

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
7500 Security Boulevard, Mail Stop S2-14-26  
Baltimore, Maryland 21244-1850



**Disabled & Elderly Health Programs Group**

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November 9, 2022

Maureen Corcoran  
Director  
Ohio Department of Medicaid  
50 West Town Street, 4th Floor  
Columbus, OH 43215

Dear Director Corcoran:

This letter and attached report are in reference to a site visit conducted by the Centers for Medicare & Medicaid Services (CMS) from May 16-18, 2022. CMS visited several settings in Ohio that were identified by the state and/or stakeholders as having the qualities of an institution as outlined at 42 CFR § 441.301(c)(5) and required a CMS-conducted heightened scrutiny review to determine if they comply with the home and community-based services (HCBS) settings criteria at 42 CFR § 441.301(c)(4).

CMS appreciates the efforts of the state to prepare for our visit to Ohio. We are asking the state to apply remediation strategies addressing the feedback contained in our report to the specific setting(s) as identified. We note that the HCBS settings criteria identified in the report that are followed by an asterisk require the state to go beyond ensuring that the individual setting has completed the necessary actions identified; specifically, complying with person-centered planning requirements requires further direction to and collaboration with the entities responsible for developing and monitoring the person-centered plans and with the HCBS provider community that is responsible for implementing services and achieving the objectives outlined in the plan. In addition, CMS notes that the state's remediation strategies must be applied to all remaining similarly situated settings you have identified as being presumptively institutional that were not included in CMS' site visit to ensure compliance with the settings criteria at 42 CFR § 441.301(c)(4) by March 17, 2023. Finally, the state should ensure issues identified in this report are addressed in the state's overall assessment process of all providers of HCBS in Ohio, to ensure that all providers are being assessed appropriately against the regulatory settings criteria and will implement the necessary remediation to achieve timely compliance.

As described more fully in the attached report, CMS notes below several areas where issues were found to exist across several locations, which raise systemic concerns that must be addressed by the state. Specifically, the following regulatory criteria located at 42 CFR 441.301(c)(4) were not found to be in practice:

- The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.
- The setting ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.
- Individuals are able to have visitors of their choosing at any time.
- Modifications of additional conditions in provider owned and controlled residential settings under § 441.301(c)(4)(vi)(A) through (D), must be supported by a specific assessed need and justified in the person-centered service plan.\*

Ohio's Statewide Transition Plan (STP), approved on September 20, 2019, describes strategies to ensure that all providers of Medicaid HCBS have been assessed to meet the regulatory criteria and any needed remediation has been identified. The state's practice for addressing the observations described in the attached report must align with the processes described in the STP.

CMS requests that the state provide a written response providing updated information describing how the state will remediate both the process for developing and implementing the person-centered service plan and the individual settings to ensure compliance with all of the settings criteria. CMS also requests a written response on how the state will apply this feedback to the ongoing monitoring of person-centered planning functions and settings in the HCBS delivery system as noted above. CMS requests this information be submitted no later than December 9, 2022.

Upon review of this feedback, please contact Michele MacKenzie at (410) 786-5929 or [Michele.Mackenzie@cms.hhs.gov](mailto:Michele.Mackenzie@cms.hhs.gov) if you would like to schedule a follow-up conference call with the CMS team to discuss next steps or request technical assistance.

Thank you for your continued commitment to the state of Ohio's successful delivery of Medicaid-funded HCBS.

Sincerely,

Melissa L. Harris, Deputy Director  
Disabled & Elderly Health Programs Group

Enclosure

**Heightened Scrutiny Site Visit- Ohio**  
**Summary Review by Setting**  
**May 17-18, 2022**

**Ohio Site Visit Team:**

CMS Representative: Michele MacKenzie (attended virtually)

New Editions: Devon Mayer and Amy Coey

ACL: Beverley Laubert

Ohio: Jesse Wyatt and Karen Boester

**Introduction:**

The Site Visit Team visited four settings in Ohio. Three of the settings were assisted living facilities (ALF), and one, Forest Hills Center-Adult Day Center, was an adult day center (ADC). The settings are located in the central and southwestern regions of Ohio, with three settings currently providing Medicaid home and community-based services (HCBS), Buckeye Forest at Fairfield (previously known as Heartland of Woodridge), Hyde Park Health Center, and Forest Hills Center, while one setting (Canal Winchester) is not currently an HCBS provider, but is in the process of becoming certified through the state. As noted in the table below, systemic issues were identified during the CMS site visits regarding several regulatory criteria.

