

3/31/17

Good Afternoon Alaska Team,

Please find below the bullet points from our discussion, which took place in March 16, 2016:

#### Site-Specific Assessment & Validation

1. Since the state has confirmed that 100% of the provider self-assessments have been completed, please provide a detailed explanation of the strategies that the state will utilize to confirm/validate the self-assessment results. Validation strategies can include but are not limited to on-site visits; beneficiary and family feedback; external stakeholder engagement; and state review of data from operational entities such as managed care organizations or regional boards/entities.
2. The STP, the state describes mandatory training requirement of all HCBS providers around the federal HCBS settings rule by February 2016. Please confirm that all providers completed this process, and if not, what the state's strategy is for addressing non-responders.
3. **Individual, Privately-Owned Homes:** The state asserts that all private homes are "presumed compliant but will be monitored, with remedial actions taken if service providers are found to have a stake in home ownership (such as individually-owned homes providing foster care). The state may make the presumption that privately-owned or rented homes and apartments of people living with family members, friends, or roommates meet the home and community-based settings requirements if they are integrated in typical community neighborhoods where people who do not receive home and community-based services also reside. However, the state must outline what it will do to monitor compliance of this category of settings with the federal home and community-based settings requirements over time. CMS requests that Alaska provide additional details about its strategy for compliance monitoring of these settings. Finally, settings where the beneficiary lives in a private residence owned by an unrelated caregiver (who is paid for providing HCBS services to the individual) are considered provider-owned or controlled settings and should be evaluated as such.

#### Site-Specific Remedial Actions

4. **Please summarize Setting Assessment & Validation Results:** Please clarify how many settings were determined to be in each of the following compliance categories:
  - Fully comply;
  - Do not comply but could with modifications;
  - Cannot comply; and
  - Are presumed to have the qualities of an institution, but for which the state will submit evidence for the application of heightened scrutiny.
5. **Non-Disability Specific Settings:** Please provide more specific details demonstrating how the state assures beneficiary access to non-disability specific settings in the provision of residential and non-residential services. This additional information should include how the state is strategically building capacity across the state to assure non-disability specific options.
6. **Provider Training to Support Compliance & Remediation:** CMS requests that the state provide additional details regarding the correlation between the provider trainings and the state's systemic remediation work.

### Monitoring of Settings

7. Provide more details on the monitoring process the state intends to use to ensure continued compliance of its settings with the federal requirements, including a timeframe for each specific monitoring step listed. Since the state is planning to weave its existing provider certification, case management, and quality assurance processes into its ongoing monitoring and compliance activities around the federal home and community-based settings rule, the state should include the following details:
  - how monitoring around the HCBS settings requirements will be embedded into these existing processes and reviews;
  - the training that will be provided to staff within these existing processes about the HCBS settings requirements; and
  - The steps the state will take to improve quality assurance.

### Heightened Scrutiny

8. There are state examples of heightened scrutiny processes available upon request, as well as several tools and sub-regulatory guidance on this topic available online at <http://www.medicaid.gov/HCBS>.

### Communication with Beneficiaries of Options When a Provider Will Not Be Compliant

9. CMS requests that the state include additional information in the STP about the state's strategies for ensuring that all individuals are able to receive services in a compliant setting of their choice.
  - For those settings that are not able to be brought into compliance, outline a detailed relocation process with timelines, and describe how the state will protect beneficiaries impacted by a setting's inability to provide services to those beneficiaries in the future.
  - Provide more detail about the steps the state will take to transition beneficiaries to compliant settings, and who will be responsible for executing each step of the process.

Should you have any further questions, please do not hesitate to contact Michelle MacKenzie of our team.

Thank you,

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