

Provider Transition Plan (PTP) System

Provider Name: Template Provider

Setting Address: 123 Main Street

PTP #NR-000537

Provider Information

** Mandatory (required) fields below are marked with an asterisk.*

Legacy Provider ID *

New Provider ID *

Provider Name *

Provider or Setting Alternate Name/DBA (if any)

Setting Type *

Not all setting types can be combined in the same PTP. You may need to complete more than one PTP for a single site.

- Adult Day Services (Not IDD Specific) Basic
- Adult Day Services (Not IDD Specific) Brain Injury Waiver
- Adult Day Services (Not IDD Specific) Specialized
- Day Habilitation for Individuals with IDD Prevocational Services
- Day Habilitation for Individuals with IDD Specialized Habilitation
- Day Habilitation for Individuals with IDD Supported Community Connections (SCC)
- Day Treatment under Brain Injury Waiver
- Supported Employment Group Supported Employment

Waivers Served *

- Children's Extensive Support (CES)

- Community Mental Health Supports (CMHS) for Persons with Major Mental Illness
- Elderly, Blind, and Disabled (EBD)
- Persons with Brain Injury (BI)
- Persons with Developmental Disabilities (DD)
- Persons with Spinal Cord Injury (SCI)
- Supported Living Services (SLS)

Please describe this Supported Employment Group in detail, including how many people are in the group, whether any of them are non-disabled, what the group does, where it works, and at what times. *

This text box and the instruction above it appear only if the PTP is for Group Supported Employment.

Number of Individuals Served

123 6

Number of Waiver Participants Served

123 6

Address of Setting *

123 Main Street

Apartment/Suite

Denver

CO

80203

Phone Number of Person Completing This Form *

(555) 555-5555

Email address of organization *

template@contact.com

Email address of person completing this form *

template2@contact.com

Contact Person *

Firstname Lastname

Documents

Based on your setting type, you are required to attach the document types listed below to this PTP.

- If you see documents in the Provider Documents section, including files you uploaded when completing a different PTP, you only need to replace them if they have changed.
- To upload pictures, receipts, and other file types not listed in the Provider Documents or PTP Specific Documents sections, please use the Additional Documents and Evidence of Remedies section.
- Once a document is uploaded, it can be replaced but not deleted.
- Do not upload a file larger than 10.0 Megabytes.

The list of required documents is dynamic and varies based on setting type.

Provider Documents

| Document Type | File Name | Date Uploaded |
|------------------------------|-----------------|-----------------|
| Rights of Persons | <i>required</i> | <i>required</i> |
| Grievance/Complaint Policy | <i>required</i> | <i>required</i> |
| Medication Policy | <i>required</i> | <i>required</i> |
| Mistreatment Policy | <i>required</i> | <i>required</i> |
| Physical Intervention Policy | <i>required</i> | <i>required</i> |
| Incident Reporting Policy | <i>required</i> | <i>required</i> |
| Dispute Resolution Policy | <i>required</i> | <i>required</i> |

PTP Specific Documents

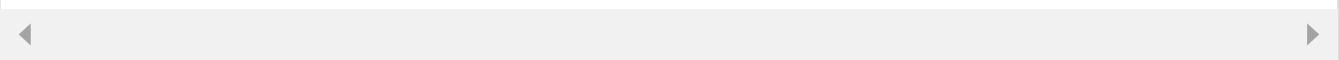
| Document Type | File Name | Date Uploaded |
|---|-----------------|-----------------|
| Recent Month Calendar of Community Activities | <i>required</i> | <i>required</i> |

The following instruction appears on the form, though not on PDFs generated from the one-click Print function: "For Group Supported Employment, in place of an activity calendar, please upload a work schedule showing (a) the times when participants in the group have the opportunity to interact with customers, vendors, the general public, and/or colleagues without disabilities, and (b) how many participants are able to so interact when the opportunity is presented."

Additional Documents

| Document Type | File Name | Date Uploaded |
|-----------------|-----------------|-----------------|
| <i>optional</i> | <i>optional</i> | <i>optional</i> |

Historical Documents

| Document Type | File Name | Date Uploaded |
|--|-----------|---------------|
|  | | |

Rights & Autonomy

Rights and Autonomy compliance issues RA-1 through RA-25 are examples of ways that a setting (site) might come into conflict with the HCBS Settings Final Rule. **Please review RA-1 through RA-25 and self-assess whether they are True or False for your site.**

- A true statement means that your setting/site has a potential compliance issue. If selected, you will be prompted to provide at least one remedial action plan for this potential compliance issue.
- If you select "Other remedial action plan:" you must enter a description.
- Use the Compliance Issue/Remedial Action Plan section at the bottom of the page to add comments or additional information.

HCBS Settings Final Rule Details

These two elements of the HCBS Settings Final Rule relate to Rights and Autonomy:

1. The setting ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.
2. The setting optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact.

The following criteria are relevant to whether a nonresidential setting complies with the general requirements above. A provider-owned or -controlled nonresidential setting (e.g., an adult day center) must comply with these criteria. Other nonresidential settings (e.g., a typical workplace where some individuals receive supported employment services while working with non-disabled, non-staff individuals) must comply with these criteria for individuals receiving HCBS to the same extent as they do for other individuals/employees.

1. Individuals have the freedom and support to control their own schedules and activities, and have access to food at any time.
2. Individuals are able to have visitors of their choosing at any time.
3. The setting is physically accessible to the individual.

Rights modifications must be supported by a specific assessed need and justified in the person-centered service plan. The following requirements must be documented in the person-centered service plan:

- a. Identify a specific and individualized assessed need.

- b. Document the positive interventions and supports used prior to any modifications to the person-centered service plan.
- c. Document less intrusive methods of meeting the need that have been tried but did not work.
- d. Include a clear description of the condition that is directly proportionate to the specific assessed need.
- e. Include regular collection and review of data to measure the ongoing effectiveness of the modification.
- f. Include established time limits for periodic reviews to determine if the modification is still necessary or can be terminated.
- g. Include the informed consent of the individual.
- h. Include an assurance that interventions and supports will cause no harm to the individual.

*** Mandatory (required) fields below are marked with an asterisk.**

RA-1.

Setting's/facility's rules, policies, procedures, or practices restrict individuals' rights under federal settings rule on a broad (not individualized) basis. *

TRUE

Select at

The provider may select True or False for each compliance issue. In addition, state staff may select Resolved for each compliance issue. If and when the user marks a compliance issue as True, the system displays relevant remedial action plans for that compliance issue, and the user must select at least one.

- RA-1A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on rights and autonomy.
- RA-1B: Provide updated documents to individuals, along with a plain-language (including pictorial, if warranted) explanation of the updates.
- RA-1C: Provider/staff participation in specific education and outreach on rights and autonomy.
- RA-1D: Review and modification of current staff trainings to ensure rights and autonomy.
- RA-1E: Development of tools/messaging materials to educate individuals and families on rights and autonomy.
- RA-1F: Training for individuals on exercising their rights safely.
- Other remedial action plan.

Other *



If and when the user selects the checkbox for "Other remedial action plan," this text box becomes available.

RA-2.

Individuals do not have the ability to participate in religious or spiritual activities, ceremonies, or communities. *

TRUE

Select at least one remedial action plan:

- RA-2A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on rights and autonomy.
 - RA-2B: Review and modification of current staff trainings to ensure rights and autonomy.
 - RA-2C: Training for individuals on ways to leave the setting and interact with others (e.g., how to access transportation options independently, including through the use of assistive technology and other measures).
 - RA-2D: Development of tools/messaging materials to educate individuals and families on rights and autonomy.
 - Other remedial action plan.
-

RA-3.

The setting employs chemical, mechanical, or physical restraints. *

Mark this item False (no compliance issue) if the setting uses restraints, but does so only in a manner consistent with the applicable waiver(s), and on an individualized basis that is supported by a specific assessed need, informed consent, and properly documented in the person-centered service plan. See above for documentation requirements.

TRUE

Select at least one remedial action plan:

- RA-3A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on rights and autonomy.
 - RA-3B: Provider/staff participation in specific education and outreach on rights and autonomy.
 - RA-3C: Review and modification of current staff trainings to ensure rights and autonomy.
 - Other remedial action plan.
-

RA-4.