<b>Rule Citation</b>	<b>Rule Language</b>	<b>Setting Name</b>
441.301(c)(4)(vi)(F)	Any modification of the additional conditions, under §441.301(c)(4)(vi)(A) through (D), must be supported by a specific assessed need and justified in the person-centered service plan.	Buckeye Forest/Heartland of Woodridge- ALF, Hyde Park Health Center- ALF, Forest Hills Center- ADC, Canal Winchester- ALF
441.301(c)(4)(i)	The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.	Buckeye Forest/Heartland of Woodridge –ALF, Hyde Park Health Center-ALF, Forest Hills Center-ADC, Canal Winchester- ALF
441.301(c)(4)(iii)	Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.	Buckeye Forest/Heartland of Woodridge- ALF, Hyde Park Health Center- ALF, Forest Hill Center- ADC
441.301(c)(4)(vi)(D)	Individuals are able to have visitors of their choosing at any time	Buckeye Forest/Heartland of Woodridge- ALF, Hyde Park Health Center- ALF
<b>Additional Provision</b>	<b>Language</b>	<b>Setting Name</b>
Staff Training on HCBS Setting Rule Criteria: State Medicaid Director Letter # 19-001 <sup>1</sup>	Description of how staff are trained and monitored on their understanding of the settings criteria and the role of person-centered planning, consistent with state standards as described in the waiver or in community training policies and procedures established by the state.	Buckeye Forest/Heartland of Woodridge- ALF, Hyde Park Health Center- ALF, Forest Hills Center- ADC, Canal Winchester- ALF

<sup>1</sup> <https://www.medicaid.gov/federal-policy-guidance/downloads/smd19001.pdf>; see question 10

## Buckeye Forest at Fairfield (Previously known as Heartland of Woodridge) - Assisted Living- Visit May 17, 2022

### Facility Description:

The setting is located north of Cincinnati, Ohio and is in the same building as a nursing facility. There are ninety-nine residents, of which ninety-one are enrolled in HCBS waivers (MyCare Ohio and Assisted Living). The assisted living facility is housed in a five-story building; all floors but the fifth floor are used by the provider at this time. Within the assisted living facility, there is a locked dementia/memory care wing. Behind the facility is a large yard area with a pavilion that can be accessed through a door that staff report is unlocked at all times, and a cement walkway. On the first floor, there is a dining room that is also used as a craft and activity room. There is an elevator bank on the main floor, however, one of the two elevators was inoperable and marked as such with caution tape. Located on each floor is a lobby/common area and a tv attached to the wall, laundry facilities, and a nurse's station. Stairwells were also located on each floor; however, accessibility is through a code/lock system that is known only by staff.

### Site Visit Review Description:

Upon arrival, the team reviewed person-centered service plans (PCSPs) made available by both the state and the provider. The entire team was provided a tour of the facility. Due to poor WiFi connectivity within the facility, the team was only able to assure that CMS participated in part of the facility tour. However, information was shared via phone calls and texts to update CMS and provide feedback about how the site visit was proceeding. New Editions and ACL conducted conversational interviews with two administrators, three direct care staff, and two participants who receive services at the facility. State staff was present during interviews, but did not contribute to, or participate in the conversation. One participant provided the team a tour of her apartment. Additionally, administrative staff provided the site visit team a tour of an unoccupied apartment within the facility. Interviews with administration, staff, and participants covered all settings criteria.

### Findings of Site Visit:

Regulation Citation	Regulation Language	Violation Finding Based on Site Visit
441.301(c)(4)(i)	The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life,	Both participants and staff indicated participants were only allowed to leave the facility with the approval of staff.  <i>Buckeye Forest at Fairfield must ensure their model of service delivery aligns with the regulatory criteria to support participants' full access to</i>

