

# **ALABAMA STATEWIDE TRANSITION PLAN**

**PLAN FOR ACHIEVING AND MAINTAINING COMPLIANCE  
WITH THE HCBS SETTINGS FINAL RULE**

**CMS 2249-F and CMS 2296-F**

**SYSTEMIC ASSESSMENT  
FEBRUARY 29, 2016**



# ALABAMA STATEWIDE TRANSITION PLAN

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## **ALABAMA STATEWIDE TRANSITION PLAN FOR ACHIEVING AND MAINTAINING COMPLIANCE WITH THE HCBS SETTINGS FINAL RULE REQUIREMENTS SYSTEMIC ASSESSMENT**

The Alabama Statewide Transition Plan is intended to ensure the state complies with new rules governing home and community based services (HCBS) provided with Medicaid funding. It outlines the requirements set forth in the rules, describes the planning process and plan for stakeholder and public input and details the steps that have been or will need to be taken to ensure compliance.

An initial version of the plan was originally submitted to Centers for Medicare and Medicaid Services (CMS) on March 17, 2015. This updated plan is being issued in response to requests for additional information received from CMS in August 2015 and pursuant to additional guidance CMS has made available to states in a series of webinars held in September through December 2015. The recent guidance laid out a revised timeline for completion of Statewide Transition Plans (STPs), as follows:

- CMS expects states to submit an amended STP with their systemic assessment results no later than March 31, 2016.
- CMS expects states to complete site-specific assessments no later than July 31, 2016, with results submitted to CMS no later than September 30, 2016.

The AMA has received approval from CMS to follow these timeframes for completion of its STP. This version of the STP addresses the systemic assessment process and results. A final version, including results for both the systemic assessment and the site-specific assessment, will be submitted to CMS no later than September 30, 2016 in accordance with the revised timelines.

This STP is divided into three sections. Section I provides background regarding the Final Rule requirements. Section II summarizes the state's systemic assessment processes and results, as well as the remediation strategies it plans to undertake to ensure full compliance with the Final Rule. Section III includes the specific and detailed description of the assessment processes, results and proposed remedial strategies for each waiver program. In addition, Appendix A provides the complete systemic assessment crosswalk for each waiver by setting type.

## SECTION I: BACKGROUND

On March 17, 2015, CMS issued its Home and Community-Based Setting Final Rule (CMS 2249-F/2296-F). The complete set of federal regulations for the Final Rule can be found on the Federal Register website at the following link:

<https://www.federalregister.gov/articles/2014/01/16/2014-00487/medicaid-program-state-plan-home-and-community-based-services-5-year-period-for-waivers-provider>

A summary of the requirements is provided below. Since August 2015, CMS has issued substantial additional guidance to states, through a series of documents and webinars, regarding specific expectations for achieving and documenting compliance with the Final Rule requirements. These are incorporated in this version of the Alabama Statewide Transition Plan.

### Transition Planning

States must be in full compliance with the Final Rule for all home and community-based settings no later than March 17, 2019.

- For new waivers, states are required to ensure that HCBS are only delivered in settings that meet the new requirements. New 1915 (c) waivers or new 1915(i) or 1915(k) state plan amendments must be compliant as of the effective date of the waiver or state plan amendment approved by CMS
- For any waiver renewals and amendments to existing waivers submitted within a year of the effective date of the final rule (March 17, 2014), the state was required to submit a plan in the renewal or amendment request detailing any actions necessary to achieve or document compliance with settings requirements for the specific waiver renewal or amendment. Renewal or amendment approval was contingent upon inclusion of an approved transition plan. Renewals that have occurred since the Final Rule became effective include:

### Intent of the Final Rule

The intent of the Final Rule is to ensure that individuals receiving long-term services and supports through home and community-based services (HCBS) programs under the 1915 (c), 1915 (i), and 1915 (k), Medicaid authorities have required full access to benefits of community living and the opportunity to receive services in the most integrated setting that is appropriate. Among many things the Final Rule does, some of the most important are: 1) establishes an outcome oriented definition that focuses on the nature and quality of individual's experiences; maximizes opportunities for individuals to have access to the benefits of community living and the opportunity to receive services in the most integrated setting; and 3) establishes requirements for the qualities of home and community-based settings.

### The Home and Community-Based Settings Final Rule Requirements

### ***Characteristics of Compliant Settings***

A compliant Home and Community-Based setting will meet all of the following requirements:

- Is integrated in and supports access to the greater community
- Provides opportunities to seek employment and work in competitive integrated settings, engage in community life, and control personal resources
- Ensures the individual receives services in the community to the same degree of access as individuals not receiving Medicaid Home and Community-Based Services
- 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 (with consideration being given to financial resources)
- Ensures an individual's rights of privacy, dignity, respect, and freedom from coercion and restraint
- Optimizes individual initiative, autonomy, and independence in making life choices
- Facilitates individual choice regarding services and supports, and who provides them
- Provides for, at minimum, the same responsibilities and protections from eviction that tenants have under the landlord tenant law of the State, county, city, or other designated entity.

### ***Additional Requirements for Provider-Owned or Controlled Residential Settings***

For Provider-Owned or Controlled Residential Settings, modifications to any of the requirements noted above must be:

- Supported by specific assessed need
- Justified in the person-centered service plan
- Documented in the person-centered service plan, which must include:
  - Specific individualized assessed need
  - Prior interventions and supports including less intrusive methods
  - Description of condition proportionate to assessed need
  - Ongoing data measure effectiveness of modification
  - Established time limits form periodic review of modifications
  - Individual informed consent
  - Assurance that interventions and supports will not cause harm

### ***Settings that are not Home and Community-Based***

The Final Rule further specifies settings that cannot be considered home and community-based under any circumstances. These include the following:

- Nursing Facilities
- Institutions for Mental Disease
- Intermediate Care Facilities for Individuals with Intellectual Disabilities
- Hospitals
- Other locations that have qualities of an institutional setting, as determined by the Secretary of the U.S Department of Health and Human Services

### ***Settings That Have Institutional Qualities***

The regulations identify other settings that are presumed to have institutional qualities and therefore do not meet the requirements for Medicaid home and community-based settings.

These include:

- Settings in a publicly or privately operated facility that provides inpatient institutional treatment
- Settings in a building on the grounds of, or adjacent to, a public institution
- Settings with the effect of isolating individuals receiving Medicaid HCBS from the broader community of individuals not receiving Medicaid HCBS. Characteristics of such settings may include:
  - A setting designed to provide people with disabilities multiple types of services/activities on-site such as housing, day services, medical, behavioral and therapeutic services, and/or social and recreational activities
  - People in the setting have limited, if any, interaction with the broader community
  - The setting uses/authorizes interventions/restrictions used in institutional settings or deemed unacceptable in Medicaid institutional settings (e.g., seclusion)

Examples of residential setting types that have the effect of isolating people receiving HCBS from the broader community include, but may not be limited to, the following.

- A gated/secured “community” for individuals with disabilities
- A farmstead or disability-specific farm community
- Multiple settings co-located and operationally related (i.e., operated and controlled by the same provider) which congregate a large number of people with disabilities together such that people’s ability to interact with the broader community is limited
- Residential schools that incorporate both the educational program and the residential program in the same building or in buildings in close proximity to each other so individuals do not travel into the broader community to live or to attend school

### ***Private Home and Foster Home Settings***

CMS has clarified that a state may presume an individual’s private home or a relative’s home where an individual resides meets the home and community-based settings requirements, but it also has a responsibility to ensure that individuals living in a private home or a relative’s home have opportunities for full access to the greater community. If a state is operating under a presumption that a private home is meeting the setting requirements, the state needs to confirm that the setting was not purchased or established in a manner that isolates the individual from the community of individuals not receiving Medicaid-funded home and community-based services. Similarly, CMS has indicated that for any foster home settings, the state must also ensure individuals have opportunities for full access to the greater community and that those foster

homes are not operating in a manner that is institutional in nature.

### ***Heightened Scrutiny Process for Settings Presumed to be Institutional***

For settings that are presumed to have institutional qualities as described above, states have the option of submitting evidence to CMS that will demonstrate the setting does not have the qualities of an institution and that it does have the qualities of a home and community-based setting.

When the state submits this evidence to CMS, the state triggers a process known as “heightened scrutiny.” CMS will review the evidence submitted by the state and make a determination as to whether the evidence is sufficient to overcome the presumption that the setting has the qualities of an institution. The heightened scrutiny review may include a site visit by CMS personnel to validate the evidence submitted by the state. Criteria CMS uses to review state requests for heightened scrutiny include whether all of the qualities of a home and community based setting outlined in the federal settings regulations are met; whether the state can demonstrate that persons receiving services are not isolated from the greater community of individuals not receiving HCBS; and, whether CMS concludes that there is strong evidence the setting does not meet the criteria for a setting that has the qualities of an institution.

