CBAS HCB Setting Stakeholder Process Webinar/Meeting

Meeting Date
February 24, 2015
2:00 – 5:00pm
Sacramento - California Department of Aging (CDA)

Attendees
Registered for the webinar: 133
Attended via webinar: 103

On-site Attendees	Organization
Bobbie Wunsch (Facilitator)	Pacific Health Consulting Group
Gretchen Brickson	LA Care Health Plan
Rafael Ameziud	LA Care Health Plan
Lydia Missaelides	California Association for Adult Day Services (CAADS)
John Shen	Department of Health Care Services (DHCS)
Jeannie Smalley	DHCS
Lora Connolly	CDA
Ed Long	CDA
Denise Peach	CDA
Staff	CDA & DHCS

Meeting Agenda
Welcome and Introductions
Overview and Background
CBAS HCB Settings Stakeholder Process Framework
- CMS Directive-STC 95 and 96
- Deliverables/Work Products
- Key Documents
- Stakeholder Engagement Principles

Walkthrough of California's Statewide Transition Plan
Overview Outline for CBAS Transition Plan
Overview CMS Exploratory Questions
Identify Possible Work Products to be Developed
Q&A/Public Comments
Next Steps/Review of Action Items

Summary
<u>Welcome, Introductions, Overview and Background</u>
Bobbie Wunsch of Pacific Health Consulting Group welcomed everyone participating in the webinar and gave a special thank you to the SCAN foundation for their support of the current CBAS HCB Settings Stakeholder

Process Meetings and for their prior support of the 1115 Waiver CBAS Waiver Amendment stakeholder process.

Bobbie reviewed housekeeping items, the meeting Agenda, and objectives on PowerPoint Slides # 2, 4 and 5. This is the first in a series of discussions about the Centers for Medicare & Medicaid Services (CMS) CBAS Home and Community-Based Settings Rule and the requirement to develop the CBAS Transition Plan to bring CBAS settings into compliance with these regulations.

Today's meeting objectives include (1) reviewing the federal HCB Settings regulations, (2) engaging stakeholders in the discussion about the CBAS setting in the context of HCB Settings regulations, and (3) beginning the discussion and review of work tools to guide the development of the CBAS Transition Plan. Bobbie emphasized that the goal of this process is for CBAS care to be the best it can be and to improve the system over time.

Ed Long, Deputy Director, Long Term Care and Aging Services Division, CDA, thanked everyone for joining this collective effort to develop the CBAS Transition Plan to amend California's Statewide Transition Plan (STP) as required by CMS in the CBAS Waiver Amendment. He encouraged robust input into how CBAS can comply with the HCB Setting rule and support the CBAS program in providing quality services moving forward.

John Shen, Chief, Long Term Care Division, DHCS, welcomed stakeholders as well and reiterated the hope that this stakeholder process in collaboration with providers and managed care plans will result in improving the CBAS program and the experience of CBAS participants receiving the services.

CBAS HCB Settings Stakeholder Process Framework

Bobbie reviewed the CBAS stakeholder meeting schedule (PowerPoint slide #8) and indicated that specific meeting dates will be finalized soon and posted on the CDA website.

All webinars/meetings will be held from 2-5pm to accommodate CBAS providers. The February, March and April meetings will focus on tasks to develop the CBAS HCB Settings Transition Plan. The draft plan will be released at the May meeting for a 30-day public comment period. The revised draft CBAS Transition Plan will be reviewed at the July meeting for inclusion in the California STP to be submitted to CMS by September 1, 2015.

CMS Directives, Deliverables/Work Products, Key Documents and Stakeholder Engagement

Denise Peach, CDA CBAS Branch Chief, reviewed the CMS directives for Home and Community-Based Settings requirements included in the CBAS Waiver Amendment Special Terms and Conditions (STCs) 95(c) and 96(c)—

refer to PowerPoint slides #9 and #10 for details.

The CBAS stakeholder process will result in two deliverables: (1) the CBAS Transition Plan to amend California's STP and (2) a Timeline to ensure CBAS compliance with the CMS directives by March 17, 2019. Work products and work tools will be created to develop and implement the CBAS Transition Plan.

The Key Documents posted on the CDA website provide information about the CMS HCB Setting requirements, the California STP and CBAS Transition Plan, and the principles of Stakeholder Engagement posted on the DHCS website. DHCS expects all state-facilitated stakeholder processes/meetings to adhere to certain standards that promote a meaningful and transparent stakeholder process with clear purpose and scope.

