



NSCLC

National Senior Citizens Law Center

Protecting the Rights of Low-Income Older Adults

September 9, 2014

Community-Based Settings and the New Medicaid HCBS Standards: Views from the States, 6 Months In

National Disability Rights Network
National Senior Citizens Law Center
Association of University Centers on Disabilities

Housekeeping

- All lines are on mute. For technical questions and concerns, please use chat box.
- For substantive questions, please use questions box.
- Problems with getting on to the webinar? email trainings@nsclc.org.
- You will be sent copies of the slides after the presentation. Slides and a recording will also be available at www.nsclc.org and www.hcbsadvocacy.org.
- The phone is optimal for audio.

Today

- Introduction
- Presentations:
 - Tim Wood, Disability Rights Center of Kansas
 - Chava Kintisch, Disability Rights Network of Pennsylvania
 - Lisa Pugh, Disability Rights Wisconsin
- Questions and Answer

The Kansas Approach

*Community-Based Settings and the New
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Tuesday, September 9, 2013

Tim Wood, Campaign Manager

*End the Wait – Disability Rights Center of
Kansas*

Background on the Kansas Process

- When Kansas submitted 2 of its 7 1915(c) HCBS Waivers (TBI and I/DD) for renewal in May the State was notified that CMS would not review its applications until the State submitted an approvable transition plan for the new HBCS Settings Rule
- Kansas submitted its draft statewide transition plan for public comment on June 14, 2014. The comment period was open for 30 days and ended July 15, 2014

The Draft Transition Plan

- Not unlike other states, the Kansas Plan is light on detail
- Upon review of the Kansas Plan it was clear that the Kansas Draft plan was more or less a plan to create a plan, lacking a clear and transparent strategy for the State to involve consumers in the compliance process, among other key elements
- The plan contained nothing beyond a rudimentary educational component for consumers and providers

The Draft Transition Plan – Con't

- Assessment for compliance
- In April the State of Kansas identified settings that should be reviewed for compliance, but the state has not yet shared with the public what settings were identified or how they were identified
- DRC has strongly encouraged Kansas to make all compliance information widely available to the public at large

The Draft Transition Plan – Con't

- The overall process by which Kansas will determine compliance is unclear within its draft plan
- Measuring Consumer rights – How will the State accomplish this?
- Additional Reporting and Oversight

Beyond the Plan

- Heightened Scrutiny in the Standard Waiver Process (see CMS toolkit) <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>
- Transparency of HCBS Programs
- Person Centered Service Planning Process

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**Disability Rights Network of
Pennsylvania**

September 9, 2014

Concerns in Pennsylvania

- Lack of detail
- Lack of involvement by persons with disabilities and family members
- Up front assertions of compliance
- Assessment

Concerns in Pennsylvania

- Need to include residential and non-residential settings
- Public input for revisions and adjustments to the plan
- Person-centered planning and conflict rules are already in effect

Lessons Learned in Pennsylvania

- Gather examples of non-compliance
- Meet with the state early on
- Advocate for full public notice and public comment periods
- Comment on any initial transition plan, which may be a part of a waiver amendment

Lessons Learned in Pennsylvania

- Comment on the statewide transition plan
- Testify at public input forums
- Communicate with the Centers for Medicare and Medicaid Services (CMS)
- Educate and provide technical assistance to persons with disabilities and family members throughout the process

Disability Rights Network of Pennsylvania

Chava Kintisch, Esquire

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**Community-Based Settings and the New
Medicaid HCBS Standards: Views from
the States, 6 Months In
Lessons Learned in Wisconsin**



What we wanted to accomplish

- Process that is easy to understand and to participate
- Process that engages self-advocates
- Process that generates significant participation
- Process that is open to all views, but focused on promoting integration

Strategies in Wisconsin

- Grassroots strategy (multiple audiences)
- Professional advocate strategy
- Social Media strategy
- Media strategy
- Legislative strategy

www.takeastandontheplan

The screenshot shows a web browser window displaying the website <http://www.takeastandontheplan.org/>. The browser's address bar and menu bar are visible at the top. The website's navigation menu includes "Home", "Advocates & Families", and "Providers & Professionals".

The main content area features a large banner with the "Take a Stand ON THE PLAN" logo on the left. The logo consists of the words "Take a Stand" in pink, "ON THE" in small blue letters, and "PLAN" in large blue letters, with a red stick figure icon. To the right of the logo is a photograph of a man in a wheelchair, wearing a green t-shirt and a baseball cap. A quote is overlaid on the photo: "I don't get to make decisions in my life." Below the photo is a yellow button that says "Submit Your Comments Here!".

Below the banner is a row of three video thumbnails, each with a play button icon. The first thumbnail shows a man in a blue shirt, the second shows a man and a child, and the third shows a woman in a purple top.

The Windows taskbar is visible at the bottom of the screen, showing the system tray with the date and time: 3:46 PM, 9/8/2014.

Created a Survey tool to Educate



Take a Stand on the Plan

Right NOW the Department of Health Services (DHS) is creating a plan that will make BIG changes to how services are provided to people with disabilities, the elderly and families. Without your input, these changes may not be strong enough to make lives better!

This tool will help you tell the Department of Health Services about changes you want for people with disabilities at home, work, and in their decision-making. Once you fill this out, we will submit your comments to the Department of Health Services and send you a copy of your comments.

*** 1. Your address and contact information is required so we can send DHS your comments.**

Name:

Address:

City/Town:

ZIP:

Email Address:

*** 2. Select one of these categories below for each individual response you create. Please fill out the tool for each role that you have. For instance, if you have various roles you might answer from the perspective of a family member, paid provider or other.**

Are you a:

- Person with a disability (or using this tool to assist someone with a disability to answer)
- Family member (sharing own perspective)
- Paid Provider of Services

Filling in the Gaps Engaging the Public



Core Elements Missing from Wisconsin's Transition Plan

- Lack of stakeholder engagement across the process
- No public education campaign
- Program participants not engaged
- Lack of robust assessment across all settings
- Limited plans for ongoing monitoring and enforcement
- Silent on provider capacity to meet new requirements

Grassroots engagement

- 466 survey responses
- Self-advocate – 138 - 29%
- Family member – 243 - 52%
- Paid provider – 109 - 23%

- Overarching message: There aren't choices in our communities. There is a lack of options – which is limiting integration.

Media Strategy: Proactive is Essential

 Opinion

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Improving lives of people with disabilities



Journal Sentinel Files
In this file photo, participants work on the production line at a training center in Racine that offers assessment, training and job placement for people with disabilities.

By Kevin Fech, Cindy Bentley And Laura Owens

July 31, 2014

 Tweet 24

 Recommend 306

 Submit

 EMAIL  PRINT  (15) COMMENTS

Imagine living in a home where you didn't choose who lived with you. You don't even have your own key; you have to wait for someone to let you in. You can't choose what you eat, watch on TV or when you go to bed. You can't have visitors when you want, and some people aren't allowed to visit you.

Imagine living in a community where there was only one job in town for you for the rest of your life, but it was not something you were good at or interested in and did not pay you enough to be independent. You might make as little as a penny per hour. You may never actually see your paycheck.

These are the only choices for living and working available for many people with disabilities across Wisconsin. People need more choices than that.

Legislator Strategy



Recommendations for Other States

- Be proactive with media – community conversations; press events
- Support basic themes for professional advocate input
- Assess your state – where do you need boots on the ground?
- Get main messages down early
- Don't forget legislators

Questions?

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