MEDICAID HOME AND COMMUNITY-BASED SERVICES SETTINGS REGULATIONS
CORRECTIVE ACTION PLAN FOR THE STATE OF VIRGINIA

Medicaid authorities subject to the CAP

1915(c) HCBS Waivers:

- Community Living, VA.0372;
- Family and Individual Supports, VA.0358; and
- Building Independence, VA.0430.

Regulatory criteria subject to the CAP

All settings:

- 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, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS at 42 CFR §441.301(c)(4)(i) (entire criterion except for "control personal resources"),
- The setting is selected by the individual from among setting options including non-disability specific settings and an option for a private unit in a residential setting. The setting options are identified and documented in the person-centered service plan and are based on the individual's needs, preferences, and for residential settings, resources available for room and board at 42 CFR §441.301(c)(4)(ii),
- 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 at 42 CFR §441.301(c)(4)(iv), and
- Facilitates individual choice regarding services and supports, and who provides them at 42 CFR §441.301(c)(4)(v).

Provider-owned or controlled residential settings:

- Individuals sharing units have a choice of roommate in that setting at 42 CFR §441.301(c)(4)(vi)(B)(2), and
- Individuals have the freedom and support to control their own schedules and activities at 42 CFR §441.301(c)(4)(vi)(C) (entire criterion except for "have access to food at any time").

State milestones and timeframes under the CAP

Milestone	Begin Date	Completion Date
Site-Specific Remediation and Validation Activities: Non-Residential Settings*		
Non-Residential Onsite Validation (5 settings, 86 percent completion); and Non-Residential Desk-Audit (19 settings, 86 percent completion).	August 1, 2020 November 1, 2020	September 30, 2023
Non-Residential Onsite Validation (5 settings, 93 percent completion); and Non-Residential Desk-Audit (19 settings, 93 percent completion).	August 1, 2020 November 1, 2020	December 31, 2023
Non-Residential Onsite Validation (5 settings, 100 percent completion); and Non-Residential Desk-Audit (19 settings,100 percent completion).	August 1, 2020 November 1, 2020	March 31, 2024
Non-Residential notification of non-compliance sent to providers, individuals in services and support coordinators/case managers.	March 17, 2023	March 31, 2024
Non-Residential settings deemed non-compliant have their provider participation agreement removed and individuals are relocated to a compliant setting.	March 17, 2023	June 30, 2024
Site-Specific Remediation and Validation Activities: Residential Settings**		
Validations for residential settings under Quality Service Reviews (80 settings, 58 percent completion); Residential Onsite Validation (10 settings, 58 percent completion); and Residential Desk-Audit Validations (120 settings, 58 percent completion).	January 1, 2021 August 1, 2020 November 1, 2020	September 30, 2023
Validations for residential settings under Quality Service Reviews (80 settings, 64 percent completion); Residential Onsite Validation (10 settings, 64 percent completion); and Residential Desk-Audit Validations (120 settings, 64 percent completion).	January 1, 2021 August 1, 2020 November 1, 2020	December 31, 2023
Validations for residential settings under Quality Service Reviews (80 settings, 69 percent completion); Residential Onsite Validation (10 settings, 69 percent completion); and Residential Desk-Audit Validations (120 settings, 69 percent completion).	January 1, 2021 August 1, 2020 November 1, 2020	March 31, 2024
Validations for residential settings under Quality Service Reviews (80 settings, 75 percent completion); Residential Onsite Validation (10 settings, 75 percent completion); and Residential Desk-Audit Validations (120 settings, 75 percent completion).	January 1, 2021 August 1,2020 November 1, 2020	June 30, 2024

Milestone	Begin Date	Completion Date
Validations for residential settings under Quality Service Reviews (80 settings, 80 percent completion); Residential Onsite Validation (10 settings, 80 percent completion); and Residential Desk-Audit Validations (120settings, 80 percent completion).	January 1, 2021 August 1, 2020 November 1, 2020	September 30, 2024
Validations for residential settings under Quality Service Reviews (80 settings, 86 percent completion); Residential Onsite Validation (20 settings, 86 percent completion); and Residential Desk-Audit Validations (100 settings, 86 percent completion).	January 1, 2021 August 1, 2020 November 1, 2020	December 31, 2024
Validations for residential settings under Quality Service Reviews (40 settings, 91 percent completion); Residential Onsite Validation (20 settings, 91 percent completion); and Residential Desk-Audit Validations (84 settings, 91 percent completion).	January 1, 2021 August 1, 2020 November 1, 2020	March 31, 2025
Validations for residential settings under Quality Service Reviews (40 settings, 100 percent completion).	January 1, 2021	June 30, 2025
Residential Onsite Validation (10 settings, 98 percent completion); and Residential Desk-Audit Validations (42 settings, 98 percent completion).	August 1, 2020 November 1, 2020	June 30, 2025
Residential Onsite Validation (10 settings, 100 percent completion); and Residential Desk-Audit Validations (42 settings, 100 percent completion).	August 1, 2020 November 1, 2020	August 31, 2025
Residential notification of non-compliance sent to providers, individuals in services and support coordinators/case managers.	March 17, 2023	August 31, 2025
Residential settings deemed non-compliant have their provider participation agreement removed and individuals are relocated to a compliant setting.	March 17, 2023	December 31, 2025
Heightened Scrutiny Activities		
Address heightened scrutiny findings related to CMS' heightened scrutiny review including, as applicable, remediation of all similarly situated settings that utilize a similar service delivery model and, as applicable, any overall assessment processes of all providers of HCBS in the state to ensure that all providers are being assessed appropriately against the regulatory settings criteria.		Complete***
CMS Onsite Visit		
Provide a written response to CMS Heightened Scrutiny site visit report describing how the state will remediate findings and apply feedback to the state's HCBS delivery system.	September 24, 2024	April 22, 2026
Address findings related to the CMS heightened scrutiny site visit including, as applicable, needed remediation required to ensure compliance with the settings visited, remediation of all similarly situated settings that utilize a similar service delivery model, remediation of the process for developing and implementing the person-	September 24, 2024	May 11, 2026

centered service plan, and application of site visit feedback to the overall assessment process of all providers of HCBS in the state to ensure that all providers are being assessed appropriately against the regulatory settings criteria.		
Statewide Compliance		
Final compliance statewide with HCBS settings rule.		May 11, 2026

* The total number of non-residential HCBS settings statewide is 335. The total number of non-residential onsite validations to complete under the CAP is 15 and the total number of non-residential desk audits is 57.

** The total number of residential HCBS settings statewide is 3,422. The total number of residential onsite validations to complete under the CAP is 110 and the total number of residential desk audits is 868. The total number of Quality Service reviews to complete under the CAP is 560.

***The settings identified for heightened scrutiny as isolating have been determined to no longer fall under the institutional presumption because of their location and the subsequent relocation to remediate the characteristics. They do not need to be submitted to CMS for heightened scrutiny review.