

National Core Indicators™ Data Highlight



What Do NCI Data Tell Us About Compliance with the HCBS Settings Rule?

In the 2017-2018 data collection cycle,

- ✚ **23% of NCI respondents were living in HCBS group home settings of 4 to 15 individuals,**
- ✚ **15% were employed in paid facility-based programs in the past 2 weeks, and**
- ✚ **84% of those living in provider-controlled HCBS residences said that people knock before entering their bedroom, and**
- ✚ **95% of those living in provider-controlled HCBS residences report they have a place to be alone in their home.**

Why does it matter? On January 10, 2014, the Centers for Medicare and Medicaid Services (CMS) issued the final Home and Community Based Settings (HCBS) Rule which laid out clear conditions for HCBS waiver funding for residential and day settings. The regulations, which went through several years of comment and revisions, went into effect on March 17, 2014. The rule states that individuals receiving waiver services should lead lives with the same opportunities for inclusion in their communities as those individuals who are not enrolled in Medicaid services. Among the new requirements, states must ensure that people have privacy in their homes, access to integrated employment, and make choices about where they live and work. The rule also describes CMS expectations for the person-centered planning and what must be documented in the plans. The original rule required that states submit a transition plan, describing how the state would come into full compliance by March 2019. CMS extended the final compliance date to March 2022. The NCI data points selected are a few indices of national progress toward full compliance with the rule—most people do not live in homes with 4 to 15 unrelated people, do not work in sheltered facilities, and do have the privacy they need in their home.

Questions to ask: What has your state designed to assess progress to full compliance with the Settings Rule? How does your state plan to monitor continued compliance beyond 2022? How have consumers and families been advised about the requirements of the Rule? In what ways did the state Medicaid agency seek and incorporate broad public comment from a range of stakeholders on the statewide transition plan? What have service provider agencies done to meet the new expectations? Have these changes been shared publicly? What opportunities exist for families and self-advocates to contribute to an ongoing dialogue about the design and delivery of HCBS services in your state or community?



Want to know more?

- Centers for Medicaid and Medicare Services (2014). Home and Community Based Settings Rule. <https://www.medicaid.gov/medicaid/hcbs/guidance/hcbs-final-regulation/index.html>
- Centers for Medicaid and Medicare Services (March 22, 2019). Home and Community-Based Settings Regulation – Heightened Scrutiny. <https://www.medicaid.gov/federal-policy-guidance/downloads/smd19001.pdf>
- CQL Position Statement on the HCBS Final Rule. <https://c-q-l.org/news-and-events/cql-position-statement-on-the-hcbs-final-rule>
- Disability Policy Seminar, Home & Community Based Settings FACT SHEET. <https://www.thearc.org/document.doc?id=5429>
- HCBS Advocacy Coalition. <https://hcbsadvocacy.org/> HCBS Waiver Regulations and Guidance. <https://www.nasddds.org/resource-library/employment/achieving-a-better-life-experience-act-of-2014/medicaid-hcbs-authorities/>