

# Home and Community Based Settings Rule Heightened Scrutiny Evidentiary Package

On March 17, 2014, new federal Medicaid rules for Home and Community Based Services (HCBS) went into effect. The rules impact many parts of HCBS. One of the most important topics is the places where HCBS can be provided.

Because HCBS programs are offered as alternatives to nursing and intermediate care facility services, the new rules make sure that HCBS are provided in settings that are not institutional in nature. To follow this rule, states must make sure that HCBS settings are part of a larger community, people are able to have choices about their service settings, and that people are assured their rights to privacy, dignity and respect.

States must evaluate their HCBS programs to determine the level of compliance with the new rules. The setting indicated on this form has been identified as requiring to go through the heightened scrutiny process as part of the compliance process.

Additional information on Heightened Scrutiny can be found here: [HCBS Settings Rule: Heightened Scrutiny](#)

## Setting Information

<b>Site Name:</b>	Community Treatment Alternatives (CTA)	<b>Site ID:</b>	242
<b>Site Address:</b>	1190 East 1450 South Clearfield, Utah 84015		
<b>Website:</b>	<a href="https://www.ctasupports.com/">https://www.ctasupports.com/</a>		
<b># of Individuals Served at this location regardless of funding:</b>	13	<b># of Medicaid Individuals Served at this location:</b>	13
<b>Waiver(s) Served:</b>		<b>HCBS Provider Type:</b>	
<input checked="" type="checkbox"/> Acquired Brain injury <input type="checkbox"/> Aging Waiver <input checked="" type="checkbox"/> Community Supports <input checked="" type="checkbox"/> Community Transition <input type="checkbox"/> New Choices <i>Description of Waivers can be found here:</i> <a href="https://medicaid.utah.gov/ltc/">https://medicaid.utah.gov/ltc/</a>		<input checked="" type="checkbox"/> Day Support Services <input type="checkbox"/> Adult Day Care <input type="checkbox"/> Residential Facility <input type="checkbox"/> Supported Living <input checked="" type="checkbox"/> Employment Preparation Services	
<b>Heightened Scrutiny Prong:</b>			
<input type="checkbox"/> Prong 1: Setting is in a publicly or privately operated facility that provides inpatient institutional treatment  <input type="checkbox"/> Prong 2: Setting is in a building on the grounds of, or immediately adjacent to, a public institution  <input checked="" type="checkbox"/> Prong 3: From the initial assessment, the setting was found to have the effect of isolating individuals from the broader community. The following is the area that was identified: <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> A. Individuals have limited, if any, opportunities for interaction in and with the broader community and /or the setting is physically located separate and apart from the broader community and does not facilitate individual opportunity to access the broader community and participate in community services consistent with their person centered service plan</li> </ul>			

# Home and Community Based Settings Rule Heightened Scrutiny Evidentiary Package

	<input type="checkbox"/> B. The setting restricts individuals choice to receive services or to engage in activities outside of the setting <input checked="" type="checkbox"/> C. The setting has qualities that are institutional in nature. These can include: <ul style="list-style-type: none"> <li>• The setting has policies and practices which control the behaviors of individuals; are rigid in their schedules; have multiple restrictive practices in place</li> <li>• The setting does not ensure an individual’s rights of privacy, dignity, and respect</li> </ul>
<b>Onsite Visit(s) Conducted:</b>	1/5/23 (Virtual, Scheduled)
<b>Description of Setting:</b>	
<p>The setting is a day service program located within a residential neighborhood in Clearfield. The setting is located near community restaurants, parks and businesses.</p> <p>CTA chose to apply for and participate in the USU technical assistance program. They engaged with industry experts through USU to identify what areas they needed to focus on to come into compliance with the settings rule and established a transformation plan for their setting. As this was a very intensive and optional process, they did not go through the additional review onsite visit with the State in 2019.</p>	
<b>Current Standing of Setting:</b>	
<input type="checkbox"/> Currently Compliant: the setting has overcome the qualities identified above  <input checked="" type="checkbox"/> Approved Remediation Plan: the setting has an approved remediation plan demonstrating how it will come into compliance. The approved timeline for compliance is: Their completed USU transformation plan will be validated in January 2023	

