Overview of CMS Final Regulation and Ohio’s HCBS Transition Plan

In January 2014, the Centers for Medicare and Medicaid Services (CMS) released new requirements for Medicaid Home and Community-Based Services (HCBS) programs administered by states. The final regulations enhance the quality of HCBS, provide additional protections to individuals who receive HCBS, and establish the characteristics of the settings in which they can live and/or receive services. The regulations also define person-centered planning requirements to empower individuals to take an active role in expressing their wants, needs and preferences, and in identifying and accessing medically necessary services and supports. Ohio submitted a statewide transition plan to CMS describing how these requirements will be met.

During routine interactions, please take the following steps to educate the individuals and families you serve on the new requirements of Ohio’s HCBS Transition Plan:

» Educate them about HCBS settings and person-centered planning requirements;

» Encourage conversations about the settings in which they live and/or receive services and about service planning;

» Reiterate they can call you at any time if they have questions or concerns;

» Share that they can reach out to an independent advocate, the Ohio Long-Term Care Ombudsman, if they have any concerns. Explain that the role of the ombudsman is to advocate for the rights of consumers and resolve complaints with the goal to improve quality of care and quality of life;

» Provide them with the Guidance for Individuals Receiving Medicaid Assisted Living or Adult Day Services document.

Help with Starting the Conversation

The feedback from individuals about their settings and person-centered planning is important. The questions below may help you start the conversation with them:

» What is it like for you to live or receive services here? Tell me about your experiences.
In your residence, do you have a private place to make telephone calls whenever you want?

In your residence, do staff knock on your door before entering? Can you lock your door if you wish? Who else has keys to your residence?

If you share a bedroom in your residence, were you free to choose your roommate and are you able to choose another roommate if you want one?

Can you sit anywhere you want when eating in the dining room? Can you get a snack at any time if you want one?

Does the person providing your services ask for your input about where you live and the services you receive?

Do you feel comfortable asking for help from, or suggesting changes to, the person providing services to you?

Do you feel comfortable telling others you are not happy with the services you receive or that you have concerns about the person providing them?

Are you free to follow your own schedule each day such as waking, bathing and eating when you want?

Do you have visitors when you want? Are you able to have as many visitors as you want?

Are you able to attend activities outside your residence or place where you receive services? How often do you attend?

Do you decide which services you want, who to receive them from and when you want to receive them?

Questions?

Use your established communication method for questions regarding individuals to whom you provide ombudsman, case management, or waiver service coordination services.

More information about the State’s HCBS Transition Plan can be found here.