Evidence CMS expects states to submit when requesting a heightened scrutiny process must focus on the qualities of the setting and how it is integrated in and supports full access of individuals receiving home and community-based services into the greater community. It should *not* focus on the aspects and/or severity of the disabilities of the individuals served in the setting. For heightened scrutiny requested for 1915(c) waiver programs, evidence should also include the information the state received during the public input process. Minimum evidentiary requirements for specific setting types include:

- For a setting in a publicly or privately-owned facility that provides inpatient treatment: At a minimum, states should submit information clarifying that there is a meaningful distinction between the facility and the community-based setting such that the latter is integrated in and supports full access of individuals receiving HCBS to the greater community. This could include documentation showing that the home and community-based setting is not operationally interrelated with the facility setting.
- For a setting located on the grounds of or immediately adjacent to a public institution: Evidence that a state might want to collect and submit to overcome the presumption of institutional qualities for these types of settings is similar to the evidence for settings in a publicly or privately-owned facility that provides inpatient treatment.
- For a setting that appears to be isolating: Individuals participate regularly in typical community life activities outside of the setting to the extent the individual desires and these activities and do not include only those organized by the provider agency specifically for a group of individuals with disabilities and/or involving only paid staff. Services to individuals, and activities in which individuals

participates, are engaged with the broader community and foster relationships with community members unaffiliated with the setting.

### Systemic Assessment and Remediation Requirements

CMS requires states to employ two types of assessment processes to evaluate whether their standards and settings are in compliance with the federal home and community-based setting regulations. These include both a systemic assessment and a site specific assessment. For both the systemic and site-specific assessments, states are required to identify all types of home and community-based program settings in their state where HCBS are provided and where beneficiaries reside. The outcomes of each assessment are to be described both by waiver and by each setting within the waiver. **The information in this submission is limited to the requirements of the Systemic Assessment. Site-Specific Settings Assessments will be addressed in the submission due no later than September 30, 2016.**

Systemic Assessment refers to the state's assessment of the extent to which its regulations, standards, policies, licensing requirements, and other provider requirements ensure settings are in compliance. States must review state standards related to all setting types in which HCBS is provided. Examples of documents in which state standards are likely to be found include Statutes, Licensing/certification regulations, waiver documents and regulations, guidelines, policy and procedure manuals.

States must also ensure that the language in state standards is fully consistent with the requirements in the federal setting regulations, including 42 CFR §441.301(c)(4) for 1915(c) waivers. The federal regulations set the floor for requirements, but states may elect to raise the standard for what constitutes an acceptable home and community-based setting.

As part of the STP, states have been directed to submit a detailed crosswalk that includes the outcomes of the systemic assessment. The crosswalk is expected to identify each related state standard including the specific citation(s) and the type of setting the standard applies to. It must also include an analysis of whether the relevant state standards are compliant, conflict with, or are silent with respect to the federal regulation. Each federal setting requirement must be addressed somewhere in its state standards.

For each requirement for which state standards are either noncompliant or silent, the state must identify the specific remediation that will be implemented, along with the milestones to be achieved and the projected dates for completion.

### Public Comment Requirements

Prior to filing with CMS, the state must seek input from the public on the state's proposed STP, or any modification to the STP, providing no less than a 30-day period for that input to occur. The process for individuals to submit public comment should be convenient and accessible for all stakeholders, particularly individuals receiving services. CMS requires states to post the Statewide Transition Plans on their website in an easily accessible manner and include a

website address for comments. At least one additional option for public input is required.

All public comments must be reviewed and consideration given to modification of the STP. The final plan submitted to CMS must include a summary of the public comments, including the full array of comments whether in agreement or not with the state's determination of the system-wide compliance and/or compliance of specific settings/types of settings; a summary of modifications to the Statewide Transition Plan made in response to public comment; and in cases where the state's determination differs from public comment, the additional evidence and rationale the state used to confirm the determination. The state also must provide an assurance that the Statewide Transition Plan, with any modifications made as a result of public input, is posted for public information no later than the date of submission to CMS, and that all public comments on the Statewide Transition Plan are retained and available for CMS review for the duration of the transition period or approved waiver, whichever is longer.

CMS also has clarified that public notice associated with settings for which the state is requesting heightened scrutiny should be included in the Statewide Transition Plan or addressed in the waiver submission to CMS and should list the affected settings by name and location and identify the number of individuals served in each setting.

## SECTION II: OVERVIEW OF ALABAMA'S RESPONSE TO FINAL RULE REQUIREMENTS

Alabama offers home and community based services through seven Medicaid 1915 (c) waivers. There are currently no HCBS provided in the state under the 1915(i) or 1915(k) authorities of the Medicaid statute. The seven 1915 (c) waivers include:

The **Elderly and Disabled Waiver** provides services to individuals who might otherwise be placed in a nursing facility. The waiver is operated by the Alabama Department of Senior Services (ADSS). The waiver is approved to serve 9,205 individuals.

The **Individuals with Intellectual Disabilities (ID) Waiver** serves individuals who meet the definition of intellectual disability who would otherwise require more costly services in an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID.) The waiver is operated by the Alabama Department of Mental Health (ADMH/DDD), Division of Developmental Disabilities (DDD) and is approved to serve 5,260 individuals.

The **Living at Home (LAH) Waiver**, also operated by ADMH/DDD, provides a wide array of services for individuals with a diagnosis of intellectual disability who would otherwise require more costly services in an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID). The Living at Home Waiver is approved to serve 569 individuals.

The **SAIL Waiver** serves adults with specific medical diagnoses who are at risk of being institutionalized in nursing facilities. The waiver is operated by the Alabama Department of Rehabilitation Services (ADRS). The SAIL Waiver is approved to serve 660 individuals.

The **Technology Assisted (TA) Waiver for Adults**, operated by AMA, provides private duty nursing, personal care/attendant services, assistive technology, and medical supplies to individuals with disabilities who would otherwise require more costly nursing facility care. The TA Waiver serves adults with complex medical and serves 40 individuals.

The **HIV/AIDS Waiver** provides case management, homemaker services, personal care, respite care, skilled nursing, and companion services to individuals with a diagnosis of HIV/AIDS and related illness who would otherwise require more costly nursing facility care. The waiver is operated by the ADSS. The waiver serves 150 individuals each year.

The **Alabama Community Transition (ACT) Waiver** provides services to facilitate transition for individuals with disabilities currently living in nursing facilities. It is currently operated by ADSS. This waiver has a capacity to serve 200 individuals.

### ALABAMA SYSTEMIC ASSESSMENT & REMEDIATION

Prior to the submission of the state's initial STP in March 2015, AMA worked cooperatively with each of the waiver Operating Agencies, providers and various stakeholders to complete

an initial assessment of the settings in which HCBS are currently provided. Following CMS feedback and the issuance of expanded guidance to states as to the expectation for the assessment process, additional assessment activities were conducted as described below.

### Systemic Assessment Process

Operating Agency waiver managers indicated prior to the submission of the initial STP in March 2015 they had reviewed relevant regulations, policies and procedures, at least at a high level, to ensure consistency with the HCBS Final Rule promulgated by CMS. This initial review of the regulations, standards, policies, licensing requirements, other provider requirements and service definitions for each HCBS waiver program was completed by each operating agency. For five waiver programs, it was concluded that services provided in an individual's home (a residence owned or leased by the individual or the individual's family, i.e. not a provider owned or operated setting), comply with the HCBS settings requirements.

Since that time, CMS has asked that the review be formally documented, and include specific and detailed elements as described in Section I: Background above. AMA developed a process and template for implementing this requirement. For 1915 (c) waivers, home and community-based settings must have all of the qualities defined at §441.301(c)(4) and §441.710 respectively, based on the needs of the individual as indicated in their person-centered plan. Each of these requirements was reflected in a crosswalk template.

Beginning in September, 2015, AMA staff met with Operating Agency waiver managers to review the template, process and timelines. The Operating Agency was asked to complete an internal review for each requirement to provide the following detail:

1. Identify and provide the citation for all state regulations, standards, policies and/or statutes for the waiver that apply to each requirement or element of the HCBS Final Rule. For the most part, the review was expected to focus on the Administrative Code, the Operating Agency's programmatic policies and procedures related to the operations of the waiver program(s) and any licensing or certification standards. Operating Agencies were also asked to provide citations for any other regulations, standards and/or statutes that may apply.
2. Provide a summary of findings of compliance with each requirement. The exploratory questions provided by CMS were attached for further guidance as needed.
  - Indicate which of the applicable regulations, standards and/or statutes are **in compliance** with each HCBS provision and the basis for that assessment.
  - Indicate which of the applicable regulations, standards and/or statutes are **not in compliance** and the basis for that assessment.
  - Indicate if the regulations, standards and/or statutes are **silent** regarding any HCBS provision and the basis for that assessment.

Note: If waiver services were not provided in any provider-owned or controlled residential setting, this section was not completed.

