



# HCBS Statewide Self-Assessment Combined Q & A

July 24, 2015 - October 16, 2015

Questions/Comments	Response	Release Date
<b>General</b>		
Hello, we need to correct our Corporate assessments. How do we access the assessments previously submitted?	Once an assessment has been submitted you must contact the LME-MCO to request to make changes to the assessment.	October 16, 2015
I have some questions about these HCBS assessments. I have referred to information on the DHHS and Sandhills website but just have a few clarifications about "individual" assessments vice provider assessments and the exact site in which I need to submit. The link to the DHHS website does not appear to have an e Assessment for individuals but my senior leadership is sending me guidance and the FAQs on your website, imply that there are individual assessments that need to be completed for individuals that are working.	The survey for individuals receiving HCBS services has not been released.  Providers should have completed self-assessments for provider sites for Adult Day Health, Day Supports, Residential Supports, Supported Employment and (b)(3) DI (Day Supports, Residential Supports, Supported Employment) and (b)(3) Supported Employment. For Supported Employment, assessments for the corporate site and 10/10% of individual job sites - whichever is greater. For Day Supports, Residential Supports and Adult Day Health, assessments for all sites must be submitted.	October 9, 2015
My liaison contacted me this morning about our transition process because she had not received our self-assessment. It was not until that moment I realized they were due on the 15th and not the 30th. I had written down that the assessments were due on September 30th. I am asking for more time to get my self-assessment in to my liaison if it is at all possible?	You need to contact your LME-MCO as soon as possible and let them know. They will need to send an email to HCBSTransPlan@dhhs.nc.gov. To notify that you are submitting late. Your assessments need to be submitted within five (5) days.	September 25, 2015
We have some homes transferring to our agency from another existing company. Do the homes have to be "MET" before an LME-MCO will accept any transfers or working toward met by 2019?	Given the situation, the sites will need to complete a new self-assessment with the new responsible provider. However, since the sites were being assessed under the previous provider, DHHS will allow them to be part of the transition group.	September 25, 2015
I am unable to go back and retrieve the assessments that have been completed for revisions that need to be made. All I have is an email confirmation that it was submitted. Please advise. Thanks	The designated point of contact at the LME-MCO/DMA (LLA) can denote the correct information in the freestanding textbox. Following the completion of the initial assessment phase, the Department will work in partnership with the LME-MCOs/LLAs to ensure needed corrections occur in an effort to ensure the integrity of the data. A reporting template will be provided to the LME-MCO/DMA (LLA) for	September 18, 2015



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	the reporting of issues and changes that are needed.	
If I need to make a correction to a submitted plan what is the process?	The designated point of contact at the LME-MCO/DMA (LLA) can denote the correct information in the freestanding textbox. Following the completion of the initial assessment phase, the Department will work in partnership with the LME-MCOs/LLAs to ensure needed corrections occur in an effort to ensure the integrity of the data. A reporting template will be provided to the LME-MCO/DMA (LLA) for the reporting of issues and changes that are needed.	September 18, 2015
This morning I completed a HCBS assessment. After clicking submit, I did not receive an email with the link for the completed survey. Perhaps I used an incorrect email address. Is there a way to trace one assessment?	In following up to ensure an assessment is in the Department’s database, the following information is needed: LME-MCO/LLA, provider name, site name, address and other identifying information can be submitted to the HCBS email address.	September 11, 2015
Is the “certificate date” referring to the License for the home and its start or expiration date?	The certificate date is primarily used with Adult Day Health providers. When an ADH provider is approved by the Division of Aging and Adult Services (DAAS) to be an ADH, a Certificate is issued with the dates of their certification as an ADH provider.	September 11, 2015
Do you want the NPI # for the Agency or for the specific home providing the service?	The NPI number for the site used for NC Tracks	September 11, 2015
Our agency provides Innovation Services including Supported Employment and Residential Support. Currently we have no consumers who receive either of these services. Do we still need to submit the Self-Assessment by 9/15/2105? If yes, do we need to submit a Self-Assessment for each site credentialed to provide each service? If No, what do we do if we receive referrals for either service after 9/15/2015 in regards to the self-Assessment?	If you are currently enrolled to provide Residential Supports or Supported Employment, you are required to submit assessments for your Residential sites and your corporate Supported Employment site. This will give you time to work towards full integration. Any new sites that are added will be required to meet full compliance prior to waiver services being provided at those sites.	September 11, 2015



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<p>We have a provider in our network that is licensed by the Department of Aging as an Adult Day Health provider and they provide Day Supports to one of our Innovations consumers. They would like to be able to provide Day Supports to ALL Innovations consumers and market themselves as an Innovations Day Supports provider.</p> <p>Can they serve all Innovations consumers or can they only provide services to those Innovations consumers that have medical needs?? Nursing supervision needs?</p>	<p>If the certification of the provider allows them to serve any individual then they would not be precluded from providing Day Supports to other individuals providing that the provider is enrolled in the provider network, the service site can meet the needs of the individual, the services is appropriate for the individual and prior authorization is obtained.</p> <p>Both Adult Day Health and Adult Day Care providers may enroll with the LME-MCO to provide Day Supports. This is noted on pages 46 and 48 of the waiver document.</p> <p>This being said, as a reminder, the setting needs to be appropriate for the individuals that are being supported. For someone who did not have skilled nursing needs and was very active, you have to consider if this setting would meet that person's needs and preferences.</p>	<p>September 4, 2015</p>
<p>When a provider alerts us that they have submitted an assessment that has a mistake, what do we (MCO) need to do to help the provider correct the mistake?</p>	<p>The designated point of contact at the LME-MCO/LLA can denote the correct information in the freestanding textbox. Following the completion of the initial assessment phase, the Department will work in partnership with the LME-MCOs/LLAs to ensure needed corrections occur in an effort to ensure the integrity of the data. Communication regarding this will be provided on September 4, 2015 to the LME-MCOs/LLAs to initiate the first step of the process.</p>	<p>September 4, 2015</p>
<p>██████████ completed and uploaded our Home and Community Based Surveys onto the DHHS website however, we would like to add more information onto the surveys that we completed. How do we request that the completed surveys be returned to us so that we can add more information?</p>	<p>Please make contact with your LME-MCO/DMA. If the LME-MCO/LLA is in agreement for the provider to have an additional opportunity to make changes in an effort to provide an "accurate assessment", the specific URL will be sent back out for the purpose of making changes.</p>	<p>September 4, 2015</p>
<p>Do new sites have to be considered full integration to be allowed into the network?</p>	<p>Yes, CMS has said that the transition period is for existing providers.</p> <p>Any new provider site enrolled between July 15<sup>th</sup> - September 15, 2015 would complete a self-assessment.</p>	<p>August 28, 2015</p>



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	<p>Any new provider site enrolled after September 15, 2015 will complete the self-assessment as a component of enrollment.</p> <p>This is referenced on slide 78 of the HCBS Provider Self-Assessment LME-MCO/LLA/Provider Statewide Training.</p>	
<p>My understanding is that once the initial HCBS Self Assessment phase is over, we will be required to complete an additional HCBS Self Assessment every time an individual receiving Innovations Supported Employment is placed on a job before they begin working at the job/employment site. Is this correct? We only had to complete 10% or 10 SE assessments during the initial assessment phase so it seems excessive to complete an assessment on each new employment site after the initial assessment phase.</p>	<p>Yes, an assessment will need to be completed on each new employment site after the initial assessment phase.</p> <p>CMS requires that sites that are established after the assessment period has begun are in full compliance. The transition plan only addresses waiver sites that were established at the time the plan was submitted.</p> <p><b>Update: After the initial assessment period, each Supported Employment site will not need to be assessed. The corporate site will need to be either in the process of meeting compliance (sites that were involved in the initial self-assessment process) or in Full Compliance (if the site was not part of the initial self-assessment process).</b></p>	<p>August 28, 2015</p>
<p>During their HCBS training, Eastpointe recommended that providers complete a master HCBS Self Assessment word document that addresses each question on the assessment for each service (SE, Residential and Day Supports). This master document could be utilized to cut and paste the answers into the web based assessment. In a meeting this morning with Cardinal, we were told not to cut and paste into the document as each assessment should be unique and not have the same responses. Could you please clarify this?</p>	<p>The recommendation that the information be placed in a word document and pasted into the assessment form was for ease of entry into the individual assessment. It was not intended to serve as a 'master' document for all sites under a provider agency. While some answers may be similar, they are going to differ in how the individual site evidences the qualities of the characteristics.</p>	<p>August 28, 2015</p>
<p>Is an assessment required for a home that only provides state funded services?</p>	<p>If only State Services are provided, a provider assessment is not needed. If the site provides one of the specific HCBS waiver services noted in the HCBS Transition Plan, then the site should be assessed. <b>(Update: If an individual on the waiver resides in the home then it must meet</b></p>	<p>August 28, 2015</p>



