

Georgia Home and Community Based Services (HCBS) Transition Plan -- Elderly and Disabled (E&D) Waiver

Section 1. Identification						
<i>Action Item</i>	<i>Description</i>	<i>Start Date</i>	<i>End Date</i>	<i>Sources</i>	<i>Key Stakeholders</i>	<i>Intervention/ Outcome</i>
Obtain active provider breakdown by site	State identifies HCBS service provider listing by site to include contact information and service by site using category of service	7/1/14	7/15/14	Department of Community Health (DCH) Decision Support Services (DSS) system	Division of Aging Services (DAS), DCH Policy and information technology unit	Consolidated and verified HCBS Setting Inventory unit
Development of provider assessment tools	State develops/selects self-assessment tool for providers to evaluate conformity to and compliance with HCBS rules State develop/selects tool for members to evaluate provider conformity to and compliance with HCBS rules	7/1/14	9/15/14	HCBS guidance, State developed assessment tools (Iowa/Nevada), CMS Guidance, Personal Life Quality Protocol (Center for Outcome Analysis/Conroy)	DCH Policy Unit, DAS, Elderly and Disabled Provider Network, SOURCE Quality Committee, Care Coordination. Medicaid members, consumer and disability advocates, Georgia Council on Aging, G4A, Alzheimer's Association, AARP, LTCO	Assessment tool vetted by key stakeholders
Submit E&D Waiver Amendment	State submits waiver amendment to Centers For Medicare and Medicaid Services (CMS) following public comment period on transition plan	7/1/14	8/15/14	CMS Waiver Document	DCH Policy staff, DAS, Elderly and Disabled Provider Network, SOURCE Quality Committee, Care Coordination	Initial E&D Waiver Amendment
Test and refine Assessment tools	Pilot self-administration of tools to ensure it adequately captures needed elements and is easily and accurately completed by providers and members	9/1/14	9/15/14	HCBS guidance, public input, key stakeholder input	Medicaid members, Elderly and Disabled Provider Network, SOURCE Quality Committee, Care Coordination, consumer and disability advocates, Georgia Council on Aging, G4A, Alzheimer's Association, AARP, LTCO	Assessment tool vetted by key stakeholders

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Other standards identification	Identify and assemble with stakeholder input a comprehensive set of provider standards (credentialing, licensing, policies, training curricula, etc.) to be reviewed and validated to conform to HCBS rule	8/16/14	9/15/14	Key stakeholder input, existing provider standards in policy and regulation	DCH Policy Unit, DCH HFRD, DAS, SOURCE Quality Committee, DCH Provider Enrollment, DAS Provider Enrollment, disability advocates	Provider Standards for enrollment and continued participation
Design electronic tool	Develop electronic version of tool for efficient collection and analysis of data	8/16/14	8/31/14	Contracted DCH IT tool, DCH Policy Unit, DCH IT, DAS IT, and DSS experts	Medicaid members, consumer and disability advocates, Georgia Council on Aging, G4A, Alzheimer's Association, AARP, LTCO	Electronic tool
Incorporation of Assessment tool into Provider enrollment policy and application	State incorporates self-assessment requirement into provider enrollment and policy at DCH and DAS.	9/1/14	10/1/14	HCBS Guidance, Healthcare Facility Regulations, Existing provider enrollment policy at DCH and DAS	DCH Policy Unit, DAS, Elderly and Disabled Provider Network, SOURCE Quality Committee, Care Coordination	Expectations for compliance are clearly outlined in policy
Develop and identify funding resources for tool development, data analysis, transition plan development, engagement and compliance auditing	Funding identified to determine needs related to HCBS compliance	9/1/14	Ongoing	HCBS Guidance, DAS, DCH Policy Unit, DCH DSS Unit, Office of Planning and Budget	DCH Policy Unit, DCH IT, DAS IT, and DSS experts. Medicaid members, consumer and disability advocates, Georgia Council on Aging, G4A, Alzheimer's Association, AARP, LTCO	State will be able to develop a sustainability plan around HCBS compliance