Regulation Citation	Regulation Language	Violation Finding Based on Site Visit
	control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.	<i>the greater community. Establishing partnerships with community resources and leveraging existing community transportation options should be explored. Individuals should not need staff permission to leave the setting.</i>
441.301(c)(4)(vi)(A) through (D)	Any modification of the additional conditions, under §441.301(c)(4)(vi)(A) through (D), must be supported by a specific assessed need and justified in the person-centered service plan.	<p>During the review of person-centered plans, it was noted that plans are primarily focused on medical care and did not include information about the person’s needs or wants. Restrictive behavior supports were noted in plans without mention of any of the required assessments.</p> <p><i>The state should ensure that the entities responsible for overseeing the development and implementation of person-centered service plans are in compliance with regulatory criteria. One function of these plans is to serve as the basis for documenting any modifications of the settings criteria for an individual.</i></p>
441.301(c)(4)(vi)(D)	Individuals are able to have visitors of their choosing at any time	<p>In both staff and participant interviews, interviewees noted restrictions on visitors. Staff indicated that visitors were not permitted after 10pm and overnight guests were not permitted.</p> <p><i>Buckeye Forest at Fairfield should amend their visitor policy to ensure that individuals are able to have visitors of their choosing at any time and remove any restrictions on this requirement.</i></p>

Regulation Citation	Regulation Language	Violation Finding Based on Site Visit
441.301(c)(4)(iii)	Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint	<ul style="list-style-type: none"> <li>Participants reported they can report any issues they have with staff to the administrator or case manager, and indicated an understanding of verbal and physical abuse. Staff indicated they received initial training upon hire related to abuse/neglect, and also ongoing annual trainings included the same topic. However, neither the participants or staff indicated understanding or training around coercion.</li> </ul> <p><i>Buckeye Forest at Fairfield should ensure that practices enforce the right for individuals to be free from coercion and ensure that staff are properly trained on this right.</i></p> <ul style="list-style-type: none"> <li>Apartment doors were labeled with resident names thereby identifying for visitors the names of individuals receiving services in the setting.</li> </ul> <p><i>The setting should also ensure that individuals have the right to privacy and therefore have the right to not have identifying information on their doors visible to guests.</i></p>
Additional Provision	Language	Findings
Staff Training on HCBS Setting Rule Criteria: State Medicaid Director Letter # 19-001	Description of how staff are trained and monitored on their understanding of the settings criteria and the role of person-centered planning, consistent with state standards as described in the waiver or in community training policies and procedures established by the state.	<p>Staff indicated they receive initial and annual training on various topics, but were unaware of the settings rule or settings criteria.</p> <p><i>Buckeye Forest at Fairfield should ensure all employees have consistent and reinforced training on the HCBS regulatory criteria.</i></p>

## Hyde Park Health Center - Assisted Living Facility- Visit May 17, 2022

### Facility Description:

The assisted living facility is located north of Cincinnati and is in a large building that also houses a skilled nursing facility. The building is located in a high traffic area that is primarily businesses (not shops or restaurants) and highways. The nursing facility is on the main floor, while the assisted living facility is on the second floor. The assisted living facility is accessed through the main entrance of the nursing facility, walking through the nursing facility, and taking an elevator to the second floor. There are seven participants residing in the assisted living facility. Until recently, there were twenty-two residents in the assisted living facility, however, administrators noted they planned to discontinue HCBS assisted living waiver services and gave the assisted living residents notice to move. Subsequently, they decided to continue providing HCBS and allowed several individuals to stay. Administrators also noted that some of the participants who vacated the assisted living facility were relocated to the skilled nursing facility on the first floor. The assisted living facility appeared to be newly remodeled. The administrator showed the site visit team a vacant, model apartment that had a bedroom, living room, kitchenette, and bathroom. The unit was modern, open, clean, and had new flooring and paint. There was a large shared area used for group activities with an attached conference room. During the site visit, the shared area was being used by participants to play bingo. On the main floor, (nursing facility) there was an ice cream shop that was operated by the activity coordinator. The store is open to both nursing facility residents and assisted living facility residents. There are snacks, soda, ice cream, and personal care products (shampoo, deodorant, and clothing items) for sale in the ice cream shop.