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	<b>HCBS characteristics regardless of the provision of waiver services in the home.</b>	
I was in the Eastpointe Provider Council meeting today and the question was posed about completing an assessment for AFLs that currently have only a State Funded client. The Council stated that ALL sites should have an assessment if the provider may ever have a regular Medicaid client in that home. I know that is different from the information you received. There was also discussion about being sure to do sites that are empty if they are on your contract so that you can get someone in that location in future.	If only State Services are provided, a provider assessment is not needed. If the site provides one of the specific HCBS waiver service or is contracted to provide one of the waiver services noted in the HCBS Transition Plan, then the site should be assessed.	August 28, 2015
What's the trigger for completing a self-assessment for new sites (tie to credentialing?) or when a person that receives state funding is replaced with someone that receives Waiver funding (Care Coordinator researches whether the MCO can place someone in that site...its "certified HCBS integrated"?)	Those would be considered new sites specific to HCBS and assessment would be needed.  Any new provider site enrolled between July 15th - September 15, 2015 would complete a self-assessment.  Any new provider site enrolled after September 15, 2015 will complete the self-assessment as a component of enrollment.  This is referenced on slide 78 of the HCBS Provider Self-Assessment LME-MCO/LLA/Provider Statewide Training.	August 28, 2015
Will there be a template/guidelines for what the provider should submit as a Plan of Action?	There is no specific template, however all plans of action should appear in a text format within the e Assessment.	August 14, 2015
Our Adult Day Health Center was selected as part of the pilot for the self-assessments. Do I need to complete this again or will the original one suffice for the requirement of having it completed by 9/15/15?	Service providers who participated in the Pilot have met the requirements for the statewide assessment phase of implementation of the HCBS final rule for their assessed sites. In this example, the original self-assessment for the specific site is adequate.	August 14, 2015
Would a Day Supports program on/in the same facility/premises as an ICF equal/lead to Heighten Scrutiny?	The presence of HCBS Day Supports within or on the premises of an ICF/IID is potentially a setting that has the effect of isolating individuals receiving Medicaid HCBS from the broader community of individuals not receiving Medicaid	August 14, 2015



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	<p>HCBS, and is presumed to not meet HCBS Criteria for community based settings.</p> <p>This is a situation where the provider would be asked to complete the Threshold Heightened Scrutiny Assessment that is being finalized by the Department.</p>	
I put the site name as the address of the AFL Provider. Should that have been the office location of the provider instead of the actual home address?	The address noted should be the physical address of the site being assessed for the specific e Assessment.	August 14, 2015
I forgot to put my title on sheet as Chief Services Officer. How can I fix?	<p>It is very important to ensure the e Assessment is accurate and includes all needed information before submitting.</p> <p>If the LME-MCO/LLA is in agreement for the provider to have an additional opportunity to make changes in an effort to provide an “accurate assessment”, the provider name, site name, and other identifying information can be submitted to the HCBS email address, and the specific URL will be sent to them for this purpose. However, this should be the exception and not the rule in practice.</p>	August 14, 2015
<p>Our Life Skills program has one person from Smoky Mountain MCO all others are Partners BHM, does this mean that we will need to do two of the assessments for the HCBS?</p> <p><b>(Note this question was originally noted under Day Supports header)</b></p>	Assessments are site specific, not consumer specific. 1 assessment should be submitted to the LME-MCO where the site is physically located.	August 14, 2015
A site that provides both supported employment and day supports. I understood that the assessment was to be site specific and not service specific. With this in mind, the e-assessment only allows one service to be selected. In this circumstance will this provider need to submit one or two self-assessments for this site?	<p>It is unclear if the Day Support site is the corporate site for Supported Employment or if it is the site where the individual is being employed through Supported Employment.</p> <p>If the Day Supports site is the corporate site for Supported Employment, then complete the assessment and note in the comments that the site is also the corporate site for Supported Employment.</p>	August 7, 2015



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	<p>If the site is also a setting where an individual is employed by the Day Program as an employee, this will also need to be noted in the comments section.</p>	
<p>Question #14 was still unclear after reading the 8-3-2015 question and answer document. Please contact me at ***** for clarification if possible. I would also like to report that I resubmitted the assessment for one site because I failed to check yes for #13, however I did state evidence. I pray that resubmitting the assessment for the same site did not eliminate the evidence for the first submission for our ***** site. Thank you so much.</p>	<p>Question 14 outlines what must be done if any of the characteristics are restricted. For example, if the individual is not allowed to have privacy in their sleeping unit due to self-injurious behavior and PICA. (Characteristic #8) then the plan must outline the requirements noted in #14. The following is an example of responses to the first questions in 1:</p> <p>1. Identify the specific and individualized assessed need: John needs line of site supervision at all times due to his self injurious behavior and PICA.</p> <p>For further clarification, your local LME-MCO is available for more specific technical assistance.</p> <p>Any concern with submissions will be managed on a case by case basis. The data base can be readily searched for information. This can best be accomplished through a request to the <a href="mailto:HCBSTransPlan@dhhs.nc.gov">HCBSTransPlan@dhhs.nc.gov</a></p>	<p>August 7, 2015</p>
<p>What is the website link is to the FAQs that are updated each month?</p>	<p>The weekly Q &amp; A documents have not been posted to the HCBS website at this time. Q &amp; A's are released weekly to the LME-MCOs/LLAs and HCBS Stakeholder group for further dissemination.</p>	<p>August 7, 2015</p>
<p>If there is an agency that has different regions within the same county, but still fall under one agency, does each region need to complete self-assessments or can they join together to complete the self-assessments (eg. SE sites)?</p>	<p>The self-assessment is site specific. Each site should complete the self-assessment specific to that location.</p> <p>For Supported employment a self-assessment should be completed for the Corporate site and submitted to the LME-MCO where the corporate site is located. The number of self-assessments for employment site submitted is 10 or 10% whichever is greater per LME-MCO.</p>	<p>August 7, 2015</p>
<p>If the agency or site is located in a county outside of CenterPoint's catchment area but serves a CenterPoint client, does the agency complete the assessment for the</p>	<p>Slide 110 of the Statewide Training provides the specific detail for submission of self-assessments. It is as follows:</p>	<p>August 7, 2015</p>