The setting regiments daily activities. *

TRUE

Select at least one remedial action plan:

- RA-4A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on rights and autonomy.
 - RA-4B: Reduce individual-to-staff ratios and/or adjust staff responsibilities in order to increase individuals' opportunity to make independent choices regarding their daily activities. (If this change will entail hiring additional staff, please describe details using the Add Comments button below.)
 - RA-4C: Increase support for individuals to leave the setting and interact with others (e.g., helping individuals access transportation options independently, including through the use of assistive technology and other measures; reimbursing staff for mileage on their own cars). (If this change will entail purchasing additional vehicles, please describe details using the Add Comments button below.)
 - RA-4D: Review and modification of current staff trainings to ensure rights and autonomy.
 - RA-4E: Training for individuals on ways to leave the setting and interact with others (e.g., how to access transportation options independently, including through the use of assistive technology and other measures).
 - RA-4F: Development of tools/messaging materials to educate individuals and families on rights and autonomy.
 - Other remedial action plan.
-

RA-5.

Individuals do not get to choose or set their own schedule. *

TRUE

Select at least one remedial action plan:

- RA-5A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on rights and autonomy.
- RA-5B: Reduce individual-to-staff ratios and/or adjust staff responsibilities in order to increase individuals' opportunity to make independent choices regarding their daily activities. (If this change will entail hiring additional staff, please describe details using the Add Comments button below.)
- RA-5C: Increase support for individuals to leave the setting and interact with others (e.g., helping individuals access transportation options independently, including through the use of assistive technology and other measures; reimbursing staff for mileage on their own cars). (If this change will entail purchasing additional vehicles, please describe details using the Add Comments button below.)
- RA-5D: Review and modification of current staff trainings to ensure rights and autonomy.
- RA-5E: Training for individuals on ways to leave the setting and interact with others (e.g., how to

access transportation options independently, including through the use of assistive technology and other measures).

RA-5F: Development of tools/messaging materials to educate individuals and families on rights and autonomy.

Other remedial action plan.

RA-6.

The setting does not offer individualized supports that enable individuals to choose activities of their own interests (with a group or individually). *

TRUE

Select at least one remedial action plan:

RA-6A: Reduce individual-to-staff ratios and/or adjust staff responsibilities in order to increase individuals' opportunity to make independent choices regarding their daily activities. (If this change will entail hiring additional staff, please describe details using the Add Comments button below.)

RA-6B: Increase support for individuals to leave the setting and interact with others (e.g., helping individuals access transportation options independently, including through the use of assistive technology and other measures; reimbursing staff for mileage on their own cars). (If this change will entail purchasing additional vehicles, please describe details using the Add Comments button below.)

RA-6C: Review and modification of current staff trainings to ensure rights and autonomy.

RA-6D: Training for individuals on ways to leave the setting and interact with others (e.g., how to access transportation options independently, including through the use of assistive technology and other measures).

RA-6E: Development of tools/messaging materials to educate individuals and families on rights and autonomy.

Other remedial action plan.

RA-7.

Individuals have only scheduled times that they are allowed to be away from the facility. *

TRUE

Select at least one remedial action plan:

RA-7A: Modifications to rules, policies, procedures, or practices to align with federal and state

requirements on rights and autonomy.

- RA-7B: Reduce individual-to-staff ratios and/or adjust staff responsibilities in order to increase individuals' opportunity to make independent choices regarding their daily activities. (If this change will entail hiring additional staff, please describe details using the Add Comments button below.)
 - RA-7C: Increase support for individuals to leave the setting and interact with others (e.g., helping individuals access transportation options independently, including through the use of assistive technology and other measures; reimbursing staff for mileage on their own cars). (If this change will entail hiring additional staff, please describe details using the Add Comments button below.)
 - RA-7D: Review and modification of current staff trainings to ensure rights and autonomy.
 - RA-7E: Training for individuals on being out in the community safely.
 - RA-7F: Training for individuals on ways to leave the setting and interact with others (e.g., how to access transportation options independently, including through the use of assistive technology and other measures).
 - RA-7G: Development of tools/messaging materials to educate individuals and families on rights and autonomy.
 - Other remedial action plan.
-

RA-8.

Individuals cannot lock bathroom doors. *

Mark this item False (no compliance issue) if the setting restricts the right in question, but does so only on an individualized basis that is supported by a specific assessed need and properly documented in the person-centered service plan. See above for documentation requirements.

TRUE

Select at least one remedial action plan:

- RA-8A: Install locks so that individuals can lock bathroom doors.
 - RA-8B: Training for individuals on being alone safely.
 - Other remedial action plan.
-

RA-9.

Individuals do not have private areas to change clothes and/or to receive assistance changing clothes. *

TRUE

Select at least one remedial action plan:

- RA-9A: Adjust use of space or make other changes to ensure that individuals have private areas to

change clothes and/or to receive assistance changing clothes.

RA-9B: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on rights and autonomy.

Other remedial action plan.

RA-10.

Individuals do not have secure areas to store their belongings. *

TRUE

Select at least one remedial action plan:

RA-10A: Give individuals secure areas to store their belongings.

RA-10B: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on rights and autonomy.

RA-10C: Training for individuals on safely having personal items.

Other remedial action plan.

RA-11.

The setting uses cameras in typically private areas used by individuals (e.g., bathrooms, changing areas).

*

Mark this item False (no compliance issue) if the setting uses cameras in typically private areas, but does so only on an individualized basis that is supported by a specific assessed need and properly documented in the person-centered service plan (a) of the individual(s) who need to be watched and (b) of other individuals, who should be informed of the camera and any methods in place to mitigate the impact on their privacy. See above for documentation requirements.

Mark this item False (no compliance issue) if cameras are used only in typically non-private areas in a manner similar to how non-HCBS settings would use them, including posting signage to alert people that they may be on camera.

TRUE

Select at least one remedial action plan:

RA-11A: Remove cameras or modify policies/procedures for their use to align with federal and state requirements on rights and autonomy.

RA-11B: Review and modification of current staff trainings to ensure rights and autonomy.

Other remedial action plan.

RA-12.

The setting uses audio monitors or devices that chime when a person stands near or passes through a doorway or window. *

Mark this item False (no compliance issue) if the setting uses audio monitors/devices that chime, but does so only on an individualized basis that is supported by a specific assessed need and properly documented in the person-centered service plan (a) of the individual(s) who need to be monitored and (b) of other individuals, who should be informed of the device and any methods in place to mitigate the impact on their privacy. See above for documentation requirements.

TRUE

Select at least one remedial action plan:

- RA-12A: Remove audio monitors/devices that chime or modify policies/procedures for their use to align with federal and state requirements on rights and autonomy.
- RA-12B: Review and modification of current staff trainings to ensure rights and autonomy.
- Other remedial action plan.

RA-13.

Individuals do not have access to food when they wish. This includes their own food and, if the setting is required to provide food, provider-supplied food. *

Mark this item False (no compliance issue) if the setting restricts the right in question, but does so only on an individualized basis that is supported by a specific assessed need and properly documented in the person-centered service plan. See above for documentation requirements.

TRUE

Select at least one remedial action plan:

- RA-13A: Development of a policy/procedure to allow individuals access to their own food when they wish.
- RA-13B: Review and modification of current staff trainings to ensure rights and autonomy.
- RA-13C: Training for individuals on social norms and/or safety issues regarding food.
- Other remedial action plan.

RA-14.

Individuals do not have access to a dining area for meals/snacks with comfortable seating where they can choose their own seat, choose their company (or lack thereof), and choose to converse (or not). *

TRUE

Select at least one remedial action plan:

- RA-14A: Modifications to rules, policies, procedures, or practices to allow individuals access to a dining area where they can choose their own seat, company (or the lack thereof), and choose to converse (or not).
- RA-14B: Review and modification of current staff trainings to ensure rights and autonomy.
- RA-14C: Training for individuals on social norms and/or safety issues regarding dining.
- Other remedial action plan.
-

RA-15.

Individuals do not have input and choice with respect to menu planning (if the setting is required to provide food). *

TRUE

Select at least one remedial action plan:

- RA-15A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on rights and autonomy.
- RA-15B: Review and modification of current staff trainings to ensure rights and autonomy.
- RA-15C: Training for individuals on social norms and/or safety issues regarding food.
- Other remedial action plan.
-

RA-16.

Individuals do not have the ability to have visitors at any time and to socialize with whomever they choose (including romantic relationships). *

Mark this item False (no compliance issue) if the setting restricts the right in question, but does so only on an individualized basis that is supported by a specific assessed need and properly documented in the person-centered service plan. See above for documentation requirements.