The stakeholder engagement principles will guide the CBAS HCB Setting Stakeholder Process. CDA and DHCS initiated outreach to inform stakeholders about the CBAS stakeholder process including e-mailing webinar/meeting information to CBAS providers, managed care plans, the aging and disability network, advocates such as Justice in Aging, Disability Rights California, legislative staff and more. DHCS and CDA ask that stakeholders pass on information received about the CBAS stakeholder meetings to others.

An issue raised requiring clarification during this part of the agenda included how this stakeholder process would address language in STC 95(c) specifying that "all home and community-based settings found in the 1115 Demonstration have all of the qualities required by 42 CFR 441.301(c) (4)" (rather than just focusing on CBAS.) John Shen clarified that CBAS is the first and only provider in the 1115 Waiver to be identified as needing a transition plan. The CBAS stakeholder process will focus only on the CBAS setting and that DHCS and CDA will learn more from CMS along the way.

California's Statewide Transition Plan (STP)

Jalal Haddad, Long Term Care Division of DHCS, provided a high-level overview of California's STP which was developed through a statewide stakeholder process and submitted to CMS for approval on December 19, 2014. California's STP is posted on the DHCS website with a link on the CDA website under CBAS Key Documents.

California's STP includes a range of HCB settings, both residential and non-residential, serving many different populations. The majority of HCB settings in California's STP serve persons under the California Department of Developmental Disabilities (DD) Waiver. The CA Department of Developmental Services (DDS) is currently engaged in a Waiver Amendment

stakeholder process.

California's STP stakeholder process is developing various HCB setting compliance assessment tools including provider and beneficiary surveys to identify compliance issues for remediation. These tools will be posted on the DHCS website for stakeholder input.

The CBAS Transition Plan will be incorporated into California's STP for submission to CMS on September 1, 2015. CMS has not yet approved California's STP or provided feedback to DHCS since the plan's submission.

CBAS Transition Plan

Bobbie reiterated that the CBAS Transition Plan will mirror the components in California's STP, and that it will be incorporated into California's STP for submission to CMS by September 1, 2015.

Denise reviewed the draft work tool "Outline for CBAS Transition Plan" and identified the five primary components/sections of California's STP that will guide the development of the CBAS Transition Plan: These sections include:

- Education and Outreach
- Assessment of Statutes, Regulations, Policies and Other Requirements
- Compliance Determination Process for HCB Settings
- Role of Person-Centered Planning
- Appeal Process
- Compliance and Monitoring

The CBAS Branch has started educating providers and other stakeholders about the CBAS HCB Setting stakeholder process and proposes the development of an information notice for distribution to CBAS providers to inform participants and caregivers at their centers. This information notice could be posted at the center next to their license as well as distributed to participant caregivers.

The stakeholder process will focus on opportunities for regulatory reform and identify what may need to be changed for CBAS to comply with the HCB Setting Rule. Stakeholders can submit their feedback on the CBAS Transition Plan outline to CDA via email, fax or mail, for review at the March meeting.

CMS Exploratory Questions

Bobbie introduced and provided an overview of the "CMS Exploratory Questions" work tool that will inform the development of the CBAS Transition Plan. CMS provided these exploratory questions for states to consider when assessing non-residential home and community-based settings.

Work Products

Denise identified the following work tools to be developed, using California's STP as a guide:

- Provider Compliance Self-Assessment Tool which can be used by CBAS centers on an ongoing basis to self-assess their own compliance to HCB Settings requirements and to assist in center Policy and Procedure development.
- Beneficiaries and Caregivers Evaluation of Compliance to ensure that beneficiary and caregiver perspectives are considered in care planning and provision of services and for evaluation of center compliance to the HCB Setting requirements.
- State Monitoring Tools to build into the state monitoring and oversight process and that incorporates the Provider, Beneficiary and Caregiver Assessments of Compliance.
- Person-Centered Care Processes/Tools that would include a revised Individual Plan of Care (IPC) to ensure person-centered care planning as required in the CBAS Waiver, and a standardized Participation Agreement to promote/strengthen person-centered care at CBAS centers.

Bobbie summarized that these tools will be developed as the CBAS stakeholder process proceeds.

Questions and Public Comments

Bobbie requested stakeholder comments/questions. The following is a compilation of this input and dialogue among attendees:

- What is the role for the Health Plan since managed care plans have an increasing role with members who are CBAS recipients?