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<p>county that the site is located in or for the MCO client?</p>	<ul style="list-style-type: none"> <li>• <i>The geographic location of the site will determine the responsible LME-MCO to complete the e Review.</i></li> <li>• <i>However, if the site is not contracted with the LME-MCO where it is geographically located, it is the responsibility of the contracted LME-MCO who holds the client-specific agreement to complete the e Review.</i></li> <li>• <i>Any site that does not align with the above two bullets will require that the LME-MCO seek technical guidance from DHHS.</i></li> <li>• <i>DMA will complete all CAP-DA assessment reviews.</i></li> </ul>	
<p>If the agency provides any of the three designated HCBS services, but is not currently providing the service at this time, does the agency still complete a self-assessment?</p>	<p>If the provider site has a contract with the LME-MCO to provide Day Supports or Residential Supports a self-assessment for the site should be completed. A self-assessment for the corporate site should be completed for supported employment.</p>	<p>August 7, 2015</p>
<p>My question, after reading the Companion Guide for Provider Self-Assessment:</p> <ul style="list-style-type: none"> <li>• We have enrolled in our agency at this time 1 NC Innovation Client.</li> <li>• We have enrolled in our agency at this time 10 participants.</li> </ul> <p>Given the drop down option of the HCBS Waiver, it states clearly we can only have one waiver. Please let me know if I am reading and understanding this document correctly or am I to submit 2 separate waivers.</p>	<p>If the site supports individuals receiving Day supports (Innovations) and Adult Day Health (CAP-DA), the site should submit its self-assessment to the LME-MCO where the site is located. However, in the additional comment section of the assessment, a note should be entered stating that ADH is also provided at this site.</p>	<p>July 31, 2015</p>
<p>Can you simplify question 14 for us? Maybe explain more in layman's terms? We're having a tough time interpreting the language explanative used.</p>	<p>If there is an exception to characteristics 8 – 13, it must be included and supported in the individual's plan. The Care Coordinator/Case Manager must be involved in this process.</p>	<p>July 31, 2015</p>
<p>We have contracts with Sandhills, Partners and Cardinal for Day Supports and Supported Employment. The physical sites where both services originate from are located in Cardinal MCO's catchment area</p>	<p>If the physical site of the day program is located within the Cardinal catchment area and the provider has a contract for that service with Cardinal, then the self-assessment for the site would only be submitted to Cardinal. For</p>	<p>July 31, 2015</p>





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<p>(Union &amp; Mecklenburg County). From the presentation, I could not fully ascertain if our agency only submit self assessments to the home MCO in this case Cardinal and we do NOT have to do separate self assessments for Sandhills and Partners?</p>	<p>additional information, please refer to Slide 110 in the Statewide Training PPT.</p>	
<p>Is there a Q &amp; A section/link in regards to self-assessments?</p>	<p>DHHS is compiling Q &amp; A documents of questions received during the statewide self-assessment and releasing them weekly (on Fridays) to the LME-MCOs/LLAs and HCBS Stakeholder Committee for dissemination to providers and stakeholders at large. The first one was released on July 24<sup>th</sup>.</p>	<p>July 31, 2015</p>
<p>Are providers like Rowan Vocational Opportunity to submit Self-Assessments for Innovations consumers only? This is being asked because, when the provider attempted to select the License Type, the 5400 Day Supports option was not available but 2300 for ADBP program license was an option. Should 2300 License Type option be selected?</p> <p>Did we miss a license type???</p>	<p>There is an Other field that the provider can select under facility type, and can then identify the specific category of licensure. If there is more than one category that is applicable, as in the case of RVO, under additional comments they can reference that information specifically. Only one assessment is required for the site.</p> <p>It is not uniquely listed, but can be captured in the Other field under facility type in the demographic section.</p>	<p>July 31, 2015</p>
<p>Have the results from the pilot been compiled? When will providers have feedback about the info that was provided to know if we are on the right track? For those of us in membership organizations this information will be very helpful to assist others going through the process.</p>	<p>Preliminary feedback has been provided through the Statewide Training, however the primary focus since completion of the Pilot assessments has been to further refine the e Tool, and finalize an e Review tool that will be utilized by all the LME-MCOs/LLAs to help ensure consistent implementation. While some of the assessments have been rated, DHHS is requesting that all LME-MCOs ensure that once the e Review is finalized that Pilot sites be reviewed first, and results provided to those who participated.</p>	<p>July 24, 2015</p>
<p>If a provider has group homes, day programs, and ICF-IID on the same grounds or campus would they select 'yes' for Section 1 # 2 "a setting that has the effect of isolating individuals receiving Medicaid HCBS from the broader community of individuals not receiving Medicaid HCBS."</p>	<p>Yes.</p>	<p>July 24, 2015</p>



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<p>Will the 33 LME-MCO staff who will be responsible for review and rating of the HCBS self-assessments through an electronic web based tool and for providing technical assistance with all providers have concrete personnel support to provide the technical assistance that may be needed by the many providers in the state?</p>	<p>Each LME-MCO/LLA has a specific point of contact for the statewide self-assessment. All the LME-MCOs have designated emails and phone numbers for HCBS communication. The LME-MCOs/Local Lead Agencies will serve as the local technical assistance point of contact for providers regarding the tool and process through their specified contact. DHHS will provide Technical Assistance to the LME-MCOs/LLAs as warranted.</p>	<p>July 24, 2015</p>
<p>What is the technical assistance offered expected to be in content form and method of delivery?</p>	<p>Technical assistance will be offered telephonically or through email. DHHS will compile Q &amp; A documents of questions received and release them weekly (on Fridays) to the LME-MCOs/LLAs and HCBS Stakeholder Committee for dissemination to providers and stakeholders at large. Technical assistance will be provided regarding the use of the e Review tool and assessment process.</p>	<p>July 24, 2015</p>
<p>Will the content include the fact that there will be an Individual Experience Profile component at some point in the future so that expectation and understanding can be translated through Providers to the individuals and families to assure them this is in the overall HCBS Plan?</p>	<p>The provider self-assessment is site specific only. DHHS, in conjunction with valued Stakeholders, will develop an Individual Experience survey. Future communication is forthcoming regarding the “My Experience Profile” to ensure that individuals receiving support and families are aware of this information.</p>	<p>July 24, 2015</p>
<p>Can you provide and/or direct me to the link for the Companion Document for preparation as mentioned in your power point presentation?</p>	<p>The Companion Document can be found at <a href="http://www2.ncdhhs.gov/hcbs/assessment_pilot.html">http://www2.ncdhhs.gov/hcbs/assessment_pilot.html</a></p>	<p>July 24, 2015</p>
<p><b>(b)(3) Services</b></p>		
<p>This assessment tool does not have a selection for b3 type of services in the first drop down box. The categories are still NC Innovations or CAPDA</p>	<p>A (b)(3) services only selection has been added to the assessment.</p>	<p>October 2, 2015</p>
<p>Will the LME-MCOs provide training to the (b)(3) providers that have nothing to do with the Innovations waiver?</p>	<p>The LME-MCO can offer additional training for those providers. The training will be the same training as the other providers received. The Statewide Training can be found on the HCBS website. <a href="http://www2.ncdhhs.gov/hcbs/index.html">http://www2.ncdhhs.gov/hcbs/index.html</a></p>	<p>September 25, 2015</p>



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Are we supposed to have a self-assessment completed for MH/SA (b)(3) SE, too?	Yes, this is correct. CMS has stated that it must be done for HCBS services including Supported Employment.	September 25, 2015
I just received a notice from Trillium and in it said that now (b)(3) service facilities must also complete a HCBS assessment? Is this for all LME-MCOs? I have a Respite Care facility in ██████ that gets referrals from ECBH and Eastpointe for (b)(3) services. This one must be in by October 15, 2015? I did not know this could you tell me when this announcement came out?	Providers of (b)(3) NC Innovations Waiver Services (Residential, Supported Employment and Day Supports) as well as providers of (b)(3) Supported Employment (MH/SA and I/DD) must complete an e Assessment. To allow for a reasonable timeframe for submission, the (b)(3) services deadline for submission is October 15, 2015.  Respite facilities are not required to submit an e Assessment.	September 25, 2015
Are we to use the same sample logic with (b)(3) supported employment services as we do with Innovations? That being 10% or 10 (whichever is great per provider per MCO). I understand that the provider would not need to duplicate any sites already submitted as Innovations Supported Employment (e.g. corporate site).	Yes, the assessment criteria is the same.	September 18, 2015
Does MH/SA (b)(3) services have to meet the HCBS characteristics?	CMS has not specified a target population. They noted that any HCBS services offered under the (b)(3) service array are subject to the HCBS Rule.	September 18, 2015
The only (b)(3) service targeted in this review is SE, correct?	Supported Employment or one of the NC Innovations Services under the (b)(3) array (Residential Supports, Day Supports, or Supported Employment).	September 18, 2015
We initially submitted a corporate site assessment for Innovations SE prior to the drop down box being added for B3 services. Please let me know if we need to complete an additional HCBS assessment for the B3 SE for the corporate site or if the one Corporate site assessment for Innovations SE is sufficient.	Only one corporate site assessment would need to be submitted.	September 18, 2015
Please clearly define the B3 codes that are supposed to be included in the self-assessments.	(b)(3) Supported Employment and DI services (including Residential, Day Supports, SE).	September 11, 2015
The latest HCBS Statewide Assessment Q and A document dated 9/4/15 states that there is now a drop down option to allow providers to select (b)(3) SE services. This	Sites providing (b)(3) services who already submitted assessments will not be required to complete a new assessment. This information can be added during the review process.	September 11, 2015