TRUE

Select at least one remedial action plan:

- RA-16A: Development of a policy/procedure to allow individuals to have visitors, make phone calls, and text/email at any time.
- RA-16B: Review and modification of current staff trainings to ensure rights and autonomy.
- RA-16C: Training for individuals on personal safety.
- RA-16D: Development of tools/messaging materials to educate individuals and families on rights and

autonomy.

Other remedial action plan.

RA-17.

Individuals do not have the ability to use their own communication devices (e.g., cell phones) to make/receive private phone calls and to send/receive private emails and text messages at times of their choosing. *

Mark this item False (no compliance issue) if the setting restricts the right in question, but does so only on an individualized basis that is supported by a specific assessed need and properly documented in the person-centered service plan. See above for documentation requirements.

TRUE

Select at least one remedial action plan:

- RA-17A: Development of a policy/procedure to allow individuals to make phone calls and text/email at any time.
 - RA-17B: Review and modification of current staff training to ensure rights and autonomy.
 - RA-17C: Training for individuals on personal safety and appropriate use of technology.
 - RA-17D: Development of tools/messaging materials to educate individuals and families on rights and autonomy.
 - Other remedial action plan.
-

RA-18.

Individuals do not have the ability to self-administer medication. *

Mark this item False (no compliance issue) if the setting restricts the right in question, but does so only on an individualized basis that is supported by a specific assessed need and properly documented in the person-centered service plan. See above for documentation requirements.

TRUE

Select at least one remedial action plan:

- RA-18A: Modifications to rules, policies, procedures, or practices to allow individuals to self-administer medication.
- RA-18B: Review and modification of current staff trainings to ensure rights and autonomy.
- RA-18C: Training for individuals on medication self-administration.
- RA-18D: Development of tools/messaging materials to educate individuals and families on rights and

autonomy.

Other remedial action plan.

RA-19.

Individuals do not have the ability to control their money or are required to receive unwanted/non-optional assistance in managing their finances. *

Mark this item False (no compliance issue) if the setting restricts the right in question and/or acts as the individual's SSI rep payee, but does so only on an individualized basis that is supported by a specific assessed need and properly documented in the person-centered service plan. See above for documentation requirements.

TRUE

Select at least one remedial action plan:

- RA-19A: Modifications to rules, policies, procedures, or practices to allow individuals to control their money, to the degree they are able to do so.
- RA-19B: Training for individuals on managing budgets.
- RA-19C: Development of tools/messaging materials to educate individuals and families on rights and autonomy.
- Other remedial action plan.
-

RA-20.

Individuals' names or other confidential items of information are posted in common areas of the setting. *

TRUE

Select at least one remedial action plan:

- RA-20A: Confidential information, including names of individuals, will be removed from common areas.
- Other remedial action plan.
-

RA-21.

Staff have not been trained in person-centered principles. *

TRUE

Select at least one remedial action plan:

- RA-21A: Provider/staff training in person-centered principles.
-

Other remedial action plan.

RA-22.

Setting does not provide individuals with a plain-language (including pictorial, if warranted) explanation of rights. *

TRUE

Select at least one remedial action plan:

RA-22A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on rights and autonomy.

RA-22B: Provide updated documents to individuals, along with a plain-language (including pictorial, if warranted) explanation of the updates.

Other remedial action plan.

RA-23.

Setting does not provide individuals with a plain-language (including pictorial, if warranted) explanation of how to submit a complaint or grievance, including anonymously, and who can assist them in doing so. *

TRUE

Select at least one remedial action plan:

RA-23A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on rights and autonomy.

RA-23B: Provide updated documents to individuals, along with a plain-language (including pictorial, if warranted) explanation of the updates.

Other remedial action plan.

RA-24.

Setting does not provide individuals with a plain-language (including pictorial, if warranted) explanation of how to seek resolution of disputes (if such a process exists apart from the process for complaints/grievances) and who can assist them in doing so. *

TRUE

Select at least one remedial action plan:

- RA-24A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on rights and autonomy.
- RA-24B: Provide updated documents to individuals, along with a plain-language (including pictorial, if warranted) explanation of the updates.
- Other remedial action plan.
-

RA-25.

Setting is otherwise noncompliant with the federal requirements above relating to rights and autonomy (provide detail below). *


TRUE**Select at least one remedial action plan:**

- RA-25A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on rights and autonomy.
- RA-25B: Provide updated documents to individuals, along with a plain-language (including pictorial, if warranted) explanation of the updates.
- RA-25C: Review and modification of current staff trainings to ensure rights and autonomy.
- Other remedial action plan.
-

Does your remedial action plan entail cost? *

 Yes No

Rights & Autonomy Incurred Cost Description: *

 If and when the user selects Yes for cost, the system displays this text box and the two cost fields below.

Total expected one-time cost for the remedial action plan(s) described on this screen: *

Only report cost once if it relates to multiple aspects of the federal rule, not on multiple screens.

\$

Total expected recurring, annual cost for the remedial action plan(s) described on this screen: *

Only report cost once if it relates to multiple aspects of the federal rule, not on multiple screens.

\$

Compliance Issue/Remedial Action Plan Comments

This section is optional. Use the “Add Comments” button to add any additional details relating to your compliance issues and/or remedial action plans. If you did not detail it above, please include your plan to train staff/contractors on any changes that involve them.

| Date | Author | Comment |
|---------------------|--------|----------------|
| 07/09/2020 01:42 PM | | Sample comment |
| 07/09/2020 01:42 PM | | Sample comment |

Informed Choice

Informed Choice compliance issues IC-1 through IC-8 are examples of ways that a setting (site) might come into conflict with the HCBS Settings Final Rule. **Please review IC-1 through IC-8 and self-assess whether they are True or False for your site.**

- A true statement means that your setting/site has a potential compliance issue. If selected, you will be prompted to provide at least one remedial action plan for this potential compliance issue.
- If you select "Other remedial action plan:" you must enter a description.
- Use the Compliance Issue/Remedial Action Plan section at the bottom of the page to add comments or additional information.

HCBS Settings Final Rule Details

These two elements of the HCBS Settings Final Rule relate to Informed Choice:

1. The setting is selected by the individual from among setting options including non-disability specific settings. The setting options are identified and documented in the person-centered service plan and are based on the individual's needs and preferences.
2. The setting facilitates individual choice regarding services and supports, and who provides them.

*** Mandatory (required) fields below are marked with an asterisk.**

IC-1.

Individuals are told that they must receive services from the setting, even if they would prefer something else. *

TRUE

Select at

The provider may select True or False for each compliance issue. In addition, state staff may select Resolved for each compliance issue. If and when the user marks a compliance issue as True, the system displays relevant remedial action plans for that compliance issue, and the user must select at least one.

- IC-1A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on informed choice and age-appropriate activities, including in the community.
- IC-1B: Development of or modifications to forms and procedures to ensure informed choice and age-appropriate activities, including in the community.
- IC-1C: Provider/staff participation in specific education and outreach on informed choice and age-appropriate activities, including in the community.
- IC-1D: Training for individuals on informed decision-making skills and resources.
- IC-1E: Provide updated documents to individuals, along with a plain-language (including pictorial, if warranted) explanation of the updates.
- Other remedial action plan.

Other *



If and when the user selects the checkbox for "Other remedial action plan," this text box becomes available.

IC-2.

Individuals are not informed of and given a chance to choose among setting options, including non-disability-specific settings. *

TRUE

Select at least one remedial action plan:

- IC-2A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on informed choice and age-appropriate activities, including in the community.
- IC-2B: Development of or modifications to forms and procedures to ensure informed choice and age-appropriate activities, including in the community.
- IC-2C: Development of tools/messaging materials to educate individuals and families on informed choice.

- IC-2D: Provide updated documents to individuals, along with a plain-language (including pictorial, if warranted) explanation of the updates.
- Other remedial action plan.
-

IC-3.

Setting options are not identified and documented in the person-centered service plan. *

TRUE

Select at least one remedial action plan:

- IC-3A: Provider/staff participation in specific education and outreach on informed choice and age-appropriate activities, including in the community.
- IC-3B: Training for individuals on informed decision-making skills and resources.
- Other remedial action plan.
-

IC-4.

