



HCBS Setting Rule Requirements

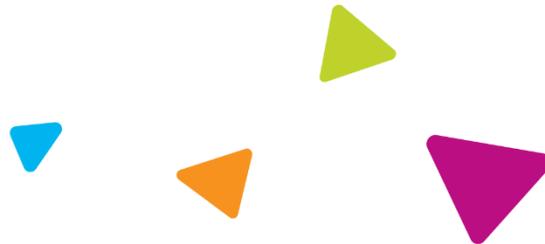
FOR PROVIDERS & WRAPAROUND AGENCIES

FEBRUARY 2019

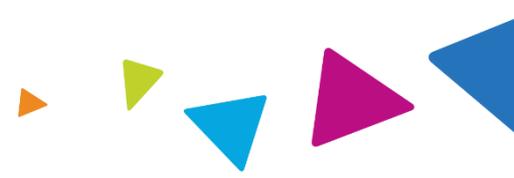
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Agenda

- Our Philosophy
- Our Policy
- What you need to do
- What Magellan will do



Our Philosophy



Magellan is committed to ensuring compliance with Centers for Medicare & Medicaid Services (CMS) regulations defining the settings in which it is permissible for states to pay for CSoC Waiver Services. The purpose of these regulations is to ensure that individuals receive CSoC Waiver Services in settings that are integrated in and support full access to the greater community. The regulations also aim to ensure that individuals have free choice of where they live and who provides services to them, as well as ensuring that individual rights are not restricted. The rule sets expectations for settings in which CSoC Waiver Services can be provided. This rule requires that the settings:

- Be selected by the individual from options that include non-disability specific settings. Individuals must also have choice regarding the services they receive and by whom the services are provided.
- Ensures the individual right of privacy, dignity and respect, and freedom from coercion and restraint.
- Optimizes independence and autonomy in making life choices without regimenting such things as daily activities, physical environment, and with whom they interact.

In addition, the rule also specifies certain settings in which CSoC Waiver Services cannot be provided. This includes settings that have always been statutorily excluded such as hospitals, nursing facilities, intermediate care facilities for the developmentally disabled (ICF/DD), and institutions for mental disease (IMD).



Magellan staff is trained in these requirements and works collaboratively with LDH to ensure compliance with these regulations.

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- Prior to enrolling members into the CSoC program, Magellan shall assess whether the member resides in a prohibited setting. Members who resided in prohibited settings shall not be enrolled into the 1915(c) waiver.
- Magellan may only permit eligible individuals, who reside in an institution (such as an inpatient hospital, nursing facility, IMD, ICF/DD, or PRTF) or other non-HCBS setting (such as a group home, any setting on the grounds of or adjacent to a public institution, or any setting located in a building that also provides inpatient institutional treatment), to receive Wraparound Services under the 1915(b)(3) authority for up to ninety (90) days while the participant remains in the institutional/non-HCBS setting for discharge planning purposes to ensure a successful transition to a home and community-based setting and, when clinical eligibility is met, enrollment in the 1915(c) waiver.

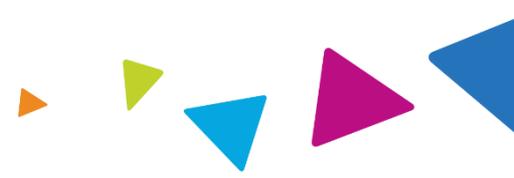
What you need to do



If you are a CSoC Waiver Service provider, your responsibility is to ensure that your provider site meets the HCBS Rule requirements:

- Provider service setting should be located among other residential buildings, private businesses, retail businesses, restaurants, doctor's office, etc. that facilitates participant integration within the greater community.
- The provider service setting should not be located in a building that also provides inpatient institutional treatment (such as a nursing facility, institute for mental disease, ICF/DD, or hospital).
- The provider service setting should not be located in a building on the grounds of or immediately adjacent to a public institution.
- The provider service setting should be physically accessible.
- Participant information should be kept private.
- Provider should have policy requirements that assure staff do not talk to other staff about an individual in the presence of other persons or in the presence of the individual as if s/he were not present.

What you need to do continued



- Notify Magellan immediately if your site does not meet these requirements or if you have questions regarding compliance.
- Do not deliver services to members in restrictive settings. The only exception for service delivery applies to WAA facilitation, which can be delivered for up to a 90-day period for the purposes of discharge and transition planning.

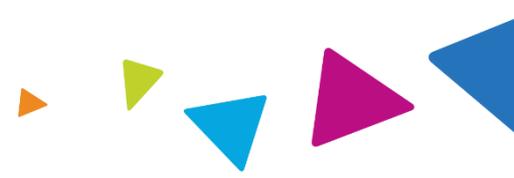
What Magellan will do



Magellan's responsibility is to:

- Evaluate your provider site to ensure compliance at the time of initial credentialing and recredentialing.
- Monitor your provider site annually to ensure compliance.
- Work with you on a corrective action plan if you are not compliant.

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