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Section 2. Assessment						
<i>Action Item</i>	<i>Description</i>	<i>Start Date</i>	<i>End Date</i>	<i>Sources</i>	<i>Key Stakeholders</i>	<i>Intervention/ Outcome</i>
Enrolled active HCBS Providers complete self-assessment	Enrolled active HCBS Providers complete self-assessment	9/15/14	10/31/14	Assessment Tool, HCBS Provider Network staff	DCH Policy Unit, DAS, Elderly and Disabled Provider Network, SOURCE Quality Committee, Care Coordination, Provider organizations	100% of HCBS providers complete self-evaluation with DCH GAP analysis
Member and Advocate supplemental assessment of provider compliance	Member and advocates engaged to complete supplemental assessment of provider compliance to HCBS standards	9/1/2014	Ongoing	Assessment Tool, Medicaid members, families	Medicaid members, families, DCH Policy Unit, DAS Elderly and Disabled Provider Network, SOURCE Quality Committee, Care Coordination, advocacy groups	Provide supplemental information for DCH GAP analysis
Other standards Assessment	Assess what changes are required to update provider qualification standards, licensure regulations, enrollment education and provider training, and other related policies, etc. to conform to HCBS rule	10/1/14	12/31/14	Key stakeholder input, existing provider standards	DCH Policy Unit, DCH HFRD, DAS, SOURCE Quality Committee, DCH Provider Enrollment, DAS Provider Enrollment, disability advocates	Updated Provider Standards for enrollment and continued participation incorporating CMS exploratory questions and focusing on development of qualified HCBS providers especially in underserved areas
Self-assessment and supplemental member evaluation data is compiled and analyzed	DCH Policy Unit compiles the self-assessment and supplemental data to determine those HCBS services providers who meet, do not meet, and	11/1/14	12/31/14	Self-assessment tool, Sharepoint	DCH Policy Unit, DAS	Report of findings and augmented Setting inventory to include compliance status

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	could come into compliance with HCBS guidance					
Case management entities validate a representative sample of self-assessments	Care coordination and SOURCE case management agencies validate a state determined percentage of provider self-assessments for validity	11/1/14	11/30/14	Self-assessment tool, SOURCE case managers, Community Care Services Program (CCSP) Care Coordinators	DCH Policy Unit, DAS, SOURCE Case management agencies, CCSP Care Coordinators, Direct Service Providers	Minimum 5% random sampling of assessment data collected to test reliability
Validated self-assessment data is compiled and analyzed	Initial assessment data compared to validation data to determine those HCBS services providers who meet, do not meet, and could come into compliance with HCBS guidance	12/1/14	12/31/14	Self-assessment tool, Sharepoint	DCH Policy Unit, DAS	Report of finding, accuracy, and reliability of tool and outcome data
Assessment Results and Report Presentation	State will assess baseline and variances by provider type and formally present the results of the assessment data to stakeholders and post on relevant websites	12/1/14	12/31/14	Self-assessment tool, Sharepoint, data analysis	DCH Policy Unit, DCH Communications, DAS	Public distribution/ awareness of the state of the state of HCBS setting compliance to include transparent compliance status of providers

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Section 3: Remediation						
<i>Action Item</i>	<i>Description</i>	<i>Start Date</i>	<i>End Date</i>	<i>Sources</i>	<i>Key Stakeholders</i>	<i>Intervention/ Outcome</i>
Comprehensive Transition Plan	Develop a Transition Plan package to include a project management plan and narrative white paper that summarizes the state of the state at the end of the initial assessment period, establishes a plan for comprehensively addressing all components of compliance with HCBS rule and describes the state's related mission and values	7/1/14	12/31/15	Assessment results, key stakeholder input results, waiver document	Medicaid members, Advocacy Groups, DCH Policy Unit, DAS, Elderly and Disabled Provider Network, SOURCE Quality Committee, Care Coordination	Fully developed statewide transition plan to include how the state will align its personal care home regulations with the final rule
Submit Waiver Plan Amendment to CMS	DCH will submit a waiver amendment that outlines remediation strategies for those HCBS providers not in compliance with HCBS regulations	12/1/14	12/31/14	Assessment results, key stakeholder input results, waiver document	DCH Policy Unit, DAS, SOURCE Quality Committee	Waiver amendment with fully developed remediation strategy
Policy Development	State will develop revised policies and procedures to address ongoing monitoring and compliance	1/1/15	3/31/15	DCH and DHS Legal	Medicaid members, Advocacy Groups, DCH Policy Unit, DAS, Elderly and Disabled Provider Network, SOURCE Quality Committee, Care Coordination	Establish adverse action and appeals processes applicable to providers who fail to comply with HCBS rule
Other standards Remediation	Design, adopt, and implement plan for achieving comprehensive compliance of provider	1/1/15	6/30/15	Key stakeholder input, existing provider standards	DCH Policy Unit, DCH HFRD, DAS, SOURCE Quality Committee, DCH Provider	Provider Standards for enrollment and continued