3. Describe any changes or other remediation that will need to be made. If no changes are needed based on the assessment of compliance, state N/A.
4. If any changes are needed to any state regulations, standards and/or statutes to bring them into compliance, provide a summary of the steps to be taken and projected timelines.
5. If an agency operates more than one waiver program, a separate crosswalk was to be completed for each.

### **SECTION III: ASSESSMENT PROCESSES, RESULTS AND PROPOSED REMEDIAL STRATEGIES**

A description of the systemic assessment process and related findings for each of the seven waivers can be found below, including a summary of the remediation processes and timelines where applicable. The entire detailed crosswalk specific to each waiver may be found in Attachment A.

**TECHNOLOGY ASSISTED WAIVER SYSTEMIC ASSESSMENT**

**Waiver Description**

The Technology Assisted (TA) waiver provides services to individuals with disabilities or long term illnesses. The Operating Agency for the TA waiver is the Alabama Medicaid Agency. Targeted Case Management is provided by the Alabama Department of Senior Services. The services available under this waiver are as follows:

TA Waiver Services
Private Duty Nursing
Personal Care/Attendant Services
Medical Supplies
Assistive Technology

**Systemic Assessment**

**I. Systemic Assessment Process**

Prior to the submission of the initial STP in March 2015, Operating Agencies reviewed relevant regulations, policies and procedures, at least at a high level, to ensure consistency with the HCBS Final Rule promulgated by CMS. For the TA waiver program, it was concluded at that time that regulations, policies and procedures appeared to be compliant with the HCBS settings requirements. Following CMS feedback and the issuance of expanded guidance to states as to the expectation for the assessment process, additional assessment activities were conducted. ADSS and AMA staff conducted a thorough examination of administrative code, policies, rules and regulations pertaining to the TA waiver to evaluate whether they were sufficient to ensure compliance with the Final Rule. A crosswalk was developed to identify each applicable administrative code, policy, rule and/or regulation that addressed each of the Final Rule requirements:

1. 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.
2. 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.
3. The setting ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.
4. The setting 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.
5. The setting facilitates individual choice regarding services and supports, and who provides them.
6. In a provider-owned or controlled residential setting, in addition to the qualities specified above, the additional conditions must be met. *(Note: Not applicable to the TA Waiver.)*
7. HCBS settings exclude locations that have the qualities of an institutional setting. For 1915(c) home and community-based waivers, settings that are not home and community-based are defined at §441.301(c)(5) as follows:

- a. A nursing facility;
- b. An institution for mental diseases;
- c. An intermediate care facility for individuals with intellectual disabilities;
- d. A hospital; or
- e. Any other locations that have qualities of an institutional setting, as determined by the Secretary.

AMA, as the Operating Agency, worked with ADSS, the agency that provides Targeted Case Management for the TA Waiver participants, to complete a thorough review of various documents pertaining to the TA Waiver, including the following:

- AMA January 2016 Provider Manual, Chapter 107, Waiver Services
- TA Waiver Renewal Application, February 2016
- AMA Administrative Code, Chapter 54
- AMA TA Policy Manual, Revised October 2015
- AMA Long Term Care Waivers Quality Assurance Manual
- Medicaid Waiver Survey for TA participants
- ADSS Case Management Guide, August 2014
- ADSS HCBS Application
- ADSS Home Visit Tool
- ADSS Rights and Responsibilities Form

Each of these documents was reviewed for consistency and compliance with each of the qualities defined at §441.301(c)(4) and §441.710 respectively, based on the needs of the individual as indicated in their person-centered plan. The completed crosswalk provides the appropriate citation for each administrative code, policy, rule and/or regulation and other applicable documents and indicates whether each was deemed compliant or non-compliant, including the basis for that determination. If no applicable citation could be identified that addressed a Final Rule requirement, the state’s rules were considered to be silent in that area. For those Final Rule requirements for which the state’s administrative code, policies, rules and/or regulations were not sufficiently compliant, or were silent, remedial strategies were devised and are included in the crosswalk with projected milestones and timelines. Note that the silence rating was also used for items that may have reflected some elements of a requirement, but were deemed to not fully address that requirement.

**II. Systemic Findings and Remediation**

The findings of the systemic assessment and proposed remediation strategies for the TA waiver are summarized in the table below. This crosswalk applies to the only setting in which waiver services are delivered, the private homes of individuals. The complete TA Waiver crosswalk may be found in Attachment A. It includes detailed descriptions of each finding, the basis for each determination of compliance, and any needed remedial strategies with milestones and projected completion date.

Requirement	Summary of Compliance and Proposed Remediation
1. 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	This requirement of the Final Rule was not fully addressed for the TA Waiver. The following will require revision to reflect requirements that settings are integrated in and support full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings,

Requirement	Summary of Compliance and Proposed Remediation
<p>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>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> <ul style="list-style-type: none"> <li>• TA Waiver, particularly Appendix C-5</li> <li>• AMA Provider Manual, Explanation of Covered Services</li> <li>• AMA Administrative Code, Chapter 54</li> <li>• Long Term Care Waiver Quality Assurance Manual</li> <li>• Medicaid Waiver Survey for TA Participants</li> </ul>
<p>2. 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.</p>	<p>The TA Waiver was considered to be compliant for this requirement with no needed remediation. Individuals are served in private homes of their choosing. The client is given choice of either institutional or the home and community based services as well as given information necessary to make informed choices regarding the location of care. TA Waiver Coordinator and ADSS Targeted Case Managers ensure waiver participants are actively involved in decision-making related to the provision of waiver services.</p>
<p>3. Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.</p>	<p>The TA Waiver was largely compliant with this requirement as it relates to privacy, dignity and respect, which were addressed in a comprehensive manner. As to freedom from coercion and restraint, the TA Waiver provides that the State does not permit the use of restrictive interventions, restraints and seclusion and assures monitoring on a monthly basis by case managers as well as oversight by the appropriate state agencies. The ADSS Medicaid Waivers Case Management Guide and Home Visit Tool will require revision to fully address this element as it relates to case manager responsibility for assessment, monitoring and documentation to ensure compliance with safeguards against restraint, restrictive interventions and seclusion. The Medicaid Waiver Survey for Participants Includes questions/probes regarding being treated with dignity and respect, but revisions should be considered to add probes regarding freedom from coercion and restraint.</p>
<p>4. 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>	<p>Covered services, as described in AMA Administrative Code, Chapter 54, support community individual initiative, independence and autonomy specifically for integrated work settings and as an outcome for medical supplies and appliances and assistive technology. The ADSS Medicaid Waivers Case Management Guide, Assessment Forms and Home Visit Tool do not fully address this element, however, as it relates to case manager responsibility for assessment, monitoring and documentation to ensure compliance and will require revision. Similarly, the AMA TA Policy Manual includes some references that support this requirement of the Rule, but does not fully address the component of this requirement related to choices of with whom to interact.</p>
<p>5. Facilitates individual choice regarding</p>	<p>The TA Waiver was largely compliant with this requirement,</p>

Requirement	Summary of Compliance and Proposed Remediation
<p>services and supports, and who provides them.</p>	<p>addressing the right of individuals regarding services and supports, and who provides them, including how this choice will be facilitated in the intake and planning processes as well as on an ongoing basis. The only revision required will be for the AMA January 2016 Provider Manual. This document describes Medicaid responsibilities to ensure beneficiaries are advised of feasible service alternatives and receive a choice of institutional and HCB services. It further states that when residents of long term care facilities become eligible for HCBS, will be advised of available services and given choice of providers, but does not clarify that all individuals receiving HCBS will be so advised and given choice of providers.</p>
<p>6. In a provider-owned or controlled residential setting, in addition to the qualities specified above, additional conditions must be met.</p>	<p>Not applicable to the TA Waiver. No waiver services are provided in provider owned or controlled residential settings.</p>
<p>7. HCBS settings exclude locations that have the qualities of an institutional setting.</p>	<p>None of the documents pertaining to the TA Waiver fully address this requirement as it relates to settings that have the qualities of an institution or are presumed to have qualities of an institution. They do not fully address exclusion of all institutional or presumed-institutional setting nor do they describe a process for identification and scrutiny of such settings. Revisions will be required to the following documents:</p> <ul style="list-style-type: none"> <li>• TA Waiver</li> <li>• AMA Provider Manual, Explanation of Covered Services</li> <li>• AMA Administrative Code, Chapter 54</li> <li>• Long Term Care Waiver Quality Assurance Manual</li> <li>• Medicaid Waiver Survey for TA Participants</li> <li>• ADSS Medicaid Waivers Case Management Guide, August 2014; Assessment Forms and Home Visit Tool</li> </ul>

**HIV/AIDS WAIVER SYSTEMIC ASSESSMENT**

**Waiver Description**

The HIV/AIDS Waiver provides services to individuals with a diagnosis of HIV, AIDS, and related illness who would meet the nursing facility level of care criteria. The Operating Agency for the HIV/AIDS waiver is the ADSS. The services available under this waiver are as follows:

HIV/AIDS Waiver Services
Case Management
Personal Care
Homemaker Services
Skilled Nursing
Respite Care (Skilled and Unskilled)

**Systemic Assessment**

**I. Systemic Assessment Process**

Prior to the submission of the initial STP in March 2015, Operating Agencies reviewed relevant regulations, policies and procedures, at least at a high level, to ensure consistency with the HCBS Final Rule promulgated by CMS. For the HIV waiver program, it was concluded at that time that regulations, policies and procedures appeared to be compliant with the HCBS settings requirements. Following CMS feedback and the issuance of expanded guidance to states as to the expectation for the assessment process, additional assessment activities were conducted. ADSS and AMA staff conducted a thorough examination of administrative code, policies, rules and regulations pertaining to the HIV waiver to evaluate whether they were sufficient to ensure compliance with the Final Rule. A crosswalk was developed to identify each applicable administrative code, policy, rule and/or regulation that addressed each of the Final Rule requirements:

1. 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.
2. 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.
3. The setting ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.
4. The setting 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.
5. The setting facilitates individual choice regarding services and supports, and who provides them.
6. In a provider-owned or controlled residential setting, in addition to the qualities specified above, the additional conditions must be met. *(Note: Not applicable to the HIV/AIDS Waiver.)*
7. HCBS settings exclude locations that have the qualities of an institutional setting. For 1915(c) home and community-based waivers, settings that are not home and community-based are defined at §441.301(c)(5) as follows:

- a. A nursing facility;
- b. An institution for mental diseases;
- c. An intermediate care facility for individuals with intellectual disabilities;
- d. A hospital; or
- e. Any other locations that have qualities of an institutional setting, as determined by the Secretary.

AMA worked with ADSS, the Operating Agency to complete a thorough review of various documents pertaining to the HIV Waiver, including the following:

- AMA January 2016 Provider Manual, Chapter 107, Waiver Services
- HIV Waiver Application, 2011
- AMA Administrative Code, Chapter 58
- AMA HIV Policy Manual, March 2011
- AMA Long Term Care Waivers Quality Assurance Manual
- Medicaid Waiver Survey for HIV participants
- ADSS Case Management Guide, August 2014
- ADSS HCBS Application
- ADSS Home Visit Tool
- ADSS Rights and Responsibilities Form

Each of these documents was reviewed for consistency and compliance with each of the qualities defined at §441.301(c)(4) and §441.710 respectively, based on the needs of the individual as indicated in their person-centered plan. The completed crosswalk provides the appropriate citation for each administrative code, policy, rule and/or regulation and other applicable documents and indicates whether each was deemed compliant or non-compliant, including the basis for that determination. If no applicable citation could be identified that addressed a Final Rule requirement, the state’s rules were considered to be silent in that area. For those Final Rule requirements for which the state’s administrative code, policies, rules and/or regulations were not sufficiently compliant, or were silent, remedial strategies were devised and are included in the crosswalk with projected milestones and timelines. Note that the silence rating was also used for items that may have reflected some elements of a requirement, but were deemed to not fully address that requirement.

**II. Systemic Findings and Remediation**

The findings of the systemic assessment and proposed remediation strategies for the HIV/AIDS waiver are summarized in the table below. This crosswalk applies to the only setting in which waiver services are delivered, the private homes of individuals. The complete HIV/AIDS Waiver crosswalk may be found in Attachment A. It includes detailed descriptions of each finding, the basis for each determination of compliance, and any needed remedial strategies with milestones and projected completion date.

Requirement	Summary of Compliance and Proposed Remediation
1. 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	This requirement of the Final Rule was not fully addressed for the HIV/AIDS Waiver. The following will require revision to reflect requirements that settings are integrated in and support 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

Requirement	Summary of Compliance and Proposed Remediation
<p>resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.</p>	<p>receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS:</p> <ul style="list-style-type: none"> <li>• HIV/AIDS Waiver</li> <li>• AMA Administrative. Code, Chapter 58</li> <li>• Long Term Care Waiver Quality Assurance Manual</li> <li>• Medicaid Waiver Survey for Participants</li> <li>• AMA HIV Waiver Policy Manual</li> <li>• ADSS Medicaid Waivers Case Management Guide, Assessment Forms, Home Visit Tool</li> </ul>
<p>2. 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.</p>	<p>The HIV/AIDS Waiver was considered to be compliant for this requirement with no needed remediation. Individuals are served in private homes of their choice. No residential or non-residential services settings are offered under the HIV waiver. The client is given choice of either institutional or the home and community based services as well as given information necessary to make informed choices regarding the location of care. HIV Case Managers ensure waiver participants are informed as to all feasible alternatives under the waiver, including free choice of waiver services or institutional care. During the person-centered care plan meeting all parties discuss the needs of the client, informal supports provided by family or other community resources, identify the gaps in supports and are informed of what waiver services may fill in those gaps. The participant decides which personal representative will be involved in development of the plan of care</p>
<p>3. Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.</p>	<p>The HIV/AIDS Waiver was largely compliant with this requirement as it relates to privacy, dignity and respect, which were addressed in a comprehensive manner. As to freedom from coercion and restraint, the HIV/AIDS Waiver provides that the State does not permit the use of restrictive interventions, restraints and/or seclusion but the waiver document does not provide any information as to oversight procedures to ensure no occurrence of unauthorized use of restraint, seclusion and/or restrictive interventions. This will require revision. The ADSS Medicaid Waivers Case Management Guide and Home Visit Tool will also require revision to fully address this element as it relates to case manager responsibility for assessment, monitoring and documentation to ensure compliance with safeguards against restraint, restrictive interventions and seclusion. The Medicaid Waiver Survey for Participants Includes questions/probes regarding being treated with dignity and respect, but revisions should be considered to add probes regarding freedom form coercion and restraint.</p>
<p>4. 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</p>	<p>AMA Administrative Code, Chapter 58 and the AMA HIV Policy Manual include some references that support this requirement of the Rule, but do not fully address this requirement, particularly as related to choices of with whom to interact. The ADSS Medicaid Waivers Case Management</p>

Requirement	Summary of Compliance and Proposed Remediation
whom to interact.	Guide, Assessment Forms and Home Visit Tool also do not fully address this element as it relates to case manager responsibility for assessment, monitoring and documentation to ensure compliance and will require revision.
5. Facilitates individual choice regarding services and supports, and who provides them.	The HIV/AIDS Waiver was partially compliant with this requirement, addressing the right of individuals regarding services and supports, and who provides them, including how this choice will be facilitated in the intake and planning processes as well as on an ongoing basis. Several documents will require revision, including the waiver document to ensure participants are provided with individual choice regarding services and supports, and who provides them, including the freedom to make such choices at other times than assessment/application process for admission, readmission, and redetermination of eligibility. The AMA January 2016 Provider Manual will also need to be revised to add clarifying language that all individuals will be advised of available services and given choice of providers.
6. In a provider-owned or controlled residential setting, in addition to the qualities specified above, additional conditions must be met.	Not applicable to the HIV/AIDS Waiver. No waiver services are provided in provider owned or controlled residential settings.
7. HCBS settings exclude locations that have the qualities of an institutional setting.	None of the documents pertaining to the HIV/AIDS Waiver fully address this requirement as it relates to settings that have the qualities of an institution or are presumed to have qualities of an institution. They do not fully address exclusion of all institutional or presumed-institutional setting nor do they describe a process for identification and scrutiny of such settings. Revisions will be required to the following documents: <ul style="list-style-type: none"> <li>• HIV/AIDS Waiver</li> <li>• AMA Provider Manual, Explanation of Covered Services</li> <li>• AMA Administrative Code, Chapter 58</li> <li>• Long Term Care Waiver Quality Assurance Manual</li> <li>• Medicaid Waiver Survey for HIV/AIDS Participants</li> <li>• ADSS Medicaid Waivers Case Management Guide, August 2014; Assessment Forms and Home Visit Tool</li> </ul>

## ELDERLY AND DISABLED WAIVER SYSTEMIC ASSESSMENT

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### Waiver Description

The Elderly and Disabled (E&D) waiver provides services to individuals with disabilities or long term illnesses. The Operating Agency for the E&D waiver is the Alabama Department of Senior Services. The services available under this waiver are as follows:

Elderly and Disabled Waiver Services
Case Management
Personal Care
Homemaker Services
Adult Day Health
Home Delivered Meals
Respite Care (Skilled and Unskilled)

### Systemic Assessment

#### I. Systemic Assessment Process

Prior to the submission of the initial STP in March 2015, Operating Agencies reviewed relevant regulations, policies and procedures, at least at a high level, to ensure consistency with the HCBS Final Rule promulgated by CMS. For the E&D waiver program, it was concluded at that time that regulations, policies and procedures appeared to be compliant with the HCBS settings requirements. Following CMS feedback and the issuance of expanded guidance to states as to the expectation for the assessment process, additional assessment activities were conducted. ADSS and E&D staff have conducted a thorough examination of administrative code, policies, rules and regulations pertaining to the HIV waiver to evaluate whether they were sufficient to ensure compliance with the Final Rule. A crosswalk was developed to identify each applicable administrative code, policy, rule and/or regulation that addressed each of the Final Rule requirements:

1. 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.
2. 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.
3. The setting ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.
4. The setting 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.
5. The setting facilitates individual choice regarding services and supports, and who provides them.
6. In a provider-owned or controlled residential setting, in addition to the qualities specified above, the additional conditions must be met. *(Note: Not applicable to the E&D Waiver.)*
7. HCBS settings exclude locations that have the qualities of an institutional setting. For 1915(c) home and community-based waivers, settings that are not home and community-based are

defined at §441.301(c)(5) as follows:

- a. A nursing facility;
- b. An institution for mental diseases;
- c. An intermediate care facility for individuals with intellectual disabilities;
- d. A hospital; or
- e. Any other locations that have qualities of an institutional setting, as determined by the Secretary.

