

TRANSITION PLAN

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

FOR THE STATE OF SOUTH CAROLINA

The CMS-approved South Carolina transition plan can be found at:

<https://www.medicaid.gov/medicaid/home-community-based-services/downloads/sc-appvd-plan.pdf>

SITE-SPECIFIC ASSESSMENTS

The Centers for Medicare & Medicaid Services (CMS) required states to conduct validated site-specific assessments of all provider-owned or controlled settings.

<p>Types of Settings/ Residents and Funding Authorities</p>	<p>South Carolina Department of Health and Human Services (SCDHHS) provides HCBS services through seven 1915(c) waivers:</p> <p>Long Term Living operates:</p> <ul style="list-style-type: none"> • Community Choices waiver • HIV/AIDS waiver • Mechanical Ventilator Dependent waiver <p>Community Options operates:</p> <ul style="list-style-type: none"> • Intellectually Disabled and Related Disabilities (ID/RD) waiver • Community Supports (CS) Waiver • Head and Spinal Cord Injury Waiver • Medically Complex Children (MCC) waiver <p>Community Options operates the MCC waiver alone, and contracts with the South Carolina Department of Disability and Special Needs (SCDDSN) to operate the other three.</p> <p>Types of settings:</p> <ul style="list-style-type: none"> • Day services facilities: <ul style="list-style-type: none"> ○ Adult Activity Center (AAC) ○ Work Activity Center (WAC) ○ Unclassified program • Adult Day Health Cares (ADHC) • Pediatric Medical Day Care • Residential Homes <ul style="list-style-type: none"> ○ Supervised Living Program I & II (SLP), ○ Community Training Home I & II (CTH), ○ Community Residential Care Facility (CRCF), ○ Community Inclusive Residential Supports (CIRS)], • Unclassified non-residential
<p>Compliant/Non-Compliant</p>	<p>Total number of settings:</p> <ul style="list-style-type: none"> • Approximately 1800 residential home settings (1,034 received site assessment visits)

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	<ul style="list-style-type: none"> • 88 day SCDDSN day services facilities • 81 Adult Day Health Care • 1 Pediatric Medical Day Care site <p>Compliance counts as of 2020:</p> <p>Total number of settings compliant with HCBS Settings Rule: 1 ADHC</p> <p>Total number of settings that do not comply with federal requirements and will require modifications: 77 ADHC, 43 AAC, 20 WAC, 11 Unclassified non-residential, 6 AAC/WAC, 3 AAC/WAC/Unclassified, 239 SLP I, 31 SLP II, 138 CTH I, 677 CTH II, 6 CLOUD/CIRS, 31 CRCF</p> <p>Total number of settings that cannot meet requirements and will require removal from the program/relocation of individuals: 1 ADHC</p> <p>Total number of settings subject to state review for possible Heightened Scrutiny Review by CMS: 2 ADHC, 2 AAC, 2 WAC, 17 SLP I, 27 SLP II, 36 CTH II, 15 CLOUD/CIRS, 18 CRCF</p>
<p>Reasons for Non-Compliance</p>	<p>For residential settings, the State found that most provider settings that were not yet compliant but can comply with remediation were non-compliant in the following areas:</p> <ul style="list-style-type: none"> • Visitation • Lockable doors and privacy • Staff accessing residents’ rooms • Proper storage of individual health information • Requiring residents to participate in activities and/or adhering to prescribed schedules
<p>Assessment process</p>	<p>To assess compliance, the State divided the assessment process into two separate assessment phases, a provider self-assessment phase and an independent site visit phase. Additionally, a survey for participants and a survey for family members was used to elicit feedback about their experiences with the HCB setting. Site visits were conducted to gather more information about the settings.</p> <p>Two levels of review were done on the site visit assessments. First, SCDHHS staff completed a global review of all the site visit findings by setting type. Second, individual settings’ assessments were reviewed by SCDDSN staff, with SCDHHS staff conducting an informal review on a sample of the individual assessments. Providers will submit compliance action plans (CAP) and indicate how they will bring the setting(s) into compliance. The HCB Settings Quality Review Team will be involved in the monitoring and quality improvement process to ensure compliance. SCDHHS and SCDDSN anticipate that residential settings identified as not being able to become HCBS compliant will be</p>

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determined by December 31, 2020. All participants will be successfully transitioned by December 31, 2021.

SETTINGS PRESUMED INSTITUTIONAL

CMS presumes some settings have qualities that are institutional or isolating in nature. These settings must go through a heightened scrutiny review by CMS.