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	standards with HCBS rule (credentialing, licensing, policies, etc.)				Enrollment, DAS Provider Enrollment	participation
Provider Training and Education	Design and implement plan for incorporating necessary training and education into provider enrollment orientation and provider employee training	1/15/15	6/30/15	Key stakeholder input, existing provider standards	DCH Policy Unit, DAS, SOURCE Quality Committee, DCH Provider Enrollment, DAS Provider Enrollment, Provider network, disability advocates	Educate providers on new rule
Ongoing Monitoring of compliance	State will incorporate HCBS requirements into policy and consumer satisfaction surveys to identify areas of non-compliance including the following: who will monitor, responsibility of monitoring, staffing levels required to perform monitoring functions, training required for auditors and monitors, training process for handling concerns and other issues of noncompliance	02/15/15	Ongoing	DCH policy manuals, consumer satisfaction surveys	Medicaid members, advocates, providers, DCH Policy Unit, DCH Program Integrity, DAS	Ongoing Program Integrity and Provider Compliance Audits in compliance with new HCBS rules

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Section 4: Outreach and Engagement						
<i>Action Item</i>	<i>Description</i>	<i>Start Date</i>	<i>End Date</i>	<i>Sources</i>	<i>Key Stakeholders</i>	<i>Intervention/ Outcome</i>
Initial plan developed	Immediate stakeholder input gathered to adjust originally drafted plan	6/23/14	6/30/14	CMS written guidance, CMS TA, DCH	DCH Policy Unit, DAS, SOURCE Quality Committee	Consensus and adoption of initially proposed plan methodology
Public Notice-- Assessment Plan Review	DCH makes public notice through multiple venues to share overarching Transition Plan and proposed method of assessment per HCBS guidance including banner messaging, website posting, and regional Medicaid office postings in conjunction with immediate waiver amendment to incorporate additional slots, rate increases, and quality incentive program	07/3/14	08/3/14	Section 1 of Proposed HCBS Transition Plan	Medicaid members, Advocacy Groups, DCH Policy Unit, DAS, Elderly and Disabled Provider Network, SOURCE Quality Committee, Care Coordination, Provider organizations	Public Notice with transition plan
Public Comment-- Initial Transition Plan	DCH commences collection of public comment through multiple methods and makes appropriate changes to assessment tool and plan. Comments will be taken in person, via fax, email, or website submission	7/3/14	8/3/14	Section 1 of Proposed HCBS Transition Plan	DCH Policy Unit, DCH Communications, DAS	Public notice posted with transition plan
Task Force	Establish a task force and supporting workgroups to inform and advise Statewide Comprehensive Transition	8/17/2014	8/31/2014	DCH Policy Unit, DAS, SOURCE Quality Committee, Medicaid members, Advocacy	DCH Policy Unit, DAS, SOURCE Quality Committee, Medicaid members, Advocacy	Involvement and participation of all stakeholders in planning and

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	Plan planning and implementation			Groups, DCH Policy Unit, DAS, Elderly and Disabled Provider Network, SOURCE Quality Committee, Care Coordination	Groups, DCH Policy Unit, DAS, Elderly and Disabled Provider Network, SOURCE Quality Committee, Care Coordination	implementation
Public Comment--Collection and plan revisions	DCH incorporates appropriate changes to the initial transition plan based on public comments	8/3/14	8/10/14	Section 1 of the Proposed HCBS Transition Plan	DCH Policy Unit, DAS, SOURCE Quality Committee	Completed transition plan
Public Comment--Retention	DCH will safely store public comments and state responses for CMS and the general public	8/15/14	Ongoing	Public Comments and State Response documents	DCH Policy Unit, CMS	Public comments stored
Posting of revisions to initial document	DCH will post the rationale behind any substantive change to the transition plan.	8/10/14	Ongoing	Public Comments and State Response documents	DCH Policy Unit, DCH Communications	Posted rationale
Stakeholder training and education	Design, schedule, and conduct training for individual recipients of waiver services, their families and similarly situated stakeholders on waiver compliance, changes they can expect to see and which will affect their services	9/1/14	4/30/2015	Statewide Transition Plan, Resulting supporting products to transition plan	Medicaid members, Families, Advocates, Providers	Member and other interested parties have an understanding of changes and impacts

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	Design, schedule, and conduct training for providers on waiver compliance, changes they can expect to see in which they will be required to comply; and design, schedule, and conduct training for providers on completion of self-assessment tool					
Public Comment— Ongoing input	DCH will leverage various stakeholders groups to periodically present and seek feedback to comprehensive Transition Plan development in preparation for Waiver Amendment to incorporate comprehensive plan	9/1/14	Ongoing	Public Comments and State Response documents	Medicaid members, Advocacy Groups, DCH Policy Unit, DAS, Elderly and Disabled Provider Network, SOURCE Quality Committee, Care Coordination, Provider organizations	Public comments for incorporation into policy and regulations