

APPENDIX 1: ICF/IID Level of Care Waivers
System Remediation Grid
3/13/2015
Updated 10/1/2015
Updated 6/1/2016

The system grid describes the impact of the federal regulation on applicable State statutes, administrative rules, administrative and operational policies.
 *The proposed timelines are contingent upon approval of the plan by the Centers for Medicare and Medicaid Services (CMS)

Regulation	Areas of Compliance	Remediation Required	Action Steps	*Timeline
<p>Setting is integrated in, and supports full access of, individual receiving Medicaid HCBS to the greater community to the same degree of access as individuals not receiving Medicaid HCBS.</p>	<p>Prior to the implementation of Ohio Administrative Code 5123:2-9-02, state regulations required that person-centered plans support community connections, but did not directly address the requirement for settings to be integrated and support full access to the greater community. With the implementation of the new regulation, the state is now fully compliant.</p> <p>Ohio Administrative Code 5123:2-1-11 requires all person-centered plans to support community connections. http://codes.ohio.gov/oac/5123%3A2-1-11</p>	<p>Implement new Home and Community-Based Services Administration rule that describes the characteristics required of all settings in which HCBS is provided and recognizes the individual's opportunity to choose among services/settings that address assessed needs in the least restrictive manner, promote autonomy and full access to the community, and minimize dependency on paid supports. http://dodd.ohio.gov/RulesLaws/Documents/5123-2-9-02%20New%202016-04-15.pdf</p>	<ul style="list-style-type: none"> • Developed content with the subcommittee with equal representation from advocates/self-advocates, county boards, and providers of HCBS • Formal clearance for draft rule • Final file • Implementation. 	<p>January 1, 2016</p>
		<p>Revise service definition of Homemaker/Personal Care under the Individual Options and Level One waivers to include language</p>	<ul style="list-style-type: none"> • Submit waiver amendments to CMS • Formal clearance for draft rule 	<p>October 1, 2016</p>

Regulation	Areas of Compliance	Remediation Required	Action Steps	*Timeline
		<p>that supports the use of this service to promote individuals' integration in and access to the greater community.</p> <p>http://dodd.ohio.gov/PipelineWeekly/Lists/Posts/Post.aspx?ID=115</p>	<ul style="list-style-type: none"> • Final file • Implementation. 	
		<p>Implement a new HCBS settings evaluation tool utilized to conduct compliance reviews of providers of HCBS to include prompts for ensuring HCBS are provided in settings that comport with the regulation.</p> <p>http://dodd.ohio.gov/OurFuture/Documents/HCBS%20Settings%20Evaluation.pdf</p>	<ul style="list-style-type: none"> • Convene workgroup with broad cross-section of individuals/families, providers of HCBS, and county board personnel • Develop draft tool • Share draft with stakeholders for feedback • Provide training on new tool • Begin implementation. 	<p>January 1, 2016</p>
<p>The setting includes opportunities to seek employment and work in competitive integrated settings to the same degree of access as individuals not receiving Medicaid HCBS.</p>	<p>The State regulation, policy or other standards are fully compliant. The sections of Ohio Administrative Code and Ohio Revised Code listed below require each individual have opportunities to seek employment and work in competitive integrated settings and are fully compliant with the regulation.</p> <p>Section 5123.022 of the Revised Code requires that employment services for individuals with developmental disabilities be</p>	<p>Create new service definitions, provider qualifications, and rate methodologies for integrated community supports and integrated employment services.</p> <p>http://dodd.ohio.gov/PipelineWeekly/Lists/Posts/Post.aspx?ID=115</p>	<ul style="list-style-type: none"> • Convened workgroup that includes advocates/self-advocates, as well as representatives from providers of HCBS and county boards • Submit waiver amendments to CMS • Formal clearance for draft rule • Final file • Implementation. 	<p>October 1, 2016</p>

Regulation	Areas of Compliance	Remediation Required	Action Steps	*Timeline
	<p>directed at community employment and that individuals with developmental disabilities are presumed capable of community employment.</p> <p>http://codes.ohio.gov/orc/5123.022</p>			
	<p>SSA and Employment First rules require path to community employment to be identified in each person-centered plan.</p> <p>http://codes.ohio.gov/oac/5123%3A2-1-11 (Service and Supports Administration rule)</p> <p>https://doddportal.dodd.ohio.gov/rules/ineffect/Documents/5123-2-2-05%20Effective%202014-04-01.pdf (Employment First rule)</p>	<p>The Transitions DD Waiver does not include a service that supports individuals in seeking and working in competitive, integrated settings. The State intends to submit a phase-out plan for this waiver which will include offering individuals the opportunity to enroll in the Level One (LV1), Individual Options (IO) or SELF waivers.</p>	<ul style="list-style-type: none"> • Convened stakeholder group that includes family members of individuals served, providers of TDD services, and county boards • Develop phase-out plan • Secure public input on phase-out • Submit amendment to CMS • Initiate phase-out plan, if approved • Phase-out complete. 	<p>Initiate phase-out July 1, 2015 to be concluded by June 30 2017</p>
	<p>LV1, IO, SELF include services that support individuals on their path to employment, such as supportive employment and integrated employment.</p>			
<p>The setting includes opportunities to engage in community life to the same degree of access as individuals not receiving Medicaid HCBS.</p>	<p>The State regulation, policy or other standards are fully complaint.</p> <p>Prior to the implementation of Ohio Administrative Code 5123:2-9-02, state regulations required that person-centered plans</p>	<p>Revise service definition of Homemaker/Personal Care under the IO and LV1 waivers to include language that supports the use of this service to promote individuals' integration in and access to the greater community.</p>	<ul style="list-style-type: none"> • Formal clearance for draft rule • Final file • Implementation 	<p>October 1, 2016</p>

Regulation	Areas of Compliance	Remediation Required	Action Steps	*Timeline
	<p>support community connections, but did not directly address the requirement for settings to be integrated and support full access to the greater community. With the implementation of the new regulation, the state is now fully compliant.</p> <p>Ohio Administrative Code 5123:2-1-11 requires all person-centered plans to support community connections. http://codes.ohio.gov/oac/5123%3A2-1-11</p>	<p>http://dodd.ohio.gov/PipelineWeekly/Lists/Posts/Post.aspx?ID=115</p>		
		<p>Create new service definitions, provider qualifications, and rate methodologies for integrated community supports and integrated employment services. http://dodd.ohio.gov/PipelineWeekly/Lists/Posts/Post.aspx?ID=115</p>	<ul style="list-style-type: none"> • Convened workgroup that includes advocates/self-advocates, as well as representatives from providers of HCBS and county boards • Submit waiver amendments to CMS • Formal clearance for draft rule • Final file • Implementation. 	<p>October 1, 2016</p>
<p>The setting includes opportunities to control personal resources to the same degree of access as individuals not receiving Medicaid HCBS.</p>	<p>The State regulation, policy or other standards are fully compliant. Section 5123.62 of the Ohio Revised Code requires that individuals have the right to control personal financial affairs,</p>	<p>Develop a new rule addressing personal funds of individuals. http://dodd.ohio.gov/RulesLaws/Documents/5123-2-2-07%20Effective%202016-10-01.pdf</p>	<ul style="list-style-type: none"> • Convened workgroup • Formal clearance for draft rule • Final file • Implementation. 	<p>June 1, 2016</p>

