### 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

November 25, 2015

Thomas Betlach Director State of Arizona, Arizona Health Care Cost Containment System 801 East Jefferson, MD 4100 Phoenix, AZ 85034

Dear Mr. Betlach,

The Centers for Medicare & Medicaid Services (CMS) has completed its review of Arizona's Statewide Transition Plan (STP) to bring state standards and settings into compliance with new federal home and community-based settings requirements. Arizona submitted its STP to CMS on October 20, 2015. CMS has completed the initial review of the STP and has some questions and requests regarding the transition timeframe, the public notice processes, public comments described in the STP, and the person-centered planning process described in the STP. CMS is continuing with a more in-depth review of the STP and will be providing additional detailed feedback shortly. The current issues are summarized below.

# **Transition Timeframe:**

The state discusses a five-year transition period beginning in October 2016, when the 1115 waiver renewal is effective, and ending in September 2021 (p. 3-4). The five-year transition period started March 17, 2014, when the federal regulations took effect, and will end by March 17, 2019. CMS requests that the state revise its STP to demonstrate compliance by March 17, 2019.

### **Public Notice:**

- In the STP, the state says it disseminated six emails with information about the opportunities for public input on the STP. Please verify this by providing copies of these emails (and attachments), including dates when these notices were disseminated.
- The state requested that community organizations notify the state of the strategies used to share the public notice information with the greater community. Based on the information provided in the STP, it appears that notice was widely distributed via email by the state and by community organizations, as well as being posted on the state's webpage. In addition, it appears that some of these organizations provided the information non-electronically via newsletters or paper copies distributed on-site. Please further describe the non-electronic forms of public notice and how they were widely distributed to notify individuals who do not have access to email or internet of their opportunity for public comment.

#### **Public Comments:**

• In the STP, the "Trends" sub-section of the "Public Comment" section provides a "high-level overview of trending topics identified throughout the public comment period" (p. 36). Aside

from the section related to center-based employment service settings (p. 38-42), the public comment topics summarized in the STP were not specific to any setting type. CMS requests that the state broaden its summary description of the public comments to include themes/concerns identified in comments related to the specific setting types identified in the Public Comment Matrix (Appendix F).

• In the "Assessment" category of the Public Comment Matrix (Appendix F, p. 6), the state explains that it added the section "Settings Requiring Special Considerations" to the STP as a result of public comments received. Please add this information to the Public Comments section of the STP.

# **Person-Centered Planning:**

The STP includes a section called "Person Centered Planning Assessment and Transition Plan," which contains information on the state's process to develop a transition plan to come into compliance with the person-centered planning requirements, including an assessment and remediation process (pgs. 43-45). The regulatory requirement for person-centered service planning was effective March 17, 2014 and therefore cannot be included in the transition plan, with one exception. The STP should not include information on the person-centered planning process, unless it directly pertains to the state's plan for conforming to the settings requirements. An example might be where the person-centered plan is used to modify conditions in a provider-owned or controlled residential setting as allowed by 42 CFR 441.301(c)(2)(xiii). Please remove the person-centered section from the STP or modify the language to address the exception only.

CMS would like to have a call with the state to go over these requests and to answer any questions the state may have. A representative from CMS' contractor, NORC, will be in touch shortly to schedule the call. Please contact Amanda Hill in the CMS Central Office at 410-786-2457 and <a href="mailto:Amanda.Hill@cms.hhs.gov">Amanda.Hill@cms.hhs.gov</a> with any questions related to this letter.

Sincerely,

Ralph F. Lollar, Director Division of Long Term Services and Supports

cc: Henrietta Sam-Louie, Acting ARA