



HFS

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HCBS Settings Rule Supplemental State and Provider Compliance Information

Alignment of State Oversight Systems with Federal HCBS Settings Requirements

Appendices A and B-1 through B-4 within Illinois' final Statewide Transition Plan (STP) draft reflect major system changes completed by each Illinois Home and Community-Based Services (HCBS) Waiver Operating agency to align with Federal HCBS Settings requirements. The State's final STP draft may be accessed at: <https://www2.illinois.gov/hfs/SiteCollection/Documents/09292022IllinoisStatewideTransitionPlanFinalDraft.pdf>. The University of Illinois Chicago's Division of Specialized Care for Children (UIC-DSCC) oversees the State's Persons who are Medically Fragile, Technology Dependent Waiver (MFTD) waiver which serves customers in their private homes. Thus, major system changes were focused on complying with Federal Person-Centered Planning requirements. In 2017, UIC-DSCC updated their policies and forms with Person-Centered Planning requirements and trained home-care staff serving customers. UIC-DSCC's Record Review tool was updated in 2018 to incorporate monitoring of Person-Centered Planning requirements and in 2021, Federal Person-Centered Planning requirements were added to the State's "Home and Community Based Services Waivers for Medically Fragile, Technology Dependent, Disabled Persons" administrative rule (89 IAC 120.530). Family Surveys are disseminated at initial enrollment, annually, at transition, and upon exit from the MFTD waiver program to gauge customer and family satisfaction. Illinois has added new Performance Measures to the MFTD waiver that will monitor for compliance with HCBS Person-Centered Planning requirements.

Illinois Department of Healthcare and Family Services' Supportive Living Program (IDHFS-SLP) had existing Resident Contracts, Rights rules and documents, and Provider agreements that aligned with requirements for residential provider-controlled HCBS settings that went into effect in 2014. IDHFS-SLP developed and presented training to SLP provider setting staff on HCBS Person-Centered Planning and Settings requirements in 2017, and several times since then. Also in 2017, IDHFS-SLP updated their policies and required use of newly developed Person-centered planning forms. Interim and annual certification tools were enhanced to monitor for compliance with HCBS Settings requirements. SLP provider settings are asked to ensure that all staff review HCBS Settings training content upon hire and annually. In 2019, IDHFS-SLP conducted training for Managed Care Organizations (MCOs) on HCBS Person-Centered Planning requirements. The SLP Waiver was amended in 2021 to allow for prospective and

current residents to live in a Dementia Care SLP provider setting when delayed egress is not a needed safety intervention. IDHFS-SLP developed and requires use of an Elopement Risk Assessment tool to be utilized with each individual Dementia Care SLP provider setting resident. When there is no identified individualized safety risk, the individual customer will be provided with guidance on how to circumvent the delayed egress. IDHFS-SLP has submitted HCBS Settings related revisions to Subpart B and Subpart E of 89 IAC 146 to Illinois' Joint Committee on Administrative Rules (JCAR) to be posted for 1st Notice. Illinois has added new Performance Measures to the SLP waiver that will monitor for compliance with HCBS Person-Centered Planning and Settings requirements.

In April of 2019, Illinois Department on Aging (IDoA) conducted training for Adult Day Service (ADS) provider settings on HCBS Person-Centered Planning requirements. This training coincided with IDoA's development of Person-Centered Plan of Care templates, ADS Person-Centered Plan of Care addendums, and policy requiring use of these forms by Care Coordination Unit (CCU) case managers and ADS provider settings. Illinois Department of Human Services' Division of Rehabilitation Services (IDHS-DRS) updated their policies, rules, and forms align with HCBS Person-Centered Planning requirements between 2019 and 2022. HCBS Settings related rule amendments pertaining to IDoA services were adopted in 2019. IDHS-DRS' HCBS Settings related rule amendments were posted for first notice by JCAR in July of 2022. IDHS-DRS and IDoA collaborated with IDHFS to update their standard training materials for case management staff to include HCBS Settings and Person-Centered Planning requirements from 2021 through 2022. Both agencies enhanced their quality assurance tools to monitor for compliance with HCBS Person-Centered Planning and Settings requirements by the Summer of 2022. All case management entities and quality assurance staff were trained on the requirements during this time as well.