Regulation	Areas of Compliance	Remediation Required	Action Steps	*Timeline
	<p>based on individual ability to do so. http://codes.ohio.gov/orc/5123.62</p>			
<p>The setting is selected by the individual from among setting options including non-disability specific settings and an option for a private unit in a residential setting. The setting options are identified and documented in the person-centered service plan and are based on the individual's needs, preferences, and, for residential settings, resources available for room and board.</p>	<p>Prior to the implementation of Ohio Administrative Code 5123:2-9-02, the state standards were silent. The new regulation requires that individuals have the opportunity to pursue activities with persons of his or her choosing and in settings not created exclusively for individuals with disabilities. The regulation also requires service and support administrators to provide a description of all services and settings options available through the waiver.</p>	<p>Amend Ohio Administrative Code 5123:2-9-11, Free Choice of Provider, to clarify the requirement to explain how choosing a licensed setting may impact an individual's free choice of Homemaker/Personal Care provider. http://dodd.ohio.gov/RulesLaws/Documents/5123-2-9-11%20Effective%202015-05-01.pdf</p>	<ul style="list-style-type: none"> • Convened workgroup that includes advocates, as well as representatives of providers of HCBS and county boards • Formal clearance for draft rule • Final file • Implementation 	<p>4/1/15</p>
		<p>Implement a new HCBS settings evaluation tool utilized to conduct compliance reviews of providers of HCBS to ensure services are provided in settings that comport with the regulation. http://dodd.ohio.gov/OurFuture/Documents/HCBS%20Settings%20Evaluation.pdf</p>	<ul style="list-style-type: none"> • Convene workgroup with broad cross-section of individuals/families, providers of HCBS, and county board personnel • Develop draft tool • Share draft with stakeholders for feedback • Provide training on new tool • Implementation. 	<p>6/1/15</p>
<p>An individual's essential personal rights of privacy, dignity, respect, and freedom from coercion and restraint are protected.</p>	<p>The State regulation, policy or other standards are fully complaint. Section 5123.62 of the Ohio Revised Code specifies rights for</p>			

Regulation	Areas of Compliance	Remediation Required	Action Steps	*Timeline
	<p>individuals with developmental disabilities. http://codes.ohio.gov/orc/5123.6_2</p>			
	<p>Annual review of the rights of individuals with developmental disabilities is required for all providers of HCBS and is provided to all individuals receiving HCBS. http://codes.ohio.gov/orc/5123.6_3 (Ohio Revised Code Distributing copies of rights)</p> <p>http://dodd.ohio.gov/RulesLaws/Documents/5123-2-2-01%20Effective%202015-10-01.pdf (Provider certification – includes requirements for initial and annual training on the rights of people with developmental disabilities)</p>			
	<p>Existing county board accreditation and provider compliance review processes ensure compliance with requirements for initial and annual training for providers of HCBS and for review of rights with individuals served. https://doddportal.dodd.ohio.gov/rules/ineffect/Documents/5123-2-1-02%20Effective%202015-01-</p>			

Regulation	Areas of Compliance	Remediation Required	Action Steps	*Timeline
	<p>01.pdf (See paragraph P for county board accreditation) https://doddportal.dodd.ohio.gov/rules/ineffect/Documents/5123-2-2-04%20Effective%202013-03-14.pdf (Compliance reviews of certified providers)</p>			
<p>Optimizes, but does not regiment individual initiative, autonomy, and independence in making life choices. This includes, but not limited to, daily activities, physical environment, and with whom to interact.</p>	<p>The State regulation, policy or other standards are fully compliant. With the implementation of Ohio Administrative Code 5123:2-9-02, however, this requirement is additionally reinforced. Ohio Administrative Code 5123:2-1-11 outlines the decision-making responsibility of individuals receiving services and a requirement for person-centered plans to assist the individual with self-advocacy, if desired. http://codes.ohio.gov/oac/5123%3A2-1-11</p>			
<p>Individual choice regarding services and supports, and who provides them, is facilitated.</p>	<p>Prior to the implementation of Ohio Administrative Code 5123:2-9-02 and the revision of 5123:2-9-11, the state was partially compliant. Previously, OAC 5123:2-9-11 required service and support administrators to assist</p>	<p>Amend Ohio Administrative Code 5123:2-9-11, Free Choice of Provider, to clarify the requirement to explain how choosing a licensed setting may impact an individual’s free choice</p>	<ul style="list-style-type: none"> • Convened workgroup that includes advocates, as well as representatives of providers of HCBS and county boards • Formal clearance for draft rule 	<p>April 1, 2015</p>

Regulation	Areas of Compliance	Remediation Required	Action Steps	*Timeline
	individuals, as needed with exercising their free choice of provider. However, it lacked specificity regarding the supports available and the impact of an individual choosing to receive services in a licensed setting.	of homemaker/personal care provider. http://dodd.ohio.gov/RulesLaws/Documents/5123-2-9-11%20Effective%202015-05-01.pdf	<ul style="list-style-type: none"> • Final file • Implementation 	
Provider owned or controlled residential settings: The unit or dwelling is a specific physical place that can be owned, rented, or occupied under a legally enforceable agreement by the individual receiving services, and the individual has, at a minimum, the same responsibilities and protections from eviction that tenants have under the landlord/tenant law of the State, county, city, or other designated entity. For settings in which landlord tenant laws do not apply, the State must ensure that a lease, residency agreement or other form of written agreement will be in place for each HCBS participant, and that that the document provides protections that address eviction processes and appeals comparable to those provided under the jurisdiction’s landlord tenant law.	The State regulation, policy or other standards are silent.	Amend Ohio Administrative Code to specify the required contents of a residency agreement or other written agreement for individuals residing in a provider-owned or controlled setting. Ohio Administrative Code 5123:2-9-02 (F) (1-4) requires the use of a legally enforceable agreement. http://dodd.ohio.gov/RulesLaws/Documents/5123-2-9-02%20New%202016-04-15.pdf	<ul style="list-style-type: none"> • Convened workgroup • Formal clearance for draft rule • Final file • Implementation. 	January 1, 2016
	The State regulation, policy or other standards are silent.	Implement a new HCBS settings evaluation tool utilized to conduct compliance reviews of providers of HCBS to ensure services are provided in settings that comport with the regulation. http://dodd.ohio.gov/OurFuture/Documents/HCBS%20Settings%20Evaluation.pdf	<ul style="list-style-type: none"> • Convene workgroup with broad cross-section of individuals/families, providers of HCBS, and county board personnel • Develop draft tool • Share draft with stakeholders for feedback • Provide training on new tool • Implementation. 	June 1, 2015

Regulation	Areas of Compliance	Remediation Required	Action Steps	*Timeline
<p>Provider owned or controlled residential settings: Each individual has privacy in their sleeping or living unit: Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors.</p>	<p>The State regulation, policy or other standards are partially compliant. This section of Ohio Revised Code addressed the right for privacy. It did not specifically address the individual's ability to have lockable doors. Section 5123.62 of the Ohio Revised Code specifies rights for individuals with developmental disabilities. http://codes.ohio.gov/orc/5123.62</p>	<p>Implement new HCBS Services Administration rule that describes the characteristics required of all settings in which HCBS is provided, including the requirements specific to provider owned or controlled settings. Ohio Administrative Code 5123:2-9-02 (F) (3) (f) (ii) ensures the individual's right to privacy and security including locks and keys to his or her living unit. http://dodd.ohio.gov/RulesLaws/Documents/5123-2-9-02%20New%202016-04-15.pdf</p> <p>Sub-regulatory guidance will be issued related to implementation of Ohio Administrative Code 5123:2-9-02 which specifies only appropriate staff shall have keys to lockable doors.</p>	<ul style="list-style-type: none"> • Developed content with the subcommittee with equal representation from advocates/self-advocates, county boards, and providers of HCBS • Convene workgroup • Formal clearance for draft rule • Final file • Implementation. 	<p>January 1, 2016</p>
	<p>Annual review of the rights of individuals with developmental disabilities is required for all providers of HCBS and is provided to all individuals receiving HCBS. http://dodd.ohio.gov/RulesLaws/Documents/5123-2-2-01%20Effective%202015-10-01.pdf (Provider certification – includes requirements for initial and annual training on the rights of people with developmental disabilities)</p>			