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<p>drop down was added after we completed and received approval on our assessments for (b)(3) SE services. When we completed the assessments initially we selected Supported Employment from drop down since (b)(3) SE was not listed. Could you please advise us on what we need to do to be in compliance now that this has been added? Will we now need to complete a separate assessment for the corporate site just for B3 SE? (We have already completed the corporate site assessment for Innovations SE where we combined our Innovations and (b)(3) SE numbers.)</p>		
<p>We are reading into the Q&amp;As that B3 services that fall into those categories should also send the assessments, however they have 2 choices Innovations or CAP D/A to choose from. I am guessing Innovations but what is the correct answer?</p>	<p>A specific field has been included under HCBS service type that reflects the (b)(3) service(s).</p>	<p>September 4, 2015</p>
<p>Today at the Partners GCQI meeting, it was announced that the Supported Employment (b)(3) services are included in the HCBS assessment I could have overlooked, but did not notice this requirement expressed elsewhere in the communication bulletins. Can you verify the need for SE (b)(3) services to be included in the HCBS assessment?</p>	<p>CMS has indicated that (b)(3) HCBS services must also be in compliance with the HCBS rule. While we did not include this in our initial transition plan, it will need to be added. Further guidance will be coming.</p>	<p>August 14, 2015</p>
<p>Are we going to require that the HCBS self-assessment be completed for (b)(3) services?</p>	<p>CMS has indicated that (b)(3) HCBS services must also be in compliance with the HCBS rule. While we did not include this in our initial transition plan, it will need to be added. Further guidance will be coming.</p>	<p>August 14, 2015</p>
<p>I attended the PFFL meeting last week and we had questions related to the HCBS self-assessment. We asked about B3 services. Can you please provide me with more details about how this needs to be accomplished with B3 services and when will we (MCO's) and the providers receive more clarification/information on this for the self-assessment process.</p>	<p>CMS has indicated that (b)(3) HCBS services must also be in compliance with the HCBS rule. While we did not include this in our initial transition plan, it will need to be added. Further guidance will be coming.</p>	<p>August 14, 2015</p>



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<b>Supported Employment</b>		
Is it correct that even if a provider is contracted between 3 MCOs for SE services, the self-assessment for their corporate site is sent to the MCO in that catchment rather than the provider completing 3 assessments (1 for each MCO)?	This is correct. Only one corporate site assessment would need to be submitted.	September 18, 2015
We need some clarification, can SE be provided in a residential setting? The residential site also acts as the corporate site for supported Employment	If the residential site is truly acting as the corporate site also, then, the provider will need to complete an assessment for SE as the corporate site.	September 11, 2015
I just reviewed the most recent bulletin (#J1520) and wanted to clarify that if my agency provides Supported Employment services through several MCOs we would need to do assessments for the sites covered by each of those MCOs (10% or up to 10 sites per MCO) along with the one for our corporate site. So if we have 20 sites through Alliance, 15 through Eastpointe, 22 with Coastal, and 18 with Sandhills then we would need to do 10 assessments per MCO (this is assuming each site is unique).	You are correct – It would be 10 assessments per LME-MCO as per the example provided.	August 14, 2015
Do the SE assessments only include people who are currently employed since the assessments are site specific? Does it also include someone who may be currently volunteering?	SE sites should be assessed only if currently active. Supported Employment should not be used for volunteering. The most appropriate service would be Community Networking or Day Supports.  <b>Update: While volunteering may not be done under Supported Employment, unpaid internships which meet the Fair Labor Standards Act may be done under Supported Employment.</b>	August 14, 2015
If we have SE H2025 in our contract but have not billed for any services. Is an assessment still required?	An assessment is still required for the corporate site if Supported Employment is part of the provider's contact.	August 14, 2015
My office currently provides Individual Placements and supports not associated with the Innovations Waiver but it is frequently referred to as supported employment. The Self Assessments are	The Self-Assessments are only required for Innovations Waiver Supported Employment, but will be required for (b)(3) Supported Employment in the future.	August 14, 2015



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<p>only required for supported employment associated with Innovations Waiver Services...Correct?</p>	<p><b>Update: CMS guidance confirmed that (b)(3) service must be in compliance with the HCBS Rule. (b)(3) service provider had to complete provider self-assessment and submit by October 15, 2015</b></p>	
<p>We have three individuals who work at the same work site and receive Innovations Supported Employment. All three individuals work at the same physical location, but two of them receive SE through Sandhills, and one receives SE through CenterPoint. Do we need to assess the same site twice (once for each MCO)? (Site is physically located in Sandhills catchment area.)</p>	<p>Assessments are site specific, not specific to the individual participant. Only one assessment should be completed.</p> <p>If the SE site is located in Sandhills catchment area, the site assessment will be submitted to Sandhills based on the scenario provided.</p>	<p>August 7, 2015</p>
<p>If the agency provides Supported Employment and is a statewide corporation, does the agency complete a self-assessment for the corporate site (e.g. Albemarle) and then 10 or 10% (whichever is less) of each individual site (e.g. McDonalds, Novant Hospital, Volvo, etc.)?</p>	<p>Yes, one assessment should be submitted for the corporate site located in Albemarle, and a minimum of 10 assessments or 10%, whichever is greater should be submitted per LME-MCO. An example would be: there are 40 unique SE sites located within Trillium – the actual submission would be for 10 of those sites, and then there are 200 unique SE sites located within Cardinal – the actual submission would be 20, and so on.</p>	<p>August 7, 2015</p>
<p>If an agency has 300 sites, the agency would complete 1 for corporate office and then 10 for the sites to make 11 self-assessments?</p>	<p>For supported employment, one assessment per corporate site, and a minimum of 10 assessments or 10%, whichever is greater per LME-MCO.</p> <p>If all 300 sites are located in one LME-MCO, then 31 self-assessments will be completed (1 corporate site and 30 work sites). If they are located across LME-MCOs, then it would be one assessment for the corporate site and 10 per MCO or 10%, whichever is greater.</p>	<p>August 7, 2015</p>
<p>Could I please have confirmation as to how providers of supported employment are to be submitting their HCBS self-assessments? My understanding is that the entire process is geographically based. Supported Employment has some variance from Day Supports and Residential Supports in that the provider will send the self-assessments to the MCO that covers the geography of their corporate location regardless of where the services are</p>	<p>One assessment per corporate site, and a minimum of 10 assessments or 10%, whichever is greater per LME-MCO.</p> <p>Example: A provider has 50 unique employment sites in LME-MCO A and 40 unique employment sites in LME-MCO B.</p>	<p>July 31, 2015</p>