### Site Visit Review Description:

The administrative staff welcomed the site visit team on arrival and met briefly in a conference room in the nursing facility. The facility administrator asked questions about the purpose of the visit, and wanted to understand the “new program” that was being put in place. The site visit team reviewed the purpose and process for the visit. A brief tour of the nursing facility was provided to the site visit team on the way to the second-floor assisted living facility. The administrator provided seven care plans for review. There was a field for “activities/preferences”; however, only two of the seven plans included any information: neither contained community integration activities but rather watching tv and reading books. The state representatives were able to provide PCSPs on their electronic devices for review by New Editions and ACL. The site visit team interviewed three direct support staff (DSPs) and three residents. DSPs reported longevity in caring for elderly individuals and acknowledged ongoing training on rights, dignity, personal care, and universal health precautions.



**Findings of Site Visit:**

Regulation Citation	Regulation Language	Violation Finding Based on Site Visit
441.301(c)(4)(i)	<p>The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.</p>	<p>Based on staff and participant reports, engaging in activities outside of the facility is very limited. There is a facility van, but it's reportedly been broken down and in need of repair for quite some time. One participant reported the need for transportation to a medical appointment. The facility van was unavailable and she paid \$30 for transportation to her appointment. Individuals were not aware of any public transportation options. The activity coordinator reported that she makes a schedule of activities, also determining the types of activities that will occur. Staff reported that individuals would have to schedule an outing in advance. One of the staff shared that people do not want to go out in the community. Staff reported that in order for individuals to work, staff would need to evaluate the participant's ability and decide if they were capable of doing so. One staff member said she would need to speak to management and the individual's doctor, also noting it might be illegal for someone to work due to their benefits. Another staff reported that it would be hard for someone who uses a wheelchair to have a job. When asked, one of the residents stated she would be interested in finding a volunteer opportunity. Staff indicated they wanted to keep people safe, and that they were "their little babies". One participant indicated that she had not left the facility since she moved in around August 2021. She reported she was unaware there were opportunities to go outside of the facility. Participant funds are managed through the business office in the nursing facility which must be accessed during business hours; the participant makes the request for funds and they are provided at a</p>

Regulation Citation	Regulation Language	Violation Finding Based on Site Visit
		<p>later time as the facility does not keep cash on hand. The activity director shared plans to bring people from the community into the assisted living and provided an example of a garage sale.</p> <p><i>Hyde Park must ensure their model of service delivery aligns with the regulatory criteria to support participants' full access to the greater community and not rely solely on reverse integration activities to solely bring the community into the setting. Establishing partnerships with community resources and leveraging existing community transportation options should be explored.</i></p> <p><i>Employees at the setting should be trained to understand individuals' rights including the ability to seek employment and/or volunteer activities not limited by their disabilities. Hyde Park should amend its policies and procedures and the implementation thereof to ensure individuals have control over their personal resources and have access to their personal funds.</i></p>
441.301(c)(4)(iii)	Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.	One resident reported that she was one of the individuals given notice to move when the facility decided they were no longer going to be an assisted living provider. She asked the site visit team if she would be continually eligible for the waiver and wanted information about accessing Medicare benefits, but was concerned that the site visit team would do something to upset the facility administration and she would lose her residential

Regulation Citation	Regulation Language	Violation Finding Based on Site Visit
		<p>placement at the assisted living facility. Neither of the individuals we spoke with would share any concerns with the staff: one did not think it would make a difference and the other did not want to rock the boat. Apartment unit doors were propped open, or unlocked.</p> <p><i>Hyde Park should ensure their model of service delivery aligns with the regulatory criteria to protect individuals' rights to privacy, dignity, respect, and freedom from coercion and restraint. Individuals should, at a minimum be afforded a process through which they can file a grievance with protections from retaliation. Individuals should be afforded the right to close and lock their unit doors at any time to ensure privacy.</i></p>
42 CFR 441.301(c)(4)(iv)	Optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact.	<p>During participant interviews, one participant noted that she requested assistance from staff to make a call. She reported she had eye surgery and was not able to see the small numbers to make a phone call. When she requested staff for assistance, she was denied help and told to ask her informal support to help her. The ACL site visit team member provided her with contact information for the ombudsman and walked with her to her apartment to post the number where she could see it.</p> <p><i>Hyde Park must ensure that residents are assisted to complete daily activities.</i></p>