## Evidence the Setting is Fully Compliant or Will Be Fully Compliant

<b>Prong 1: The setting is in a publicly or privately operated facility that provides inpatient institutional treatment; the setting overcomes this presumption of an institutional setting.</b>	
<b>Compliance:</b>	<input type="checkbox"/> Met <input type="checkbox"/> Remediation Plan demonstrating will be compliant <input checked="" type="checkbox"/> Not Applicable

<b>Prong 2: The setting is in a building on the grounds of, or immediately adjacent to, a public institution; the setting overcomes this presumption of an institutional setting.</b>	
<b>Compliance:</b>	<input type="checkbox"/> Met <input type="checkbox"/> Remediation Plan demonstrating will be compliant <input checked="" type="checkbox"/> Not Applicable

<b>Prong 3 A: The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.</b>	
<b>Compliance:</b>	<input type="checkbox"/> Met <input checked="" type="checkbox"/> Remediation Plan demonstrating will be compliant
<b>Summary:</b>	<p><b>Transformation Plan Summary:</b></p> <p>CTA will continue to promote community integration for people receiving services across all supports. Evidence of compliance to include documentation of inclusion for each person we support on Therap. CTA training to also include settings rule compliance training. CTA will train</p>

# Home and Community Based Settings Rule Heightened Scrutiny Evidentiary Package

	<p>all current employees in March 2021 and new hires on CTA’s settings rule policy. CTA will implement community “exploration” support across all service models.</p> <p>People receiving residential support from CTA Community Supports will participate in Exploration activities that will lead to community inclusion and potential gainful employment opportunities.</p> <p>Program Managers, Assistant Managers and Direct Support Professionals will support people to engage in the planned Exploration activities on at least a weekly basis. People will also be presented with and supported to participate in general community inclusive activities on a daily basis. Data on Exploration and community inclusive activities will be taken upon occurrence using the Therap electronic data collection system.</p> <p>CTA’s Family Services after school program intends for each participant to have an individualized goal to promote community integration and involvement as well as opportunities for employment.</p> <p><b>Policy/Document Review:</b></p> <p>The following were reviewed for compliance:</p> <ul style="list-style-type: none"> <li>● Rights restriction forms</li> <li>● Exploration Activities</li> <li>● Planning Calendars</li> </ul>
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<b>Prong 3 B: The setting is selected by the individual from among setting options, including non-disability specific settings.</b>	
<b>Compliance:</b>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Remediation Plan demonstrating will be compliant
<b>Summary:</b>	The setting does not restrict access to non-disability settings. The setting has an admission process that assesses individuals' needs and preferences and regularly reassesses to ensure services are provided in a person-centered manner.

<b>Prong 3 C: The setting optimizes, but does not regiment individual initiative, autonomy, and independence in making life choices. The setting ensures an individual’s rights of privacy, dignity, respect, and freedom from coercion and restraint. The setting ensures the individual has the freedom and support to control his/her own schedule and activities.</b>	
<b>Compliance:</b>	<input type="checkbox"/> Met <input checked="" type="checkbox"/> Remediation Plan demonstrating will be compliant
<b>Summary:</b>	<p><b>Transformation Plan Summary:</b></p> <p>People receiving support in CTA’s after school, summer program, and adult day activity program will be offered a variety of community integrated activity options based on choice, interests and preference. Individual themes and matching activities will be developed for each individual by January 2021. Employment opportunities will also be provided as determined by each person and their support team.</p> <p>Through the person centered planning process, and by offering opportunities to explore novel community activities, the Program Coordinator will develop a support strategy in the person's ISP that will focus on supporting people in discovering and identifying community inclusion activities based on individual choice, interests and preference . The Program Coordinator and Manager will develop community inclusion activity calendars, with multiple options for the</p>