Regulation	Areas of Compliance	Remediation Required	Action Steps	*Timeline
	<p>Existing county board accreditation and provider compliance review processes ensure compliance with requirements for initial and annual training for providers of HCBS and for review of rights with individuals served.</p> <p>https://doddportal.dodd.ohio.gov/rules/ineffect/Documents/5123-2-1-02%20Effective%202015-01-01.pdf (See paragraph P for county board accreditation)</p> <p>https://doddportal.dodd.ohio.gov/rules/ineffect/Documents/5123-2-2-04%20Effective%202013-03-14.pdf (Compliance reviews of certified providers)</p>			

Regulation	Areas of Compliance	Remediation Required	Action Steps	*Timeline
	<p>Ohio Administrative Code 5123:2-2-06 outlines requirements when behavioral strategies incorporated in person-centered plans include restrictive measures.</p> <p>http://codes.ohio.gov/oac/5123:2-2-06</p>			
<p>Provider owned or controlled residential settings: Individuals sharing units have a choice of roommates in that setting.</p>	<p>The State regulation, policy or other standards are silent.</p>	<p>Implement new HCBS Services Administration rule that describes the characteristics required of all settings in which HCBS is provided, including the requirements specific to provider owned or controlled settings. Ohio Administrative Code 5123:2-9-02 (F) (3) (f) (i) ensures the individual's choice of roommates.</p> <p>http://dodd.ohio.gov/RulesLaws/Documents/5123-2-9-02%20New%202016-04-15.pdf</p>	<ul style="list-style-type: none"> • Developed content with the subcommittee with equal representation from advocates/self-advocates, county boards, and providers of HCBS • Convene workgroup • Formal clearance for draft rule Final file • Implementation. 	<p>6/1/15 January 1, 2016</p>
<p>Provider owned or controlled residential settings: Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.</p>	<p>The State regulation, policy or other standards are partially compliant. The statute includes the right for people to have and use personal possessions so as to maintain individuality and personal dignity. It did not specifically include a requirement for individuals to have the freedom to furnish and decorate sleeping/living units in provider owned or controlled residential settings. That requirement is now</p>	<p>Implement new HCBS Services Administration rule that describes the characteristics required of all settings in which HCBS is provided, including the requirements specific to provider owned or controlled settings. Ohio Administrative Code 5123:2-9-02 (F) (3) (f) (iii) ensures the individual is able to furnish or decorate his or her living unit.</p> <p>http://dodd.ohio.gov/RulesLaws/Documents/5123-2-9-02%20New%202016-04-15.pdf</p>	<ul style="list-style-type: none"> • Developed content with the subcommittee with equal representation from advocates/self-advocates, county boards, and providers of HCBS • Convene workgroup • Formal clearance for draft rule Final file • Implementation. 	<p>January 1, 2016</p>

Regulation	Areas of Compliance	Remediation Required	Action Steps	*Timeline
	<p>incorporated in Ohio Administrative Code 5123:2-9-02.</p> <p>Section 5123.62 of the Ohio Revised Code specifies rights for individuals with developmental disabilities. http://codes.ohio.gov/orc/5123.62</p>			
	<p>Annual review of the rights of individuals with developmental disabilities is required for all providers of HCBS and is provided to all individuals receiving HCBS. http://dodd.ohio.gov/RulesLaws/Documents/5123-2-2-01%20Effective%202015-10-01.pdf (Provider certification – includes requirements for initial and annual training on the rights of people with developmental disabilities)</p>			
	<p>Existing county board accreditation and provider compliance review processes ensure compliance with requirements for initial and annual training for providers of HCBS and for review of rights with individuals served. https://doddportal.dodd.ohio.gov/rules/ineffect/Documents/5123-2-1-02%20Effective%202015-01-02</p>			

Regulation	Areas of Compliance	Remediation Required	Action Steps	*Timeline
	<p>01.pdf (See paragraph P for county board accreditation)</p> <p>https://doddportal.dodd.ohio.gov/rules/ineffect/Documents/5123-2-2-04%20Effective%202013-03-14.pdf (Compliance reviews of certified providers)</p>			
<p>Provider owned or controlled residential settings: Individuals have the freedom and support to control their own schedules and activities, and have access to food at any time.</p>	<p>The State regulation, policy or other standards are partially compliant. This statute includes the rights of all people, regardless of living arrangement, to participate in activities of their choosing and have access to opportunities to help them develop to their full potential. With the implementation of Ohio Administrative Code 5123:2-9-02, the state is now fully compliant.</p> <p>Section 5123.62 of the Ohio Revised Code specifies rights for individuals with developmental disabilities.</p> <p>http://codes.ohio.gov/orc/5123.62</p>	<p>Implement new HCBS Services Administration rule that describes the characteristics required of all settings in which HCBS is provided, including the requirements specific to provider owned or controlled settings. Ohio Administrative Code 5123:2-9-02 (F) (3) (f) (v -vi) ensures the individual is able to control his or her schedule and activities and have access food at any time.</p> <p>http://dodd.ohio.gov/RulesLaws/Documents/5123-2-9-02%20New%202016-04-15.pdf</p>	<ul style="list-style-type: none"> • Developed content with the subcommittee with equal representation from advocates/self-advocates, county boards, and providers of HCBS • Convene workgroup • Formal clearance for draft rule Final file Implementation. 	<p>January 1, 2016</p>

Regulation	Areas of Compliance	Remediation Required	Action Steps	*Timeline
	<p>Annual review of the rights of individuals with developmental disabilities is required for all providers of HCBS and is provided to all individuals receiving HCBS. http://dodd.ohio.gov/RulesLaws/Documents/5123-2-2-01%20Effective%202015-10-01.pdf (Provider certification – includes requirements for initial and annual training on the rights of people with developmental disabilities)</p>			
	<p>Existing county board accreditation and provider compliance review processes ensure compliance with requirements for initial and annual training for providers of HCBS and for review of rights with individuals served.</p> <p>https://doddportal.dodd.ohio.gov/rules/ineffect/Documents/5123-2-1-02%20Effective%202015-01-01.pdf (See paragraph P for county board accreditation)</p> <p>https://doddportal.dodd.ohio.gov/rules/ineffect/Documents/5123-2-2-04%20Effective%202013-03-14.pdf (Compliance reviews of certified providers)</p>			

Regulation	Areas of Compliance	Remediation Required	Action Steps	*Timeline
	<p>Ohio Administrative Code 5123:2-2-06 outlines requirements when behavioral strategies incorporated in person-centered plans include restrictive measures.</p> <p>http://codes.ohio.gov/oac/5123:2-2-06</p>			
<p>Provider owned or controlled residential settings: Individuals are able to have visitors of their choosing at any time.</p>	<p>The State regulation, policy or other standards are partially compliant. This statute includes the rights of all people, regardless of living arrangement, to have visitors of their choosing at any time. With the implementation of Ohio Administrative Code 5123:2-9-02, the state is now fully compliant.</p> <p>Section 5123.62 of the Ohio Revised Code specifies rights for individuals with developmental disabilities.</p> <p>http://codes.ohio.gov/orc/5123.62</p>	<p>Implement new HCBS Services Administration rule that describes the characteristics required of all settings in which HCBS is provided, including the requirements specific to provider owned or controlled settings. Ohio Administrative Code 5123:2-9-02 (F) (3) (f) (iv) ensures the individual is able to have visitors of his or her choosing at any time.</p> <p>http://dodd.ohio.gov/RulesLaws/Documents/5123-2-9-02%20New%202016-04-15.pdf</p>	<ul style="list-style-type: none"> • Developed content with the subcommittee with equal representation from advocates/self-advocates, county boards, and providers of HCBS • Convene workgroup • Formal clearance for draft rule Final file Implementation. 	<p>January 1, 2016</p>
	<p>Annual review of the rights of individuals with developmental disabilities is required for all providers of HCBS and is provided to all individuals receiving HCBS.</p> <p>http://dodd.ohio.gov/RulesLaws/Documents/5123-2-2-01%20Effective%202015-10-01.pdf (Provider certification –</p>			

