



Executive Director's Report

October 2014

Teresa Holt, Executive Director

NEW COUNCIL ADDITIONS

- Welcome Britteny Howell, our new research analyst
- Welcome Kristin's new daughter, Isabella





CHANGES TO 1915(c) WAIVER REGULATIONS

Effective March 17, 2014

- Emphasis on *quality of life* for recipients of waiver services
- Person-Centered Planning
- Definition of “home and community-based settings” in which services may be provided
- “Conflict-free” care coordination
- Added protections for recipients in provider controlled or operated residential settings



PERSON-CENTERED PLANNING

- Clear separation of service planning and service provision
- New requirements for documentation of options offered to the recipient
- Real choice for recipient free from pressure and undue influence



PERSON-CENTERED PLANNING PROCESS

- Led by the recipient and/or with their representative (as defined by recipient)
- Reflect cultural considerations
 - individuals with disabilities
 - limited English proficiency
- Documents the options offered and considered by the individual
- Plan signed by and distributed to all



CONFLICT-FREE CARE COORDINATION

- Complete separation of service planning and service provision
- Prohibition on any agency providing both to same individual
- ***No acceptable degree or percentage of financial or organizational affiliation between agencies that will allow provision of care coordination and service provision***
- **Exception:** only 1 qualified agency in a geographic



HOME AND COMMUNITY-BASED SETTING (HCBS)

Requires the state to verify that all recipients of HCBS receive those services:

- in integrated community settings
- selected by the recipient from among setting options (including non-disability specific settings)
- appropriate to their needs
- settings provide “full access” to the benefits of community living



DEFINITION OF FULL ACCESS

Full access means **to the same degree of access as individuals not receiving home and community-based services** including opportunities to:

- *seek employment and work in competitive, integrated settings*
- *engage in community life*
- *control personal resources*
- *receive services in the community*



HOME AND COMMUNITY-BASED SETTING

Qualities of a “home and community-based setting:”

- Physically accessible
- Choice of roommates
- Freedom to furnish and decorate
- Freedom and support to control schedules and activities
- Access to food at any time
- Visitors at any time



HCBS IN PROVIDER-OWNED SETTINGS

In a provider-owned or controlled residential setting the following *additional* conditions must be met:

- Must be rented or occupied under a “legally enforceable” agreement
- Same protections from eviction under the landlord/tenant law
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- Privacy in sleeping or living unit
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- Entrance doors lockable by the individual

NEVER ALLOWABLE AS HCBS SETTINGS

- Nursing home/facility
- Institution for mental disease (16+ beds)
- Intermediate Care Facility/Intellectual and Developmental Disabilities (ICF/IDD)
- Hospital
- Any setting co-located with, on the grounds of, or immediately adjacent to an institution
- Any other location that isolates individuals from the broader community



ALASKA'S NEXT STEPS TO COMPLIANCE

- 1. Assess providers on the basis of HCBS settings regulatory criteria*
- 2. Determine setting's level of conformity to HCBS setting characteristics*
- 3. Develop "Transition Plan"*
- 4. Provide opportunity for Public Comment*



HOW THE COUNCIL CAN HELP

Discussion on how to help self-advocates and families:

1. Get information about these changes
2. Provide input on the state plan
3. Understand how the approved plan will affect their services