

TRANSITION PLAN

For Complying with the CMS Home- and Community-Based Services Medicaid Rule

FOR THE STATE OF WYOMING

The CMS-approved Wyoming transition plan can be found at:

<https://www.medicaid.gov/medicaid/hcbs/downloads/wy/wy-approved-plan.pdf>

Providers and other stakeholders are advised to review the state’s current rules and plans for updates for meeting federal regulations and plans, which are included at the end of the transition plan, pp. 36 ff. The transition plan includes a good overall description of services in state: “Wyoming is a frontier state with many small, rural communities. Building provider capacity, in the traditional sense, is challenging. Wyoming has approximately 775 providers. Most of these providers work with one or two individuals, so individualized services are inherent to the Wyoming service delivery system. Large providers are still considered small, relatively speaking; Wyoming’s largest provider offers services to fewer than 130 individuals.”

SITE-SPECIFIC ASSESSMENTS

Types of Settings/Residents and Funding Authorities	<p>The state evaluated initial compliance based on responses to a 35-point self-assessment instrument. Of 1038 settings at which waiver services were provided, 388 were deemed compliant because they were participant family homes. Of the remaining, the state received responses covering 558 settings, including:</p> <p>Residential settings</p> <ul style="list-style-type: none">• Assisted living facilities — 19• Residential habilitation host homes (adults) — 157• Residential habilitation group home and apartments (adults) — 148• Special family host homes (children) — 2• Supported living sites — 124 <p>Non-residential settings</p> <ul style="list-style-type: none">• Adult day care facilities — 4• Supported employment sites — 6• Group work centers — 9• Provider owned businesses — 1• Facility-based day services — 58• Community integration settings — 2• Other — 28
Compliant/Non-Compliant	<p>Of the settings listed above, all but 56 were found to be in fully compliance. Notably, none of the assisted living providers was fully compliant. 54 of the 56 were found to be “mostly compliant due to the approval of milestones and the overall progress made toward completing milestones and are anticipated to be in full compliance by the March 17, 2022 deadline.” The settings considered mostly compliant include:</p> <ul style="list-style-type: none">• Adult day care facilities — 4• Facility-based day services — 6

WYOMING TRANSITION PLAN FOR COMPLYING WITH THE CMS HOME- AND COMMUNITY-BASED SERVICES MEDICAID RULE (continued)

	<ul style="list-style-type: none"> • Residential habilitation group home and apartments — 25 • Residential habilitation host homes — 1 • Supported living sites — 1 • Assisted living facilities — 17 <p>Two assisted living facilities have been determined to be “somewhat compliant” due to the location of the sites. One is a Veterans’ Home that is located on a campus with institutional services, and the other is in the same building as a facility offering institutional services. These settings will undergo heightened scrutiny.</p>
<p>Reasons for Non-Compliance</p>	<p>Because of the small numbers involved, the state did not identify percentages of non-compliance by type. They include a discussion, however, of the types of “flag” issues that are more or less common in types of settings, based on interviews with participants.</p> <p>Facility-based day settings:</p> <p>“Day settings had higher rates of compliance than Residential and Supported Living settings. Day settings struggle with providing freedom to choose and schedule daily activities. Some compliant day settings employ a planning coordinator, who helps participants determine their goals, desires, and wishes, and then designs customized schedules, helping the provider plan for staff time and transportation ahead of time.”</p> <p>Group homes:</p> <p>“Group homes struggled with 4 out 5 of the top-flagged areas the most. Group homes providers may need to change their business model and capital structure to provide non-disability specific settings. With regards to access to food, most settings will need to formalize their practices by way of policies and procedures to ensure ongoing compliance, as the participant survey indicates most providers have compliant practices.”</p> <p>Host homes:</p> <p>“Host Homes had better compliance than day settings in many respects, with the exception of community integration. Hosts Homes are often located in rural locations, further from other people. These settings will have to determine how they integrate participants with neighbors and friends, and make sure participants can go into town. Host Homes are also smaller than most day settings, which increases the likelihood of individualized services.”</p> <p>Supported living:</p> <p>“Supported living settings struggled with the five areas more than host homes or day services. Many of these settings need to improve their process for showing participants different setting options, which include non-disability specific options. However, these settings are the most integrated of the four major setting types.”</p>

WYOMING TRANSITION PLAN FOR COMPLYING WITH THE CMS HOME- AND COMMUNITY-BASED SERVICES MEDICAID RULE (continued)

<p>Types of Remediation</p>	<p>The State has a detailed, 30 “Milestone” plan for bringing providers into compliance by 2022 (pages 19–24 of transition plan). For example:</p> <p>“Milestone 13: By January 1, 2018, each provider with an HCB setting that has areas of noncompliance with the new standards found by State staff will receive technical assistance to develop provider specific transition plans that address areas of non-compliance. Areas could include:</p> <ul style="list-style-type: none"> • A lease or written residency agreement with each participant • Each individual has privacy in their sleeping or living unit • Units have lockable entrance doors, with the individual and appropriate staff having keys to doors as needed • Individuals sharing units have a choice of roommates • Individuals have freedom to furnish and decorate within the lease/agreement • Individuals have freedom and support to control their schedules and activities and have access to food any time • Individuals may have visitors at any time • The setting is physically accessible to the individual”
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SETTINGS PRESUMED INSTITUTIONAL

<p>% Presumed Institutional (No. of Residents Affected)</p>	<p>The transition plan includes an interesting discussion that provides some insight into confusion about interpreting what types of issues require “heightened scrutiny”: “Initially, over 100 settings were identified as requiring heightened scrutiny. However, after a review of the guidance provided by CMS, the Department determined that these settings were incorrectly identified. The initial identification was based on practice rather than setting location. Since areas of non-compliance could be rectified through the provider transition plan, the number of settings which required heightened scrutiny was reduced to five (5).”</p>
<p>Type of Setting/Residents</p>	<p>Two assisted living and three other unidentified settings</p>
<p>Reason for Presumption</p>	<p>The assisted living settings were located with or in a facility providing institutional services. The other three settings were deemed to be isolating for beneficiaries.</p>
<p>Heightened Scrutiny Process</p>	<p>After notifying those settings subject to heightened scrutiny, each provider must produce the care plans used for each Medicaid participant. Each will receive a site visit with interviews of participants. The heightened scrutiny report produced will be subject to public comment before a determination is made.</p>

NON-COMPLIANCE COMMUNICATION

<p>% Cannot/Will Not Comply (No. of Residents Affected)</p>	<p>Not applicable</p>
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Type of Setting/Residents	
Reason for Determination	
Communication Strategy	
Assistance to Residents?	

ONGOING MONITORING

Monitoring Procedures	Routine monitoring for ongoing compliance, though see the 30 milestone discussion above regarding the state’s role in providing technical assistance and guidance to come into compliance.
Quality Assurance Measures	The state has both a 35 factor self-assessment tool as well as a survey instrument regarding beneficiary experiences in meeting the goals of the HCBS rule (p. 8 of transition plan).