Setting options are not based on the individual's needs and preferences. *

TRUE

Select at least one remedial action plan:

- IC-4A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on informed choice and age-appropriate activities, including in the community.
- IC-4B: Development of or modifications to forms and procedures to ensure informed choice and age-appropriate activities, including in the community.
- IC-4C: Provider/staff participation in specific education and outreach on informed choice and age-appropriate activities, including in the community.
- IC-4D: Training for individuals on informed decision-making skills and resources.
- IC-4E: Provider/staff training in person-centered principles.
- IC-4F: Reduce individual-to-staff ratios and/or adjust staff responsibilities in order to enhance individual choice regarding services and supports, and who provides them, and/or to ensure age-appropriate activities, including in the community. (If this change will entail hiring additional staff, please describe details using the Add Comments button below.)
- Other remedial action plan.
-

IC-5.

Setting does not facilitate individual choice regarding services and supports, and who provides them. *

TRUE

Select at least one remedial action plan:

- IC-5A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on informed choice and age-appropriate activities, including in the community.
 - IC-5B: Development of or modifications to forms and procedures to ensure informed choice and age-appropriate activities, including in the community.
 - IC-5C: Reduce individual-to-staff ratios and/or adjust staff responsibilities in order to enhance individual choice regarding services and supports, and who provides them, and/or to ensure age-appropriate activities, including in the community. (If this change will entail hiring additional staff, please describe details using the Add Comments button below.)
 - IC-5D: Review and modification of current staff trainings to ensure informed choice.
 - IC-5E: Development of tools/messaging materials to educate individuals and families on informed choice.
 - IC-5F: Provide updated documents to individuals, along with a plain-language (including pictorial, if warranted) explanation of the updates.
 - IC-5G: Training for individuals on informed decision-making skills and resources.
 - Other remedial action plan.
-

IC-6.

Setting does not seek input from individuals regarding age-appropriate activities, including in the community. *

TRUE

Select at least one remedial action plan:

- IC-6A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on informed choice and age-appropriate activities, including in the community.
 - IC-6B: Development of or modifications to forms and procedures to ensure informed choice and age-appropriate activities, including in the community.
 - IC-6C: Provider/staff participation in specific education and outreach on informed choice and age-appropriate activities, including in the community.
 - IC-6D: Training for individuals on informed decision-making skills and resources.
-

- IC-6E: Provider/staff training in person-centered principles.
 - IC-6F: Reduce individual-to-staff ratios and/or adjust staff responsibilities in order to enhance individual choice regarding services and supports, and who provides them, and/or to ensure age-appropriate activities, including in the community. (If this change will entail hiring additional staff, please describe details using the Add Comments button below.)
 - Other remedial action plan.
-

IC-7.

Setting does not offer choices of age-appropriate activities, including in the community. *

TRUE

Select at least one remedial action plan:

- IC-7A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on informed choice and age-appropriate activities, including in the community.
 - IC-7B: Development of or modifications to forms and procedures to ensure informed choice and age-appropriate activities, including in the community.
 - IC-7C: Provider/staff participation in specific education and outreach on informed choice and age-appropriate activities, including in the community.
 - IC-7D: Training for individuals on informed decision-making skills and resources.
 - IC-7E: Provider/staff training in person-centered principles.
 - IC-7F: Reduce individual-to-staff ratios and/or adjust staff responsibilities in order to enhance individual choice regarding services and supports, and who provides them, and/or to ensure age-appropriate activities, including in the community. (If this change will entail hiring additional staff, please describe details using the Add Comments button below.)
 - Other remedial action plan.
-

IC-8.

Setting is otherwise noncompliant with the federal requirements above relating to informed choice (provide detail below). *

TRUE

Select at least one remedial action plan:

- IC-8A: Modifications to rules, policies, procedures, or practices to align with federal and state

requirements on informed choice and age-appropriate activities, including in the community.

IC-8B: Development of or modifications to forms and procedures to ensure informed choice and age-appropriate activities, including in the community.

IC-8C: Development of tools/messaging materials to educate individuals and families on informed choice.

IC-8D: Provider/staff participation in specific education and outreach on informed choice and age-appropriate activities, including in the community.

IC-8E: Training for individuals on informed decision-making skills and resources.

IC-8F: Provider/staff training in person-centered principles.

IC-8G: Reduce individual-to-staff ratios and/or adjust staff responsibilities in order to enhance individual choice regarding services and supports, and who provides them, and/or to ensure age-appropriate activities, including in the community. (If this change will entail hiring additional staff, please describe details using the Add Comments button below.)


Other remedial action plan.

Does your remedial action plan entail cost? *

Yes

No

Informed Choice Incurred Cost Description: *

 If and when the user selects Yes for cost, the system displays this text box and the two cost fields below.

Total expected one-time cost for the remedial action plan(s) described on this screen: *

Only report cost once if it relates to multiple aspects of the federal rule, not on multiple screens.

\$

Total expected recurring, annual costs for the remedial action plan(s) described on this screen: *

Only report cost once if it relates to multiple aspects of the federal rule, not on multiple screens.

\$

Compliance Issue/Remedial Action Plan Comments

This section is optional. Use the “Add Comments” button to add any additional details relating to your compliance issues and/or remedial action plans. If you did not detail it above, please include your plan to train staff/contractors on any changes that involve them.

| Date | Author | Comment |
|---------------------|--------|----------------|
| 07/09/2020 01:44 PM | | Sample comment |
| 07/09/2020 01:44 PM | | Sample comment |

Community Integration

Community Integration compliance issues CI-1 through CI-20 are examples of ways that a setting (site) might come into conflict with the HCBS Settings Final Rule. **Please review CI-1 through CI-20 and self-assess whether they are True or False for your site.**

- A true statement means that your setting/site has a potential compliance issue. If selected, you will be prompted to provide at least one remedial action plan for this potential compliance issue.
- If you select "Other remedial action plan:" you must enter a description.
- Use the Compliance Issue/Remedial Action Plan section at the bottom of the page to add comments or additional information.
- You may see fewer than twenty compliance issues on this screen, depending on your setting type.

HCBS Settings Final Rule Details

This element of the HCBS Settings Final Rule relates to Community Integration:

1. The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.

*** Mandatory (required) fields below are marked with an asterisk.**

Compliance issues CI-1 through CI-5 **must be addressed only if** this PTP is for **Group Supported Employment**.

CI-1.

Group Supported Employment services are provided in a facility-based or sheltered work setting (such as a site owned or operated by an agency whose primary focus is service provision to persons with

disabilities), as distinct from a typical business or industry setting in the community. *

TRUE

Select at

The provider may select True or False for each compliance issue, except that some compliance issues are available only for certain setting types. In addition, state staff may select Resolved for each compliance issue. If and when the user marks a compliance issue as True, the system displays relevant remedial action plans for that compliance issue, and the user must select at least one.

- CI-1A: Change worksite to a typical business or industry setting in the community.
- CI-1B: Ensure that participants regularly interact with people without disabilities, such as customers, vendors, the general public, and/or colleagues without disabilities.
- CI-1C: Enhance support for career development leading to competitive integrated employment.
- CI-1D: Rename program and/or rework marketing materials, policies and procedures, and the like to eliminate descriptions of services as an "enclave," "non-integrated," "sheltered," or "segregated."
- CI-1E: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on community integration.
- CI-1F: Provide updated documents to individuals, along with a plain-language (including pictorial, if warranted) explanation of the updates.
- CI-1G: Provider/staff participation in specific education and outreach on community integration.
- CI-1H: Review and modification of current staff trainings on community integration.
- CI-1I: Development of tools/messaging materials to educate individuals and families on community integration, including competitive integrated employment options.
- CI-1J: Development of programs aimed at increasing opportunities for community integration.
- CI-1K: Reduce individual-to-staff ratios and/or adjust staff responsibilities in order to enhance community integration. (If this change will entail hiring additional staff, please describe details using the Add Comments button below.)
- CI-1L: Increase support for individuals to leave the setting and engage with the community (e.g., helping individuals access transportation options independently, including through the use of assistive technology and other measures; increasing frequency of staff accompanying individuals; reimbursing staff for mileage on their own cars). (If this change will entail purchasing additional vehicles or other increased expenditures, please describe details using the Add Comments button below.)
- CI-1M: Ensure that age-appropriate activities are provided within the settings and that information about such activities outside the setting is provided to individuals.
- CI-1N: Training for individuals on community integration.
- CI-1O: Training for individuals on ways to access the greater community (e.g., how to access transportation options independently, including through the use of assistive technology and other measures).
- Other remedial action plan.

Other *

If and when the user selects the checkbox for "Other remedial action plan," this text box becomes available.

CI-2.

