**OHIO DEPARTMENT OF DEVELOPMENTAL DISABILITIES**

**HCBS RESIDENTIAL SETTING SURVEY TOOL INSTRUCTIONS**

**Background**

The Centers for Medicaid and Medicare Services (CMS) recently announced a requirement for states to review and evaluate current home and community based service (HCBS) settings, including residential and nonresidential settings, and to demonstrate how their waivers meet the new federal HCBS settings requirements that became effective on March 17, 2014. The federal regulation citation for these requirements is 42 CFR 441.301(c)(4). CMS posted additional guidance to help states assess the extent to which settings meet the new requirements and address areas that may not fully meet the criteria. More information about these requirements can be found on the CMS website at [www.medicaid.gov](http://www.medicaid.gov).

**Overview**

In a report to CMS under the new requirements, Ohio must include:

* A plan for assessing the HCBS settings, including a summary of comments received during a required 30-day public comment period;
* An inventory and description of all HCBS service settings by size, type, location, and service delivery characteristics;
* A summary of how each setting meets or does not meet the federal HCBS settings requirements;
* A list of any areas that need to be addressed;
* A transition plan and process for bringing all HCBS settings into conformance with the new rules; and
* A plan detailing the state’s specified transition timeline for ensuring the health and safety of participants who reside in locations that need to meet the HCBS settings criteria to be appropriate locations for the delivery of HCBS.

**Assessment Plan**

The Department of Developmental Disabilities (“DODD”) has been working with the Department of Medicaid, county boards, providers, individuals, and other stakeholders involved in the waiver programs administered by DODD, to determine the mechanisms used to assess our current adherence to HCBS setting regulations. One result of that effort is the development of the HCBS Residential Setting Survey Tool.

**HCBS Residential Setting Survey Tool**

The purpose of the HCBS Residential Setting Survey Tool is to allow providers the opportunity to self-identify the extent to which all settings in which HCBS services are provided incorporate the CMS requirements. **The survey tool must be completed no later than close of business** **Thursday,** **September 25, 2014**. The tool is to be completed by agency providers operating congregate settings, both licensed and unlicensed. The survey must be completed **separately** for **each** residential setting location. It can be accessed online by following this link: <https://www.surveymonkey.com/s/DODD-HCBS-Residential-Settings-Survey>

Providers are to complete the *Yes* or *No* response for each item as indicated. In some instances, a third choice is available to indicate that the setting meets the requirements specified, except for individuals who have restrictions identified in their plan that have been approved in accordance with administrative rules governing such restrictions.

In addition to responding to the Yes or No questions, a brief narrative explanation is required to support those *Yes/No* responses for the items in the survey. Providers will need to provide an estimate of the setting’s ability to meet the HCBS Settings criteria, along with the timeline anticipated to do so. The Improvement Strategy section at the end of the survey will need to be completed when any of the entries above indicate something other than meeting the HCBS criteria as defined by CMS.

**For Further Information Contact:**

For questions in connection with completion of the survey tool, please contact DODD at the following email address: [ResidentialSurvey@dodd.ohio.gov](mailto:ResidentialSurvey@dodd.ohio.gov)

**Ohio Department of Developmental Disabilities**

**Division of Medicaid Development and Administration**

**September, 2014**