CMS presumes the following types of settings have institutional or isolating qualities:

- *Category 1: Located in a hospital, nursing facility, or other institutional setting.*
- *Category 2: Located adjacent to a public hospital, nursing facility, or other institutional setting.*
- *Category 3: Have the effect of isolating people from the broader community.*

<p>% Presumed Institutional (No. of Residents Affected)</p>	<p>Total 120 settings</p> <p>ADHC Settings:</p> <ul style="list-style-type: none"> • Category 1: (1) • Category 2: (0); • Category 3: (2) <p>SCDDSN Settings</p> <ul style="list-style-type: none"> • Category 1: 0 • Category 2: Day Services/AAC (2); Day Services/WAC (1); Residential/SLP II (2); Residential/CTH II (5) • Category 3: Day Services/WAC (1); Residential/SLP I (17); Residential/SLP II (25); Residential/CTH II (31); Residential/CIRS (15); Residential/CRCF (18)
<p>Type of Setting/Residents</p>	<p>Adult Activity Center (AAC), Work Activity Center (WAC), Adult Day Health Cares (ADHC), Supervised Living Program I & II (SLP), Community Training Home I & II (CTH), Community Residential Care Facility (CRCF), Community Inclusive Residential Supports (CIRS)</p>
<p>Reason for Presumption</p>	<p>Data gathered from site visits helped to confirm if any of the HCB settings fell into the three categories of settings that are presumed institutional:</p> <ul style="list-style-type: none"> • Category 1: Any setting that is located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment. • Category 2: Any setting in a building on the grounds of, or immediately adjacent to, a public institution, with public institution defined as an inpatient facility that is financed and operated by a county, state, municipality, or other unit of government. • Category 3: Any other setting that has the effect of isolating individuals receiving Medicaid HCBS from the broader community of individuals not receiving Medicaid HCBS.

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<p>Heightened Scrutiny Process</p>	<p>SCDHHS undertook the following actions to identify settings that may need to go through the HCB Settings Quality Review process:</p> <ul style="list-style-type: none"> • Initial C5 Heightened Scrutiny Assessment* • C4 Individual Facilities/Settings Self-Assessment* • Geocode Data Generation • Consultation with Technical Assistance Collaborative (TAC), Inc. • Public Input • Individual settings independent site visits <p>*C4 and C5 refer to 42 CFR 441.301(c)(4) and (c)(5)</p>
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NON-COMPLIANCE COMMUNICATION

States must describe their process for notifying residents when a setting is unwilling or unable to comply with the rule, and supporting residents to select and transition to a new setting.

<p>% Cannot/Will Not Comply (No. of Residents Affected)</p>	<p>Not known</p>
<p>Type of Setting/Participants</p>	<p>One ADHC setting: 9 participants</p>
<p>Reason for Determination</p>	<p>One ADHC was located in a building that is also a publicly or privately-operated facility that provides inpatient institutional treatment. The setting announced its closure on Oct. 18, 2017, and all participants were notified and transitioned successfully to a new setting or services in less than 30 days.</p>
<p>Communication Strategy</p>	<p>The State and case managers will identify participants in non-compliant settings and alert them of the setting’s noncompliance. From there, participants will have 30 days to work with a case manager in a person-centered process to choose to stay with the existing non-compliant provider or transition to a new compliant provider.</p>

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<p>Assistance to Residents?</p>	<p>Relocation for those in non-compliant Adult Day Health Care settings: Participants’ case managers would be informed of a settings’ non-compliant status. Case managers would contact participants and notify them of the settings’ compliance change and provide them with a list of other compliant providers. Once a decision is made, the case manager can make a referral, process an authorization for the new provider, and see through the transition. If there is no other viable provider, the case manager may work to authorize other services to substitute for the service change. Then, the case manager would monitor to ensure the new service package is meeting the participant’s needs.</p> <p>Relocation for those in non-compliant SCDDSN Day services settings: The participant will be informed of the status change. Should a participant choose to continue to receive services in a compliant setting: participants would be provided with other compliant settings. When chosen, the case manager can make a referral and process an authorization for the participant for the new setting. The appropriate SCDDSN regional representative will facilitate the relocation of participants with the case managers. Should a participant choose to stay in the non-compliant setting: The case manager will explain alternative service options available to the participant in that setting and explain the need for the funding source of the alternative service options. A case manager will submit the authorization for the new service should one be chosen and monitor the participant.</p> <p>Relocation of waiver participants in non-compliant Residential settings: If a CRCF is not a provider of residential habilitation and is identified as a non-compliant setting, SCDHHS would identify the waiver participants who are living in the non-compliant setting. To relocate those residents, the “Relocation Guidelines: Community Residential Care Facility Residents” will be used for proper protocol and procedure. For those residential settings contracted with SCDDSN and in non-compliant settings, participants will be identified. The State will work with the participant choosing the new residential setting through an informed choice process. Should a participant choose to stay in the non-compliant residential setting: the case manager may explain alternative options.</p>
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ONGOING MONITORING

States must describe their planned process for ensuring ongoing compliance with the rule.

<p>Monitoring Procedures</p>	<p>Strategies to ensure ongoing compliance will include:</p> <ul style="list-style-type: none"> • The contracted Quality Improvement Organization (QIO) will monitor progress through a regularly scheduled contract compliance review process. • QIO will conduct Day Services observations for 100% non-residential settings each year.
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	<ul style="list-style-type: none"> • QIO will conduct Residential observations for 25% of each provider’s residential settings every year. • SCDDSN will conduct yearly licensing and certification reviews
<p>Quality Assurance Measures</p>	<p>For Adult Day Health Care settings, there is a LTL Quality Assurance (QA) Plan. The Quality Assurance Task Force meets bi-monthly. Data on settings will be discussed for discovery of noncompliance and strategies for remediation. All reports, corrective action plans, appeals and dispositions are brought to the Task Force.</p> <p>The SCDHHS QA staff review all critical incident reports and results of QIO provider reviews and receive licensing/certification reviews upon completion and any received participant complaints.</p>