.



Goals of the Federal Ruling

- Enhances the quality of HCBS and provides additional protections to individuals enrolled in HCBS programs.
- Maximizes opportunities for people to have access to the benefits of community living and receiving services in the most integrated setting.
- States must include a transition plan specific to the HCBS program to ensure compliance with the new Federal Rules.



Overview of New Federal Provisions

HCBS providers must meet the following qualifications:

1. Setting is integrated in and supports full access to the greater community;
2. Setting is selected by individuals from among setting options;
3. Setting ensures individual rights of privacy, dignity, respect, and freedom from coercion and restraint;
4. Setting optimizes autonomy and independence in making life choices;
5. Waiver participants have choice regarding services and who provides them;

Overview of New Federal Provisions



Residential HCBS Providers - Congregate Living Health Facility (CLHF):

6. A lease or other legally enforceable agreement providing similar protections;
7. Privacy in unit including lockable doors, choice of roommates, and freedom to furnish or decorate the unit,
8. His/her own schedule including access to food at any time;
9. Have visitors at any time; and
10. Lives in a setting that is physically accessible.



Statewide Transition Plan (STP)

- STP describes how the State will come into compliance with new Federal Home and Community-Based (HCBS) setting requirements
- STP can be viewed at:
<http://www.dhcs.ca.gov/services/ltc/Pages/HCBSStatewideTransitionPlan.aspx>
- Most HCBS programs Transition Plans will adhere to the STP process

Statewide Transition Plan (STP) Process



The following framework and strategy will be implemented through the STP to achieve and maintain compliance with the federal requirements:

- Systemic Assessment
- Self Surveys
 - Participants
 - Providers
- On-site Assessments
- Stakeholder Input



Resources

- <http://www.dhcs.ca.gov/services/ltc/Documents/ReferenceMaterialandResources.pdf>
- <http://www.dhcs.ca.gov/services/ltc/Pages/AssistedLivingWaiver.aspx>
- <http://www.medicaid.gov/HCBS>
- <https://www.federalregister.gov/articles/2014/01/16/2014-00487/medicaid-program-state-plan-home-and-community-based-services-5-year-period-for-waivers-provider>
- <http://www.dhcs.ca.gov/services/ltc/Pages/HCBSStatewideTransitionPlan.aspx>