Regulation	Areas of Compliance	Remediation Required	Action Steps	*Timeline
	includes requirements for initial and annual training on the rights of people with developmental disabilities)			
	Existing county board accreditation and provider compliance review processes ensure compliance with requirements for initial and annual training for providers of HCBS and for review of rights with individuals served. https://doddportal.dodd.ohio.gov/rules/ineffect/Documents/5123-2-1-02%20Effective%202015-01-01.pdf (See paragraph P for county board accreditation) https://doddportal.dodd.ohio.gov/rules/ineffect/Documents/5123-2-2-04%20Effective%202013-03-14.pdf (Compliance reviews of certified providers)			
	Ohio Administrative Code 5123:2-2-06 outlines requirements when behavioral strategies incorporated in person-centered plans include restrictive measures. http://codes.ohio.gov/oac/5123:2-2-06			

Regulation	Areas of Compliance	Remediation Required	Action Steps	*Timeline
<p>Provider owned or controlled residential settings: The setting is physically accessible to the individual.</p>	<p>The State regulation, policy or other standards are fully compliant. The state standards state the need for all areas of the setting to be physically accessible to individuals.</p> <p>Ohio Administrative Code 5123:2-3-10 addresses the physical environment standards in licensed settings. http://codes.ohio.gov/oac/5123%3A2-3-10</p> <p>Ohio Administrative Code 5123:2-3-02 (C) (2) addresses that all areas of the residential facility must adequately meet the needs of the individuals. http://dodd.ohio.gov/RulesLaws/Documents/5123-2-3-02%20Effective%202016-10-01.pdf</p> <p>In addition, OAC 5123:2-3-08(D)(1)(a-b), (D)(4) and (5) addresses for the setting to be physically accessible to all residents. http://dodd.ohio.gov/RulesLaws/Documents/5123-2-3-08%20Effective%202016-10-01.pdf</p>	<p>Implement new HCBS and Community-Based Services Administration rule that describes the characteristics required of all settings in which HCBS is provided, including the requirements specific to provider owned or controlled settings.</p> <p>Ohio Administrative Code 5123:2-9-02 http://dodd.ohio.gov/RulesLaws/Documents/5123-2-9-02%20New%202016-04-15.pdf</p>	<ul style="list-style-type: none"> • Developed content with the sub-committee with equal representation from advocates/self-advocates, county boards, and providers of HCBS • Convene workgroup • Formal clearance for draft rule Final file Implementation. 	<p>January 1, 2016</p>

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<p>Locations that have qualities of institutional settings, as determined by the Secretary. Any setting that is located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment, or in a building on the grounds of, or immediately adjacent to, a public institution.</p>	<p>The State regulation, policy or other standards are silent.</p>	<p>Implement new Home and Community-Based Services Administration rule that describes the characteristics required of all settings in which HCBS is provided and recognizes the individual's opportunity to choose among services/settings that address assessed needs in the least restrictive manner, promote autonomy and full access to the community, and minimize dependency on paid supports. Ohio Administrative Code 5123:2-9-02 (C) (6) (a-b). http://dodd.ohio.gov/RulesLaws/Documents/5123-2-9-02%20New%202016-04-15.pdf</p>	<ul style="list-style-type: none"> • Developed content with the sub-committee with equal representation from advocates/self-advocates, county boards, and providers of HCBS • Convene workgroup • Formal clearance for draft rule • Final file • Implementation. 	<p>January 1, 2016</p>
<p>Home and community-based settings do not include the following: a nursing facility; institution for mental diseases; an intermediate care facility for individuals with intellectual disabilities; a hospital.</p>	<p>The State regulation, policy or other standards are silent.</p>	<p>Implement new Home and Community-Based Services Administration rule that describes the characteristics required of all settings in which HCBS is provided and recognizes the individual's opportunity to choose among services/settings that address assessed needs in the least restrictive manner, promote autonomy and full access to the community, and minimize dependency on paid supports. Ohio Administrative Code 5123:2-9-02 (C) (5) (a-d). http://dodd.ohio.gov/RulesLaws/Documents/5123-2-9-02%20New%202016-04-15.pdf</p>	<ul style="list-style-type: none"> • Developed content with the sub-committee with equal representation from advocates/self-advocates, county boards, and providers of HCBS • Convene workgroup • Formal clearance for draft rule • Final file • Implementation. 	<p>January 1, 2016</p>

**Appendix 3: NF-LOC Waivers
System Remediation Grid
3/13/2015
Updated 10/1/2015
Updated 6/1/2016**

The system grid describes the impact of the federal regulation on applicable State statues, administrative rules, administrative and operational policies.
*The proposed timelines are contingent upon approval of the plan by the Centers for Medicare and Medicaid (CMS)

Regulation	Areas of Compliance	Remediation Required	Action Steps	Timeline*
Setting is integrated in and supports full access of individual receiving Medicaid HCBS to the greater community, includes opportunities to seek employment and work in competitive integrated settings, opportunities to engage in community life, and to control personal resources to the same degree of access as individuals not receiving Medicaid HCBS.	The State regulation, policy or other standards are partially compliant. The state’s determination was the result of the assessment methodology outlined on pages 17-20.	Adopt and implement an overarching HCBS Waiver Administration rule that details the CMS HCBS settings characteristics required for all provider controlled settings. Amend the following administrative rules to incorporate HCBS community integration/access characteristics.	Rule Process: Utilize rule development and filing processes which includes individuals, advocates, and providers.	July 1, 2015-July 1, 2016
	Assisted Living Service Residents Rights <u>ORC 3721.13</u> Licensure Rules <u>OAC 3701-17-50</u>	OAC 5160-44-01 (B) (1) requires the setting to be fully integrated. <u>http://www.registerofohio.state.oh.us/pdfs/5160/0/44/5160-44-01_PH_OF_N_RU_20160415_135_2.pdf</u>	Training: Modify Provider and case management operational manuals and applicable forms as needed. Issue guidance to impacted providers and case management entities.	January 1, 2016-June 30, 2016
Adult Day Health Service Consumer Choice & Control Rules <u>OAC 5160-45-03</u> <u>OAC 5160-58-03.2</u> <u>OAC 173-42</u>	Assisted Living <u>OAC 173-39-02.16</u>	Ongoing Compliance: On site I provider reviews, including the experience of individuals residing in the setting, conducted for each setting in accordance with OAC rules.	July 1, 2017-March 17, 2019	