AMA, as the Operating Agency, worked with ADSS, the agency that provides Targeted Case Management for the E&D Waiver participants, to complete a thorough review of various documents pertaining to the E&D Waiver, including the following:

- AMA January 2016 Provider Manual, Chapter 107, Waiver Services
- E&D Waiver Application, October 2012
- AMA Administrative Code Chapter 36
- AMA E&D Policy Manual, August 2014
- AMA Long Term Care Waivers Quality Assurance Manual
- Medicaid Waiver Survey for E&D participants
- ADSS Case Management Guide, August 2014
- ADSS HCBS Application
- ADSS Home Visit Tool
- ADSS Rights and Responsibilities Form
- Alabama Medicaid Adult Day Health Standards
- Adult Day Health Scope of Service for HCBS Waivers
- Alabama Medicaid Adult Day Health Review Tool

Each of these documents was reviewed for consistency and compliance with each of the qualities defined at §441.301(c)(4) and §441.710 respectively, based on the needs of the individual as indicated in their person-centered plan. The completed crosswalk provides the appropriate citation for each administrative code, policy, rule and/or regulation and other applicable documents and indicates whether each was deemed compliant or non-compliant, including the basis for that determination. If no applicable citation could be identified that addressed a Final Rule requirement, the state’s rules were considered to be silent in that area. For those Final Rule requirements for which the state’s administrative code, policies, rules and/or regulations were not sufficiently compliant, or were silent, remedial strategies were devised and are included in the crosswalk with projected milestones and timelines. Note that the silence rating was also used for items that may have reflected some elements of a requirement, but were deemed to not fully address that requirement.

**II. Systemic Findings and Remediation**

The findings of the systemic assessment and proposed remediation strategies for the E&D waiver are summarized in the table below. There are two crosswalks, one applying to services provided in individuals’ private homes and integrated employment and another specifically to Adult Day Health Services. The complete E&D Waiver crosswalks may be found in Attachment A. It includes detailed descriptions of each finding, the basis for each determination of compliance, and any needed remedial strategies with milestones and projected completion date.

Requirement	Summary of Compliance and Proposed Remediation
1. The setting is integrated in and supports full access of individuals receiving	This requirement of the Final Rule was not fully addressed for the E&D Waiver. The following will require revision to reflect

Requirement	Summary of Compliance and Proposed Remediation
<p>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>requirements that settings are integrated in and support 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> <ul style="list-style-type: none"> <li>• E&amp;D Waiver</li> <li>• AMA Administrative Code, Chapter 36</li> <li>• Alabama Medicaid Adult Day Health Standards</li> <li>• Scope of Service for Adult Day Health Service</li> <li>• Alabama Medicaid Adult Day Health Review Tool</li> <li>• Long Term Care Waiver Quality Assurance Manual</li> <li>• Medicaid Waiver Survey for Participants</li> <li>• AMA E&amp;D Waiver Policy Manual</li> <li>• ADSS Medicaid Waivers Case Management Guide, Assessment Forms, Home Visit Tool</li> </ul>
<p>2. 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.</p>	<p>Individuals are served in private homes of their choice with the exception of Adult Day Health services, which are the only services offered in a provider-controlled setting. Each client is given choice of either institutional or the home and community based services as well as given information necessary to make informed choices regarding the location of care, but key documents related to Adult Day Health are silent as to whether individuals are offered non-disability specific settings and will need revision. These include the following:</p> <ul style="list-style-type: none"> <li>• Alabama Medicaid Adult Day Health Standards</li> <li>• Alabama Medicaid Agency Administrative Code, Chapter 36</li> <li>• Scope of Service for Adult Day Health Service</li> <li>• Alabama Medicaid Adult Day Health Review Tool</li> </ul>
<p>3. Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.</p>	<p>The E&amp;D Waiver was largely compliant with this requirement as it relates to privacy, dignity and respect, which were addressed in a comprehensive manner with one exception. The AMA E&amp;D Waiver Policy Manual does not reference dignity and respect and will need revision. As to freedom from coercion and restraint, the E&amp;D Waiver provides that the State does not permit the use of restrictive interventions, restraints and seclusion and assures monitoring on a monthly basis by case managers as well as oversight by the appropriate state agencies. The ADSS Medicaid Waivers Case Management Guide and Home Visit Tool will require revision to fully address this element as it relates to case manager responsibility for assessment, monitoring and documentation to ensure compliance with safeguards against restraint, restrictive interventions and seclusion. The Medicaid Waiver Survey for Participants Includes questions/probes regarding being treated with dignity and respect, but revisions should be considered to add probes regarding freedom from coercion and restraint.</p>

Requirement	Summary of Compliance and Proposed Remediation
<p>4. 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>	<p>AMA Administrative Code, Chapter 36 is only partially compliant with this requirement. Adult Day Health and Companion services provide some language related to this requirement, such as education and training for health and self-care and promoting client independence, but this section of the Code does not fully address the optimization of individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact. The AMA E&amp;D Policy Manual is also silent regarding this requirement and will be revised. The ADSS Medicaid Waivers Case Management Guide, Assessment Forms and Home Visit Tool also do not fully address this element as it relates to case manager responsibility for assessment, monitoring and documentation to ensure compliance and will require revision.</p>
<p>5. Facilitates individual choice regarding services and supports, and who provides them.</p>	<p>The E&amp;D Waiver was largely compliant with this requirement, addressing the right of individuals regarding services and supports, and who provides them, including how this choice will be facilitated in the intake and planning processes as well as on an ongoing basis. The AMA January 2016 Provider Manual will require revision to add clarifying language that all individuals will be advised of available services and given choice of providers.</p>
<p>6. In a provider-owned or controlled residential setting, in addition to the qualities specified above, additional conditions must be met.</p>	<p>Not applicable to the E&amp;D Waiver. No waiver services are provided in provider owned or controlled residential settings.</p>
<p>7. HCBS settings exclude locations that have the qualities of an institutional setting.</p>	<p>None of the documents pertaining to the E&amp;D Waiver fully address this requirement as it relates to settings that have the qualities of an institution or are presumed to have qualities of an institution. They do not fully address exclusion of all institutional or presumed-institutional setting nor do they describe a process for identification and scrutiny of such settings. Revisions will be required to the following documents:</p> <ul style="list-style-type: none"> <li>• E&amp;D Waiver</li> <li>• AMA Provider Manual, Explanation of Covered Services</li> <li>• AMA Administrative Code, Chapter 36</li> <li>• Alabama Medicaid Adult Day Health Standards</li> <li>• Scope of Service for Adult Day Health Service</li> <li>• Alabama Medicaid Adult Day Health Review Tool</li> <li>• Long Term Care Waiver Quality Assurance Manual</li> <li>• Medicaid Waiver Survey for E&amp;D Participants</li> <li>• ADSS Medicaid Waivers Case Management Guide, August 2014; Assessment Forms and Home Visit Tool</li> </ul>

**ALABAMA COMMUNITY TRANSITION WAIVER**

**Waiver Description**

The Alabama Community Transition (ACT) waiver provides services to individuals with disabilities or long term illnesses, who resided in a nursing facility and desired to transition to the home or community setting. The Operating Agency for the ACT waiver is the Alabama Department of Senior Services. The services available under this waiver are as follows:

ACT Waiver Services
Case Management
Transitional Assistance
Personal Care
Homemaker Services
Adult Day Health
Home Delivered Meals
Respite Care (Skilled and Unskilled)
Skilled Nursing
Adult Companion Services
Home Modifications
Assistive Technology
Personal Emergency Response Systems (PERS) Installation/Monthly Fee
Medical Equipment Supplies and Appliances

**Systemic Assessment**

**I. Systemic Assessment Process**

Prior to the submission of the initial STP in March 2015, Operating Agencies reviewed relevant regulations, policies and procedures, at least at a high level, to ensure consistency with the HCBS Final Rule promulgated by CMS. For the ACT waiver program, it was concluded at that time that regulations, policies and procedures appeared to be compliant with the HCBS settings requirements. Following CMS feedback and the issuance of expanded guidance to states as to the expectation for the assessment process, additional assessment activities were conducted. ADSS and ACT staff conducted a thorough examination of administrative code, policies, rules and regulations pertaining to the ACT waiver to evaluate whether they were sufficient to ensure compliance with the Final Rule. A crosswalk was developed to identify each applicable administrative code, policy, rule and/or regulation that addressed each of the Final Rule requirements:

1. 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.
2. 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.
3. The setting ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.