Regulation Citation	Regulation Language	Violation Finding Based on Site Visit
441.301(c)(4)(vi)(B)(1)	Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors.	<p>One individual said that other people have locks on their doors, but she does not; she would like to know how they got locks because she would like one. Other apartment unit doors were propped open, or unlocked.</p> <p><i>Hyde Park must ensure that all individuals have lockable doors with only appropriate staff having keys to the doors, and inform all residents of their rights to have lockable doors.</i></p>
441.301(c)(4)(vi)(D)	Individuals are able to have visitors of their choosing at any time	<p>Reviewers noted visiting hours were posted at the entrance.</p> <p><i>Hyde Park should revise their current practice to ensure individuals can have visitors at any time with no restrictions on visiting hours.</i></p>
441.301(c)(4)(vi)(F)	Any modification of the additional conditions, under §441.301(c)(4)(vi)(A) through (D), must be supported by a specific assessed need and justified in the person-centered service plan.	<p>Plans that were reviewed by the site visit team were scant with information and included mostly medical information; assessment of the individual's wants and needs were not included in the plans. Participants noted modifications to the conditions of the rule related to locks on doors and visitors, which were not noted in the person-centered plans.</p> <p><i>The state must ensure that the person-centered plan developed by case managers for all individuals receiving Medicaid HCBS reflects the needs and preferences of the individual and any restrictions or</i></p>

Regulation Citation	Regulation Language	Violation Finding Based on Site Visit
		<i>modifications in the plan must be supported by a specific assessed need and justified in the person-centered service plan.</i>
Additional Provision	Language	Findings
Staff Training on HCBS Setting Rule Criteria: State Medicaid Director Letter # 19-001	Description of how staff are trained and monitored on their understanding of the settings criteria and the role of person-centered planning, consistent with state standards as described in the waiver or in community training policies and procedures established by the state.	<p>Staff indicated they receive initial and annual training on various topics, but were unaware of the settings rule or settings criteria. When describing the purpose of the visit, and evaluating the site on the settings regulation, it was clear the administrator and staff were unaware of the regulation's existence. One of the direct support staff said she was already trained because she has been working in health care settings for years and did not require additional training to work in the assisted living. When asked, another direct care staff said she had worked in the nursing facility and did not need training for home and community-based services.</p> <p><i>Hyde Park should ensure all employees have consistent and reinforced training on the HCBS settings regulatory criteria.</i></p>

### Forest Hills Center-Adult Day Center - Visit May 18, 2022

#### Facility Description:

The day center is located in business park in suburban Columbus and is in the same building with a skilled nursing facility. The day center has a separate entrance, with separate signage. There is a front door where participants arrive and depart, a back door that is used for emergencies, and an internal door that that leads to the skilled nursing facility. All the doors are locked and staff open/close as needed. The day center is set up like a home with distinct living room and kitchen areas. There are approximately eight recliners and a television in one area, tables and chairs

in an area off to the side where participants can do art or craft projects, and a kitchen area with a large table, microwave and refrigerator. Off of the kitchen area are bathrooms, one male and one female. CMS participated in a virtual tour of the setting.

**Site Visit Review Description:**

The site visit team reviewed service plans onsite that were provided by the state. Prior to the public health emergency (PHE), the setting served twenty-two participants; currently there are nine individuals (two Medicaid HCBS beneficiaries) that attend on varying schedules Monday through Friday. Throughout the morning of the site visit, participants were either picked up by the center’s van, or dropped off by family members. The setting was small enough that the site visit team could walk around freely and see all areas while remaining in sight of day center staff. The site visit team interviewed one participant, one direct support staff, and the program administrator, and observed several other participants receiving services and talked briefly with them. The participant who was interviewed indicated she lived with her daughter, who helped her choose this setting after visiting several day center settings. She had arrived at the facility after her daughter dropped her off that morning, and she spends her days at the setting Monday through Friday. She likes to watch television when she arrives. She reported that she eats breakfast at home, and then around 10 am the staff tests her blood sugar and helps her get a snack. She eats her snack at the large kitchen table with other participants and they discuss current events. She stated that prior to the PHE, she participated in a lot of group activities outside of the setting. The day center van was used for transport, and the group would go out to eat, to movies, parks, and other locations, but since the PHE those outings have been stopped. Currently, she is not interested in leaving the day center to go out in the community as she doesn’t feel safe. She feels that after the PHE she may want to think about going out again. The program administrator confirmed that group community activities were not currently occurring due to concerns over the PHE; individual community activities are not part of the services at the day center. However, if participants choose to not participate in community activities, there are staff available to stay at the day center with them. Since participants are all diagnosed with some variation of dementia, the day center does not permit participants to come and go freely.