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<p>rendered. Per the provider’s email below it appears she has received conflicting messages from other LME-MCOs and would like to ensure my understanding is accurate and thus what I convey to providers is also accurate.</p> <p>In regard to submission of SE self assessments, my understanding from the HCBS training is that we should submit 10% or 10 clients (whichever is higher) based on the total number of SE clients we have across all of our offices and that all of these should be submitted to the MCO of our Corporate location. Please confirm that I should be sending the SE self assessments for my Alliance clients to East Point instead of Alliance as our Corporate office is in Goldsboro. Other MCOs are instructing us to send the SE assessments to the same MCO that supervises the cases.</p>	<p>LME-MCO A – 50 unique sites – provider will submit 10 assessments to LME-MCO A. 10 is greater than the 10% which would be 5.</p> <p>LME-MCO B – 40 unique sites - provider will submit 10 assessments to LME-MCO B. 10 is greater than the 10% which would be 4.</p> <p>Assessments are site specific, not specific to the individual participant. In the Statewide training, it was stated that providers would submit 10% or 10 assessments (whichever is the greater number) based on SE sites per LME-MCO. This is based on the geographical location of employment sites.</p> <p>If the Corporate site is in Goldsboro, that assessment will be submitted to Eastpointe. If the SE sites are located in Durham County, the site assessments will be submitted to Alliance.</p> <p>In the event that there are specific questions or sites do not seemingly align with the information denoted on Slide 110 of the Statewide PPT, technical guidance from DHHS should be sought.</p>	
<p>As we place more individuals in competitive employment, will we need to assess these new employment sites since this will change the percentage?</p>	<p>Any service sites added after 8/1/15 must meet full HCBS compliance. The transition plan process only covers providers that are currently providing waiver services. The formula is applied to current sites.</p> <p>As new sites are added an assessment will be required, and will not fall under the initial submission formula. Thus, if a provider figures their percentage of submission on 7/31 as 1 corporate, 3 assessments for Smoky, 10 for Cardinal, and 4 for Alliance – this is what they complete. However if there is a new site in Cardinal as of 8/1/2015 – they will not refigure the calculation, but will simply complete an assessment for the new site. This will be a rolling process moving forward. Refer to slide110 in the Statewide PPT.</p>	<p>July 31, 2015</p>



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	<p><b>Update: After the initial assessment period, each Supported Employment site will not need to be assessed. The corporate site will need to be either in the process of meeting compliance (sites that were involved in the initial self-assessment process) or in Full Compliance (if the site was not part of the initial self-assessment process).</b></p>	
Will the providers for B-3 Innovation funding also have to complete the HCBS Provider Self-Assessments?	HCB services that are covered under the (b)(3) benefit must also be in compliance with HCBS final rule. A communication bulletin is forthcoming which will contain additional detail/information.	July 31, 2015
What do we do if we provide supported employment but the individuals receiving the service is not yet employed?	The provider will still need to complete a self-assessment for Supported Employment for the corporate site.	July 24, 2015
If we have less than 10 supported employment sites, how many site assessments do we have to do?	<p>You would complete a self-assessment for all sites if you have less than 10 sites.</p> <p>One per corporate site and minimum of 10 assessments or 10%, whichever is greater for each LME-MCO.</p>	July 24, 2015
Do we do site assessments for micro-enterprises?	Yes.	July 24, 2015
If a person has a micro-enterprise and goes to various locations to work, do you have to do a self-assessment on each location? Example individual is a Zumba instructor and travels to different churches or centers to teach classes.	<p>The Corporate site, and 10 or 10% whichever is greater. Assessments may not include all the various locations based on the sample.</p> <p>For unique situations, please seek technical assistance from the LME-MCO.</p>	July 24, 2015
10 per LME-MCO or 10% (whichever is more) is that just SE or all Day, Residential, SE across the board for the self-assessments?	The 10 or 10% refers to Supported Employment only.	July 24, 2015
Is IDD B3 SE – counted or not in the 10?	IDD (b)(3) SE will not count in the 10. However, in the near future we will capture it.	July 24, 2015
We have people who receive supported employment who are at paid employment sites, and it is clear we have to do an assessment for these sites. However, we also have people who receive supported employment who are at volunteer sites. Do we need to do assessments for	<p>Prevocational services may include volunteer work, such as volunteer learning and training activities that prepare a person for entry into the paid workforce.</p> <p>Individual Supported employment supports do not include volunteer work. Such volunteer</p>	July 24, 2015





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<p>these volunteer sites? Also, we were under the understanding that if someone is receiving supported employment but is only receiving it as job development that an assessment doesn't need to be completed as there is no "site" to assess.</p>	<p>learning and training activities that prepare a person for entry into the paid workforce are addressed through pre-vocational services.</p> <p>Job development would fall under the corporate site.</p> <p><b>Update: While volunteering may not be done under Supported Employment, unpaid internships which meet the Fair Labor Standards Act may be done under Supported Employment.</b></p>	
<p>What if place of employment is a hospital? How do you answer number 2 in section I?</p>	<p>No. This is a job/employment.</p>	<p>July 24, 2015</p>
<p>Can the e Assessment be completed and submitted using IPAD/tablet?</p>	<p>Yes.</p>	<p>July 24, 2015</p>
<p>Do we need to complete an assessment if there is no participant in the home (AFL)?</p>	<p>Yes, this is a site assessment, it is not individual specific.</p> <p>Please refer to slide 110 in the Statewide Training PPT.</p>	<p>July 24, 2015</p>
<p>I understand completing 1 assessment per corporate site but how do I complete 10 additional assessments and have them be understood as different assessments? Can I enter in the persons served name to show that they are different than the corporate assessment? I don't see any place in the assessment form to differentiate the difference.</p>	<p>A corporate assessment is completed for Supported Employment. An e Assessment is completed for each site being assessed. The site name and address must be entered in the e Assessment to denote the site and its location. No e PHI should be entered into the e Assessment.</p>	<p>July 24, 2015</p>
<p><b>Residential Supports</b></p>		
<p>When I am completing an the assessments for the various residential supports sites it displays this message after question 7 "PROVIDERS DO NOT HAVE TO FILL OUT QUESTIONS 8 - 14. CLICK HERE TO PROCESS." I just want to verify that this is correct.</p>	<p>Review to ensure the appropriate service type is reflected. However, if you are completing the assessment(s) for residential supports, all of the questions will need to have a response.</p>	<p>September 11, 2015</p>
<p>Do I need to complete HCBS self-assessment for licensed AFL homes?</p>	<p>Yes, if the licensed AFL home provides HCBS Residential Supports under NC Innovation, a provider self-assessment is required.</p>	<p>September 11, 2015</p>
<p>Section III: #9: According to the HCBS Final Regulations 42 CFR Part 441: Questions and Answers Regarding Home and Community</p>	<p>The assessment is about the site, and not the individual. The assessment should include what the site does to meet the characteristics.</p>	<p>August 28, 2015</p>



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<p>Based Settings - Public Notice and Comments - Question 3 and the corresponding answer, " The regulations allow states to presume the enrollee's private home or the relative's home in which the enrollee resides meet the requirements of HCB settings."</p> <p>The individual lives in an AFL setting with his sister as the AFL provider. The individual does not own, rent, or occupy under a legally enforceable agreement with the home he lives in with his sister. Does the AFL provider (sister) have to meet the requirements for number 9 since the individual lives with his sister?</p>	<p>If the site bills and provides Residential Services as an AFL it has to be assessed as a Residential provider-owned or controlled residential setting.</p>	
<p><b>Heightened Scrutiny</b></p>		
<p>What is the heightened scrutiny threshold assessment? Where is this template? Is this the same as the threshold assessment?</p>	<p>The tool has not been released for use to date. The tool will be used for those sites that are triggered by a yes response for Section 1 question 2. The Heightened Scrutiny Threshold assessment will be used to determine if the provider truly triggers a heightened scrutiny response or site visit, etc. The tool will only be released to the providers/individuals, by the appropriate reviewing entity, when there is determination of need.</p>	<p>September 11, 2015</p>
<p><b>e Assessment</b></p>		
<p>Provider started an assessment and saved it to go back and finish it. She cannot find it or retrieve it to complete. Please advise on how to access a saved assessment so that the provider can complete it.</p>	<p>When an assessment is saved, an email will be sent to the email address noted in the assessment.</p> <p>From: <a href="mailto:HCBSTransPlan@dhhs.nc.gov">HCBSTransPlan@dhhs.nc.gov</a>          Sent: Day, date, and time          To: email note in e assessment          Subject: Home and Community Based Services</p> <p>Your NCDHHS Provider Self-Assessment (xxxxxxxxxxxxxxxxxxxxxxxx) has been saved, and can be accessed at the following link:          xxx</p>	<p>July 31, 2015</p>