4. The setting 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.
5. The setting facilitates individual choice regarding services and supports, and who provides them.
6. In a provider-owned or controlled residential setting, in addition to the qualities specified above, the additional conditions must be met. *(Note: Not applicable to the ACT Waiver.)*
7. HCBS settings exclude locations that have the qualities of an institutional setting. For 1915(c) home and community-based waivers, settings that are not home and community-based are defined at §441.301(c)(5) as follows:
  - a. A nursing facility;
  - b. An institution for mental diseases;
  - c. An intermediate care facility for individuals with intellectual disabilities;
  - d. A hospital; or
  - e. Any other locations that have qualities of an institutional setting, as determined by the Secretary.

AMA worked with ADSS to complete a thorough review of various documents pertaining to the ACT Waiver, including the following:

- AMA January 2016 Provider Manual, Chapter 107, Waiver Services
- ACT Waiver Application, March 2011
- AMA Administrative Code, Chapter 44
- AMA ACT Scopes of Covered Services, September 1, 2015
- AMA Long Term Care Waivers Quality Assurance Manual
- Medicaid Waiver Survey for ACT participants
- ADSS Case Management Guide, August 2014
- ADSS HCBS Application
- ADSS Home Visit Tool
- ADSS Rights and Responsibilities Form
- Alabama Medicaid Adult Day Health Standards
- Adult Day Health Scope of Service for HCBS Waivers
- Alabama Medicaid Adult Day Health Review Tool

Each of these documents was reviewed for consistency and compliance with each of the qualities defined at §441.301(c)(4) and §441.710 respectively, based on the needs of the individual as indicated in their person-centered plan. The completed crosswalk provides the appropriate citation for each administrative code, policy, rule and/or regulation and other applicable documents and indicates whether each was deemed compliant or non-compliant, including the basis for that determination. If no applicable citation could be identified that addressed a Final Rule requirement, the state's rules were considered to be silent in that area. For those Final Rule requirements for which the state's administrative code, policies, rules and/or regulations were not sufficiently compliant, or were silent, remedial strategies were devised and are included in the crosswalk with projected milestones and timelines. Note that the silence rating was also used for items that may have reflected some elements of a requirement, but were deemed to not fully address that requirement.

## **II. Systemic Findings and Remediation**

The findings of the systemic assessment and proposed remediation strategies for the ACT waiver are summarized in the table below. There are two crosswalks, one applying to services provided in individuals'

private homes and integrated employment and another specifically to Adult Day Health Services. The complete ACT Waiver crosswalks may be found in Attachment A. It includes detailed descriptions of each finding, the basis for each determination of compliance, and any needed remedial strategies with milestones and projected completion date.

Requirement	Summary of Compliance and Proposed Remediation
<p>1. 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>This requirement of the Final Rule was not fully addressed for the ACT Waiver. The waiver Includes services designed to promote access to community living through supports for transition from an institution, including transitional assistance and community case management, as well as services to support integrated employment and increased independence. It does not specifically reflect requirements that settings are integrated in and support full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to engage in community life and control personal resources to the same degree of access as individuals not receiving Medicaid HCBS.</p> <ul style="list-style-type: none"> <li>• AMA Administrative Code, Chapter 44</li> <li>• Alabama Medicaid Adult Day Health Standards</li> <li>• Scope of Service for Adult Day Health Service</li> <li>• Alabama Medicaid Adult Day Health Review Tool</li> <li>• Long Term Care Waiver Quality Assurance Manual</li> <li>• Medicaid Waiver Survey for Participants</li> <li>• AMA ACT Scopes of Services</li> <li>• ADSS Medicaid Waivers Case Management Guide, Assessment Forms, Home Visit Tool</li> </ul>
<p>2. 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.</p>	<p>Individuals are served in private homes of their choice with the exception of Adult Day Health services, which are the only services offered in a provider-controlled setting. Each client is given choice of either institutional or the home and community based services as well as given information necessary to make informed choices regarding the location of care, but key documents related to Adult Day Health are silent as to whether individuals are offered non-disability specific settings and will need revision. These include the following:</p> <ul style="list-style-type: none"> <li>• Alabama Medicaid Adult Day Health Standards</li> <li>• Alabama Medicaid Agency Administrative Code, Chapter 44</li> <li>• Scope of Service for Adult Day Health Service</li> <li>• Alabama Medicaid Adult Day Health Review Tool</li> </ul>
<p>3. Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.</p>	<p>The ACT Waiver was largely compliant with this requirement as it relates to privacy, dignity and respect, which were addressed in a comprehensive manner. As to freedom from coercion and restraint, the ACT Waiver provides that the State does not permit the use of restrictive interventions, restraints and seclusion and assures monitoring on a monthly basis by case managers as well as oversight by the appropriate state agencies. The ADSS Medicaid Waivers Case Management Guide and Home Visit Tool will require revision to fully address this</p>

Requirement	Summary of Compliance and Proposed Remediation
	<p>element as it relates to case manager responsibility for assessment, monitoring and documentation to ensure compliance with safeguards against restraint, restrictive interventions and seclusion. The Medicaid Waiver Survey for Participants Includes questions/probes regarding being treated with dignity and respect, but revisions should be considered to add probes regarding freedom from coercion and restraint.</p>
<p>4. 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>	<p>AMA Administrative Code, Chapter 44, is only partially compliant with this requirement. Adult Day Health and Companion services provide some language related to this requirement, such as education and training for health and self-care and promoting client independence, but this section of the Code does not fully address the optimization of individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact. The AMA ACT Policy Manual is also silent regarding this requirement and will be revised. The ADSS Medicaid Waivers Case Management Guide, Assessment Forms and Home Visit Tool also do not fully address this element as it relates to case manager responsibility for assessment, monitoring and documentation to ensure compliance and will require revision.</p>
<p>5. Facilitates individual choice regarding services and supports, and who provides them.</p>	<p>The ACT Waiver was partially compliant with this requirement, addressing the right of individuals regarding services and supports, and who provides them, including how this choice will be facilitated in the intake and planning processes as well as on an ongoing basis. AMA Administrative Code Chapter 44 does not address individual choice regarding services and supports, and who provides them and will be Revised rule to integrate these requirements. In addition, the AMA January 2016 Provider Manual will require revision to add clarifying language that all individuals will be advised of available services and given choice of providers.</p>
<p>6. In a provider-owned or controlled residential setting, in addition to the qualities specified above, additional conditions must be met.</p>	<p>Not applicable to the ACT Waiver. No waiver services are provided in provider owned or controlled residential settings.</p>
<p>7. HCBS settings exclude locations that have the qualities of an institutional setting.</p>	<p>None of the documents pertaining to the ACT Waiver fully address this requirement as it relates to settings that have the qualities of an institution or are presumed to have qualities of an institution. They do not fully address exclusion of all institutional or presumed-institutional setting nor do they describe a process for identification and scrutiny of such settings. Revisions will be required to the following documents:</p> <ul style="list-style-type: none"> <li>• ACT Waiver</li> <li>• AMA Provider Manual, Explanation of Covered Services</li> <li>• AMA Administrative Code, Chapter 44</li> </ul>

Requirement	Summary of Compliance and Proposed Remediation
	<ul style="list-style-type: none"> <li>• Alabama Medicaid Adult Day Health Standards</li> <li>• Scope of Service for Adult Day Health Service</li> <li>• Alabama Medicaid Adult Day Health Review Tool</li> <li>• Long Term Care Waiver Quality Assurance Manual</li> <li>• Medicaid Waiver Survey for ACT Participants</li> <li>• ADSS Medicaid Waivers Case Management Guide, Assessment Forms and Home Visit Tool</li> </ul>

**STATE OF ALABAMA INDEPENDENT LIVING WAIVER**

**Waiver Description**

The State of Alabama Independent Living (SAIL) Waiver provides services to disabled adults with specific medical diagnoses who meet the nursing facility level of care criteria. The Operating Agency for the SAIL waiver is the Alabama Department of Rehabilitation Services (ADRS.) The services available under this waiver are as follows:

SAIL Waiver Services
Case Management
Personal Care
Personal Assistance Service
Environmental Accessibility Adaptations
Personal Emergency Response System (Initial Setup)
Personal Emergency Response System (Monthly Fee)
Medical Supplies
Minor Assistive Technology
Evaluation for Assistive Technology
Assistive Technology Repairs

**Systemic Assessment**

**III. Systemic Assessment Process**

Prior to the submission of the initial STP in March 2015, Operating Agencies reviewed relevant regulations, policies and procedures, at least at a high level, to ensure consistency with the HCBS Final Rule promulgated by CMS. For the SAIL waiver program, it was concluded at that time that regulations, policies and procedures appeared to be compliant with the HCBS settings requirements. Following CMS feedback and the issuance of expanded guidance to states as to the expectation for the assessment process, additional assessment activities were conducted. ADRS and AMA staff have conducted a thorough examination of administrative code, policies, rules and regulations pertaining to the SAIL waiver to evaluate whether they were sufficient to ensure compliance with the Final Rule. A crosswalk was developed to identify each applicable administrative code, policy, rule and/or regulation that addressed each of the Final Rule requirements:

1. 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.
2. 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.
3. The setting ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.
4. The setting 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.