By July 1, 2022, IDoA updated their Health and Safety Policy to require all Adult Day Service (ADS) providers that impose delayed egress or controlled exit to utilize an Elopement Risk Assessment tool for all customers. Additionally, the IDoA updated their Health and Safety Policy to require ADS settings to post transportation resources, community events, and employment and volunteer opportunities in an area viewable by all customers. All ADS, traumatic brain injury (TBI) Prevocational, and TBI Day Habilitation settings utilized by IDHS-DRS were notified in April of 2022 of required compliance with brokering volunteer and work opportunity information to individuals as well as compliance with all other applicable HCBS Settings criteria. Illinois has added new Performance Measures to the IDoA and IDHS-DRS waivers that will monitor for compliance with HCBS Person-Centered Planning and Settings requirements.

Illinois Department of Human Services' Division of Developmental Disabilities (IDHS-DDD) sought assistance from University of Illinois Chicago (UIC) to evaluate the Division's Person-Centered Planning process and make recommendations for improvements. In May of 2022, IDHS-DDD released University of Illinois Chicago's (UIC) Person-Centered Planning Report:

<https://www.dhs.state.il.us/page.aspx?item=144102>. IDHS-DDD worked to enhance their Discovery and Personal plan tools for full compliance with HCBS Person-Centered Planning and Settings requirements, then trained Independent Service Coordination (ISC) case managers and required use of the tools by October of 2022. Simultaneously, IDHS-DDD developed an Implementation Strategy tool that is congruent with HCBS Settings requirements and addresses modifications to HCBS Settings criteria based on individualized assessments. Provider settings were trained on use of the Implementation Strategy Tool and were required to begin using them by October of 2022. IDHS-DDD has continued to offer weekly technical assistance webinars to providers and case managers on appropriate use of the person-centered planning tools. In addition to Person-Centered Planning tools, IDHS-DDD developed and implemented policies in 2022 pertaining to provider-controlled residential HCBS settings that required lease or residency agreements, privacy and lockable doors, and choice of private rooms and roommates.

All IDHS-DDD staff, including administrative and quality assurance staff, were trained on HCBS Person-Centered Planning and Settings requirements between 2016 and 2020. Training was made available to stakeholders. Between 2021 and 2022, IDHS-DDD conducted training for providers and case managers on HCBS Settings requirements. IDHS-DDD is in the process of amending administrative rules pertaining to Community Integrated Living Arrangement (CILA) settings, Community Day Service (CDS) settings, Home-Based services for people with I/DD, and Rights and Responsibilities for people with I/DD to align with HCBS Person-Centered Planning and Settings requirements. The CILA rule was posted by JCAR for first notice in June of 2022, and the remaining rules are expected to be posted for first notice between December of 2022 and February of 2023. In 2022, IDHS-DDD completed updates to their Waiver Manual and quality assurance monitoring tools for alignment with the Final HCBS Rule. Illinois has added new Performance Measures to the IDHS-DDD waivers that will monitor for compliance with HCBS Person-Centered Planning and Settings requirements.

Between 2021 and 2022, IDHFS trained its contracted Quality Improvement Organizations (QIOs), Public Consulting Group (PCG) and Health Services Advisory Group (HSAG), on how to gather compliance data on new waiver performance measures related to HCBS Person-Centered Planning and Settings requirements. IDHFS' Bureau of Waiver Operations Management conducts bi-weekly meetings with the QIOs to ensure adequate compliance monitoring of HCBS waiver performance measures. The State conducted multiple HCBS Person-Centered Planning focused trainings for its contracted MCOs from 2019 to 2022 and conducted HCBS Settings focused training in the Summer of 2021. In December of 2021, IDHFS solicited evidence of systemic changes facilitated by the MCOs to ensure their members receive services in settings that are compliant with HCBS Settings requirements. The State included all advancements made by the MCOs in Appendix H of their Final STP (<https://www2.illinois.gov/hfs/SiteCollectionDocuments/09292022IllinoisStatewideTransitionPlanFinalDraft.pdf>). The MCOs have updated their Comprehensive Assessment tools, Person-Centered Planning areas of their case management platforms, and auditing processes to

ensure the provider settings utilized by their members are compliant with HCBS Settings requirements. IDHFS maintains quarterly meetings with Illinois Waiver Operating agencies and MCOs to ensure ongoing compliance with HCBS Settings criteria.

