Home and Community Based Services Rule Guide for Individuals and Family Members

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The Home and Community Based Services (HCBS) Rule

Purpose and Survey Participants

Why is the HCBS Rule Important?

The goals are to make sure individuals have the opportunity to make decisions about their lives, are supported in their desire to participate in the community, and have their rights respected.

Who is Surveyed?

Adults with disabilities who receive at least one waiver service.

Providers who are providing the service.
Michigan’s HCBS Rule Statewide Transition Plan

Review HCBS Settings
individual and providers are surveyed

State and Local Agencies Work Together
to have policies, supports and services, meet the HCBS Rule

Individuals use the Person-Centered Planning process to arrange their services and supports
Who Can Help Me with the HCBS Rule Process?

- Peers
- Family
- Friends
- Self-Advocates
- Guardian
- Supports Coordinator Case Manager
What Do the HCBS Surveys Say about Providers?

- Shows the views of participants and providers and individuals, and if there are any differences.

- There are providers that will need to make changes to how they provide supports and services through a strict review process of **Heightened Scrutiny**.

- There are providers in the process of making changes to meet the HCBS Rule through a **Corrective Action Plan**.

- There are providers whose supports and services give individuals opportunities to make decisions about their lives, support their participation in the community, and have their rights respected. These providers’ supports and services **Meet the HCBS Rule**.
Your Provider is in Heightened Scrutiny, Out of Compliance, or Compliant Status

Heightened Scrutiny:
Provider has a strict review process and will need to make changes about how they provide supports and services.

Out of Compliance:
Provider has a plan to make changes.

Meet the HCBS Rule:
Provider continues to provide services
What Happens if my Provider is **Not** Meeting the HCBS Rule?

- Your Community Mental Health Services Programs (CMHSP) or Prepaid Inpatient Health Plan (PIHP) will tell you the status of your Provider.

- Your Supports Coordinator/Case Manager will tell you if your Provider is going through the Heightened Scrutiny Process (HS) or is developing a Corrective Action Plan (CAPs).

- Individuals using supports and services that do **not** meet the HCBS Rule can choose to change to a provider that meets the HCBS Rule.
The HCBS Rule says the individuals choose what services they want. Individuals can choose services in a non-disability setting.

Examples of non-disability services and settings include:

- A person living and receiving services in their own apartment or home instead of a group home.

- Working and receiving employment supports at one’s job in the community instead of in a sheltered workshop.
Why Do You Need to Make Changes to Your Provider?

Goal of the HCBS Rule: Individuals decide how to participate in their community, and ensure the rights of individuals are respected.

Medicaid-funded HCBS supports and services must meet the HCBS Rule.

The HCBS Rule applies to all residential and non-residential settings:
- One’s home
- Day programs
- Employment supports
- Transportation
Do I Need to do Anything if I Choose to Keep My Current Provider Who Meets the HCBS Rule

You do not need to make changes with your services and supports when the provider meets the HCBS Rule.

Your local Community Mental Health Services Programs (CMHSPs) and Prepaid Inpatient Health Plan (PIHP) will make sure your services and supports continue to meet the HCBS Rule.
What If I Want to Change My Provider

- Talk with your supports coordinator/case manager, family, friends, and peers about changing providers.
- Use the Person-Centered Planning process to explore options.
Person-Centered Planning (PCP) is a process for planning and supporting an Individual. The Person-Centered Planning process must happen at least once a year with person-centered thinking, planning, and practice.
Meet with your Supports Coordinator or Case Manager

• You can meet with your Supports Coordinator/Case Manager to make changes to your Person-Centered Plan at any time.
• You do not need to wait until the scheduled yearly time of a PCP.
• You determine your Person-Centered Plan goals using your strengths to connect to what is important to and for you.
Get the Supports and Services in your Home, Job, and Community that you want in your life

Use the Person-Centered Planning process to make changes to where you live-work-have fun to develop the supports and services you want in your life:

- **Live**: Your home and belongings
- **Work**: Your job and money
- **Have fun**: Your community, health, happiness, and friends
• Think about your options. How will the HCBS Rule provide you with more opportunity to live the life you desire?

• Learn about how the HCBS Rule guides services and supports providers offer to help you live in the community.

• You may want to think about whether changes made to meet the HCBS Rule will result in you being happier with your current provider of supports and services.
Groups that can help with the HCBS Rule Process:

- My State Agency: Michigan Department of Health and Human Services (MDHHS/BHDDA)
- My Prepaid Inpatient Health Plan (PIHP)
- My Community Mental Health Services Programs (CMHSP)
- Providers
- Advocacy and Educational Organizations
Adjustments to the HCBS Rule for Health and Safety Needs

Modifications/Adjustments to the HCBS Rule must meet the following:

- Based on the health or safety needs of an individual.
- Written in the Person-Centered Plan.
- Must meet all other requirements under the HCBS Rule.

What should not occur when changes are made to your plan:

- Your rights change because it is easy for the provider or guardian or for any reason that is not based on a health or safety need.
- Change to your supports without agreement.
- A modification in place for all individuals living in a setting.
Individuals with disabilities can make their own decision about their lives.
Resources

Centers for Medicare & Medicaid Services:  

HCBS Advocacy Coalition:  
http://hcbsadvocacy.org

Michigan Department of Health and Human Services Home and Community-Based Services Program Transition:  
https://www.michigan.gov/mdhhs/0,5885,7-339-71547_2943-334724--,00.html  
or call Customer Service 844-275-6324

Self-Advocates Becoming Empowered (SABE):  
http://www.sabeusa.org/

Michigan Developmental Disabilities Institute  
Wayne State University  
Home and Community Based Services Transition:  
https://ddi.wayne.edu/hcbs