Settings that Demonstrated Compliance by July 1, 2021

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 had initially been identified as requiring to go through the heightened scrutiny process as part of the compliance process. They were able to demonstrate compliance with the settings criteria by July 1, 2021, so they are not required to go through the entire heightened scrutiny process, but they are required to go out for public comment.

Additional information on Heightened Scrutiny can be found here: HCBS Settings Rule: Heightened Scrutiny

Setting Information

Site Name:	Chrysalis Utah Site ID: 399		399		
Site Address:	2017 W Commerce Way #C, West Haven, UT				
Website:	https://www.chr	ysalis.care/			
# of Individuals Served at this location regardless of funding:		# of Medicaid Individual Served at this location		26	
Waiver(s) Served:		HCBS Provider Type:			
 ☑ Acquired Brain injury ☑ Day Support Services ☐ Adult Day Care ☑ Community Supports ☑ Residential Facility ☑ Supported Living ☐ New Choices ☐ Employment Preparation S Description of Waivers can be found here: https://medicaid.utah.gov/ltc/ 		/	rvices		
Heightened Sc	rutiny Prong:				
☐ Prong 1: Setting is in a publicly or privately operated facility that provides inpatient institutional treatment					
\square Prong 2: Setting is in a building on the grounds of, or immediately adjacent to, a public institution					
☑ 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:					

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□ A.	Individuals	s 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		
	\square B. The setting restricts individuals choice to receive services or to engage in activities outside of the		
Se	etting		
☑ C.	-	g has qualities that are institutional in nature. These can include:	
•		ting has policies and practices which control the behaviors of individuals; are rigid in	
		hedules; have multiple restrictive practices in place	
	The se	tting does not ensure an individual's rights of privacy, dignity, and respect	
Onsite Visit(s) Co	nducted:	10/29/2019 (in-person), 4/1/2021 (virtual)	
Description of Se	etting:		
The setting is a d	ay support	program located in an industrial area. Although the location is not located in an area	
that facilitates in	tegration v	vith the greater community, the setting overcomes the location by ensuring individuals	
are given the opp	ortunity to	o go out into the community on a daily basis, if they choose to. On average, individuals	
		ity 3-4 times per week during program time. The location is also 0.5 miles from the	
•		ng is located in the same building as a hair salon and a thrift store and the nearest gas	
station is 0.08 mi	les away s	o it is not completely isolated from the greater community.	
Current Standing	of Setting	;:	
☑ Currently Com	pliant: the	setting has overcome the qualities identified above	
☐ Approved Ren	☐ Approved Remediation Plan: the setting has an approved remediation plan demonstrating how it will come		
into compliance.	The appro	oved timeline for compliance is:	
Evidence the	Setting	g is Fully Compliant or Will Be Fully Compliant	
	_	publicly or privately operated facility that provides inpatient institutional treatment;	
the setting overc	omes this	presumption of an institutional setting.	
Compliance:	\square Met	☐ Remediation Plan demonstrating will be compliant ☑ Not Applicable	
	_	building on the grounds of, or immediately adjacent to, a public institution; the	
setting overcome	es this pre	sumption of an institutional setting.	
Compliance:	☐ Met	☐ Remediation Plan demonstrating will be compliant ☑ Not Applicable	
	_	tegrated in and supports full access of individuals receiving Medicaid HCBS to the	
_	-	ing opportunities to seek employment and work in competitive integrated settings,	
	-	control personal resources, and receive services in the community, to the same	
degree of access	as individ	uals not receiving Medicaid HCBS.	
Compliance:	☑ Met	\square Remediation Plan demonstrating will be compliant	

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	Onsite Visit Summary (10/2019):	
	Individuals are able to access the community 3-4 times a week. There are frequent	
	opportunities for individuals to volunteer and gain skills in their community while giving back at	
	locations of their choice. The setting has a formal process for individuals to explore and pursue	
	a competitive integrative employment (CIE), if they choose to. Individuals are able to control	
C	their spending money when they are in the community.	
Summary:	Policy/Document Review:	
	The following were reviewed for compliance:	
	Chrysalis HCBS Policies	
	 5-2 Annual Meetings and Person Centered Supports 	
	o 5-19 Schedules	
	o 2-2 Direct Care Employee Training Requirements (Utah)	

Prong 3 B: The settings.	etting is selected by the individual from among setting options, including non-disability specific	
Compliance:	☑ Met ☐ Remediation Plan demonstrating will be compliant	
Summary:	Onsite Visit Summary: 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. Policy/Document Review: The following were reviewed for compliance: Person Orientation Packet New Staff Training Checklist	
	Person Orientation Form	

making life choice	etting optimizes, but does not regiment individual initiative, autonomy, and independence in ces. The setting ensures an individual's rights of privacy, dignity, respect, and freedom from straint. The setting ensures the individual has the freedom and support to control his/her own tivities.
Compliance:	☑ Met □ Remediation Plan demonstrating will be compliant
Summary:	Onsite Visit Summary (10/2019): Individuals are able to bring their own lunches or eat out when they desire. They are able to eat both their snacks or lunch when they want. They are not required to participate in any activities they do not want to and staff are trained to offer choices throughout the day. Concerns identified at the validation visit included that the setting was not fully accessible with the upstairs area not having an elevator or a lift. During the onsite visit, there were some concerns identified that the setting is overly restrictive. Restrictions are placed on individuals prior to using less intrusive methods first; individuals must earn things such as "free time." Remediation Plan Summary:

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The setting submitted a sample of human rights restrictions for review. The State provided technical assistance on how to revise the restrictions to meet the requirement of the HCBS settings rule and the setting resubmitted the revised rights restrictions meeting the setting rule criteria. Along with the revised restrictions, the provider submitted a plan of correction on how to move forward with training their staff and revising their rights restriction process for the remainder of their settings to come into HCBS settings rule compliance in this area. **Rights Restriction Validation Summary:** The State did a desk review of the resubmitted rights restrictions. The State reviewed the rights restrictions to ensure they met the 8 criteria of the settings rule regulations, including individual served informed consent. The setting was able to demonstrate compliance for the individuals served in the setting. Onsite Visit Summary (4/2021): The State observed the upstairs area to validate the accessibility issues had been addressed. All program areas are now accessible to all individuals going to program. Policy/Document Review: The following were reviewed for compliance: Chrysalis HCBS Policies 5-2 Annual Meetings and Person Centered Supports 5-3 Human Rights (Utah) o 5-17 Positive Behavioral Supports o 5-19 Schedules 2-2 Direct Care Employee Training Requirements (Utah) Person Orientation Packet New Staff Training Checklist

New Employee Orientation of Policy, Procedures, and Chrysalis Culture Competency

Revised Rights Restrictions Documentation for multiple individuals served

Overall, the setting enforces the Home and Community-Based Settings Regulation requirements.		
Compliance:	☑ Met ☐ Remediation Plan demonstrating will be compliant	
Summary:	Overall, all segregating and institutional concerns were addressed through the remediation process and the State was able to validate that the areas were remediated through the desk review validation process. Staff are trained on HCBS requirements both upon hire and ongoing. The State will continue to work with the Provider, and its additional settings to ensure its rights restriction process has been implemented across all of its settings. As indicated below, this setting will be reviewed through ongoing monitoring activities.	

Person Orientation Form

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Input from Individuals Served and Staff

	Summary of interviews (2019):	
Individuals Served Summary:	Individuals reported they are able to participate in activities that are important to them in the community.	
	Individuals report they are given the opportunity to control their spending money.	
	Individuals report they can eat when they want to	
	One individual reported they had a restriction in place, but they understood why	
	Summary of interviews (2019):	
Staff Summary:	Staff reported they have received training on keeping individual's information private.	
	Staff reported they have received training on HCBS Settings Rule, community integration,	
	human rights, and individual choice.	
	Staff reported individuals are never forced to participate in anything they do not want to.	

Ongoing Remediation Activities		
Current Standing	g: 🗹 Currently Compliant 🗆 Approved Remediation Plan	
Continued		
Remediation	☑ N/A for currently compliant	
Activities		
	The State will use the following tools to ensure settings continue compliance with the Settings Rule criteria:	
	Conducting individual served experience surveys	
Ongoing Monitoring	 Addressing settings compliance during the annual person centered service planning process 	
Activities	Ongoing provider training and certification	
	Monitoring through critical incident reporting	
	Case Management/Support Coordinator visit monitoring	
	HCBS Waiver Reviews/Audits	

Summary of Stakeholder Workgroup Comments Received and State Response:

Stakeholder Workgroup Review: October 24 to November 28, 2022
No comments received

Summary of Public Comments Received and State Response:

Public Comment Period: October 24 to November 28, 2022

Comment: At each of the sites [Chrysalis sites 395, 399, 402, 816], the State noted that individuals had to "earn things such as free time." This language connotes the provider was utilizing a levels system that applied to all consumers. A provider utilizing a levels system cannot be compliant with the settings rule as the regulations require individuals to have the maximum freedoms possible. The State has not conducted follow up site visits since 2019 and only conducted a desk review of rights restrictions as part of its remediation process. To ensure

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individuals are not subjected to broad, programmatic restrictions the State should conduct another site visit and speak with individuals about their experience in the setting before a determination is made that the setting has overcome the institutional presumption. We would urge the state to complete an in person assessment to ensure compliance with the rule.

Response:

The State determined final compliance through the desk review process. The desk review determined Chrysalis was using a person-centered approach for these specific settings in regards to rights restrictions and met the settings requirements. The State will continue to monitor their status through the ongoing monitoring process.

Summary of Stakeholder Workgroup Recommendation:

Stakeholder Workgroup Review: October 24 to November 28, 2022

The Stakeholder Workgroup recommended that the heightened scrutiny packet is ready to be submitted to CMS (100% of those that responded).

Utah's Recommendation

Date of Recommendation: 1/12/23

The State has determined the setting has overcome the effect of isolating individuals from the broader community and is in compliance with the HCBS Settings Rule.