Group Supported Employment services do not include and provide the opportunity for integration into the workplace and regular interaction between participants and people without disabilities in those workplaces (other than staff). *

Such interaction may include interaction with customers, vendors, the general public, and/or colleagues without disabilities, beyond incidental contact. While interaction with non-disabled colleagues is valuable (and may be required under other federal programs), the Department is not requiring it if interaction with non-disabled people occurs regularly by other means. However, interaction with non-disabled colleagues may be necessary if the work group does not otherwise have regular opportunities for interacting with non-disabled customers/members of the public (e.g., a mobile work crew that operates at night and only incidentally encounters the building's daytime occupants).

TRUE

Select at least one remedial action plan:

- CI-2A: Change worksite to a typical business or industry setting in the community.
- CI-2B: Ensure that participants regularly interact with people without disabilities, such as customers, vendors, the general public, and/or colleagues without disabilities.
- CI-2C: Enhance support for career development leading to competitive integrated employment.
- CI-2D: Rename program and/or rework marketing materials, policies and procedures, and the like to eliminate descriptions of services as an "enclave," "non-integrated," "sheltered," or "segregated."
- CI-2E: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on community integration.
- CI-2F: Provide updated documents to individuals, along with a plain-language (including pictorial, if warranted) explanation of the updates.
- CI-2G: Provider/staff participation in specific education and outreach on community integration.
- CI-2H: Review and modification of current staff trainings on community integration.
- CI-2I: Development of tools/messaging materials to educate individuals and families on community integration, including competitive integrated employment options.
- CI-2J: Development of programs aimed at increasing opportunities for community integration.
- CI-2K: Reduce individual-to-staff ratios and/or adjust staff responsibilities in order to enhance community integration. (If this change will entail hiring additional staff, please describe details using the Add Comments button below.)
- CI-2L: Increase support for individuals to leave the setting and engage with the community (e.g., helping individuals access transportation options independently, including through the use of assistive

technology and other measures; increasing frequency of staff accompanying individuals; reimbursing staff for mileage on their own cars). (If this change will entail purchasing additional vehicles or other increased expenditures, please describe details using the Add Comments button below.)

- CI-2M: Ensure that age-appropriate activities are provided within the settings and that information about such activities outside the setting is provided to individuals.
- CI-2N: Training for individuals on community integration.
- CI-2O: Training for individuals on ways to access the greater community (e.g., how to access transportation options independently, including through the use of assistive technology and other measures).
- Other remedial action plan.

CI-3.

Group Supported Employment services do not support career development leading to individual integrated community-based employment at or above the minimum wage. *

TRUE

Select at least one remedial action plan:

- CI-3A: Change worksite to a typical business or industry setting in the community.
- CI-3B: Ensure that participants regularly interact with people without disabilities, such as customers, vendors, the general public, and/or colleagues without disabilities.
- CI-3C: Enhance support for career development leading to competitive integrated employment.
- CI-3D: Rename program and/or rework marketing materials, policies and procedures, and the like to eliminate descriptions of services as an "enclave," "non-integrated," "sheltered," or "segregated."
- CI-3E: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on community integration.
- CI-3F: Provide updated documents to individuals, along with a plain-language (including pictorial, if warranted) explanation of the updates.
- CI-3G: Provider/staff participation in specific education and outreach on community integration.
- CI-3H: Review and modification of current staff trainings on community integration.
- CI-3I: Development of tools/messaging materials to educate individuals and families on community integration, including competitive integrated employment options.
- CI-3J: Development of programs aimed at increasing opportunities for community integration.
- CI-3K: Reduce individual-to-staff ratios and/or adjust staff responsibilities in order to enhance community integration. (If this change will entail hiring additional staff, please describe details using

the Add Comments button below.)

CI-3L: Increase support for individuals to leave the setting and engage with the community (e.g., helping individuals access transportation options independently, including through the use of assistive technology and other measures; increasing frequency of staff accompanying individuals; reimbursing staff for mileage on their own cars). (If this change will entail purchasing additional vehicles or other increased expenditures, please describe details using the Add Comments button below.).

CI-3M: Ensure that age-appropriate activities are provided within the settings and that information about such activities outside the setting is provided to individuals.

CI-3N: Training for individuals on community integration.

CI-3O: Training for individuals on ways to access the greater community (e.g., how to access transportation options independently, including through the use of assistive technology and other measures).

Other remedial action plan.

CI-4.

Group Supported Employment settings do not provide individuals with the opportunity to participate in negotiating their work schedule, break/lunch times, and leave and medical benefits with their employer to the same extent as individuals not receiving Medicaid-funded HCBS. *

TRUE

Select at least one remedial action plan:

CI-4A: Change worksite to a typical business or industry setting in the community.

CI-4B: Enhance support for career development leading to competitive integrated employment.

CI-4C: Ensure that individuals have the opportunity to participate in negotiating their work schedule, break/lunch times, and leave and medical benefits with their employer to the same extent as individuals not receiving Medicaid-funded HCBS.

CI-4D: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on community integration.

CI-4E: Provide updated documents to individuals, along with a plain-language (including pictorial, if warranted) explanation of the updates.

CI-4F: Provider/staff participation in specific education and outreach on community integration.

CI-4G: Development of tools/messaging materials to educate individuals and families on community integration, including competitive integrated employment options.

Other remedial action plan.

CI-5.

Group Supported Employment services are described (e.g., in the provider's marketing materials, policies and procedures, etc.) as an “enclave,” “non-integrated,” “sheltered,” or “segregated.” *

TRUE

Select at least one remedial action plan:

- CI-5A: Change worksite to a typical business or industry setting in the community.
- CI-5B: Ensure that participants regularly interact with people without disabilities, such as customers, vendors, the general public, and/or colleagues without disabilities.
- CI-5C: Enhance support for career development leading to competitive integrated employment.
- CI-5D: Ensure that individuals have the opportunity to participate in negotiating their work schedule, break/lunch times, and leave and medical benefits with their employer to the same extent as individuals not receiving Medicaid-funded HCBS.
- CI-5E: Rename program and/or rework marketing materials, policies and procedures, and the like to eliminate descriptions of services as an "enclave," "non-integrated," "sheltered," or "segregated."
- CI-5F: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on community integration.
- CI-5G: Provide updated documents to individuals, along with a plain-language (including pictorial, if warranted) explanation of the updates.
- CI-5H: Review and modification of current staff trainings on community integration.
- CI-5I: Development of tools/messaging materials to educate individuals and families on community integration, including competitive integrated employment options.
- Other remedial action plan.

Compliance issues CI-6 through CI-8 **must be addressed only if** this PTP is for **Prevocational Services**.

CI-6.

Prevocational services do not help the individual develop general, non-job-task-specific strengths and skills leading to integrated community-based employment at or above the minimum wage.

n/a

CI-7.

Prevocational services are provided for more than five years to a single individual.

** Mark this item False (no compliance issue) if prevocational services are provided for more than five years based on an individualized assessment supporting this timeframe.*

n/a

CI-8.

Prevocational services do not promote regular interaction between participants and people without disabilities (other than staff), beyond incidental contact.

Such interaction may include regular interaction with customers, vendors, the general public, and/or colleagues without disabilities.

n/a

CI-9.

A designated individual or group of individuals rarely or never has the opportunity to interact with people in the community who are not disabled and not paid staff, even if others have such opportunities. *

TRUE

Select at least one remedial action plan:

- CI-9A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on community integration.
- CI-9B: Provide updated documents to individuals, along with a plain-language (including pictorial, if warranted) explanation of the updates.
- CI-9C: Provider/staff participation in specific education and outreach on community integration.
- CI-9D: Review and modification of current staff trainings on community integration.
- CI-9E: Development of tools/messaging materials to educate individuals and families on community integration, including competitive integrated employment options.
- CI-9F: Development of programs aimed at increasing opportunities for community integration.
- CI-9G: Reduce individual-to-staff ratios and/or adjust staff responsibilities in order to enhance community integration. (If this change will entail hiring additional staff, please describe details using the Add Comments button below.)
- CI-9H: Increase support for individuals to leave the setting and engage with the community (e.g., helping individuals access transportation options independently, including through the use of assistive technology and other measures; increasing frequency of staff accompanying individuals; reimbursing staff for mileage on their own cars). (If this change will entail purchasing additional vehicles or other increased

expenditures, please describe details using the Add Comments button below.)

- CI-9I: Ensure that age-appropriate activities are provided within the settings and that information about such activities outside the setting is provided to individuals.
- CI-9J: Training for individuals on community integration.
- CI-9K: Training for individuals on ways to access the greater community (e.g., how to access transportation options independently, including through the use of assistive technology and other measures).
- Other remedial action plan.

CI-10.

