

## Historical Appendix 2h (formerly Appendix O) – Provider Notice 12/31/2015

HFS ► Medical Providers ►

### Provider Notice issued 12/31/15

#### Revised Statewide Transition Plan for Home and Community-Based Settings

To: Supportive Living Providers (SLP)

Date: December 31, 2015

Re: Revised Statewide Transition Plan for Home and Community-Based Settings

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In March 2015, the Illinois Department of Healthcare and Family Services (HFS) published a draft Statewide Transition Plan (STP) for the State's compliance with the Centers for Medicaid and Medicare Services (CMS) Home and Community-Based Services (HCBS) Rule 42 CFR 441.301(c)(iii). This [rule](#) requires that all federally approved 1915(c) waiver settings meet new federal requirements defining home and community-based settings.

The Department has completed a revised STP after receiving feedback from CMS and the initial public comment period. A summary of changes accompanies this notice. The revised STP is available for public review and comment for a period of 30 days beginning on December 4, 2015. Although the public comment period will end on January 3, 2016, the Department will continue to accept comments through January 18, 2016. Providers are encouraged to share this information with their residents, representatives, and other interested parties. The next submittal of the transition plan to CMS is scheduled for March 2016.

The [revised Statewide Transition Plan \(pdf\)](#) is accessible through the HFS website. Comments may be submitted online [HFS.SWTransitionPlan@illinois.gov](mailto:HFS.SWTransitionPlan@illinois.gov) or written comments may be mailed to:

The Illinois Department of Healthcare and Family Services

Attn: Waiver Management

201 South Grand Ave East, FL 2

Springfield, IL 62763

Persons who are unable to access the Internet may request a hard copy of the revised draft plan by calling HFS at (217) 524-4148.

Felicia F. Norwood

Director

#### Provider Category Distribution:

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| 2015 | 12/31/2015 | <a href="#">prn151231a</a> | Revised Statewide Transition Plan for Home and Community-Based Settings | Supportive Living; All Medical Assistance Providers; Ambulatory Surgical Treatment Centers; All Kids Application Agents Instructions & Alerts; Audiologists; Chiropractors; Community Mental Health Providers; Dentists; Department of Alcohol and Substance Abuse Provider; Durable Medical Equipment Suppliers; Early Intervention Services; Encounter Rate Clinics; Federally Qualified Health Centers; Home Health Agencies; Hospice; Hospitals; Imaging Centers; Laboratory; Local Education Agencies; Local Health Departments; Long Term Care; Nurses; Optometrists; Other Governmental Payors; Pharmacies; Physicians; Podiatrists; Renal Dialysis Clinics; Rural Health Clinics; School Based Health Services; School Based/Linked Health Center Services; Therapists; Transportation Providers; Waiver |
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## ***Continuation of Provider Notice – 12/31/2015***

### **Summary of Revisions to Illinois' Home- and Community-Based Services Statewide Transition Plan**

On March 16, 2015, the State of Illinois submitted to the Centers for Medicare & Medicaid Services (CMS) its Home and Community-Based Services Statewide Transition Plan (STP) for review, in accordance with the new federal rule regarding home and community based settings. On July 30, 2015, CMS responded, and Illinois updated the STP to address the points CMS made. Illinois is currently soliciting public comments on the second draft of the STP, and will incorporate public comments prior to our next submission to CMS in March 2016.

To provide clarity around the numerous changes that have occurred from the first draft submitted in March 2015 and the second draft currently under public review, the Department of Healthcare and Family Services (HFS) created this summary guide.

- Minor stylistic and typographical changes are interspersed throughout the document, and revised dates appear in the appendices to correct conflicts CMS noted in its letter.
- The first significant update appears at the top of page 5 of the revised STP. This change explains the means by which the State plans to reach 100% site survey responsiveness.
- Page 6 beginning with the paragraph "In addition, settings were asked to identify...", in response to a specific question from CMS, the State has clarified that settings that self-identify as farmsteads, gated or secured communities whose residents may not leave, or other specific types of sites, will be categorized as a Category 3 setting and subjected to heightened scrutiny.
- Page 7 explains the State's use of the five point "Likert Scale" to measure level of resident autonomy in the new first full paragraph.
- Page 8 contains new paragraphs to further explain the process by which the State will conduct onsite survey validation visits.
- Page 13 in the section that discusses system wide compliance and remediation strategies, the State added language to further detail its compliance process for settings found to be out of compliance with the federal rule.
- The last substantive modifications to the plan appear in the Monitoring of Ongoing Compliance section on page 15, which now includes additional details.