	<p>ORC 3721.13 affords individuals the right to participate in decisions that affect their life, access to opportunities to achieve their fullest potential, and to manage their personal financial affairs.</p> <p>State standards require individuals to receive services that maximize personal independence.</p> <p>State laws regulating residential care facilities provide for access to the community.</p> <p>The state standards are silent on opportunities to seek employment and work in competitive integrated settings.</p>	<p>Adult Day Health <u>OAC 5160-46-04 (C)</u> <u>OAC 173-39-02.1</u></p> <p>Modify the ongoing provider oversight process.</p>	<p>Quality Strategy: Use results from a nationally recognized, statistically valid survey, such as the National Core Indicators-Aging and Disability (NCI-AD) survey to assess system wide trends with waiver participants experience with community integration and access.</p> <p>In collaboration with the State Long Term Care Ombudsman Office, utilize the Resident Satisfaction Survey results, which can be cross-walked to specific setting locations, to assess the individual’s experience with community inclusion.</p>	<p>October 1, 2017- March 17, 2019</p> <p>July 1, 2017 – March 17, 2019.</p>
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<p>The setting is selected by the individual from among setting options including non-disability-specific settings and an option for a private unit in a residential setting. The setting options are identified and documented in the person-centered service plan and are based on the individual's needs, preferences, and, for residential settings, resources available for room and board.</p>	<p>Informed choice of HCBS services rather than institutional services documented for both services, in accordance with the approved waivers. The State regulation, policy or other standards are silent. The State's determination was the result of the assessment methodology outlined on pages 17-20.</p> <p>Assisted Living</p> <p>Service Specification <u>OAC 173-39-02.16</u></p> <p>Room and Board obligation documented in the care plan.</p> <p>Adult Day Health</p> <p>N/A</p>	<p>Adopt and implement an overarching HCBS Waiver Administration rule that details the CMS HCBS settings characteristics required.</p> <p>OAC 5160-44-01 (B)(2),(2)(a) ensure the individual is able to select a setting from among options that include non-disability specific settings and a private unit in a residential setting.</p> <p><u>http://www.registerofohio.state.oh.us/pdfs/5160/0/44/5160-44-01_PH_OF_N_RU_20160415_1352.pdf</u></p> <p>OAC 5160-44-02 (B)(1)(a) and(i) also ensure the individual's ability to choose a setting that is integrated in and supports full access to the community.</p> <p><u>http://www.registerofohio.state.oh.us/pdfs/5160/0/44/5160-44-02_PH_OF_N_RU_20160415_1352.pdf</u></p>	<p>Rule Process: Utilize rule development and filing processes that includes individuals, advocates, and providers.</p> <hr/> <p>Training: Modify provider and case management operational manuals and applicable forms as needed.</p> <p>Issue guidance to impacted providers and case management entities.</p> <hr/> <p>Ongoing Compliance: On site provider reviews, including the experience of individuals residing in the setting, conducted for each setting in accordance with OAC rules.</p> <hr/> <p>Quality Strategy: Use results from a nationally recognized, statistically valid survey, such as the National Core Indicators-Aging and Disability (NCI-AD) survey to assess system wide trends with waiver participants experience with community integration and access.</p> <p>In collaboration with the State Long Term Care Ombudsman Office, utilize the Resident Satisfaction Survey results, which can be cross-walked to specific setting locations, to assess the</p>	<p>July 1, 2015-July 1, 2016</p> <p>January 1, 2016-June 30, 2016</p> <p>July 1, 2017-March 17, 2019</p> <p>October 1, 2017-March 17, 2019</p> <p>July 1, 2017 – March 17, 2019.</p>
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			individual's experience with community inclusion.	
<p>An individual's essential personal rights of privacy, dignity, respect, and freedom from coercion and restraint are protected.</p>	<p>The State regulation, policy or other standards are partially compliant. The State's determination was the result of the assessment methodology outlined on pages 17-20.</p> <p>Assisted Living</p> <p>Residents' Rights <u>ORC 3721.10</u></p> <p>Resident Agreement <u>OAC 3701-17-57</u></p>	<p>Adopt and implement an overarching HCBS Waiver Administration rule that details the CMS HCBS settings characteristics required.</p> <p>OAC 5160-44-01 (B)(3) requires the setting to ensure an individual's right to privacy.</p> <p><u>http://www.registerofohio.state.oh.us/pdfs/5160/0/44/5160-44-01 PH OF N RU 20160415 1352.pdf</u></p>	<p>Rule Process: Utilize rule development and filing processes which include individuals, advocates, and providers.</p> <hr/> <p>Training: Modify provider and case management operational manuals and applicable forms as needed.</p> <hr/> <p>Issue guidance to impacted providers and case management entities.</p> <hr/>	<p>July 1, 2015-July 1, 2016</p> <p>January 1, 2016-June 30, 2016</p>

	<p>Adult Day Health</p> <p>Consumer Choice and Control <u>OAC 5160-45-03</u> <u>OAC 5160-58-03.2</u> <u>OAC 173-42-06</u></p> <p>PASSPORT Bill of Rights (provided to the individual upon waiver enrollment and available to the public upon request)</p> <p>OHCW/TCOW Consumer Handbook http://medicaid.ohio.gov/Portals/0/For%20Ohioans/Programs/HCBS/WaiverHandbook2015(002).pdf</p> <p>ORC 3721.13 addresses essential personal rights of dignity, respect, and freedom from coercion and restraint.</p> <p>State regulations for residential care facility permit the use of a risk agreements.</p> <p>State standards require individuals to be treated with respect and dignity and protected from abuse, neglect, exploitation, or other threats to health, safety, or well-being.</p>	<p>Consumer Handbook will be updated to reflect the requirements set forth in OAC rules 5160-44-01 and 5160-44-02</p>	<p>Ongoing Compliance: On site provider reviews, including the experience of individuals residing in the setting, conducted for each setting in accordance with OAC rules.</p> <hr/> <p>Quality Strategy: Use results from a nationally recognized, statistically valid survey, such as the National Core Indicators-Aging and Disability (NCI-AD) survey to assess system wide trends with waiver participants experience with community integration and access.</p> <p>In collaboration with the State Long Term Care Ombudsman Office, utilize the Resident Satisfaction Survey results, which can be cross-walked to specific setting locations, to assess the individual’s experience with community inclusion.</p>	<p>July 1, 2017- March 17, 2019</p> <p>October 1,2017- March 17/2019</p> <p>July 1, 2017 – March 17, 2019.</p>
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<p>Optimizes, but does not regiment individual initiative, autonomy, and independence in making life choices. This includes, but not limited to, daily activities, physical environment, and with whom to interact.</p>	<p>The State regulation, policy or other standards are partially compliant. The State’s determination was the result of the assessment methodology outlined on pages 17-20.</p> <p>Assisted Living Service</p> <p>Residents’ Rights <u>ORC 3721.13</u></p> <p>Resident Agreement <u>OAC 3701-17-57</u></p> <p>Service Specification <u>OAC 173-39-02.16 (A)</u></p> <p>Adult Day Health Service</p> <p>Consumer choice and Control <u>OAC 5160-45-03</u> <u>OAC 5160-58-03.2</u> <u>OAC 173-42-06</u></p> <p>ORC 3721.13 gives individuals the right to participate in decisions that affect the individual's life.</p> <p>State regulations establish individuals have choice and control over the arrangement and provision of home and community-based waiver services, and the selection and control over</p>	<p>Adopt and implement an overarching HCBS Waiver Administration rule that details the CMS HCBS settings characteristics required.</p> <p>OAC 5160-44-01 (B)(4) ensures the setting supports individual initiative, autonomy and independence..</p> <p><u>http://www.registerofohio.state.oh.us/pdfs/5160/0/44/5160-44-01 PH OF N RU 20160415 1352.pdf</u></p>	<p>Rule Process: Utilize rule development and filing processes which includes individuals, advocates, and providers.</p> <hr/> <p>Training: Modify Provider and case management operational manuals and applicable forms as needed.</p> <p>Issue guidance to impacted providers and case management entities.</p> <hr/> <p>Ongoing Compliance: On site provider reviews, including the experience of individuals residing in the setting, conducted for each setting in accordance with OAC rules.</p> <hr/> <p>Quality Strategy: Use results from a nationally recognized, statistically valid survey, such as the National Core Indicators-Aging and Disability (NCI-AD) survey to assess system wide trends with waiver participants experience with community integration and access.</p> <p>In collaboration with the State Long Term Care Ombudsman Office, utilize the Resident Satisfaction Survey results, which can be cross-walked to specific setting locations, to assess the</p>	<p>July 1, 2015-July 1, 2016</p> <p>January 1, 2016-June 30, 2016</p> <p>July 1, 2017- March 17, 2019</p> <p>October 1, 2017- March 17, 2019</p> <p>July 1, 2017 – March 17, 2019.</p>
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	<p>the direction of approved waiver service providers.</p> <p>State regulations for residential care facility permit the use of a risk agreements.</p>		<p>individual's experience with community inclusion.</p>	
<p>Individual choice regarding services and supports, and who provides them, is facilitated.</p>	<p>The State regulation, policy or other standards are partially compliant. The State's determination was the result of the assessment methodology outlined on pages 17-20.</p> <p>Assisted Living Service</p> <p>Residents' Rights <u>ORC 3721.13</u></p> <p>Service Specifications <u>OAC 173-39-02.16</u> <u>OAC 3701-17-57</u> <u>OAC 5160-58-03</u></p> <p>Adult Day Health Service</p> <p>Consumer Choice and Control <u>OAC 5160-45-03</u> <u>OAC 5160-58-03.2</u> <u>OAC 173-42-06</u></p> <p>ORC 3721.13 gives individuals the right to participate in decisions that affect the individual's life.</p>	<p>Adopt and implement an overarching HCBS Waiver Administration rule that details the CMS HCBS settings characteristics required.</p> <p>OAC 5160-44-01 (B)(5) ensures the individual can choose amongst service providers.</p> <p><u>http://www.registerofohio.state.oh.us/pdfs/5160/0/44/5160-44-01 PH OF N RU 20160415 135 2.pdf</u></p>	<p>Rule Process: Utilize rule development and filing processes which includes individuals, advocates, and providers.</p> <hr/> <p>Training: Modify provider and case management operational manuals and applicable forms as needed.</p> <p>Issue guidance to impacted providers and case management entities.</p> <hr/> <p>Ongoing Compliance: On site provider reviews, including the experience of individuals residing in the setting, conducted for each setting in accordance with OAC rules.</p> <hr/> <p>Quality Strategy: Use results from a nationally recognized, statistically valid survey, such as the National Core Indicators-Aging and Disability (NCI-AD) survey to</p>	<p>July 1, 2015-July 1, 2016</p> <p>January 1, 2016-June 30, 2016</p> <p>July 1, 2017-March 17, 2019</p> <p>October 1, 2017-March 17, 2019</p>