Initial Compliance Assessment

In 2014, the State collaborated with the University of Illinois at Springfield (UIS) to develop and disseminate two provider self-assessment surveys—one for Residential and one for Non-residential HCBS provider settings. The surveys were sent to 2,266 HCBS provider settings and solicited feedback from providers on level of compliance with the Federal Settings requirements as well as the qualities applicable to institutional settings as defined by Federal CMS in 42 CFR 441.301(c)(5)(v): “Any setting that is located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment, or in a building on the grounds of, or immediately adjacent to, a public institution, or any other setting that has the effect of isolating individuals receiving Medicaid HCBS from the broader community of individuals not receiving Medicaid HCBS.” The State obtained responses from 2256 of the HCBS provider settings. For settings with provider-reported institutional characteristics and settings who did not respond to the surveys, the State conducted 446 on-site visits to assess for compliance with Federal Settings requirements. The State’s assessment processes and results, Historical Appendices 3a through 3d, may be accessed at:

<https://www2.illinois.gov/hfs/MedicalClients/HCBS/Transition/Pages/HistoricalAppendices.aspx>.

After conducting validation reviews for all SLP settings in 2016, IDHFS-SLP updated their Annual Certification Review Tool in June of 2017 to monitor SLP provider setting compliance with Federal HCBS Settings requirements. In addition, IDHS-SLP updated their Interim Certification Review tools to assess for institutional characteristics and determine compliance with Federal HCBS Settings requirements. All SLP settings must undergo an Interim Certification Review prior to admitting residents for HCBS service delivery. Since SLP updated their Annual Certification and Interim Certification Review Tools, all 155 SLP Provider Sites have been assessed and determined compliant with Federal HCBS Settings requirements. Evidentiary packages for SLP Heightened Scrutiny locations have been updated to include current compliance monitoring data and can be accessed at:

<https://www2.illinois.gov/hfs/MedicalClients/HCBS/Transition/Pages/HeightenedScrutiny.aspx>.

Through feedback from Federal CMS, IDHFS identified a need to re-evaluate HCBS provider settings overseen by Illinois Waiver Operating agencies who were still working to update their Annual Compliance monitoring tools, policy, training, and rules. The State excluded the MFTD waiver as this waiver does not utilize HCBS provider settings, since services are delivered in the customer’s private residence. The State excluded the SLP waiver due to their updated certification tools and determination of all SLP settings as compliant with HCBS Settings requirements.

Given that IDHS-DDD oversees the majority of HCBS provider settings in the state, IDHFS and IDHS-DDD sought and received approval for Technical Assistance through CMS contractor, New Editions, in July of 2021. The guidance provided by New Editions was a tremendous benefit to the State in developing their enhanced Federal HCBS Settings Compliance validation processes. To ensure comprehensive assessment of compliance with Federal HCBS Settings requirements during the COVID-19 pandemic, IDHFS began work with their Department of Innovative Technology (DoIT) staff in September of 2021 to build a Microsoft Customer Relationship Management (CRM) portal that by February of 2022, would serve as a forum for over 2,400 HCBS provider settings to submit supportive policy and sources of evidence of compliance with all applicable Federal HCBS Settings requirements. During the build process and review of HCBS provider settings, Illinois identified additional provider settings that required the validation process to be completed to determine compliance, in addition to the settings that underwent assessment between 2016 and 2018. To provide for efficient and accurate validation, the State implemented a staggered approach to the submission and review process as follows: Provider Agencies with fewer than 21 settings were required to submit evidence by late April 2022. Provider Agencies with more than 21 to 50 settings were required to submit up until mid-May 2022, and Provider Agencies with more than 51 settings were required to submit up until mid-June 2022. Providers that were determined to meet Heightened Scrutiny status through a Pre-Site Validation Survey received on-site visits.