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	Clicking the link provided will take you to the saved e Assessment.	
If we made an error on a submitted assessment, can we recall the assessment and resubmit a corrected copy?	A provider cannot re-call an assessment. However, if the LME-MCO/LLA is in agreement for the provider to have an additional opportunity to provide and “accurate assessment”, the provider name, site name, and other identifying information can be submitted to the HCBS email address, and the specific URL will be sent to them for this purpose. However, this should be the exception and not the rule in practice.	July 31, 2015
Once you have saved your information, how do you retrieve it?	The assessment now has a 'save' feature – after the user enters an email address, if the user clicks 'save' they will get an email with a link back to the assessment to continue filling out or send the link to someone else for review before actual submission.  Assessments cannot be submitted or saved if the email field is not completed.	July 24, 2015
When we submit our e Assessment into the NCDHHS website, how will you guys (LME-MCO) get the assessments in your catchment area? Will we submit them somehow to you or will you be able to access the database the NCDHHS evaluations are going to?	The information is detailed in the PPT -- once a provider submits, they should receive a Thank you . . . the LME-MCO selected for the site will receive a specific URL leading them to that assessment. If the provider does not receive a "real time" thank you -- they need to notify the LME-MCO immediately as it may need to be reviewed by DHHS/IT. The provider should check their spam before contacting their LME-MCO.	July 24, 2015
<b>e-Review Process</b>		
How we go about taking out duplicates in our HCBS database.	Please use the Master Index Log to submit and request the removal of duplicate assessments.	October 16, 2015



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<p>During some routine monitoring, it came to our attention that we have two families who self-direct Supported Employment. These families have not completed the provider self-assessment. Will you please advise us on how we should resolve this issue?</p>	<p>Individuals who self-direct Supported Employment will not have to complete a provider self-assessment as the services are not provider led. The nature of self-direction with EOR is what excludes this from HCBS. CMS is interested in the facility based, provider driven services, which is why PCS and IHSB are excluded.</p>	<p>October 16, 2015</p>
<p>Which assessment has been approved?</p>	<p>DHHS has received several emails from providers asking which assessment has been approved, when they receive the email notifying their assessment is accepted. Provider specific information was not included when LME-MCOs/DMA accepts the assessment. A process has been implemented with the LME-MCO/DMA (LLAs) to notify providers who have had assessment accepted prior to 9/16/15. This process should be completed on or before October 15, 2015.</p> <p>Moving forward, identifying information will be included in the notification.</p>	<p>October 16, 2015</p>
<p>The consultants are stating that some of the providers are stating they didn't receive notification of the pending review. I've asked the consultants to let me know of these agencies. How can we get them the information for the next level of review and remain within timelines?</p>	<p>The designated reviewer should check to ensure that the contact information noted in the assessment is correct and ask the provider ensure that the email notification did not go to the junk/spam folder. The reviewer should also make sure the assessment review was pended for questions and not just saved.</p> <p>If none of the above address the issue, the designated reviewer should use the Master Index Log to report.</p>	<p>October 16, 2015</p>
<p>Responses that come in from providers, should the consultants change the integration to "full" if response meets full integration or should consultants only "accept" the response if it's still emerging?</p>	<p>If the designated reviewer determines that a characteristic is in "full integration" after reviewing the additional information, the reviewer should:</p> <ul style="list-style-type: none"> <li>• select "Review supports a full integration rating"</li> <li>• Enter the date the review was completed for the characteristic</li> <li>• Change the overall rating for the characteristic to full integration.</li> </ul>	<p>October 16, 2015</p>
<p>For any Innovations provider that is adding a new site, I know they have to complete the HCBS self-assessment; however, is the</p>	<p>New AFL sites will be expected to meet full integration prior to providing services.</p>	<p>October 16, 2015</p>



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<p>new AFL unlicensed site expected to be fully integrated from the start or is the new site going to be allowed the transition timelines of 6 months, 1 year, 2 year, etc...? Please advise. Thanks!</p>		
<p>I wanted to inquire about an extension of our November 30, 2015 due date. Our team is working diligently to review assessments however we are concerned that we will not meet the current designated due date. Has there been any discussion about extending the LME/MCO assessment review due date?</p>	<p>DHHS will request a status update for the review of provider self-assessment on November 16<sup>th</sup> from the LME-MCOs/DMA(LLAs). At the time DHHS will assess the need for an extension.</p>	<p>October 9, 2015</p>
<p>We've encountered an issue recently where the provider agency representative that completed the self-assessments for a number of sites is no longer employed with the agency. When we either accept the assessment and more importantly when we pended with questions the provider is not able to receive that information as the link is sent to a non-functional email address. Is there any way to update the provider's contact information? If so, how do we do it? Due to the inability of the provider to view and respond to questions identified I assume the 10 and 5 day timelines begin once the provider is able to receive the e document detailing questions?</p>	<p>The LME-MCO/DMA(LLA) will need to submit the needed change with specific information and using the Master Index Log. The LME-MCO/DMA(LLA) must ensure the information submitted is accurate. DHHS will use this process to make requested changes. Once complete the LME-MCO/DMA(LLA) will receive notification through the Master Index Log that changes were made or that additional information is being requested.</p>	<p>October 9, 2015</p>
<p>When is the Questions and Respond part due by?</p>	<p>When a provider receives notification that "the designated representative has submitted questions for follow up", the provider site has 10 working days to respond to the questions.</p>	<p>October 9, 2015</p>
<p>What happens when you do an e review and ask for additional information and the provider does not respond to the request within the 10 day time frame?</p>	<p>The LME-MCO/DMA (LLA) should call the provider on day 11 to ensure that the communication was received. If a response is not received in 5 business days, then the assessment will be returned as not accepted.</p>	<p>October 2, 2015</p>
<p>If a provider does not respond within 10 days (as specified) – what is the recourse?</p>	<p>The LME-MCO/DMA (LLA) should call the provider on day 11 to ensure that the communication was received. If a response is not received in 5 business days, then the assessment will be returned as not accepted.</p>	<p>October 2, 2015</p>



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<p>For some assessments that we reviewed we did not score the characteristic when we felt that additional information was needed in order to appropriately score the item. We left the score blank, put our questions in the “Questions” box and then hit the “Pending/Questions” button at the bottom. However, it was later discovered when reopening an assessment that all of the items had been automatically been scored as “Full Integration”, even though no selection was made by the reviewer. How do we correct this problem?</p>	<p>The way the system was developed, once the cursor is moved off of ‘Select one’ it cannot default back to that . . . a selection will have to be made. The key is to ensure that before an assessment is accepted that the appropriate selection has been made. There is flexibility between the three choices throughout the process.</p>	<p>October 2, 2015</p>
<p>If the actual SE job site (not corporate site) is in our (LME-MCO) catchment, but it is another LME-MCO’s client who works at that site, which LME-MCO does the self-assessment belong?</p>	<p>As noted in the statewide training, geographic location, of the site, will determine the responsible LME-MCO to complete the e Review. However, if the site is not contracted with the LME-MCO where it is geographically located, it is the responsibility of the contracted LME-MCO who holds the client specific agreement to complete the e Review. Any site that does not align with this guidance will require that the LME-MCO seek technical guidance from DHHS.</p>	<p>September 25, 2015</p>
<p>When the provider gets an email that the assessment was accepted/approved, it is not letting them know what site was approved/accepted.</p>	<p>This field can be added, and the detail specific to the site will be included in the email notification.</p>	<p>September 25, 2015</p>
<p>After the LME-MCO requests additional information from the provider, how does the provider resubmit their responses?</p>	<p>When the reviewer pends an assessment, the provider receives a link to access the site assessment with the questions from the reviewer noted in a questions box. The providers will see a response text box where they will enter their responses. Once complete they hit the “submit response” button and the LME-MCO will receive notification. See below:</p>	<p>September 25, 2015</p>