	<p>State regulations establish individuals have choice and control over the arrangement and provision of home and community-based waiver services, and the selection and control over the direction of approved waiver service providers.</p> <p>State regulations for residential care facility permit the use of a risk agreements.</p>		<p>assess system wide trends with waiver participants experience with community integration and access.</p> <p>In collaboration with the State Long Term Care Ombudsman Office, utilize the Resident Satisfaction Survey results, which can be cross-walked to specific setting locations, to assess the individual’s experience with community inclusion.</p>	<p>July 1, 2017 – March 17, 2019.</p>
<p>Provider owned or controlled residential settings: The unit or dwelling is a specific physical place that can be owned, rented, or occupied under a legally enforceable agreement by the individual receiving services, and the individual has, at a minimum, the same responsibilities and protections from eviction that tenants have under the landlord/tenant law of the State, county, city, or other designated entity. For settings in which landlord tenant laws do not apply, the State must ensure that a lease, residency agreement or other form of written agreement will be in place for each HCBS participant, and that that the document provides protections that address eviction processes and appeals comparable to those provided</p>	<p>The State regulations, policy or other standards are partially compliant. The State’s determination was the result of the assessment methodology outlined on pages 17-20.</p> <p>Assisted Living</p> <p>Transfer and Discharge Rights <u>ORC 3721.16</u></p> <p>Residents’ Rights <u>ORC 3721.13(A)(30)</u></p> <p>Resident Agreement <u>OAC 3701-17-57</u></p> <p>Service Provision <u>OAC 173-39-02 (E)</u></p> <p>Adult Day Health N/A</p>	<p>Adopt and implement an overarching HCBS Waiver Administration rule that details the CMS HCBS settings characteristics required.</p> <p>OAC 5160-44-01 (C)(1) requires the use of a legally enforceable agreement.</p> <p>OAC 5160-44-01 (C)(1)(b) ensures that the individual has a lease, residency agreement or other form of written agreement documents protections that addresses eviction processes and appeals comparable to those provided under Ohio Law..</p> <p>OAC 5160-44-01(C)(2)(b) ensures the individuals choice roommate.</p>	<p>Rule Process: Utilize rule development and filing processes which includes individuals, advocates, and providers.</p> <hr/> <p>Training: Modify Provider and case management operational manuals and applicable forms as needed.</p> <p>Issue guidance to impacted providers and case management entities.</p> <hr/> <p>Ongoing Compliance: On site provider reviews, including the experience of individuals residing in the setting, conducted for each setting in accordance with OAC rules.</p> <hr/> <p>Quality Strategy: Use results from a nationally recognized, statistically valid survey, such as</p>	<p>July 1, 2015-July 1, 2016</p> <p>January 1, 2016-June 30, 2016</p> <p>July 1, 2017-March 17, 2019</p>

<p>under the jurisdiction's landlord tenant law.</p>	<p>ORC 3721.16 specifies the circumstances under which an individual's residency may be terminated and the appeal procedures.</p> <p>State regulations for a residential facility require a written resident agreement with the individual prior to the beginning of residency in the setting.</p> <p>The State standards do not specifically require the protections that address eviction and appeals to be comparable to the jurisdiction's landlord tenant law.</p>	<p>http://www.registerofohio.state.oh.us/pdfs/5160/0/44/5160-44-01 PH OF N RU 20160415 135 2.pdf</p>	<p>the National Core Indicators-Aging and Disability (NCI-AD) survey to assess system wide trends with waiver participants experience with community integration and access.</p> <p>In collaboration with the State Long Term Care Ombudsman Office, utilize the Resident Satisfaction Survey results, which can be cross-walked to specific setting locations, to assess the individual's experience with community inclusion.</p>	<p>October 1,2017- March 17/2019</p> <p>July 1, 2017 – March 17, 2019.</p>
<p>Provider owned or controlled residential settings: Each individual has privacy in their sleeping or living unit: Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors.</p>	<p>The State regulations, policy or other standards are partially compliant. The State's determination was the result of the assessment methodology outlined on pages 17-20.</p> <p>Assisted Living</p> <p>Residents' rights ORC 3721.13</p> <p>Space Requirements OAC 3701-17-64,</p> <p>Living Unit Characteristics OAC 173-39-02.16 (B)(2)</p> <p>Adult Day Health</p>	<p>Adopt and implement an overarching HCBS Waiver Administration rule that details the CMS HCBS settings characteristics required.</p> <p>OAC 5160-44-01 (C)(2) ensures the individual has privacy in his or her living unit, including lockable doors.</p> <p>http://www.registerofohio.state.oh.us/pdfs/5160/0/44/5160-44-01 PH OF N RU 20160415 135 2.pdf</p>	<p>Rule Process: Utilize rule development and filing processes which includes individuals, advocates, and providers.</p> <p>Training: Modify Provider and case management operational manuals and applicable forms as needed.</p> <p>Issue guidance to impacted providers and case management entities.</p> <p>Ongoing Compliance: On site provider reviews, including the experience of individuals residing in the setting, conducted for each setting in accordance with OAC rules.</p>	<p>July 1, 2015-July 1, 2016</p> <p>January 1, 2016-June 30, 2016</p> <p>July 1, 2017- March 17, 2019</p>

