

Aging and People with Disabilities

Jane-ellen Weidanz

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Number: APD-IM-15-110

Issue date: 12/23/2015

Corrected

Topic: Long Term Care

Providers required to complete Home and Community-Based Services

Subject: (HCBS) Provider Self-Assessment (Survey)

Applies to (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County Mental Health Directors |
| <input checked="" type="checkbox"/> Area Agencies on Aging | <input type="checkbox"/> Health Services |
| <input checked="" type="checkbox"/> Aging and People with Disabilities | <input type="checkbox"/> Office of Developmental Disabilities Services(ODDS) |
| <input type="checkbox"/> Self Sufficiency Programs | <input type="checkbox"/> ODDS Children's Intensive In Home Services |
| <input type="checkbox"/> County DD Program Managers | <input type="checkbox"/> Stabilization and Crisis Unit (SACU) |
| <input type="checkbox"/> ODDS Children's Residential Services | <input checked="" type="checkbox"/> Other (<i>please specify</i>): Medicaid and Non-Medicaid (Private Pay) Community-based licensed or certified providers including: Adult Foster Homes, Assisted Living Facilities, Residential Care Facilities and Memory Care Communities |
| <input type="checkbox"/> Child Welfare Programs | |

Message: Home and Community-Based Services (HCBS) rules

The purpose of this memorandum is to clarify and inform APD/AAA staff that:

- All community-based licensed or certified providers are required to complete the HCBS Provider Self-Assessment Survey prior to the new 12/30/15 deadline, and
- HCBS permanent rules and facility-specific temporary rules are effective 1/1/16.

Survey Clarification

Some private pay providers (those without a Medicaid contract) have been told or believe they are exempt from participating in the HCBS survey process. This is not accurate. ALL licensed APD facilities, regardless of payment source, are required to participate.

The HCBS survey gathers information from Medicaid and non-Medicaid (“private pay”) providers, including Adult Foster Homes, Assisted Living Facilities, Residential Care Facilities and Memory Care Communities.

Should a provider call a local office for guidance, please clarify the expectations to participate. If the provider needs additional assistance, please provide the following e-mail contact: jbarber@acumentra.org

HCBS Rule Effective Dates

[Oregon's Home and Community-Based Transition Plan](#) allows for a transition period for community-based providers to come into compliance with the new regulations. Providers licensed prior to 1/1/16 must be in full compliance by September 2018.

In line with the transition plan, Oregon has created new rules that comply with the new HCBS regulations that will be in place January 1, 2016. The new rules cover all providers, and individuals receiving services, regardless of the funding source (Medicaid or non-Medicaid). The Oregon rules can be viewed at the following link: <http://www.dhs.state.or.us/policy/spd/notice.htm>

All current community-based providers must begin making measurable progress towards compliance starting in 2016. The Provider Self-Assessment Survey will assist Oregon in determining which providers need further assistance in coming into full compliance with the new rules.

In addition to new rules, the following website contains material including Frequently Asked Questions (FAQ's), Information Sheets, Fact Sheets, and other materials intended to help with understanding the new rules and what they mean for Oregon. <http://www.oregon.gov/dhs/seniors-disabilities/HCBS/pages/index.aspx>

Questions regarding HCBS rules or changes may be submitted to:
HCBS.Oregon@state.or.us

If you have any questions about this information, contact:

Contact(s):	Chris Angel		
Phone:	503-945-7034	Fax:	
Email:	chris.s.angel@state.or.us		