**Findings of Site Visit:**

Regulation Citation	Regulation Language	Violation Finding Based on Site Visit
441.301(c)(4)(i)	The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to	The setting shares a van with the nursing facility and the administrator said that the medical appointments for the nursing facility residents are the priority which limits the availability to prioritize taking individuals into the community. Although both individuals and staff noted that community integration has been somewhat limited due to the PHE, staff

Regulation Citation	Regulation Language	Violation Finding Based on Site Visit
	<p>the same degree of access as individuals not receiving Medicaid HCBS.</p>	<p>also noted minimal staff assigned to the setting, which limits the opportunity for individuals to participate in the community to the extent they desire. Staff noted if sufficient staff was not available, the entire group would not do outings or those who chose not to attend scheduled group outings could stay at the day setting supported by nursing facility staff, if available.</p> <p><i>Forest Hills should ensure their model of service delivery aligns with the regulatory criteria to facilitate community integration. Establishing partnerships with community resources and leveraging existing community transportation options should be explored.</i></p>
<p>441.301(c)(4)(iii)</p>	<p>Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.</p>	<p>There is a medication list on the wall with names and medications listed. During the visit, the site visit team observed one of the individuals receive her blood sugar reading at the table with others. There are no locks on the bathroom doors. Staff places a tall laundry basket in front of the bathroom door when it's in use. The program administrator noted that since people have dementia, they don't permit locks on bathroom doors.</p> <p><i>Forest Hills should amend their model of service delivery to ensure individuals' rights to privacy such that individuals' medical care and information are kept private and locks are</i></p>

Regulation Citation	Regulation Language	Violation Finding Based on Site Visit
		<i>installed on the bathroom doors (appropriate staff should have a key to the bathroom door for emergencies).</i>
441.301(c)(4)(vi)(F)	Any modification of the additional conditions, under §441.301(c)(4)(vi)(A) through (D), must be supported by a specific assessed need and justified in the person-centered service plan.	<p>All entrances are locked due to the individuals' dementia diagnoses. When the administrator was asked whether an individual who did not require locked doors could have the code to exit freely, the administrator shared they would not enroll anyone without a dementia diagnosis. CMS notes not all individuals with a diagnosis of dementia exhibit dangerous "wandering behaviors".<sup>2</sup></p> <p><i>The state must ensure that the person-centered plan developed by case managers for all individuals receiving Medicaid HCBS reflects the needs and preferences of the individual and any restrictions or modifications in the plan must be supported by a specific assessed need and justified in the person-centered service plan.</i></p> <p><i>Forest Hills should train staff on exit seeking and wandering behaviors based on individual assessed needs and ensure that staff adhere to provisions outlined in individuals' person-centered service plans.</i></p>
<b>Additional Provision</b>	<b>Language</b>	<b>Findings</b>

<sup>2</sup> <https://www.medicaid.gov/federal-policy-guidance/downloads/faq121516.pdf>



Regulation Citation	Regulation Language	Violation Finding Based on Site Visit
<p>Staff Training on HCBS Setting Rule Criteria: State Medicaid Director Letter # 19-001</p>	<p>Description of how staff are trained and monitored on their understanding of the settings criteria and the role of person-centered planning, consistent with state standards as described in the waiver or in community training policies and procedures established by the state.</p>	<p>Staff indicated they receive initial and annual training on various topics, but were unaware of the settings rule or settings criteria. When describing the purpose of the visit, and evaluating the site on the settings regulation, it was clear the administrator and staff were unaware of the regulation's existence. The administrator said that the nursing facility and adult day center can share staff as needed and there was no separate training for the assisted living.</p> <p><i>Forest Hills should ensure all employees have consistent and reinforced training on the HCBS settings regulatory criteria.</i></p>