Prior to initiating Settings Compliance Validation processes in 2022, IDHFS worked with IDHS-DRS, IDHS-DDD, and IDoA to develop new HCBS Settings validation tools for dissemination to providers and to conduct trainings for providers on HCBS Settings requirements. IDHS-DDD posted their 2022 Settings Compliance Validation tools on their public-facing website: <https://www.dhs.state.il.us/page.aspx?item=141608>. IDHS-DRS and IDoA Settings Compliance Validation tools can be viewed in Appendices C1 and C2 of the States final STP draft (<https://www2.illinois.gov/hfs/SiteCollectionDocuments/09292022IllinoisStatewideTransitionPlanFinalDraft.pdf>). Because IDHS-DDD has traditionally required provider Settings to develop policies that align with State and Federal requirements, IDHS-DDD provider agencies were required to submit policies that align with all applicable Federal HCBS Settings requirements. IDHS-DRS and IDoA updated and implemented Provider Setting policies to align with Federal HCBS Settings requirements by July of 2022. To prepare their HCBS providers for validation, IDHS-DRS, IDoA, and IDHS-DDD collaborated with IDHFS to conduct web-based trainings for providers from October 2021 through December 2021. IDHFS developed a 2022 Settings Compliance Validation webpage (<https://www2.illinois.gov/hfs/MedicalClients/HCBS/Transition/Pages/2022SettingsComplianceValidation.aspx>) that included a video tutorial on navigating the portal, written guidance on portal submissions, and Waiver Operating agency e-mail contacts. Identified providers were notified of requirements for submission on February 15, 2022, by their respective Waiver Operating agencies. The following day, IDHFS issued a Provider Notice (<https://www2.illinois.gov/hfs/MedicalProviders/notices/Pages/pm220216a.aspx>) regarding the launch of 2022 Settings Compliance Validation.

The State implemented processes and developed resources for providers to promote provider cooperation with the State's enhanced Settings Compliance Validation process, and to assist providers in transitioning to compliance. IDHS-DRS and IDoA issued weekly reminders to providers regarding validation requirements. Ahead of 2022 Settings Compliance Validation efforts, IDHFS conducted trainings on Federal Person-Centered Planning and Settings requirements for Illinois Department of Human Services' Division of Rehabilitation Services (IDHS-DRS) and Illinois Department on Aging (IDoA) HCBS provider settings in October 2021. Resources for these trainings are available at: <https://www2.illinois.gov/hfs/MedicalClients/HCBS/Transition/Pages/AdditionalResources.aspx>. IDHFS also hosted two web-based Settings Compliance Validation Q&A sessions in April of 2022 for IDHS-DRS and IDoA HCBS Provider Settings. A set of Frequently Asked Questions (FAQs) was developed and distributed to providers based on education provided during those meetings. Initial and Annual training for Adult Day Service (ADS) provider settings includes Person-Centered Planning and HCBS Settings requirements.

IDHS-DDD conducted training for their providers in February of 2022. The Division maintained weekly education and technical assistance meetings for providers through the validation process. IDHS-DDD also issued weekly e-mail updates regarding deadlines for compliance. IDHS-DDD collaborated with the Illinois Council on Developmental Disabilities (ICDD) and the Council on Quality Leadership (CQL) to launch the Home and Community Based Settings (HCBS) Settings Rule Technical Assistance (TA) Project. The TA Project began with a pilot phase from January through March 2022 in which 20 Provider Agencies received up to three days of TA from a CQL TA Lead that resulted in the development of Compliance Action Plans specific to their organizations. Technical Assistance continued throughout the 2022 Compliance Validation process. IDHS-DDD also created a webpage specifically dedicated to HCBS Settings Rule Compliance <https://www.dhs.state.il.us/page.aspx?item=138570>. This webpage includes links for accessing IDHS-DDD's revised Settings Assessment tools, trainings on the HCBS Settings Rule conducted for providers from December 2021 through February 2022, a set of Frequently Asked Questions (FAQs) regarding the HCBS Settings Rule and 2022 HCBS Settings Compliance Validation efforts, a toolkit developed for providers to assist with preparation for 2022 HCBS Settings Compliance Validation, links to Informational Bulletins on Residency Agreements and Lockable Doors, and the Pre-Survey conducted with providers before 2022 Settings Compliance Validation efforts to confirm provider locations and assess for institutional or isolating characteristics.