# Home and Community Based Settings Rule Heightened Scrutiny Evidentiary Package

	<p>person to choose from that are informed by the individual's interests and preferences. Exploration and community inclusive activities will be taken upon occurrence using the Therap electronic data collection system.</p> <p>Program Managers, Assistant Managers and Direct Support Professionals will support people to engage in the identified activities on at least a weekly basis.</p> <p><b>Technical Assistance and Rights Restrictions Review:</b></p> <p>The State requested a sample of rights restrictions documents for review. Technical assistance was provided to the setting to bring them into compliance. The setting resubmitted revised rights restrictions and a desk review was completed, validating their rights restriction process meets settings rule requirements.</p> <p><b>Policy/Document Review:</b></p> <p>The following were reviewed for compliance:</p> <ul style="list-style-type: none"> <li>● Rights restriction forms</li> </ul>
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<b>Overall, the setting enforces the Home and Community-Based Settings Regulation requirements.</b>	
<b>Compliance:</b>	<input type="checkbox"/> Met <input checked="" type="checkbox"/> Remediation Plan demonstrating will be compliant
<b>Summary:</b>	<p><b>Transformation Plan Summary:</b></p> <p>The setting developed and implemented a multi-faceted approach to providing information and educating to the general public, businesses, civic organizations, families and staff regarding integrated community inclusion for adults with disabilities and for future consumers. The setting implemented an exploration of services model to better understand and facilitate individuals services. The setting developed focused training for staff on the settings rule and individual supports. The setting established a goal of full integrations and employment opportunities for individuals served. The state will conduct validation visits to ensure ongoing compliance is achieved.</p>

## Input from Individuals Served and Staff

<b>Individuals Served Summary:</b>	N/A
<b>Staff Summary:</b>	N/A

<b>Ongoing Remediation Activities</b>	
Current Standing: <input type="checkbox"/> Currently Compliant <input checked="" type="checkbox"/> Approved Remediation Plan	
<b>Continued Remediation Activities</b>	<p>The provider has identified areas of remediation in their transformation plan to bring them into compliance with the Settings Rule. The state will validate this plan with a validation visit.</p>

# Home and Community Based Settings Rule Heightened Scrutiny Evidentiary Package

<b>Ongoing Monitoring Activities</b>	<p>The State will use the following tools to ensure settings continue compliance with the Settings Rule criteria:</p> <ul style="list-style-type: none"> <li>● Conducting individual served experience surveys</li> <li>● Addressing settings compliance during the annual person centered service planning process</li> <li>● Ongoing provider training and certification</li> <li>● Monitoring through critical incident reporting</li> <li>● Case Management/Support Coordinator visit monitoring</li> <li>● HCBS Waiver Reviews/Audits</li> </ul>
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## Summary of Stakeholder Workgroup Comments Received and State Response:

<b>Stakeholder Workgroup Review:</b> January 3, 2023 - January 18, 2023
<p><b><i>General Comments Received</i></b></p>
<p><b><i>Comment:</i></b> The materials provided by the State in the newly-released evidentiary packets (“batch 5”) raise concerns about whether the identified settings currently demonstrate the qualities of HCBS. In most instances, the state has only completed a virtual review instead of an in-person visit. In our experience as the P&amp;A, it is difficult to accurately assess characteristics of an institution as well as to communicate effectively with waiver participants without an in-person visit.</p>
<p><b><i>Response:</i></b> The State has a comprehensive virtual validation visit process in place to determine HCBS Settings Rule compliance. If at any time the State determines that the virtual process is not sufficient for a specific setting, then the State will make the determination that an in-person visit is required at that time. Once a setting has completed its remediation and the State has validated its compliance with the HCBS settings rule, it moves to the ongoing monitoring process.</p>
<p><b><i>Comment:</i></b> In many instances, the packages state that the setting is compliant based on a remediation plan and indicate that a validation visit will be completed in the future. Many of the reviews state that individuals are not getting into the community to the degree they would wish and that there are still institution-like restrictions on individuals in the settings. It is difficult for stakeholders to provide feedback on whether a setting has the characteristics of an HCBS setting if it is still in the process of remediating. The remediation plans seem to lack the detail necessary to assist a setting with becoming compliant and the short time frame until the final compliance deadline leads us to believe that these sites will not remediate in time.</p>
<p><b><i>Response:</i></b> Settings must demonstrate compliance or demonstrate a plan along with the State’s oversight to ensure completion of actions to certify they will become compliant prior to March 17, 2023 before the State submits them through the heightened scrutiny process.</p>