- The CBAS HCB Setting rule relates to the setting although contracting entities need to be aware of this rule. The importance of person-centered planning started with the prior CBAS Waiver Amendment stakeholder process and discussions about the importance of the IPC and the overall care plan of Managed Care Plans (MCPs.) there is a strong link between the IPC executed at the center and the MCP's care plan. It is critical to have some "state wideness" in what is developed to prevent "22 ways" of doing care planning, to reduce the risk of misinterpretation, and not be too prescriptive but to be as clear as possible.

- MCPs should participate in developing the work products associated with the transition plan, including revising the IPC. A smaller advisory group will likely be formed to start discussions about what to do with the IPC and other tools in the CBAS center particularly with regard to care coordination. Plans have mandates to do care coordination at the CBAS provider level.

- CBAS is unique. Managed Care is directing the care, and the physician is writing prescriptions. There can be tensions between HCB services and health plan services. We need to have a balance between what CMS and MCPs want.

- It is important to have diverse voices regarding the CBAS Transition Plan. We need to hear what to consider from different perspectives.

- Due to the amount of work required under the CBAS Waiver Amendment, a balanced approach is important. Not all can't be solved by September 2015, but the CBAS Transition Plan can identify how to approach these issues with milestones between September 2015 and March 2019 and intervening objectives.

- It is important to consider the broader context when thinking about the CMS questions. Every state is different, including the services available for persons with disabilities. For example, California is a state with self-directed personal care services such as IHSS. Many people who participate in IHSS also attend other HCB setting services, not just CBAS centers, so there is a level of community integration already in California. Different states have different adult day programs and Developmental Disability programs such as sheltered workshops.

- How does the HCB Unit at CMS view the CMS Medicaid Unit rules that apply equally to CBAS? The CMS Medicaid funding at CMS has expectations and so do the DHCS Audit and Investigations Branch. For example, if a center takes participants on a field trip outside the center (to promote integration with the community), this can conflict with the four-hour minimum day requirement to provide core services. How does a center comply with the CMS Access expectations and also meet program rules? Also, CBAS is a voluntary program and participants can leave the center at any time. There are tensions between Medicaid rules and HCB rules. What if there are conflicting regulations?

- We need to navigate through this together and we may not know the answers. Medicare and Medicaid view themselves as payers (federal financial participation) and the state can do what it wants with its funding. However, the use of federal funds needs to promote HCB setting rules.

- If the state does not comply, then it puts the state's federal financial participation at risk. CMS has some control over the money. Another example of potential conflicts is with regard to Residential Care Facility Licensing which is to protect the consumer but this may conflict with HCB

setting rules. There are tensions between optimizing privacy and choice and applying protections and safety. The care plan of the individual needs to enhance integration with the community.

Bobbie focused the attention of the meeting/webinar participants on the CMS Exploratory Question Work Tool and reviewed each question for stakeholder input. She emphasized that the goal is to get stakeholder input on the CMS questions, consider the appropriateness of the question for the CBAS setting and to incorporate this input into the CBAS Transition Plan. This information can be used to improve quality of CBAS care. All stakeholder comments will be documented on the CMS Exploratory Questions work tool and reviewed at the March meeting.

Public Comments

No additional stakeholder comments or questions were provided at the end of the meeting. Stakeholders who participated in the webinar/meeting submitted comments/ questions via their computer. Persons who attended the meeting on-site asked questions/provided comments during the meeting. All comments/questions will be captured in the Stakeholder Input Log, Meeting Summary and/or the CMS Exploratory Questions Work Tool which will be posted before the March meeting.

Action Items / Next Steps

- ✓ CDA will post the following on the CDA website:
  - Date of the March meeting
  - February 24th Meeting Summary and audiotape
  - CBAS Transition Plan Outline Work Tool and the CMS Exploratory Questions Work Tool reviewed during the webinar
  - Stakeholder Input Log documenting all written comments submitted by stakeholders during and after the webinar
  - Copy of Facility Accessibility Assessment
- ✓ CDA and DHSC staff will document all comments specific to the CMS Exploratory Questions in the work tool to be reviewed at the March meeting.
- ✓ Stakeholders are invited to submit additional comments/questions after the webinar/meeting on any issue or document discussed during the webinar, including comments about the stakeholder meeting process.
- ✓ Stakeholders may prepare for the March meeting by reviewing the CMS questions about the IPC/person-centered planning and the CBAS Transition Plan Outline.

Bobbie thanked all stakeholders who participated, including the knowledgeable CBAS providers and all CDA and DHCS staff.