Individuals' community activities offer only incidental contact with non-disabled, non-staff members of the community due to the type of activities or the number of individuals participating. *

TRUE

Select at least one remedial action plan:

- CI-10A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on community integration.
- CI-10B: Provide updated documents to individuals, along with a plain-language (including pictorial, if warranted) explanation of the updates.
- CI-10C: Provider/staff participation in specific education and outreach on community integration.
- CI-10D: Review and modification of current staff trainings on community integration.
- CI-10E: Development of tools/messaging materials to educate individuals and families on community integration, including competitive integrated employment options.
- CI-10F: Development of programs aimed at increasing opportunities for community integration.
- CI-10G: Reduce individual-to-staff ratios and/or adjust staff responsibilities in order to enhance community integration. (If this change will entail hiring additional staff, please describe details using the Add Comments button below.)
- CI-10H: Increase support for individuals to leave the setting and engage with the community (e.g., helping individuals access transportation options independently, including through the use of assistive technology and other measures; increasing frequency of staff accompanying individuals; reimbursing staff for mileage on their own cars). (If this change will entail purchasing additional vehicles or other increased expenditures, please describe details using the Add Comments button below.)
- CI-10I: Training for individuals on community integration.
- CI-10J: Training for individuals on ways to access the greater community (e.g., how to access

transportation options independently, including through the use of assistive technology and other measures).

Other remedial action plan.

CI-11.

Setting has policies, procedures, or practices preventing individuals from interacting with or receiving services in the community. *

So-called reverse integration (bringing individuals without disabilities into the setting) is important, but is not by itself sufficient to comply with the community integration requirement.

Mark this item True (compliance issue) if, for example, on outings, individuals rarely or never get out of the vehicle.

TRUE

Select at least one remedial action plan:

- CI-11A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on community integration.
 - CI-11B: Provide updated documents to individuals, along with a plain-language (including pictorial, if warranted) explanation of the updates.
 - CI-11C: Provider/staff participation in specific education and outreach on community integration.
 - CI-11D: Review and modification of current staff trainings on community integration.
 - CI-11E: Development of tools/messaging materials to educate individuals and families on community integration, including competitive integrated employment options.
 - CI-11F: Development of programs aimed at increasing opportunities for community integration.
 - CI-11G: Reduce individual-to-staff ratios and/or adjust staff responsibilities in order to enhance community integration. (If this change will entail hiring additional staff, please describe details using the Add Comments button below.)
 - CI-11H: Increase support for individuals to leave the setting and engage with the community (e.g., helping individuals access transportation options independently, including through the use of assistive technology and other measures; increasing frequency of staff accompanying individuals; reimbursing staff for mileage on their own cars). (If this change will entail purchasing additional vehicles or other increased expenditures, please describe details using the Add Comments button below.)
 - CI-11I: Training for individuals on community integration.
 - CI-11J: Training for individuals on ways to access the greater community (e.g., how to access transportation options independently, including through the use of assistive technology and other measures).
 - Other remedial action plan.
-

CI-12.

Setting does not ensure that individuals have the opportunity to be engaged in community activities outside the setting with individuals without disabilities. *

So-called reverse integration (bringing individuals without disabilities into the setting) is important, but is not by itself sufficient to comply with the community integration requirement.

Mark this item True (compliance issue) if a designated individual or group of individuals rarely or never has the opportunity to be engaged in community activities outside the setting, even if others have such opportunities.

TRUE

Select at least one remedial action plan:

- CI-12A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on community integration.
- CI-12B: Provide updated documents to individuals, along with a plain-language (including pictorial, if warranted) explanation of the updates.
- CI-12C: Provider/staff participation in specific education and outreach on community integration.
- CI-12D: Review and modification of current staff trainings on community integration.
- CI-12E: Development of tools/messaging materials to educate individuals and families on community integration, including competitive integrated employment options.
- CI-12F: Development of programs aimed at increasing opportunities for community integration.
- CI-12G: Reduce individual-to-staff ratios and/or adjust staff responsibilities in order to enhance community integration. (If this change will entail hiring additional staff, please describe details using the Add Comments button below.)
- CI-12H: Increase support for individuals to leave the setting and engage with the community (e.g., helping individuals access transportation options independently, including through the use of assistive technology and other measures; increasing frequency of staff accompanying individuals; reimbursing staff for mileage on their own cars). (If this change will entail purchasing additional vehicles or other increased expenditures, please describe details using the Add Comments button below.)
- CI-12I: Training for individuals on community integration.
- CI-12J: Training for individuals on ways to access the greater community (e.g., how to access transportation options independently, including through the use of assistive technology and other measures).
- Other remedial action plan.

CI-13.

Participants are singled out from the general public and/or non-disabled colleagues through a requirement that they and/or provider staff wear name tags, vests, uniforms, or standardized clothing;

through a requirement that they use a separate entrance or sit in a marked-off signposted area; or through other means. *

TRUE

Select at least one remedial action plan:

- CI-13A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on community integration.
 - CI-13B: Provider/staff participation in specific education and outreach on community integration.
 - CI-13C: Review and modification of current staff trainings on community integration.
 - CI-13D: Eliminate name tags, vests, uniforms, standardized clothing, separate entrances/signage, and other measures that single out participants from the general public or nondisabled coworkers.
 - Other remedial action plan.
-

CI-14.

Setting has no visitors without disabilities. *

TRUE

Select at least one remedial action plan:

- CI-14A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on community integration.
 - CI-14B: Provide updated documents to individuals, along with a plain-language (including pictorial, if warranted) explanation of the updates.
 - CI-14C: Provider/staff participation in specific education and outreach on community integration.
 - CI-14D: Review and modification of current staff trainings on community integration.
 - CI-14E: Development of tools/messaging materials to educate individuals and families on community integration, including competitive integrated employment options.
 - CI-14F: Development of programs aimed at increasing opportunities for community integration.
 - Other remedial action plan.
-

CI-15.

Setting does not provide age-appropriate activities within the settings and information about age-appropriate activities outside the setting. *

TRUE

Select at least one remedial action plan:

- CI-15A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on community integration.
- CI-15B: Provide updated documents to individuals, along with a plain-language (including pictorial, if warranted) explanation of the updates.
- CI-15C: Provider/staff participation in specific education and outreach on community integration.
- CI-15D: Review and modification of current staff trainings on community integration.
- CI-15E: Development of tools/messaging materials to educate individuals and families on community integration, including competitive integrated employment options.
- CI-15F: Development of programs aimed at increasing opportunities for community integration.
- CI-15G: Reduce individual-to-staff ratios and/or adjust staff responsibilities in order to enhance community integration. (If this change will entail hiring additional staff, please describe details using the Add Comments button below.)
- CI-15H: Increase support for individuals to leave the setting and engage with the community (e.g., helping individuals access transportation options independently, including through the use of assistive technology and other measures; increasing frequency of staff accompanying individuals; reimbursing staff for mileage on their own cars). (If this change will entail purchasing additional vehicles or other increased expenditures, please describe details using the Add Comments button below.)
- CI-15I: Training for individuals on community integration.
- CI-15J: Training for individuals on ways to access the greater community (e.g., how to access transportation options independently, including through the use of assistive technology and other measures).
- CI-15K: Ensure that age-appropriate activities are provided within the settings and that information about such activities outside the setting is provided to individuals.
- Other remedial action plan.

CI-16.

Setting does not help individuals access public transportation, Medicaid-funded medical and non-medical transportation, and other generally available transportation resources. *

TRUE

Select at least one remedial action plan:

- CI-16A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on community integration.

- CI-16B: Provide updated documents to individuals, along with a plain-language (including pictorial, if warranted) explanation of the updates.
- CI-16C: Provider/staff participation in specific education and outreach on community integration.
- CI-16D: Review and modification of current staff trainings on community integration.
- CI-16E: Development of tools/messaging materials to educate individuals and families on community integration, including competitive integrated employment options.
- CI-16F: Increase support for individuals to leave the setting and engage with the community (e.g., helping individuals access transportation options independently, including through the use of assistive technology and other measures; reimbursing staff for mileage on their own cars). (If this change will entail purchasing additional vehicles or other increased expenditures, please describe details using the Add Comments button below.)
- CI-16G: Training for individuals on community integration.
- CI-16H: Training for individuals on ways to access the greater community (e.g., how to access transportation options independently, including through the use of assistive technology and other measures).
- Other remedial action plan.

CI-17.