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	<p>Response</p> <div style="border: 1px solid #ccc; height: 100px; width: 100%;"></div> <p style="text-align: center;"><a href="#">Submit Response</a></p>	
<p>We have several providers that did not complete self-assessments for all of their sites and services. We are contacting them and requesting the transition plans and discussing what this means. We need guidance on this and if we are truly expecting the provider to transition the consumer to other providers?</p>	<p>Upon notification by a LME-MCO/DMA (LLA) that a provider self-assessment was not completed, the provider will have 5 days from the date of LME-MCO/DMA (LLA) contact to complete the assessment.</p> <p>If a provider realize they did not submit an assessment, contact the LME-MCO/DMA (LLA) immediately.</p>	<p>September 25, 2015</p>
<p>The pilot assessment below should have been submitted to Alliance instead of Trillium. The assessment is for a corporate SE site in Raleigh. Unless instructed to do otherwise, the assessment will not be reviewed by Trillium. This information has been included in the Questions section on the assessment.</p>	<p>DHHS is developing a template that will be used for LME-MCOs/DMA (LLA) to report know issues/glitches identified with provider self-assessments. DHHS will use this list to make needed changes to the database. Addition information will be provided to the LME-MCO/DMA point of contacts.</p>	<p>September 18, 2015</p>
<p>As we begin our review of HCBS self-assessments we've noticed that we need to go back and forth between the e review PDF instructions document, word version of self-assessment, or other document that has the specific bullet points the providers are expected to address in their response. Is it possible to include the bullets for the questions/items listed in the electronic reviews?</p>	<p>DHHS is working to restructure the assessment review tool to make it more user friendly.</p>	<p>September 18, 2015</p>
<p>As we have recently received an abundance of self-assessments within the last few hours/days. As we are reviewing these it appears we have several duplicates of sites. How are we do address these?</p>	<p>DHHS is developing a template that will be used for LME-MCOs/DMA (LLA) to report know issues/glitches identified with provider self-assessments. DHHS will use this list to make needed changes to the database. Additional</p>	<p>September 18, 2015</p>



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	information will be provided to the LME-MCO/DMA point of contacts.	
For providers who operate an enclave where the group starts at the corporate office and then goes around to numerous community sites as part of the enclave work, how would they do the HCBS SE assessment? Is it one assessment for the corporate site only?	Yes, but the assessment should speak to the various sites.	September 18, 2015
Sending this as an FYI...a provider has informed me of a glitch that they have reported to the state... apparently when they go in to do an assessment, click save, then go back into it later, the service type automatically defaults to Residential Supports.	This issue has been resolved.	September 18, 2015
If it is identified that providers have duplicate assessments in the system how should the LME/MCO address? Can duplicate assessments be removed?	Yes, DHHS is developing a template that will be used for LME-MCOs/DMA (LLA) to report know issues/glitches identified with provider self-assessments. DHHS will use this list to make needed changes to the database. This will need to be included.	September 18, 2015
The LME/MCO has identified 2 provider sites that will require a heightened scrutiny review. Is there a final tool that to send out to those providers.  Also, should the LME/MCO contact the state for assistance with those reviews?	The tool has been finalized, and there will be an electronic template on or by 9/30.  Yes, this information should be shared with DHHS before any further action is taken.	September 18, 2015
According to the HCBS review tool, pending with questions "should be the exception and not the rule specific to the e Review process",  What constitutes an approved transition plan? Can they be approved with all emerging answers?	Yes, an assessment should be accepted if the reviewer accepts the plan of action the provider has provided to achieve full compliance with the HCBS characteristics. Accepting the self-assessment does not mean the provider is in full compliance (although it could if they are rated as fully integrated on all responses), but that the LME-MCO accepts the plan of action(s) provided for how the provider will come into full integration. If there is a need to request additional information, the reviewer will utilize the text box at the end of the e Review Tool to make the desired request or to request plan of actions as indicated by need. The e Review tool will also be utilized to document the follow-up on	September 11, 2015





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	the plan of actions. Refer to pages 2-4 of the Self-Assessment Review tool for more details. The recorded webinar also addresses noted questions.	
The LME is required to have all of the pilot assessments done by 9-30-15. Please verify if this means an initial review or accepted in its entirety? Given the timeframe for the resubmission it will be difficult to meet the 9-30-15 deadline.	The pilot assessments initial review should be completed by 9/30/15.	September 11, 2015
What is the qualifier of the plan of action 6 month, 1 year, 2 year, and 3 year time frame?	The Plan of Action follow-up by the LME-MCO at the noted interval is based on the date the assessment is accepted by the LME-MCO.	September 11, 2015
The time frame for the completion of the self-assessments has been extended to October 15 <sup>th</sup> will the time frame for the LME be extended as well?	The extension in time is for the submission of provider self-assessment for (b)(3) service sites only. The LME-MCO review time frame has not been extended at this time.	September 11, 2015
When an agency sends an assessment to the wrong LME how do we handle this? Can the assessments be forwarded to the correct LME and by who?	This will need to be managed on a case by case basis between the LME-MCO/DMA and DHHS.	September 11, 2015
Is there a save feature in the e-Review tool?	Yes, but on the LME-MCO side as the master user, there will be no reminders/prompts to complete. Reviewers will need to remember which assessments they are working on and have saved so they can complete at a later time. The Department has suggested a tickler system for this purpose. In addition the functionality has been improved to assist as well – the site name now appears on the LME-MCO/LLA admin link.	September 11, 2015
Is there a specific contact for each assessment?	Yes, the email address that the provider submitted on the assessment from, in real time is the person that will receive the notification that an e-Review for that site has been completed. Reviewers are not required to take additional steps to notify others not listed on the assessment. Providers have been informed that the email address listed in the assessment is who will receive the notification. However, anyone within a provider organization can share within their agencies as long as that person(s) have access to the URL.	September 11, 2015
Does historical information that the LME-MCO may know need to be considered?	To be clear, reviewers are to review information that is presented in the e-Assessment only. This is a 2014-2019 process, the ownership is on the provider to outline how they are going to comply.	September 11, 2015



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Can an assessment be accepted with Emerging or Insufficient ratings?	Yes, areas requiring improvement are not intended to be viewed as a negative. This process is all about identifying areas where providers need to make changes in order to meet the criteria.	September 11, 2015
Do all elements in the companion guide need to be addressed?	All of the bullets listed in the companion guide are only examples of evidence a provider COULD submit. They do not all have to be present in order for the provider to receive an emerging/full integration score.	September 11, 2015
What if responses are from an individual perspective?	The assessment still needs to be reviewed through the electronic process. Some assessments from AFLs or SE have responded not as a site, but as an individual but the systems and practices are clearly evident. Any reviewer feedback, shared with the provider should be shaped from the perspective as a site, not the person.	September 11, 2015
What are the timelines for the e Review?	There are timelines for responses outlined in the e-Review companion guide.	September 11, 2015
How does the information from the Plan of Action get integrated into the assessment?	There is continuing work to improve/enhance the functions of the e Review. However, if plans of action are not evident, and are needed this will occur through the text box provided at the end of the e Review as it will capture all exchanges between the provider and the LME-MCO.	September 11, 2015
Do you complete the assessment if there is a yes response under Section 1, Question 2	Yes, the assessment should be reviewed in its entirety. However, at this time a determination will be made to have the provider complete a Threshold Assessment for Heightened Scrutiny. This will occur on a case by case basis,	September 11, 2015
Should the companion be used in rating assessments:	The Department's training is clear that the guide is to be used in completing the e Reviews.	September 11, 2015
What do the providers see/receive on their end once the reviewer accept the assessment?	Notification that assessment has been accepted.	September 11, 2015
How do they know what ratings they've received per site etc.	They do not see the ratings through this process. If accepted, it is either as submitted or through the Q and A/pending process.	September 11, 2015
If a provider completes an assessment for DS, however, indicate "no" in section III which relate only to RS-how should we address?	DHHS will work collaboratively with the LME-MCOs on a case by case basis.	September 11, 2015



