

## **Background**

On January 16, 2014, the Centers for Medicare and Medicaid Services, CMS, released final rules regarding requirements for home and community based services, HCBS, operated under section 1915 of the Social Security Act. The rules mandate certain requirements for alternative residential or community settings where Medicaid beneficiaries receive long term care services and supports. Specifically, the rules establish requirements for settings to ensure that individuals receiving services are integrated into their communities and have full access to the benefits of community living. While the AHCCCS HCBS program is operated under section 1115 of the Act, CMS is requiring compliance with those regulations for all long term care home and community based settings. To that end, AHCCCS has established a plan for meeting those standards on a timeline consistent with its 1115 Waiver renewal submission, effective October 2016. In Arizona, these requirements impact the residential placements, e. g. assisted living homes, assisted living centers, group homes, et cetera, for members enrolled in the Arizona Long Term Care Services, ALTCS, program. The new rules also impact programs, adult day health, day treatment and training, center based employment and group supported employment, where ALTCS members receive services during the day.

Arizona's Systemic Assessment and Transition Plan.

AHCCCS conducted a preliminary assessment of Arizona's HCBS settings to determine its level of compliance, provide recommendations for identified variances, and outline a process for continuous monitoring. The assessment process included a review of statutes, rules, policies and contract language.

AHCCCS will publish its draft assessment of Arizona's HCBS settings and the draft transition plan to seek public comment on or before August 1, 2015. The public comment period will be for the month of August, August 1, 31, 2015. AHCCCS will host a round of public forums throughout the state. As part of the public comment period, AHCCCS will disseminate surveys to randomly selected members and providers to further assess a baseline of the state's assessment and how the rules might currently be employed in practice. The survey responses will be anonymous.

After consideration of public comment, AHCCCS will submit its final assessment and transition plan to CMS for approval. AHCCCS will have 5 years to come into compliance with the rules under the Transition Plan. During the 5 year transition period, AHCCCS will work with a variety of stakeholders to implement the plan. Additionally, AHCCCS will be working collaboratively with the MCOs to ensure providers are adequately oriented and trained on their respective roles and responsibilities in ensuring members have full access to the benefits of community living.

For more information on the Home and Community Based Setting Rules and the requirements for State Medicaid Programs, please visit <http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services-and-Supports/Home-and-Community-Based-Services/Home-and-Community-Based-Services.html>

For more information on Arizona's compliance with the Home and Community Based Setting Rules and the requirements for State Medicaid Programs, please visit [www.azahcccs.gov/hcbs](http://www.azahcccs.gov/hcbs)

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