Over 50 State agency employees across HCBS Waiver Programs conducted compliance validation reviews. Adult Day Service (ADS) provider settings are certified by IDoA, but the settings are also utilized by IDHS-DRS for their waiver customers. As such, IDHS-DRS staff assisted in evaluating a number of ADS settings for compliance with HCBS Settings requirements. To promote consistency in validation reviews, IDHFS partnered with IDHS-DRS, IDoA, and IDHS-DDD to ensure all Waiver Operating agency HCBS Settings Compliance

Validation tools were alike regarding Settings requirements and suggestions for sources of evidence of compliance. In addition, IDHFS Waiver Operations staff monitored for adequate completion of validation review tools and compliance tracking within the Settings Compliance Validation portal. IDHS-DDD developed an HCBS Settings workgroup that included agency staff, advocates, providers, and individuals with I/DD who reviewed validation tools and provider communications. Additionally, IDHS-DDD also brought on Quality Assurance staff to monitor reviews. All IDHFS and IDHS-DDD staff who assisted with validation reviews underwent training on Federal HCBS Settings requirements and use of validation review tools. IDHFS held weekly meetings with Waiver Operating agencies on validation review progress and provided technical assistance with the Settings Compliance Validation portal. In May of 2022, IDHS-DDD began hosting weekly web-based meetings for IDHS-DDD and IDHFS staff assisting with IDHS-DDD validation reviews.

Through an existing contract, the State sought assistance with compliance validation reviews and on-site assessments for IDHS-DDD Heightened Scrutiny locations from Public Consulting Group (PCG), a Quality Improvement Organization (QIO). PCG is a nationally recognized public-sector consulting firm with extensive experience conducting Heightened Scrutiny reviews. IDHFS worked with all Waiver Operating agencies to ensure PCG and validation review staff from IDHFS, IDHS-DDD, IDoA, and IDHS-DRS were adequately trained on Federal HCBS Settings requirements, use of Validation Review tools, review of HCBS Provider evidence, and navigation of the Settings Compliance Validation Portal.

In addition to assessing HCBS Provider Setting compliance, Illinois Department of Human Services' Division of Developmental Disabilities (IDHS-DDD) also completed validation reviews of Group Supported Employment Provider (SEP) Organizations. Individual customers who pursue Group SEP are paid at or above minimum wage and belong to an enclave of no more than six customers at a time. While IDHS-DDD does allow Group SEP to occur at an integrated location when there are typically no other employees working besides the IDHS-DDD Group SEP customers, Group SEP must be conducted in an integrated business, industry, or community setting that:

- Meets the requirements of the Federal HCBS Settings rule;
- Is not isolated from individuals who do not have disabilities; and
- Allows ample opportunity for routine interactions with customers, co-workers and other individuals who do not have disabilities.

The goal of Group SEP is to successfully transition customers to competitive integrated employment or self-employment, or to supplement such employment and/or self-employment when it is only part-time. In mid-February 2022, 20 Group SEP provider organizations received training on the Federal HCBS Settings Rule as well as organizational policy and evidence submission requirements. The Group SEP Policy and Implementation Evidence Collection Tool (see Appendix D) required Group SEP Program staff to submit evidence and organizational policy by mid-April 2022 that are supportive of the following Federal HCBS Settings requirements:

- The setting optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to daily activities.
- The setting optimizes, but does not regiment, individual autonomy, and independence in making life choices, including but not limited to physical environment.
- The setting optimizes, but does not regiment, individual autonomy, and independence in making life choices, including but not limited to with whom to interact.
- The setting facilitates individual choice regarding services and supports, and who provides them.

From April through September of 2022, the State conducted HCBS Settings compliance validation reviews for 2,345 HCBS provider settings. A total of 1,016 (43%) of Illinois HCBS provider settings were determined fully compliant with HCBS Settings criteria. Compliance Action Plans (CAPs) were disseminated to 1,325 (57%) Illinois HCBS provider settings with one or more non-compliance concerns. As discussed previously, all Illinois SLP provider settings were determined as fully compliant prior to Illinois' 2022 HCBS Settings compliance validation efforts. A single IDHS-DRS TBI Pre-Vocational provider setting did not submit required evidence of compliance, was non-responsive to outreach from the State, and removed as a provider. This provider setting was not serving customers at the time. Two ADS provider settings had one or more non-compliance concerns and furnished evidence of remediation to the State by August 2022. Of the 20 Group SEP provider agencies required to undergo validation, three were removed as providers, either due to lack of evidence submission or choosing to withdraw as Group SEP providers. None were serving customers. Five of the 17 remaining Group SEP provider agencies received CAPs and are expected to attain full compliance with HCBS Settings requirements by the end of December 2022. 209 CDS settings, 21 Children's Group Home (CGH) settings, 13 Community Living Facility (CLF) settings, and 1,070 CILA settings received CAPs. All 14-day CAPs were submitted to IDHS-DDD by November 2022. The State anticipates that all IDHS-DDD provider settings who received CAPs will transition to full compliance with HCBS Settings requirements by the end of January 2023.

