HCBS Settings Rule
Center Based Employment (CBE) Discussion

AGENDA

Monday, August 20, 2018

Room 125
Cannon Health Building

3:00 – 5:00 P.M.

Call-In Number: 877-820-7831
Access Code: 197312

1. Welcome

2. Overview of Settings Rule

3. Stakeholder Opportunity to Discuss Concerns

4. State’s Presentation of a Draft CBE Model

5. Stakeholder Feedback on a Draft CBE Model

6. Next Steps and Timeline

Visit http://health.utah.gov/ltc/hcbstransition/ for more information and ongoing updates.
Home and Community Based Services (HCBS) Settings Rule

- Federal rule issued in 2014, full compliance required by March 2022
- HCBS Setting must be integrated in and support full access to the greater community

Settings presumed not to be eligible for Medicaid HCBS funding
- Settings with the effect of isolating individuals from the broader community of individuals not receiving HCBS
  - The setting is designed specifically for people with disabilities
  - Individuals in the setting are primarily or exclusively people with disabilities

A Center Based Employment (CBE) Model for Discussion

Hub and Spoke Model –

- Limit use of CBE to up 24 months (with some exceptions that allow CBE beyond 24 months)
  - Ability to extend beyond 24 months - Based on the goals outlined in the individual’s person centered support plan (PCSP) on a case by case basis
  - Option to return to center-based employment for additional (up to) 24-month periods if the individual quits or loses competitive, integrated employment

- Complete meaningful person-centered planning to determine what tasks the individual will work on to build job skill while in CBE
  - Must work toward (and document) specific and measurable employment goals for competitive integrated employment
  - Opportunity for yearly career counseling

- Create opportunities for integration during both the pre-vocational phase and during periods of the day when the individual is not at work at their competitive, integrated, employment site. (This could entail the use of a new service definition “Community Participation” or a combination of service codes (for example – some services could be coded as “supported employment” and some “day supports”)
  - Evaluate implementing a requirement where individuals will spend a minimum of 20% of their time in the community participating in experiences that are meaningful to the individual
  - CMS has stated that providers must avoid reverse integration

- Limit enrollment of new CBE providers to those that:
  - Meet the pre-vocational hub and spoke model standards
### Next Steps

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<thead>
<tr>
<th>DOH and DHS Action Items</th>
<th>Proposed Completion Date</th>
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<tbody>
<tr>
<td>1. Work with CMS to identify opportunities for flexibility regarding CBE service delivery and submit design proposal to CMS for review</td>
<td>September 2018</td>
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<td>2. Participate in technical assistance call with CMS’ TA contractor to discuss design proposal</td>
<td>September 2018</td>
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<td>3. Update Legislative leadership on CMS’ feedback regarding proposal</td>
<td>September 2018</td>
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<td>4. Continue to work with stakeholders to determine feasibility of a CMS approvable CBE model and determine if alternative models are needed</td>
<td>October–December 2018</td>
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<td>5. Provide Legislature with options (including potential costs) to address CBE</td>
<td>January 2019</td>
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<td>6. To assist providers to transition to CMS approved CBE model, the DOH and DHS will:</td>
<td>January - June 2019</td>
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<tr>
<td>• Identify and engage technical assistance contractor that specialized in this service delivery area</td>
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<td>• Modify employment and day support service descriptions</td>
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<td>• Identify rate changes needed to employment and day support billing codes</td>
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<td>7. Work with stakeholders to complete transition to approved model(s)</td>
<td>July 2019 – March 2022</td>
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