Setting does not allow individuals to spend their money on food or other items of their choice while out in the community. *

If an individual wants assistance with making purchases, this support need should be documented in their service plan.

TRUE

Select at least one remedial action plan:

- CI-17A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on community integration.
- CI-17B: Provide updated documents to individuals, along with a plain-language (including pictorial, if warranted) explanation of the updates.
- CI-17C: Provider/staff participation in specific education and outreach on community integration.
- CI-17D: Review and modification of current staff trainings on community integration.
- CI-17E: Development of tools/messaging materials to educate individuals and families on community integration, including competitive integrated employment options.
- CI-17F: Develop a policy/procedure to allow individuals to spend their money on food or other items of their choice.
- Other remedial action plan.

CI-18.

Setting or staff prohibit individuals from leaving at will (e.g., locks; setting's/facility's rules), in a way not properly documented in the individual's person-centered plan. *

TRUE

Select at least one remedial action plan:

- CI-18A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on community integration.
- CI-18B: Provide updated documents to individuals, along with a plain-language (including pictorial, if warranted) explanation of the updates.
- CI-18C: Provider/staff participation in specific education and outreach on community integration.
- CI-18D: Review and modification of current staff trainings on community integration.
- CI-18E: Install new locks and/or restrictive egress alert systems or devices that comply with federal requirements.
- CI-18F: Development of tools/messaging materials to educate individuals and families on community integration, including competitive integrated employment options.
- Other remedial action plan.

CI-19.

Setting uses restrictive egress alert devices on a setting-wide (non-individualized) basis, in a way not properly documented in the individual's person-centered plan. *

TRUE

Select at least one remedial action plan:

- CI-19A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on community integration.
- CI-19B: Provide updated documents to individuals, along with a plain-language (including pictorial, if warranted) explanation of the updates.
- CI-19C: Provider/staff participation in specific education and outreach on community integration.
- CI-19D: Review and modification of current staff trainings on community integration.
- CI-19E: Install new locks and/or restrictive egress alert systems or devices that comply with federal requirements.
- CI-19F: Development of tools/messaging materials to educate individuals and families on community

integration, including competitive integrated employment options.

Other remedial action plan.

CI-20.

Setting is otherwise noncompliant with the federal requirements above relating to community integration (provide detail below). *

TRUE

Select at least one remedial action plan:


- CI-20A: Modifications to rules, policies, procedures, or practices to align with federal and state requirements on community integration.
 - CI-20B: Provide updated documents to individuals, along with a plain-language (including pictorial, if warranted) explanation of the updates.
 - CI-20C: Provider/staff participation in specific education and outreach on community integration.
 - CI-20D: Review and modification of current staff trainings on community integration.
 - CI-20E: Development of tools/messaging materials to educate individuals and families on community integration, including competitive integrated employment options.
 - CI-20F: Development of programs aimed at increasing opportunities for community integration.
 - CI-20G: Reduce individual-to-staff ratios and/or adjust staff responsibilities in order to enhance community integration. (If this change will entail hiring additional staff, please describe details using the Add Comments button below.)
 - CI-20H: Increase support for individuals to leave the setting and engage with the community (e.g., helping individuals access transportation options independently, including through the use of assistive technology and other measures; increasing frequency of staff accompanying individuals; reimbursing staff for mileage on their own cars). (If this change will entail purchasing additional vehicles or other increased expenditures, please describe details using the Add Comments button below.)
 - CI-20I: Ensure that age-appropriate activities are provided within the settings and that information about such activities outside the setting is provided to individuals.
 - CI-20J: Training for individuals on community integration.
 - CI-20K: Training for individuals on ways to access the greater community (e.g., how to access transportation options independently, including through the use of assistive technology and other measures).
 - Other remedial action plan.
-

Does your remedial action plan entail cost? *

Yes

No

Community Integration Incurred Cost Description: *

 If and when the user selects Yes for cost, the system displays this text box and the two cost fields below.

Total expected one-time cost for the remedial action plan(s) described on this screen: *

Only report cost once if it relates to multiple aspects of the federal rule, not on multiple screens.

\$ 0

Total expected recurring, annual costs for the remedial action plan(s) described on this screen: *

Only report cost once if it relates to multiple aspects of the federal rule, not on multiple screens.

\$ 0

Compliance Issue/Remedial Action Plan Comments

This section is optional. Use the “Add Comments” button to add any additional details relating to your compliance issues and/or remedial action plans. If you did not detail it above, please include your plan to train staff/contractors on any changes that involve them.

| Date | Author | Comment |
|---------------------|---|----------------|
| 07/09/2020 01:47 PM |  | Sample comment |
| 07/09/2020 01:46 PM | | Sample comment |

Institutional Characteristics

Institutional Characteristics compliance issues ICH-1 through ICH-3 are examples of ways that a setting (site) might be subject to heightened scrutiny under the HCBS Settings Final Rule. **Please review ICH-1 through ICH-3 and self-assess whether they are True or False for your site.**

A true statement means that your setting/site might be subject to heightened scrutiny. If selected, you will be prompted to provide at least one remedial action plan to address the setting's institutional characteristics.

If you select "Other remedial action plan:" you must enter a description.

Use the Compliance Issue/Remedial Action Plan section at the bottom of the page to add comments or additional information.

HCBS Settings Final Rule Details

This element of the HCBS Settings Final Rule relates to Institutional Characteristics:

1. For 1915(c) home and community-based waivers, 42 C.F.R. § 441.301(c)(5)(v) specifies that the following settings are presumed to have the qualities of an institution:
 - a. Any setting that is located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment,
 - b. Any setting that is located in a building on the grounds of, or immediately adjacent to, a public institution, or
 - c. Any other setting that has the effect of isolating individuals receiving Medicaid HCBS from the broader community of individuals not receiving Medicaid HCBS.

*** Mandatory (required) fields below are marked with an asterisk.**

ICH-1.

Setting is located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment. *

TRUE

Select at

The provider may select True or False for each heightened scrutiny trigger. In addition, state staff may select Resolved for each trigger. If and when the user marks a heightened scrutiny trigger as as True, the system displays relevant remedial action plans for that trigger, and the user must select at least one.

ICH-1A: Separation of operations from those of the institution.

ICH-1B: Provider/staff participation in specific education and outreach on ways to overcome the institutional presumption.

ICH-1C: Train staff on HCBS requirements and how they vary from institutional requirements.

ICH-1D: Movement to a new location.

ICH-1E: Development of a plan to decrease isolation from the broader community.

ICH-1F: Provider request for state assistance to relocate individuals to a community setting.

ICH-1G: Referrals of individuals to case managers or peers who can help them understand other setting options available in the community.

Other remedial action plan.

Other *

 If and when the user selects the checkbox for "Other remedial action plan," this text box becomes available.

ICH-2.

Setting is located in a building on the grounds of, or immediately adjacent to, a public institution. *

TRUE

Select at least one remedial action plan:

ICH-2A: Separation of operations from those of the institution.

ICH-2B: Provider/staff participation in specific education and outreach on ways to overcome the institutional presumption.

ICH-2C: Train staff on HCBS requirements and how they vary from institutional requirements.

ICH-2D: Movement to a new location.

ICH-2E: Development of a plan to decrease isolation from the broader community.

ICH-2F: Provider request for state assistance to relocate individuals to a community setting.

ICH-2G: Referrals of individuals to case managers or peers who can help them understand other setting options available in the community.

Other remedial action plan.

ICH-3.

Setting has the effect of isolating individuals receiving Medicaid HCBS from the broader community of individuals not receiving Medicaid HCBS *

TRUE

Select at least one remedial action plan:

ICH-3A: Provider/staff participation in specific education and outreach on ways to overcome the institutional presumption.

ICH-3B: Train staff on HCBS requirements and how they vary from institutional requirements.

ICH-3C: Movement to a new location.

ICH-3D: Development of a plan to decrease isolation from the broader community.

ICH-3E: Provider request for state assistance to relocate individuals to a community setting.

ICH-3F: Referrals of individuals to case managers or peers who can help them understand other

setting options available in the community.


Other remedial action plan.

Does your remedial action plan entail cost? *

Yes

No

Institutional Characteristics Incurred Cost Description: *

 If and when the user selects Yes for cost, the system displays this text box and the two cost fields below.

Total expected one-time cost for the remedial action plan(s) described on this screen: *

Only report cost once if it relates to multiple aspects of the federal rule, not on multiple screens.

\$ 0

Total expected recurring, annual costs for the remedial action plan(s) described on this screen: *

Only report cost once if it relates to multiple aspects of the federal rule, not on multiple screens.