Ongoing Compliance Monitoring

HCBS Settings criteria has been folded into annual and new staff trainings for case managers, Waiver Operating agency staff, providers, and MCOs. All Illinois Waiver Operating agencies require prospective provider settings to attest to compliance with applicable State and Federal regulations, including HCBS Settings requirements, prior to serving customers. IDHS-DDD requires Group SEP agencies to submit settings supportive policies prior to serving customers and must submit implementation evidence once service provision begins. New IDHS-DDD provider settings must submit evidence of compliance with all applicable HCBS Settings requirements within the first 90 days of serving customers and receive an on-site compliance assessment within a year of serving customers. IDoA and IDHFS-SLP conduct interim and final certification reviews for new provider settings within their first six months of serving customers. Prior to application, IDHS-DRS relays information regarding applicable State and Federal regulations to settings interested in serving waiver customers. IDHS-DRS RSAs will conduct

initial compliance assessments before settings initiate service provision to customers. Training is provided as needed during initial and subsequent bi-annual certification reviews.

All Illinois Waiver Operating agencies who utilize HCBS provider settings have updated their compliance monitoring tools to assess for provider setting compliance with HCBS Settings criteria. When deficiencies are observed, the Waiver Operating agency notifies the provider setting in writing and includes timeframes for furnishing evidence of remediation to avoid disenrollment as an HCBS provider. Once every two years or in response to compliance concerns, IDHS-DRS Rehabilitation Services Advisors conduct quality assurance assessments of ADS, TBI Habilitation, and TBI Pre-Vocational settings utilized by IDHS-DRS waiver customers. Once every three years, IDoA conducts quality assurance assessments of ADS provider settings, unless the agency fields compliance concerns prior to the assessment due date. IDoA interviews waiver customers during the assessment process to ensure compliance with HCBS Settings requirements. The majority of TBI Pre-Vocational Service and Day Habilitation settings also serve as Community Day Service (CDS) provider settings that are monitored by IDHS' Bureau of Accreditation, Licensure, and Certification (BALC). In addition to BALC oversight, IDHS-DDD annually monitors compliance of all IDHS-DDD HCBS provider settings customers through surveys conducted by IDHS-DDD's Bureau of Quality Management (BQM). BQM collects a sample of Personal Plans from Independent Service Coordination (ISC) case managers and surveys the providers organizations, including Group and Individual Supported Employment Program (SEP) provider organizations utilized by IDHS-DDD waiver customers. All IDHS-DDD HCBS provider organizations are surveyed at least once every three years. IDHS-DDD's Supported Employment Administrator conducts annual revalidations of Individual and Group Supported Employment Program (SEP) provider organizations.

Eight of the nine Illinois Waiver programs have received Federal approval for updated Waiver performance measures that monitor for compliance with HCBS Settings requirements and accompanying Person-Centered Planning documentation requirements. The HIV/AIDS waiver will be renewed in October 2023 and the performance measures will be updated at that time. Interested parties can view Illinois' currently active HCBS waivers with updated performance measures here: <https://www2.illinois.gov/hfs/MedicalClients/HCBS/Pages/default.aspx> . These performance measures are applied to customers receiving HCBS in their homes and customers receiving services at HCBS provider settings in the community. The State intends to ensure that customers who receive HCBS in their private homes have autonomy in decision-making over their services and the same degree of access to the community as individuals not receiving Medicaid HCBS.