# Home and Community Based Settings Rule Heightened Scrutiny Evidentiary Package

**Comment:**

The reviews in many instances lack the detail necessary to determine whether a setting is institutional/segregating. For example, there are reviews of 14c certificate holders that do not indicate whether the setting will pay subminimum wage moving forward. Reviews indicate that individuals access the community, but in many instances don't specify how large the groups are, what types of activities they engage in and the frequency with which activities occur. Some reviews mention work groups/work enclaves, but do not specify what type of work individuals engage in, where people work and how large the work groups are. The reviews frequently say that the setting does not restrict access to the community, that community amenities are within "miles" and that there is access to public transportation, but often do not specify how the facility supports individuals to access these amenities/public transportation.

**Response:**

While the State agrees that certain criteria can create concerns with compliance, several elements described do not determine on their own whether a setting meets or fails requirements. Individual settings are reviewed and assessed on their merit. For example, payment of sub-minimum wage work or group sizes in and of themselves are not including or excluding criteria. The state determines compliance based on factors such as person centered planning, individual choice and autonomy, individualized schedules, and individuals self-reporting they are accessing the community at the level that they desire.

**Comment:**

We are very concerned about how the state has handled non-residential settings, particularly large day programs and sheltered workshops. These reviews do not demonstrate that the state has ensured that these particularly problematic settings have remediated sufficient to comply with the settings rule as well as title II of the ADA and Olmstead. Again, many final reviews have not been completed in person, and most frequently the state is submitting sites that have submitted a remediation plan but have not been validated as remediated.

**Response:**

Settings must demonstrate compliance or demonstrate a plan along with the State's oversight to ensure completion of actions to certify they will become compliant prior to March 17, 2023 before the State submits them through the heightened scrutiny process. The State has a comprehensive virtual validation visit process in place to determine HCBS Settings Rule compliance. If at any time the State determines that the virtual process is not sufficient for a specific setting, then the State will make the determination that an in-person visit is required at that time. Once a setting has completed its remediation and the State has validated its compliance with the HCBS settings rule, it moves to the ongoing monitoring process. While the State does acknowledge that activities for remediation extended into March 2023, it does not believe strategies deviated from its Statewide Transition Plan, or that inappropriate methods were used in validating compliance. The State also acknowledges that Settings compliance is not a one time activity and the usage of ongoing monitoring will aid to reinforce core tenants of the Rule as well as the development and dissemination of best practices. The State encourages the submission of providers who are believed to be non-compliant with requirements of the Settings Rule, including the elements/criteria which are not sufficiently meeting expectations.

# Home and Community Based Settings Rule Heightened Scrutiny Evidentiary Package

**Comment:**

Reviews indicate that individuals are still being segregated by “level of functioning” and even by whether an individual resides in an ICF or an HCBS setting.

**Response:**

The State agrees that settings identified as having this concern are institution and segregating in nature. The purpose of the heightened scrutiny process was to identify settings that were institutional and segregating in nature and go through the process of showing how they overcame those qualities. Settings submitting for heightened scrutiny were required to remediate through training of staff, provide evidence of compliance, and demonstrate compliance through validation that they were compliant in these areas of concern.

**Comment:**

Reviews do not indicate that the EPR codes which contemplate meaningful, individualized, time-limited pre-vocational programs are being implemented in Workshops. Reviews do not indicate that individuals are spending at least 20% of their time in the community engaging in activities chosen by the individual. Reviews do not (for the most part) indicate whether or not the provider is continuing to pay subminimum wage. Reviews do not consider what type of work individuals engage in the setting and whether or not that work is chosen by the individual. Frequently, specificity as to how many individuals are working in a group is not given. Frequently, information about how settings are supporting individuals to gain competitive, integrated employment as guaranteed by the settings rule is not given.

**Response:**

As with all settings, the State’s review was for the purpose of determining whether the tenants of the Settings Rule had been met, regardless of which specific services were delivered at the location. The State has separate compliance monitoring for the appropriate authorization of Employment Preparation Services and the delivery of those services by providers.

**Comment:**

Frequently, reviews indicate that there are still restrictive practices in the settings indicating an institution-like environment.

