

TRANSITION PLAN

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

FOR THE STATE OF CONNECTICUT

The updated CMS-approved Connecticut transition plan and other technical assistance materials can be found at: <https://www.medicaid.gov/sites/default/files/2023-05/ct-appvd-plan.pdf> (See also the Settings Requirements – Amendment at:

<https://portal.ct.gov/-/media/Departments-and-Agencies/DSS/Health-and-Home-Care/Community-Options/CT-STP-Amendment-Final-08-01-2018.pdf?la=en>)

SITE-SPECIFIC ASSESSMENTS

Types of Settings/Residents and Funding Authorities
<p>The HCBS programs administered and operated by the Department of Social Services (DSS) are:</p> <ul style="list-style-type: none">• HCBS Waiver for Elders• 1915(i) State Plan HCBS Option• Acquired Brain Injury Waiver• Mental Health Waiver (operated by the Department of Mental Health and Addiction Services)• Personal Care Assistance Waiver• Katie Beckett Waiver <p>The HCBS programs administered by DSS but operated by the Department of Developmental Services (DDS) are:</p> <ul style="list-style-type: none">• Comprehensive Waiver• Individual and Family Support Waiver• Employment and Day Supports Waiver• Home and Community Supports Waiver for Persons with Autism• Early Childhood Autism Waiver <p>Types of services overseen by the Department of Social Services (DSS):</p> <ul style="list-style-type: none">• Assisted Living• Adult Family Living• Adult Day Health• Residential Care Homes• Prevocational Services• Supported Employment• Group Day <p>Types of services overseen by the Department of Developmental Service (DDS):</p> <ul style="list-style-type: none">• Residential Habilitation: Community Living Arrangements• Residential Habilitation: Community Companion Homes• Continuous Residential Supports• Prevocational Services

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

	<ul style="list-style-type: none"> • Group Supported Employment • Group Day Support Options
Compliant/Non-Compliant	<ul style="list-style-type: none"> • Assisted Living — All 38 fully comply • Adult Family Living — All 1768 fully comply • Adult Day Health — 44 fully comply; 5 are presumed to have the qualities of an institution but the State will submit evidence for the application of heightened scrutiny • Residential Care Homes — 0 fully comply; 36 could comply with modifications; 7 are presumed to have the qualities of an institution but the State will submit evidence for the application of heightened scrutiny <p>(See pages 36-38 of the State Plan Amendments for a full listing of compliance levels of other services, mostly for those with developmental disabilities.)</p>
Reasons for Non-Compliance	<p>Areas for improvement identified as discrepancies between participant and provider surveys:</p> <ul style="list-style-type: none"> • Choice of residence • Choice of roommate • Options for employment • Ensuring participant privacy/access to keys • Access to computer
Types of Remediation	<p>For the most part, DSS seemed to accept provider explanations, but identified the above areas for continued monitoring and reminders to providers to address participant issues.</p> <p>Residential care homes will be especially monitored for resident lease/agreement issues — especially around eviction procedures — as well as privacy, visitation, meals, and other issues.</p> <p>DSS identified Adult Day Centers and Residential Care Homes that are located in a building that is also a publicly or privately operated facility that provides institutional care or settings located on the grounds of, or are immediately adjacent to a public institution. DSS determined waiver participants made an informed choice to be in the residence or activity.</p>

SETTINGS PRESUMED INSTITUTIONAL

% Presumed Institutional (No. of Residents Affected)	DSS has identified 5 Adult Day Centers and several Residential Care Homes that are located in a building that is also a publicly or privately-operated facility that provides institutional care or settings located on the grounds of, or are immediately adjacent to a public institution.
Type of Setting/Residents	See above
Reason for Presumption	See above

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

Heightened Scrutiny Process	Continued surveys and site visits are planned throughout the 2018–2022 period to ensure compliance.
------------------------------------	---

NON-COMPLIANCE COMMUNICATION

% Cannot/Will Not Comply (No. of Residents Affected)	It does not appear that the state has identified any services that cannot comply. Those not currently in compliance have until March 17, 2022, to come into compliance.
Type of Setting/Residents	Not applicable
Reason for Determination	Not applicable
Communication Strategy	<p>DSS will identify clients who will be impacted and need to have transition alternatives explained to them. The state will communicate directly with the participants via letter and then the care manager will follow up with an in person visit to discuss options available to the participant. If the person wishes to move to a setting that is compliant, the care manager will be responsible to assist with the transition.</p> <p>DDS will identify waiver participants who will be impacted and need to have transition alternatives explained to them. The state will communicate directly with the participants via letter beginning 12/31/0 1 and ending 9/31/21 consistent with the milestone chart and then the care manager will follow up within 30 days of the mailing of the letter with an in person visit to discuss options available to the participant. If the person wishes to move to a setting that is compliant, the care manager will be responsible to assist with the transition.</p>
Assistance to Residents?	The state will ensure that critical services and supports are in place in advance of any transition by identifying such needs through the person-centered planning process with the care manager responsible for having the services in place.

ONGOING MONITORING

Monitoring Procedures	The state employs a web-based quality services (QRS) tool for ongoing monitoring.
Quality Assurance Measures	On-site QSR reviews are conducted by Quality and Systems Improvement (QSI) staff and Case Management staff at all settings where LTSS Waiver services are provided. QSI staff are professional staff who have primary responsibility for the required quality assurance and improvement activities of facilities, programs and agencies for compliance with state and federal laws, regulations, policies, standards for licensure and participation in Medicaid Waiver programs for persons with developmental disabilities.