\$ 0

Compliance Issue/Remedial Action Plan Comments

This section is optional. Use the “Add Comments” button to add any additional details relating to your compliance issues and/or remedial action plans. If you did not detail it above, please include your plan to train staff/contractors on any changes that involve them.

| Date | Author | Comment |
|---------------------|--------|----------------|
| 07/09/2020 01:48 PM | | Sample comment |
| 07/09/2020 01:48 PM | | Sample comment |

PTP Status

Thank you for completing the PTP for this setting!

Please note that further action may be needed!

Providers must update their PTPs every three months, starting three months after the initial site visit (if any) or completion of the PTP, whichever is later. This timeframe is designed to allow ample time for providers to take necessary action steps towards compliance. It also allows time for organizational change and process and protocol revision.

For the three-month update, you will return to this PTP using the same web-link and login information that you are currently using.

Providers should submit an updated PTP every three months until they receive a notice from the Department that further updates are not required. If your three-month update is due, do not wait for a reminder from the Department; simply make your updates.

PTP Status Comments

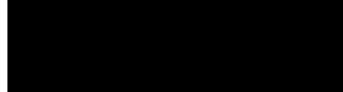
This section is optional. If you have any questions or comments for your PTP review team on the status of this PTP use the “Add Comments” button to add them.

07/09/2020 01:49 PM



Sample comment

07/09/2020 01:49 PM



Sample comment

FOR STATE USE ONLY

Status of this PTP:

☰ Draft

- PTP Status options:
- Draft
- Needs CDPHE Review
- Needs Provider Review
- Accepted for Implementation
- Has Finally Determined Compliance Status
- Retired
- Locked

Date this PTP was last submitted by Provider:

Date this PTP Status was changed:

07/09/2020

PTP Status was changed by:



PTP Submission Date:

mm / dd / yyyy

Autopopulates upon submission; adjustable by state staff

PTP Update Due Date:

mm / dd / yyyy

Autocalculates as date of first submission + 90 days; adjustable by state staff

PTP First Submission Due Date:

08 / 08 / 2020

Autocalculates as date of Welcome email + 30 days; adjustable by state staff

Compliance Status:

☰ (7) Not yet known

Compliance Status options:
(1) Setting is NOT subject to heightened scrutiny and IS compliant with rule; no further action needed
(2) Setting is NOT subject to heightened scrutiny and NOT YET compliant with rule; file updated PTP in three months with evidence showing progress
(3) Setting is NOT subject to heightened scrutiny and NOT timely able to comply with rule; prepare now to transition clients
(4) Setting IS subject to heightened scrutiny and IS able to overcome institutional presumption; evidence should be put forward to the public and/or CMS
(5) Setting IS subject to heightened scrutiny and NOT YET able to overcome institutional presumption; file updated PTP in three months with evidence showing progress
(6) Setting IS subject to heightened scrutiny and NOT timely able to overcome institutional presumption; prepare now to transition clients
(7) Not yet known [this is the default option]
(8) Setting has closed because of rule
(9) Setting has closed for another reason

Most Recent Date Notice Sent Coming Due 15 Days:

mm / dd / yyyy

Most Recent Date Notice Sent 15 Days Late:

mm / dd / yyyy

Most Recent Date Notice Sent 30 Days Late:

mm / dd / yyyy

Most Recent Date Notice Sent 60 Days Late:

mm / dd / yyyy

Heightened Scrutiny

Factor(s) triggering the potential for heightened scrutiny (from Institutional Characteristics section above):

The Heightened Scrutiny screen is completed by state staff if any of the three factors listed immediately below is True.

Setting is located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment

True

False

Setting is located in a building on the grounds of, or immediately adjacent to, a public institution

True

False

Setting has the effect of isolating individuals receiving Medicaid HCBS from the broader community of individuals not receiving Medicaid HCBS

True

False

Compliance indicators for overcoming institutional presumption:

The setting ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.

☰ Yes

Dropdown menu options:

- Yes
- No
- Partially
- N/A

The selections shown in this PDF randomly demonstrate the available options and do not reflect the actual analysis of any setting.

The setting optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact.

☰ No

The setting is selected by the individual from among setting options including non-disability specific settings.

☰ Partially

The setting options are identified and documented in the person-centered service plan and are based on the individual's needs and preferences.

☰ N/A

The setting facilitates individual choice regarding services and supports, and who provides them.

☰ Yes

The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.

☰ No

The setting ensures that individuals have the freedom and support to control their own schedules and activities, and have access to food at any time.

☰ Partially

The setting ensures that individuals are able to have visitors of their choosing at any time.

☰ N/A

The setting ensures physical accessibility.

☰ Yes

The setting ensures that any modification of individual rights is supported by a specific assessed need and justified in the person-centered service plan.

☰ No

Conclusion: Based on the factors set forth above, the setting does not have the qualities of an institution and does have the qualities of home- and community-based settings.

☰ Partially

Summary of site visit team assessment of whether setting meets HCBS setting requirements; cite relevant evidence.

If the site visit team believes that the setting is able to overcome the institutional presumption, describe the evidence that should be put forward to the public and/or CMS and state when the provider will supply it (if it is not already on file).

If the setting is not yet able to overcome the institutional presumption, describe the remedial actions it is taking and state when its new supporting evidence will be available.

If the setting is not timely able to overcome the institutional presumption, describe its plan to transition individuals to other settings.

 State staff will type text here.

Site Visit Desk Review

CDPHE Lead Staff

CDPHE Lead Staff Email

Initial site visit or desk review

Selected for initial site visit?

Please note that a setting that is not currently selected for a site visit may be selected later.

Yes

Not at this time

Status of initial site visit

Dropdown menu options:
 N/A; not selected for site visit
 To be scheduled
 Scheduled
 Completed

All PTPs are subject to desk review, regardless of whether the setting is also selected for (or requests) a site visit.

Date of initial site visit


mm/dd/yyyy

Initial site visit team members


 State staff name(s)

Identify the supporting documentation submitted by the provider, and follow up with the provider to obtain any missing materials.

Details of supporting documentation obtained and efforts to obtain missing materials:


 State staff can type in this text box.

Findings from supporting documentation


 State staff can type in this text box.

Findings from site visit or desk review**Summary of findings***


* Site visit and desk review teams should ensure that the PTP accurately reflects all areas of noncompliance and remedial action plans, including compliance issues and remedial action plans relating to heightened scrutiny. Overwrite any inaccurate information in the preceding sections of the PTP.

 State staff can type in this text box.

Promising Practices

 State staff can type in this text box.

Additional notes/observations/suggestions from site visit or desk review team

 State staff can type in this text box.

Follow-up site visit(s) or desk review(s)

If multiple follow-up visits are made, overwrite the information in this section as needed.

Selected for follow-up site visit?

Please note that a setting that is not currently selected for a site visit may be selected later.

Yes

Not at this time

Status of follow-up site visit

☰ --- Select Status ---


Date of follow-up site visit

mm/dd/yyyy

Follow-up site visit team members

Identify the supporting documentation submitted by the provider, and follow up with the provider to obtain any missing materials.

Details of supporting documentation obtained and efforts to obtain missing materials:

 State staff can type in this text box.


Findings from supporting documentation

 State staff can type in this text box.

Findings from follow-up site visit or desk review

Summary of findings*


* Site visit and desk review teams should ensure that the PTP accurately reflects all areas of noncompliance and remedial action plans, including compliance issues and remedial action plans relating to heightened scrutiny. Overwrite any inaccurate information in the preceding sections of the PTP.

 State staff can type in this text box.

Promising Practices

 State staff can type in this text box.

Additional notes/observations/suggestions from site visit or desk review team

 State staff can type in this text box.

Accessibility (https://urldefense.proofpoint.com/v2/url?u=https-3A__www.colorado.gov_accessibility-2Dstandards&d=DwMGAg&c=sdnEM9SRGFuMt5z5w3AhsPNahmNicq64TgF1JwNR0cs&r=VAxz8J7ud1MZock17EAK62RzawF4wyCsEaYzkWUKyc0&m=CE:7H30qIb4Cmu0B1aQ3A5h7Hd1N-bLgDPI&s=dpjQuV10FQT5N6KWt7XQeop0y6bWZVirRPim20308n0&e=) Privacy Statement (https://urldefense.proofpoint.com/v2/url?u=https-3A__www.colorado.gov_privacy-

An Audit Trail (showing changes to the PTP) is available online but is not included in the one-click Print function.