### Canal Winchester-Assisted Living Facility - Visit May 18, 2022

#### Facility Description:

The facility is located in a small town southeast of Columbus. Newly constructed approximately 3-4 years ago, the building houses a skilled nursing facility on the first floor with the assisted living facility on the second floor. The building and grounds are well kept and are a modern farmhouse design. There are several open, shared areas with comfortable chairs and fireplaces where residents can entertain visitors, talk and visit with other residents, and participate in group activities. There is a Pub with a bar, fireplace, large tables and chairs that is used for larger gatherings and activities. The hallways are wide and well lit. Large windows make the facility light/bright. Each participant has their name on their door; most doors are decorated with seasonal decorations. There is a nursing station located at end of a hall, off to the side, for the privacy of residents when receiving nursing services. The assisted living facility is not currently a certified Medicaid HCBS waiver provider, but is going through the process with the state to become certified in order to allow residents who have spent down to waiver eligibility to remain in the assisted living. During the visit the administrator noted the facility is undergoing a change in ownership and it has not yet been decided if they will continue to pursue certification. During the certification review, the state identified the setting as presumptively institutional and submitted a package to CMS for heightened scrutiny review.

### Site Visit Review Description:

There are two separate entrances to the facility; the main entrance and a side entrance that goes directly to the assisted living facility. At the time of the visit, the assisted living entrance was closed due to the PHE. The site visit team entered through the main entrance through the nursing home and completed an electronic verification that included providing a name and phone number for each person on the team, as well as answering COVID screening questions. There is an attendant at the door that must enter a code for the doors to open and close, controlling visitors to the facility. After business hours, a pass card is needed to enter/exit the facility. It was noted during resident interviews that not all residents have pass cards. One resident reported he had a pass card because he comes and goes when he chooses, going to church, out to meet friends, or shopping. He has a car that he keeps at the facility. Another resident reported only leaving during business hours and using the facility's transportation or transportation provided by his daughter. His daughter was also present during the interview and indicated that she lives in Maine and can get in/out of the facility at any hour she needs. She does have a pass card. Residents report liking the facility and receiving help from staff as needed, and having access to food. The site visit team spoke to two administrative staff and three residents. CMS participated in a virtual tour of the setting.

### Findings of Site Visit:

Regulation Citation	Regulation Language	Violation Finding Based on Site Visit
441.301(c)(4)(i)	The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.	<p>Although the facility coordinates facility-based and community group activities, it's uncertain whether individuals without access to personal transportation have the opportunity to go into the community to participate in activities individually. During the tour, the site visit team members observed information posted about transportation options. One of the individuals shared that there are resident council meetings where individuals can raise concerns and the staff appear to take their feedback, but nothing changes.</p> <p><i>Canal Winchester should ensure their model of service delivery aligns with the regulatory criteria to facilitate independence and community integration. For example, establishing</i></p>

Regulation Citation	Regulation Language	Violation Finding Based on Site Visit
		<p><i>partnerships with community resources and leveraging existing community transportation options should be explored.</i></p>
42 CFR 441.301(c)(vi)(C)	Individuals have the freedom to control their own schedules and activities, and have access to food at any time.	<p>One gentleman was very upset about the delays in food and the food mix ups. He said because they share the kitchen with the NF, their food is always late, it is frequently cold, and he frequently receives the wrong order which makes him worry that individuals who may have specific dietary needs are getting the wrong food as well.</p> <p><i>Canal Winchester should revise their current practice to permit individuals to have access to food at any time, and is encouraged to broaden the variety of food available and the ability of residents to participate in meal planning.</i></p> <p><i>See findings described above for issues that must be addressed in order to comply with the portion of this criterion requiring that individuals have the freedom and support to control their own schedules and activities.</i></p>
Additional Provision	Language	Findings
Staff Training on HCBS Setting Rule Criteria: State	Description of how staff are trained and monitored on their understanding of the settings criteria and the role of person-centered planning, consistent with state standards as described in the waiver or in	Staff indicated they receive initial and annual training on various topics, but were unaware of the settings rule or settings criteria. When describing the purpose of the visit, and evaluating the site on the settings regulation, it was clear

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<p>Medicaid Director Letter # 19-001</p>	<p>community training policies and procedures established by the state.</p>	<p>the administrator and staff were unaware of the regulation's existence. One of the individuals interviewed reported that the staff is constantly changing, sometimes it is staff from the nursing facility and other times there are short-term travel nurses that provided services. He reported that he is frequently asked by new staff to show them around and provide directions.</p> <p><i>Canal Winchester should ensure all employees have consistent and reinforced training on the HCBS settings regulatory criteria.</i></p>