In July of 2021, IDHFS developed a process for tracking HCBS provider settings with institutional qualities that require the application of Heightened Scrutiny. The form is included in Appendix L of the State's Final STP draft (<https://www2.illinois.gov/hfs/SiteCollection/Documents/09292022IllinoisStatewideTransitionPlanFinalDraft.pdf>). Each Waiver Operating agency has Pre-Certification processes in place to

avoid onboarding provider settings with institutional qualities. When a prospective provider setting falls into a heightened scrutiny category, IDHFS-SLP, IDHS-DRS, and IDoA take this characteristic into consideration when reviewing the setting's application. IDHS-DDD has amended provider setting rules to ensure new provider settings with institutional qualities are not selected as HCBS providers. IDHS-BALC has also updated their initial questionnaire for prospective settings to gauge institutional characteristics.

Beneficiary Recourse Processes

MFTD customers receive support and education regarding program requirements, grievance, and hotline reporting. UIC-DSCC is engaged with participant/families on a variety of platforms to ensure families have a path of accessibility to voice concerns involving grievances, critical incidents, and the provision of waiver services. To enhance support to families, UIC-DSCC maintains a "Contact Us" page (<https://dsccl.uic.edu/find-an-office/contact-us/>) on the UIC-DSCC website. This page allows families the ability to directly submit a message or concern. The message board is monitored with each submission being directed to the appropriate for support and resolution. In addition, UIC-DSCC conducts family surveys which solicit input regarding satisfaction and service concerns.

All UIC-DSCC care coordination staff are trained on the grievance process during their new employee orientation and annually thereafter. When a UIC-DSCC care coordinator or employee identifies a grievance, the employee has a responsibility to inform the individual of the UIC-DSCC grievance process, explaining that it is a way to escalate the concern for administrative resolution. The UIC-DSCC employee should immediately inform the manager of the grievance. The customer or Legally Responsible Adult may also file a grievance through written, electronic, or verbal means.

UIC-DSCC requires each customer/family to complete the "Emergency Information for the Home" document. UIC-DSCC care coordinators assist families with completion of the document upon enrollment and annually. The document ensures that families have identified key supports and services which may be sought during a time of emergency. The document also includes contact numbers, directing families to relay emergency situations to Police, Fire, Poison Control, and Abuse and Neglect Hotline. In addition to the "Emergency Information for the Home document," UIC-DSCC has updated their "Roles and Responsibility" form which covers family guidance to submitting a hotline complaint.

IDHS-SLP provider setting residents are educated on how to file complaints with the SLP complaint hotline and the Long-Term Care Ombudsman upon admittance and during annual Person-Centered Planning meetings. The SLP Complaint hotline number and Long-Term Care Ombudsman contact information are provided to customer during admittance and posted in a visible location on each floor, or in two locations for single story buildings. The Long-Term Care Ombudsman assist residents with filing complaints, either by doing this on their behalf, or

providing them the complaint hotline phone number. SLP residents may also notify their Managed Care case manager of provider setting complaints, and the case manager relays the complaint to IDHS-SLP by way of HFS.SLF@illinois.gov.

Upon receipt of a resident complaint, IDHS-SLP initiates an investigation within seven days. The investigations are unannounced. If findings of non-compliance are issued, providers receive written notification and have 30 days to implement a plan of correction. After the 30-day period, IDHFS-SLP completes an unannounced follow-up review within ten business days. If non-compliance is still identified, a second written notification is provided, and another 30 days is allowed for correction. A second unannounced follow-up review is completed. If non-compliance continues to exist, IDHFS-SLP can impose sanctions ranging from a directed in-service to termination of the Medicaid provider agreement. The same process is followed in instances of immediate jeopardy, but the timeline is shortened. On the day the immediate jeopardy is issued, an abatement plan must be submitted that identifies remediation that will occur beginning that day that will resolve the health & safety issue(s). Depending on the type of non-compliance, IDHFS staff may remain on-site at the SLP setting to verify implementation of the abatement plan. A plan of correction must be implemented within 10 days. IDHFS completes an unannounced follow up review within 10 business days. If the follow up review shows immediate health & safety issues continue, or there is the potential for this, IDHFS will take action to suspend or terminate the Medicaid provider agreement.