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<p>On the assessment list screen, there needs to be a way to identify provider site: Solutions: Show site name along with provider name.</p>	<p>Functionality to show site name has been updated and is included in the admin list for each LME-MCO/LLA/DMA</p>	<p>September 11, 2015</p>
<p>What is the deadline for the LME/MCO to have any site reviews or additional desk reviews completed for the pilot self-assessments? Is that deadline the same as the 09/30/15 review deadline?</p> <p>What is the deadline for the LME/MCO to have any site reviews or additional desk reviews completed for the remainder of the self-assessments? Is that deadline the same as the 11/30/15 review deadline?</p>	<p>The desk review or site visit should be the exception and not the rule. For those sites that are flagged for Heightened Scrutiny or unable/unwilling to comply a timeline for desk review and/or site visit is outlined in the Review Guide (pg. 3).</p> <p>The 9/30/2015 only pertains to the finalized review of all the assessments that were submitted during the Pilot phase.</p> <p>Dates for site visits (only if warranted) will be rolling based on the completion of the threshold assessment, review by the LME-MCO/DMA and then appropriate scheduling. Below is information as provided in the e Review Companion Guide:</p> <p>Prior to a site visit being scheduled, a thorough desk review will occur which will result in an immediate rating change or the need for a site visit to occur. Again, any action that occurs during this review will need to reflect the corresponding date through the use of the associated pop up menu within the e Review Tool.</p> <p>Prior to the desk review resulting in a change in rating from Insufficient to Emerging or Full, the Provider must complete the Threshold Assessment to make the final determination regarding the need for a site visit. Once the assessment template (this is a separate template and is not contained in the e Review Tool) is provided by the LME-MCO/DMA the provider will have 10 working days to complete and return the information to the reviewing entity.</p> <p>The reviewing entity will have 5 working days to review and determine if a site visit is warranted.</p>	<p>September 4, 2015</p>



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	<p>If a site visit does occur, it will be the responsibility of the reviewing entity to coordinate a date for the site visit to include all of the respective parties, and upon occurrence the date appropriately reflected in the corresponding field. Site visits should occur within 14 days that the need for such is determined.</p> <p>As a reminder, this is an emerging process, and it is the expectation of DHHS that most providers will be emerging.</p>	
<p>Our agency submitted all residential HCBS Assessments. We recently received an email seeking a response to address some issues with one of the AFL Sites.</p> <p>During the HCBS training, we were informed not to respond to any assessment question with any of our own agency policy/procedures. Also, all responses should be site specific not client specific.</p> <p>The response email we received seems to be asking for more detailed client specific information. I am requesting further assistance on how to reply to the response email. Also, based on the response email - do we need to answer every question again?</p>	<p>Assessments are site specific not individual specific. If there is discrepancy or question regarding the requested follow up by the LME-MCO/LLA/DMA, the Department recommends that the provider seek technical guidance from the reviewing entity to ensure there is no loss in the translation of information.</p> <p>The Department’s training conveyed that policy and procedure could be included in the responses, but would not be accepted as the only measure of evidence/example/ practice.</p>	September 4, 2015
<p>I did not receive a report for Site Name: [REDACTED], which was submitted with all of the other reports. I am assuming all responses were acceptable unless I hear back from you.</p>	<p>When the LME-MCO/DMA (LLA) accepts, does not accept or pends an assessment with questions, the provider will receive an email notification in real time. The email will be sent to the email address documented in the assessment.</p> <p>A response will be provided for each individual assessment. If a provider is not in receipt of one by 9/30/15 for the pilot sites or 11/30/2015 for all other sites, contact the appropriate reviewing entity.</p>	September 4, 2015



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<p>As we are reviewing assessments and the reviewer has rated an item as “Emerging” and the “Review supports a need for Plan of Action”... The reviewer then goes in to accept- will the provider be able to see that on their end?</p> <p>What is needed in their POA?</p> <p>Or, is that if the review supports a need for a Plan of Action, the reviewer should put this in pending/question status until the provider responds??</p>	<p>No, all questions/requests must be resolved before the e Review is accepted. If you accept, the provider only receives that information. If this has occurred and there is further need, direct communication with the provider is recommended to address the occurrence. The Department continues to emphasize that this process is new for providers, LME-MCOs/LLAs and the State, and we must work collaboratively to address any “mishaps/glitches”.</p> <p>There is not a template for a POA, but they must state how (in practice) they intend to meet the characteristic. P/P can be shared, but should not be the full response.</p> <p>Yes, if the review supports a need for a Plan of Action, the reviewer should put this in pending/question status until a POA is submitted by the provider for the specific characteristic(s).</p>	<p>September 4, 2015</p>
<p>All elements listed in the right hand side of the guide are not addressed, does this mean that it requires an emerging or insufficient rating?</p>	<p>No, only the elements on the left hand side of the guide must be addressed. The e Review companion document is only a “guide”.</p>	<p>August 28, 2015</p>
<p>Can questions be asked of a provider before rating the characteristic?</p>	<p>Yes, and this is recommended.</p>	<p>August 28, 2015</p>
<p>If it is just a “cut and paste of the rules”, is this adequate for evidence?</p>	<p>No, this is not adequate for evidence and follow up should occur with the provider.</p>	<p>August 28, 2015</p>
<p>Should we share this document (e Review Guide) with our providers or is it for MCO use only?</p>	<p>The e Review document has been publically shared through the Stakeholders group. We will be posting it to the HCBS website in the immediate future. It can be disseminated further, but suggest this occur only in a PDF format to ensure the integrity of the document. However, as the e Tool is a “live” interactive document, and is linked to the e Assessment it will not be available for access by anyone other than those who are reviewing. (Efforts are underway to provide a template of the review.) However, LME-MCOs/LLAs are welcome to share the tool via a webinar; provider forum or any other venue, but just be reminded that it is a live site.</p>	<p>August 28, 2015</p>
<p>Has the committee completed a review of the agencies in the May pilot; or should</p>	<p>All assessments submitted will be reviewed by the LME-MCO (Innovations) or DMA (CAP/DA-</p>	<p>August 28, 2015</p>



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those entries be reviewed by the consultants as well?	ADH). Assessment submitted during the pilot should be completed no later than September 30, 2015	
After submission I noticed an error. Is there a way I can go back in and correct?	A provider cannot re-call an assessment. However, if the LME-MCO/LLA is in agreement for the provider to have an additional opportunity to provide an "accurate assessment", the provider name, site name, and other identifying information can be submitted to the HCBS email address, and the specific URL will be sent to them for this purpose. However, this should be the exception and not the rule in practice.	August 14, 2015
We (LME-MCO) are preparing our tracking system to capture the data needed that we will eventually report and have a question. When we are reporting data, are we reporting on each characteristic (that achieved full/emerging/insufficient) or an overall rating per site? If it is the latter, how should we calculate the rating to give the site an overall score?	Each characteristic will need to be captured individually as there is no "overall" rating.	August 7, 2015
Please describe more about the "Action steps have been developed to ensure uniformity in reviewing and rating provider integration and compliance with the HCBS Characteristics."	A collaborative process was utilized to develop an e Review companion guide that mirrors the e Assessment companion guide. This occurred to help ensure uniformity in the review and rating across all the LME/MCOs/LLAs. All reviewers are requested to use this document as the technical guide in completing this process. DHHS will work in partnership with the LME-MCOs to ensure the tool is implemented and utilized as per development. There has been significant emphasis on recognizing the differences across our State, and incorporating as much information as possible within the framework of the e Review companion guide.	July 24, 2015