	<p>N/A</p> <p>ORC 3721.13 allows doors to be closed, upon reasonable request.</p> <p>State regulations for residential care facilities prescribe the space requirements but does not address lockable doors.</p> <p>State standards for the waiver require lockable doors.</p>		<hr/> <p>Quality Strategy: Use results from a nationally recognized, statistically valid survey, such as the National Core Indicators-Aging and Disability (NCI-AD) survey to assess system wide trends with waiver participants experience with community integration and access.</p> <p>In collaboration with the State Long Term Care Ombudsman Office, utilize the Resident Satisfaction Survey results, which can be cross-walked to specific setting locations, to assess the individual's experience with community inclusion.</p>	<p>October 1, 2017- March 17, 2019</p> <p>July 1, 2017 – March 17, 2019.</p>
<p>Provided owned or controlled settings: Individuals sharing units have a choice of roommates in that setting.</p>	<p>The State regulations, policy or other standards are partially compliant. The State's determination was the result of the assessment methodology outlined on pages 17-20.</p> <p>Assisted Living Residents' Rights <u>ORC 3721.13</u></p> <p>Living Unit Characteristics <u>OAC 173-39-02.16 (B)(2)</u></p> <p>Adult Day Health N/A</p>	<p>Adopt and implement an overarching HCBS Waiver Administration rule that details the CMS HCBS settings characteristics required.</p> <p>OAC 5160-44-01 (C)(2)(b) ensures the individual is able to have a choice of roommates.</p> <p><u>http://www.registerofohio.state.oh.us/pdfs/5160/0/44/5160-44-01_PH_OF_N_RU_20160415_1352.pdf</u></p>	<p>Rule Process: Utilize rule development and filing processes which includes individuals, advocates, and providers.</p> <hr/> <p>Training: Modify Provider and case management operational manuals and applicable forms as needed.</p> <p>Issue guidance to impacted providers and case management entities.</p> <hr/> <p>Ongoing Compliance: On site provider reviews, including the experience of individuals residing in the setting, conducted for each</p>	<p>July 1, 2015-July 1, 2016</p> <p>January 1, 2016-June 30, 2016</p> <p>July 1, 2017- March 17, 2019</p>

	<p>ORC 3721.13 requires the individual be given reasonable notice before a roommate change.</p> <p>State standards for the waiver require an individual have an existing relationship with someone in order to share a living unit.</p>		<p>setting in accordance with OAC rules.</p> <hr/> <p>Quality Strategy: Use results from a nationally recognized, statistically valid survey, such as the National Core Indicators-Aging and Disability (NCI-AD) survey to assess system wide trends with waiver participants experience with community integration and access.</p> <p>In collaboration with the State Long Term Care Ombudsman Office, utilize the Resident Satisfaction Survey results, which can be cross-walked to specific setting locations, to assess the individual's experience with community inclusion.</p>	<p>October 1,2017- March 17/2019</p> <p>July 1, 2017 – March 17, 2019.</p>
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<p>Provider owned or controlled residential settings: Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.</p>	<p>The State regulations, policy or other standards are partially compliant. The state’s determination was the result of the assessment methodology outlined on pages 17-20.</p> <p>Assisted Living Supplies <u>OAC 3701-17-65 (C)</u></p> <p>Community Transition Service <u>OAC 173-39-02.17</u></p> <p>Adult Day Health N/A</p> <p>The State standards provide methods for the individual to obtain items to furnish their sleeping or living unit.</p> <p>The State standards do not specifically state the individual has the freedom to furnish and decorate their sleeping or living unit.</p>	<p>Adopt and implement an overarching HCBS Waiver Administration rule that details the CMS HCBS settings characteristics required.</p> <p>OAC 5160-44-01 (C)(3) ensures the individual is able to furnish or decorate their living unit within the lease or other agreement.</p> <p><u>http://www.registerofohio.state.oh.us/pdfs/5160/0/44/5160-44-01 PH OF N RU 20160415 1352.pdf</u></p>	<p>Rule Process: Utilize rule development and filing processes which includes individuals, advocates, and providers.</p> <hr/> <p>Training: Modify Provider and case management operational manuals and applicable forms as needed.</p> <p>Issue guidance to impacted providers and case management entities.</p> <hr/> <p>Ongoing Compliance: On site provider reviews, including the experience of individuals residing in the setting, conducted for each setting in accordance with OAC rules.</p> <hr/> <p>Quality Strategy: Use results from a nationally recognized, statistically valid survey, such as the National Core Indicators-Aging and Disability (NCI-AD) survey to assess system wide trends with waiver participants experience with community integration and access.</p> <p>In collaboration with the State Long Term Care Ombudsman Office, utilize the Resident Satisfaction Survey results, which can be cross-walked to specific setting locations, to assess the</p>	<p>July 1, 2015-July 1, 2016</p> <p>January 1, 2016-June 30, 2016</p> <p>July 1, 2017- March 17, 2019</p> <p>October 1,2017- March 17, 2019</p> <p>July 1, 2017 – March 17, 2019.</p>
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			individual's experience with community inclusion.	
<p>Provider owned or controlled residential settings: Individuals have the freedom and support to control their own schedules and activities, and have access to food at any time.</p>	<p>The State regulations, policy or other standards are partially compliant. The State's determination was the result of the assessment methodology outlined on pages 17-20.</p> <p>Assisted Living service</p> <p>Residents' Rights <u>ORC 3721.13</u></p> <p>Service Specifications <u>OAC 173-39-02.16</u> <u>OAC 3701-17-57</u> <u>OAC 5160-46-04 (C)</u> <u>OAC 173-39-02.1</u></p> <p>Dietary Services <u>OAC 3701-17-60</u></p> <p>Adult Day Health Service</p> <p>Consumer Choice and Control</p>	<p>Adopt and implement an overarching HCBS Waiver Administration rule that details the CMS HCBS settings characteristics required.</p> <p>Non-Residential Provider Owned/Controlled Settings</p> <p>OAC 5160-44-01 (B)(4) ensures the individual is able to exercise independence in making life choices including but not limited to daily activities.</p> <p>Residential Provider Owned/Controlled Settings</p> <p>OAC 5160-44-01 (C)(4) ensures the individual is able to control their own schedule and have access to food at any time.</p> <p><u>http://www.registerofohio.state.oh.us/pdfs/5160/0/44/5160-44-</u></p>	<p>Rule Process: Utilize rule development and filing processes that includes individuals, advocates, and providers.</p> <hr/> <p>Training: Modify provider and case management operational manuals and applicable forms as needed.</p> <p>Issue guidance to impacted providers and case management entities.</p> <hr/> <p>Ongoing Compliance: On-site provider reviews, including the experience of individuals residing in the setting, conducted for each setting in accordance with OAC rules.</p> <hr/>	<p>July 1, 2015-July 1, 2016</p> <p>January 1, 2016-June 30, 2016</p> <p>July 1, 2017-March 17, 2019</p>