IDoA ADS provider settings are required by IDoA policy to display Illinois Senior Helpline and Adult Protective Services (APS) contact information on their bulletin boards for ADS customers to see. IDoA has specific staff assigned to investigate and respond to HCBS and ADS provider setting complaints. Illinois Senior Helpline and APS hotline staff are trained to route complaints to the appropriate staff for follow up. Upon initial and annual eligibility assessment, CCU case managers provide customers with Illinois Senior Helpline APS contact information as well as the CCU case manager's direct contact information. Managed Care Organization (MCO) case managers are also required to provide Illinois Senior Helpline and APS contact information at initial and annual service planning. CCU and MCO case managers can relay ADS customer complaints to Aging.COVID19.ADS@illinois.gov or Aging.ADS@illinois.gov.

An IDoA designated staff member is responsible for investigating complaints regarding ADS sites. This staff member may conduct an in-person visit to ADS site to resolve any non-compliance concerns. This includes written notification to the ADS site of the non-compliance concern(s) and a timeline for remediation. If the ADS site is unable to resolve the concern, IDoA administration collaborates with IDHFS to ensure the ADS is eliminated as an HCBS provider. IDoA collaborates with the respective CCU case manager or MCO Care Coordinator to broker alternate service options to impacted customers.

At initial and annual eligibility assessments, IDHS-DRS waiver customers are provided with their Home Services Program (HSP) Counselor's name and contact information. MCO case

managers also provide their contact information to customers during annual service planning. Customers are educated on how to relay DRS HCBS provider concerns to HSP Counselors and MCO case managers during service planning and eligibility assessments. HSP Counselors and Coordinators are educated to relay HCBS provider complaints to DHS.HSPProgram@illinois.gov. IDHFS and IDHS-DRS have educated MCOs to relay HCBS provider complaints to DHS.HSPManagedCare@illinois.gov.

The DRS-HSP Waiver Manager collaborates with DRS-HSP Rehabilitation Services Advisors (RSAs) to investigate complaints against Traumatic Brain Injury (TBI) Pre-Vocational provider settings, TBI Day Habilitation provider settings, ADS provider settings, Homemaker agencies, and Home Health agencies. The RSAs and Waiver Manager work with provider settings to resolve any non-compliance concerns. This process includes written notification to the provider setting of the non-compliance concern(s) and a timeline for remediation. If DRS-HSP is unable to resolve the concern, DRS-HSP administration collaborates with IDHFS to ensure the provider setting is eliminated as an HCBS provider. DRS-HSP collaborates with the respective DRS-HSP Counselor or MCO Care Coordinator to broker alternate service options to impacted customers.

In November of 2022, IDHS-DDD established a new e-mail address, DHS.HCBSComplaints@illinois.gov and toll-free number, 877-657-0005, that are specifically dedicated to receiving HCBS provider setting complaints. This HCBS specific complaint process was relayed to providers and case managers on November 30, 2022. IDHS-DDD notified stakeholder of the new process on December 12, 2022. IDHS-DDD has identified a point person who will receive and enter the complaint information. The point person will talk to the complainant to best understand their concerns and when necessary, forward the concerns to the appropriate IDHS-DDD staff person to address. This will include IDHS-DDD's Bureau of Community Services/Regions and Bureau of Quality Management staff. The point person will ensure there is follow up to the complainant as well as track data on the complaint and findings. IDHS-DDD will add information regarding their new complaint processes to the Rights document provided to HCBS customers. To further assist with the tracking of HCBS complaints, IDHS-DDD is working to develop a web-based complaint form and anticipates uploading the form in January 2023.

Timelines for IDHS-DDD HCBS provider complaints depend on complaint dynamics. When a complaint regarding abuse, neglect, or exploitation is submitted to IDHS-DDD, the Division is required to relay the concern to IDHS' Office of Inspector General (OIG) for investigation. IDHS' Bureau of Accreditation, Licensure & Certification (BALC) will conduct an on-site investigation if a complaint includes concern for imminent risk. Frequently, IDHS' Bureau of Quality Management (BQM) and BALC collaborate to conduct on-site visits in response to complaints. When complaints include medication concerns, nurses will visit provider setting locations to monitor medication administration. On a monthly basis, the identified point person requests follow-up reports for tracking and data. If a complaint is verified and the HCBS provider setting

does not remediate concerns, IDHS-DDD's Bureau of Community Services/Regions will work with the appropriate ISC to broker alternate service options to impacted individuals. IDHS-DDD will work very closely with the provider setting to resolve the issue and if the issue persists, IDHS-BALC will end the provider's license.