5. The setting facilitates individual choice regarding services and supports, and who provides them.
6. In a provider-owned or controlled residential setting, in addition to the qualities specified above, the additional conditions must be met. *(Note: Not applicable to the SAIL Waiver.)*
7. HCBS settings exclude locations that have the qualities of an institutional setting. For 1915(c) home and community-based waivers, settings that are not home and community-based are defined at §441.301(c)(5) as follows:
  - a. A nursing facility;
  - b. An institution for mental diseases;
  - c. An intermediate care facility for individuals with intellectual disabilities;
  - d. A hospital; or
  - e. Any other locations that have qualities of an institutional setting, as determined by the Secretary.

AMA worked with ADRS, the waiver operating agency, to complete a thorough review of various documents pertaining to the SAIL Waiver, including the following:

- AMA January 2016 Provider Manual, Chapter 107, Waiver Services
- SAIL Waiver Application, April 2015
- Alabama Administrative Code, Chapter 57
- Alabama Administrative Code, Chapter 795
- SAIL Policy and Procedure Manual
- AMA Long Term Care Waivers Quality Assurance Manual
- Medicaid Waiver Survey for SAIL participants

Each of these documents was reviewed for consistency and compliance with each of the qualities defined at §441.301(c)(4) and §441.710 respectively, based on the needs of the individual as indicated in their person-centered plan. The completed crosswalk provides the appropriate citation for each administrative code, policy, rule and/or regulation and other applicable documents and indicates whether each was deemed compliant or non-compliant, including the basis for that determination. If no applicable citation could be identified that addressed a Final Rule requirement, the state's rules were considered to be silent in that area. For those Final Rule requirements for which the state's administrative code, policies, rules and/or regulations were not sufficiently compliant, or were silent, remedial strategies were devised and are included in the crosswalk with projected milestones and timelines. Note that the silence rating was also used for items that may have reflected some elements of a requirement, but were deemed to not fully address that requirement.

#### **IV. Systemic Findings and Remediation**

The findings of the systemic assessment and proposed remediation strategies for the SAIL waiver are summarized in the table below. This crosswalk applies to the only setting in which waiver services are delivered, the private homes of individuals or integrated employment. The complete SAIL Waiver crosswalk may be found in Attachment A. It includes detailed descriptions of each finding, the basis for each determination of compliance, and any needed remedial strategies with milestones and projected completion date.

Requirement	Summary of Compliance and Proposed Remediation
<p>1. 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>This requirement of the Final Rule was not fully addressed for the SAIL Waiver. Covered services promote client independence, community access and integrated employment, but requirements that settings are integrated in and support full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to engage in community life and control personal resources to the same degree of access as individuals not receiving Medicaid HCBS were not fully reflected. Revisions will be required for the following documents:</p> <ul style="list-style-type: none"> <li>• Alabama Administrative Code, Chapter 57</li> <li>• Long Term Care Waiver Quality Assurance Manual</li> <li>• Medicaid Waiver Survey for Participants</li> <li>• SAIL Waiver Policy and Procedure Manual</li> <li>• ADSS Medicaid Waivers Case Management Guide, Assessment Forms, Home Visit Tool</li> </ul>
<p>2. 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.</p>	<p>This requirement was fully compliant. Individuals are served in private homes of their choice and in integrated competitive employment settings. Each client is given choice of either institutional or the home and community based services as well as given information necessary to make informed choices regarding the location of care. The participant-centered plan of care development process provides involved persons with the information necessary to make an informed choice regarding the location of care and services to be utilized.</p>
<p>3. Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.</p>	<p>The SAIL Waiver was largely compliant with this requirement as it relates to privacy, dignity and respect, which were addressed in a comprehensive manner. As to freedom from coercion and restraint, the SAIL Waiver provides that the State does not permit the use of restrictive interventions, restraints and seclusion and assures monitoring on a monthly basis by case managers as well as oversight by the appropriate state agencies. The SAIL Policy and Procedure Manual will require revision, however, to fully address this element as it relates to case manager responsibility for assessment, monitoring and documentation to ensure compliance with safeguards against restraint, restrictive interventions and seclusion. The Medicaid Waiver Survey for Participants Includes questions/probes regarding being treated with dignity and respect, but revisions should be considered to add probes regarding freedom form coercion and restraint.</p>
<p>4. 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>	<p>Both the SAIL Waiver and AMA Administrative Code, Chapter 57 address this requirement, but the SAIL Policy and Procedure Manual will need to be revised to address this element as it relates to case manager roles to assess and monitor for unauthorized use of restraint, seclusion and other restrictive interventions and to document the findings.</p>
<p>5. Facilitates individual choice regarding</p>	<p>The SAIL Waiver was largely compliant with this requirement,</p>

Requirement	Summary of Compliance and Proposed Remediation
<p>services and supports, and who provides them.</p>	<p>addressing the right of individuals regarding services and supports, and who provides them, including how this choice will be facilitated in the intake and planning processes as well as on an ongoing basis. The AMA January 2016 Provider Manual will require revision to add clarifying language that all individuals will be advised of available services and given choice of providers.</p>
<p>6. In a provider-owned or controlled residential setting, in addition to the qualities specified above, additional conditions must be met.</p>	<p>Not applicable to the SAIL Waiver. No waiver services are provided in provider owned or controlled residential settings.</p>
<p>7. HCBS settings exclude locations that have the qualities of an institutional setting.</p>	<p>None of the documents pertaining to the SAIL Waiver fully address this requirement as it relates to settings that have the qualities of an institution or are presumed to have qualities of an institution. They do not fully address exclusion of all institutional or presumed-institutional setting nor do they describe a process for identification and scrutiny of such settings. Revisions will be required to the following documents:</p> <ul style="list-style-type: none"> <li>• SAIL Waiver</li> <li>• AMA Provider Manual, Explanation of Covered Services</li> <li>• AMA Administrative Code, Chapter 57</li> <li>• Alabama Administrative Code Chapter 795</li> <li>• Long Term Care Waiver Quality Assurance Manual</li> <li>• Medicaid Waiver Survey for SAIL Participants</li> <li>• SAIL Waiver Policy and Procedure Manual</li> </ul>

## LIVING AT HOME WAIVER

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### Waiver Description

The Living at Home (LAH) Waiver provides services to individuals who would otherwise require the level of care available in an ICF/IID. The Operating Agency for the LAH waiver is the Alabama Department of Mental Health, Division of Developmental Disabilities (ADMH/DDD.) The services available under this waiver are as follows:

LAH Waiver Services
Residential Habilitation In-Home
Day Habilitation-Level 1-4
Day-Habilitation with Transportation – Level 1-4
Prevocational Services
Supported Employment
Individual Job Coach
Individual Job Developer
Occupational Therapy Services
Speech and Language Therapy
Physical Therapy
Behavior Therapy- Level 1-3
In-Home Respite
Out-of-Home Respite
Personal Care
Personal Care on Worksite
Personal Care Transportation
Environmental Accessibility Adaptations
Specialized Medical Equipment
Medical Supplies
Skilled Nursing
Community Specialist
Crisis Intervention

### Systemic Assessment

#### ***I. Systemic Assessment Process***

Prior to the submission of the initial STP in March 2015, Operating Agencies reviewed relevant regulations, policies and procedures, at least at a high level, to ensure consistency with the HCBS Final Rule promulgated by CMS. For the LAH waiver program, it was concluded at that time that regulations, policies and procedures appeared to be compliant with the HCBS settings requirements. Following CMS feedback and the issuance of expanded guidance to states as to the expectation for the assessment process, additional assessment activities were conducted. ADMH/DDD and AMA staff have conducted a thorough examination of administrative code, policies, rules and regulations pertaining to the LAH waiver to evaluate whether they were sufficient to ensure compliance with the Final Rule. A crosswalk was developed to identify each

applicable administrative code, policy, rule and/or regulation that addressed each of the Final Rule requirements:

1. 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.
2. 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.
3. The setting ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.
4. The setting 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.
5. The setting facilitates individual choice regarding services and supports, and who provides them.
6. In a provider-owned or controlled residential setting, in addition to the qualities specified above, the additional conditions must be met. *(Note: Not applicable to the LAH Waiver.)*
7. HCBS settings exclude locations that have the qualities of an institutional setting. For 1915(c) home and community-based waivers, settings that are not home and community-based are defined at §441.301(c)(5) as follows:
  - a. A nursing facility;
  - b. An institution for mental diseases;
  - c. An intermediate care facility for individuals with intellectual disabilities;
  - d. A hospital; or
  - e. Any other locations that have qualities of an institutional setting, as determined by the Secretary.