	<p><u>OAC 5160-45-03</u> <u>OAC 5160-58-03.2</u> <u>OAC 173-42-06</u></p> <p>ORC 3721.13 gives individuals the right to participate in decisions that affect the individual's life.</p> <p>State regulations establish individuals have choice and control over the arrangement and provision of home and community-based waiver services, and the selection and control over the direction of approved waiver service providers.</p> <p>State regulations for residential care facility permit the use of a risk agreements.</p> <p>State regulations for residential care facilities describe the options for dietary services and require the setting to specify in policy the amount and type of meal services furnished.</p> <p>State regulation for the assisted living waiver service requires the coordination of three meals a day and snacks.</p> <p>State regulations for the adult day health service require the provision of no more than 2 meals a day and snacks.</p>	<p><u>01 PH OF N RU 20160415 135 2.pdf</u></p>	<p>Quality Strategy: Use results from a nationally recognized, statistically valid survey, such as the National Core Indicators-Aging and Disability (NCI-AD survey, to assess system wide trends with waiver participants experience with community integration and access.</p> <p>In collaboration with the State Long Term Care Ombudsman Office, utilize the Resident Satisfaction Survey results, which can be cross walked to specific setting locations, to assess the individual's experience with community inclusion.</p>	<p>October 1,2017- March 17/2019</p> <p>July 1, 2017 – March 17, 2019.</p>
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	The state regulations do not specifically state the individual has access to food at any time.			
Individuals are able to have visitors of their choosing at any time.	<p>The State regulation, policy, and other standards are partially compliant. The State’s determination was the result of the assessment methodology outlined on pages 17-20.</p> <p>Assisted Living</p> <p>Residents’ rights <u>ORC 3721.13</u></p> <p>Service Specifications <u>OAC 173-39-02.16</u></p> <p>ORC 3721.13 affords the right to private visits at any reasonable hour.</p> <p>The State standards do not specifically support an individual's ability to have visitors of their choosing at any time.</p> <p>Adult Day Health Service</p> <p>The State regulation, policy, and other standards applicable to adult day health are silent.</p>	<p>Adopt and implement an overarching HCBS Waiver Administration rule that details the CMS HCBS settings characteristics.</p> <p>Residential Provider Owned/Controlled Settings.</p> <p>OAC 5160-44-01 (C)(5) ensures the individual is able to have visitors of their choosing at any time.</p> <p>Non-Residential Provider Owned/Controlled Settings</p> <p>OAC 5160-44-01 (B)(4) ensures the individual is able to exercise independence in making life choices including daily activities and with whom to interact.</p> <p>http://www.registerofohio.state.oh.us/pdfs/5160/0/44/5160-44-01_PH_OF_N_RU_20160415_1352.pdf</p>	<p>Rule Process: Utilize rule development and filing processes which includes individuals, advocates, and providers.</p> <hr/> <p>Training: Modify Provider and case management operational manuals and applicable forms as needed.</p> <p>Issue guidance to impacted providers and case management entities.</p> <hr/> <p>Ongoing Compliance: On-site provider reviews, including the experience of individuals residing in the setting, in accordance with OAC rules.</p> <hr/> <p>Quality Strategy: Use results from a nationally recognized, statistically valid survey, such as the National Core Indicators-Aging and Disability (NCI-AD survey, to assess system-wide trends with waiver participants experience with community integration and access.</p>	<p>July 1, 2015-July 1, 2016</p> <p>January 1, 2016-June 30, 2016</p> <p>July 1, 2017-March 17, 2019</p> <p>October 1, 2017-March 17, 2019</p>

			In collaboration with the State Long Term Care Ombudsman Office, utilize the Resident Satisfaction Survey results, which can be cross-walked to specific setting locations, to assess the individual's experience with community inclusion.	July 1, 2017 – March 17, 2019.
The setting is physically accessible to the individual.	<p>The State regulations, policy or other standards are partially compliant. The State's determination was the result of the assessment methodology outlined on pages 17-20.</p> <p>Assisted Living</p> <p>Conditions of Participation OAC <u>173-39-02</u></p> <p>Adult Day Health</p> <p>Conditions of Participation OAC <u>173-39-02</u> OAC <u>5160-46-04</u> OAC <u>5160-45-10</u></p>	<p>Adopt and implement an overarching HCBS Waiver Administration rule that details the CMS HCBS settings characteristics required.</p> <p>OAC 5160-44-01 (C)(6) requires the setting is physically accessible to the individual.</p> <p><u>http://www.registerofohio.state.oh.us/pdfs/5160/0/44/5160-44-01_PH_OF_N_RU_20160415_135_2.pdf</u></p>	<p>Rule Process: Utilize rule development and filing processes which includes individuals, advocates, and providers.</p> <p>Training: Modify Provider and case management operational manuals and applicable forms as needed.</p> <p>Issue guidance to impacted providers and case management entities.</p> <p>Ongoing Compliance: On site provider reviews, including the experience of individuals residing in the setting, conducted for each setting in accordance with OAC rules.</p>	<p>July 1, 2015-July 1, 2016</p> <p>January 1, 2016-June 30, 2016</p> <p>July 1, 2017-March 17, 2019</p>

	<p>Conditions of participation rules require providers to comply with all federal, state, and local laws.</p> <p>The State standards do not specifically require the setting to be physically accessible.</p>		<hr/> <p>Quality Strategy: Use results from a nationally recognized, statistically valid survey, such as the National Core Indicators-Aging and Disability (NCI-AD) survey to assess system wide trends with waiver participants experience with community integration and access.</p> <p>In collaboration with the State Long Term Care Ombudsman Office, utilize the Resident Satisfaction Survey results, which can be cross-walked to specific setting locations, to assess the individual’s experience with community inclusion.</p>	<p>October 1, 2017- March 17/2019</p> <p>July 1, 2017 – March 17, 2019.</p>
<p>Locations that have qualities of institutional settings, as determined by the Secretary. Any setting that is located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment, or in a building on the grounds of, or immediately adjacent to, a public institution.</p>	<p>The State regulations, policy, or other standards are silent.</p>	<p>Adopt and implement an overarching HCBS Waiver Administration rule that details the CMS HCBS settings characteristics required for all provider controlled settings.</p> <p>OAC 5160-44-01 (A)(2) identifies the locations that are not home- and community based settings.</p> <p>http://www.registerofohio.state.oh.us/pdfs/5160/0/44/5160-44-01_PH_OF_N_RU_20160415_1352.pdf</p>	<p>Rule Process: Utilize rule development and filing processes which includes individuals, advocates, and providers.</p> <hr/> <p>Training: Modify Provider and case management operational manuals and applicable forms as needed.</p> <p>Issue guidance to impacted providers and case management entities.</p> <hr/> <p>Ongoing Compliance: On site provider reviews, including the experience of individuals residing in the setting, conducted for each</p>	<p>July 1, 2015-July 1, 2016</p> <p>January 1, 2016-June 30, 2016</p> <p>July 1, 2017-</p>

			<p>setting in accordance with OAC rules.</p> <hr/> <p>Quality Strategy: Use results from a nationally recognized, statistically valid survey, such as the National Core Indicators-Aging and Disability (NCI-AD) survey to assess system wide trends with waiver participants experience with community integration and access.</p> <p>In collaboration with the State Long Term Care Ombudsman Office, utilize the Resident Satisfaction Survey results, which can be cross-walked to specific setting locations, to assess the individual's experience with community inclusion.</p>	<p>March 17, 2019</p> <p>October 1, 2017- March 17, 2019</p> <p>July 1, 2017 – March 17, 2019.</p>
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<p>Home and community-based settings do not include the following: a nursing facility; institution for mental diseases; an intermediate care facility for individuals with intellectual disabilities; a hospital.</p>	<p>The State regulation, policy, or other standards are silent.</p>	<p>Adopt and implement an overarching HCBS Waiver Administration rule that details the CMS HCBS settings characteristics required for all provider controlled settings.</p> <p>OAC 5160-44-01 (A) (2) identifies the locations that are not home- and community based settings.</p> <p>http://www.registerofohio.state.oh.us/pdfs/5160/0/44/5160-44-01 PH OF N RU 20160415 135 2.pdf</p>	<p>Rule Process: Utilize rule development and filing processes which includes individuals, advocates, and providers.</p> <hr/> <p>Training: Modify provider and case management operational manuals and applicable forms as needed.</p> <p>Issue guidance to impacted providers and case management entities.</p> <hr/> <p>Ongoing Compliance: On site provider reviews, including the experience of individuals residing in the setting, conducted for each setting in accordance with OAC rules.</p> <hr/> <p>Quality Strategy: Use results from a nationally recognized, statistically valid survey, such as the National Core Indicators-Aging and Disability (NCI-AD) survey to assess system wide trends with</p>	<p>July 1, 2015-July 1, 2016</p> <p>January 1, 2016-June 30, 2016</p> <p>July 1, 2017-March 17, 2019</p> <p>October 1, 2017-March 17, 2019</p>

			<p>waiver participants experience with community integration and access.</p> <p>In collaboration with the State Long Term Care Ombudsman Office, utilize the Resident Satisfaction Survey results, which can be cross-walked to specific setting locations, to assess the individual's experience with community inclusion.</p>	<p>July 1, 2017 – March 17, 2019.</p>
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