**Response:**

The State agrees that many reviews indicated settings still had restrictive practices in place indicating an institution-like environment as they had not yet gone through their final validation process at the time they went out for heightened scrutiny. The State has spent considerable time with settings and providers providing technical assistance beyond what was documented in their remediation plans to remediate their institutional and segregating characteristics to come into compliance with the rule.

## Summary of Public Comments Received and State Response:

**Public Comment Period:** January 2, 2023 to February 3, 2023

***Setting Specific Comments:***

**Comment:**

One commenter stated Community Treatment Alternatives (CTA) site 242 is a day support services and employment preparations services program located at 1190 East 1450 South Clearfield, Utah 84015. It provides services to 13 waiver participants. The materials provided by the State in the evidentiary packet do not

# Home and Community Based Settings Rule Heightened Scrutiny Evidentiary Package

demonstrate that the identified setting currently demonstrates the qualities of HCBS. This evidentiary packet states that the setting has fully remediated but does not contain any information about the state validating this through a visit. Instead the document states that a visit is planned for January 2023, but that information is not included in the packet. For stakeholders to provide effective feedback, the state needs to present stakeholders with final validations of compliance with the rule rather than un-validated remediation plans. Not doing so does not provide appropriate notice to community partners of the steps the state has taken to ensure that settings are fully in compliance with the settings rule.

**Response:**

Settings must demonstrate compliance or demonstrate a plan along with the State's oversight to ensure completion of actions to certify they will become compliant prior to March 17, 2023 before the State submits them through the heightened scrutiny process. As indicated on the heightened scrutiny package, a validation visit was conducted on 12/29/22 to ensure that the remediation plan was implemented and the setting was compliant in the areas indicated. The setting was determined compliant at the validation visit.

**Comment:**

The same commenter had additional feedback stating While with the assistance of the Utah State University technical assistance program the setting has developed a detailed plan to remediate, the state has not conducted a visit and did not interview staff or consumers about their experience within the setting. Without that assessment it is difficult for the state to ascertain that the setting will be compliant within the compliance deadline. It is also difficult for stakeholders to provide appropriate feedback and be involved in the process.

**Response:**

Settings must demonstrate compliance or demonstrate a plan along with the State's oversight to ensure completion of actions to certify they will become compliant prior to March 17, 2023 before the State submits them through the heightened scrutiny process. As indicated on the heightened scrutiny package, a validation visit was conducted on 12/29/22 to ensure that the remediation plan was implemented and the setting was compliant in the areas indicated. The setting was determined compliant at the validation visit.

**General Comments Received:**

**Comment:**

As the Protection and Advocacy agency for people with disabilities for the State of Utah, the Disability Law Center ("DLC") is uniquely suited to provide assistance and input during this process. Based on our own observations as the P&A as well as our evaluation of the state's assessments of settings, the state did not engage in a sufficient assessment process or provide adequate support to bring settings into compliance with the rule prior to the March 17, 2023 deadline. We are concerned that HCBS waiver dollars will continue to be spent on segregated, institutional settings despite the state's obligations under the HCBS settings rule, Title II of the ADA and Olmstead. This heightened scrutiny evidentiary package demonstrates these ongoing concerns as detailed below.

**Response:**

While the State does acknowledge that activities for remediation extended into March 2023, it does not believe strategies deviated from its Statewide Transition Plan, or that inappropriate methods were used in validating compliance. The State also acknowledges that Settings compliance is not a one time activity and the usage of ongoing monitoring will aid to reinforce core tenants of the Rule as well as the development and dissemination of best practices. The State encourages the submission of providers who are believed to be non-compliant with



# Home and Community Based Settings Rule Heightened Scrutiny Evidentiary Package

requirements of the Settings Rule, including the elements/criteria which are not sufficiently meeting expectations.

## Summary of Stakeholder Workgroup Recommendation:

**Stakeholder Workgroup Review:** January 3, 2023 - January 18, 2023

We only got a response from one workgroup member. Their comments are noted above.

## Utah's Recommendation

**Recommendation: Compliant**

**At the time the heightened scrutiny packet was submitted for public comment, the State had not completed the final validation visit. The State has since completed the final validation visit and determined the setting has overcome the effect of isolating individuals from the broader community and is in compliance with the HCBS Settings Rule.**