AMA worked with ADMH/DDD to complete a thorough review of various documents pertaining to the LAH Waiver, including the following:

- AMA January 2016 Provider Manual, Chapter 107, Waiver Services
- LAH Waiver
- Alabama Administrative Code, Chapter 52
- Alabama Title 38
- Behavioral Services Procedural Guidelines, 2014 Update
- Assessment Tool for Basic Assurance, 2012
- Provider Certification and Guidance Manual, Revised June 2014
- Home And Community Based Settings Check List
- AMA Long Term Care Waivers Quality Assurance Manual
- Medicaid Waiver Survey for LAH participants

Each of these documents was reviewed for consistency and compliance with each of the qualities defined at §441.301(c)(4) and §441.710 respectively, based on the needs of the individual as indicated in their person-centered plan. The completed crosswalk provides the appropriate citation for each administrative code, policy, rule and/or regulation and other applicable documents and indicates whether each was deemed compliant or non-compliant, including the basis for that determination. If no applicable citation

could be identified that addressed a Final Rule requirement, the state’s rules were considered to be silent in that area. For those Final Rule requirements for which the state’s administrative code, policies, rules and/or regulations were not sufficiently compliant, or were silent, remedial strategies were devised and are included in the crosswalk with projected milestones and timelines. Note that the silence rating was also used for items that may have reflected some elements of a requirement, but were deemed to not fully address that requirement.

**II. Systemic Findings and Remediation**

The findings of the systemic assessment and proposed remediation strategies for the LAH waiver are summarized in the table below. This crosswalk applies to all settings in which waiver services are delivered. These include the private homes of individuals, day habilitation programs, workplace and various community settings. The complete LAH Waiver crosswalk may be found in Attachment A. It includes detailed descriptions of each finding, the basis for each determination of compliance, and any needed remedial strategies with milestones and projected completion date.

Requirement	Summary of Compliance and Proposed Remediation
<p>1. 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>This requirement of the Final Rule is addressed for the LAH Waiver in most respects. Covered services promote integrated settings and support full access of individuals receiving Medicaid HCBS to the greater community, 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. Additional emphasis on opportunities to seek employment and work in competitive integrated settings continued to be needed. Revisions will be required for the following documents:</p> <ul style="list-style-type: none"> <li>• LAH Waiver</li> <li>• AMA Administrative Code, Chapter 52</li> <li>• AMA January 2016 Provider Manual, Chapter 107</li> <li>• Long Term Care Waiver Quality Assurance Manual</li> <li>• Medicaid Waiver Survey for Participants</li> </ul>
<p>2. 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.</p>	<p>This requirement was not fully compliant. Services provided under the LAH Waiver are generally provided in the person’s own home or family’s home. Day services that may be offered in a disability specific setting under the waiver include Day Habilitation and Prevocational Services. Facilitation of choices of supports and services, as well as providers, throughout the person-centered planning process is addressed, but the requirement to ensure selection is made from among setting options including non-disability specific settings is not fully reflected. Revisions will be required for the following documents:</p> <ul style="list-style-type: none"> <li>• LAH Waiver</li> <li>• Alabama Administrative Code, Chapter 52</li> <li>• Assessment Tool for Basic Assurance, 2012</li> </ul>
<p>3. Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.</p>	<p>The LAH Waiver is largely compliant with this requirement as regulations comprehensively address individual's rights of privacy, dignity and respect, and freedom from coercion and restraint. As to freedom from coercion and restraint, the LAH Waiver provides that the State permits the use of restraints,</p>

Requirement	Summary of Compliance and Proposed Remediation
	<p>but prohibits the use of seclusion and restrictive interventions. The waiver, related regulations and the Behavioral Services Procedural Guidelines describe the requirements for implementing, monitoring and documenting use of restraints permitted during the course of the delivery of waiver services. These include due process protections, staff training requirements and reporting procedures. Revisions will be required for the Provider Certification and Guidance Manual Restraint, however, as restrictive interventions are currently probed only in the context of mental health or behavior supports an individual receives to help achieve goals, but there are no probes regarding unauthorized use. In addition, the Medicaid Waiver Survey for Participants Includes questions/probes regarding being treated with dignity and respect, but revisions should be considered to add probes regarding freedom from coercion and restraint.</p>
<p>4. 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>	<p>The LAH Waiver is in compliance with this requirement.</p>
<p>5. Facilitates individual choice regarding services and supports, and who provides them.</p>	<p>The LAH Waiver is largely compliant with this requirement, addressing the right of individuals regarding services and supports, and who provides them, including how this choice will be facilitated in the person-centered planning processes as well as on an ongoing basis. AMA Administrative Code, Chapter 52 does not address individual choice regarding services and supports, and who provides them and will require revision. The instrument used for licensing and certification, Assessment Tool for Basic Assurance, does not include specific probes related to individual choice regarding services and supports, and who provides them. These will be added.</p>
<p>6. In a provider-owned or controlled residential setting, in addition to the qualities specified above, additional conditions must be met.</p>	<p>Not applicable to the LAH Waiver. No waiver services are provided in provider owned or controlled residential settings.</p>
<p>7. HCBS settings exclude locations that have the qualities of an institutional setting.</p>	<p>Only the Home and Community Based Checklist fully addresses this requirement as it relates to settings that have the qualities of an institution or are presumed to have qualities of an institution. Other documents pertaining to the LAH Waiver do not fully address exclusion of all institutional or presumed-institutional setting nor do they describe a process for identification and scrutiny of such settings. Revisions will be required to the following documents:</p> <ul style="list-style-type: none"> <li>• LAH Waiver</li> <li>• AMA Provider Manual, Explanation of Covered Services</li> <li>• AMA Administrative Code, Chapter 52</li> <li>• Alabama Administrative Code Chapter 58</li> <li>• Provider Certification and Guidance Manual</li> </ul>

Requirement	Summary of Compliance and Proposed Remediation
	<ul style="list-style-type: none"><li data-bbox="776 233 1219 260">• Assessment Tool for Basic Assurance</li><li data-bbox="776 264 1360 291">• Long Term Care Waiver Quality Assurance Manual</li><li data-bbox="776 296 1300 323">• Medicaid Waiver Survey for LAH Participants</li></ul>

## INTELLECTUAL DISABILITIES WAIVER

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### Waiver Description

The Intellectual Disabilities (ID) Waiver provides services to individuals who would otherwise require the level of care available in an ICF/IID. The Operating Agency for the ID waiver is the Alabama Department of Mental Health, Division of Developmental Disabilities (ADMH/DDD.) The services available under this waiver are as follows:

ID Waiver Services
Residential Habilitation
Residential Habilitation - Other Living Arrangement
Day Habilitation – Level 1-4
Day Habilitation with Transportation – Level 1-4
Prevocational Services
Supported Employment
Individual Job Coach
Individual Job Developer
Occupational Therapy
Speech and Language Therapy
Physical Therapy
Behavior Therapy– Level 1-3
In-Home Respite Care
Out-of-Home Respite Care
Institutional Respite Care
Personal Care
Personal Care on Worksite
Personal Care Transportation
Environmental Accessibility Adaptations
Specialized Medical Equipment
Medical Supplies
Skilled Nursing
Adult Companion Services
Crisis Intervention
Community Specialist

### Systemic Assessment

#### **III. Systemic Assessment Process**

Prior to the submission of the initial STP in March 2015, Operating Agencies reviewed relevant regulations, policies and procedures, at least at a high level, to ensure consistency with the HCBS Final Rule promulgated by CMS. For the ID waiver program, which came due for renewal in the period between issuance of the Final Rule and the submission of the initial STP, a transition plan was required. As a part of that transition

plan process, ADMH/DDD had developed a preliminary crosswalk of the Final Rule requirements with Alabama Administrative Code Chapter 58. Following CMS feedback and the issuance of expanded guidance to states as to the expectation for the assessment process, additional assessment activities were conducted. ADMH/DDD and AMA staff have since conducted a thorough examination of administrative code, policies, rules and regulations pertaining to the ID waiver to evaluate whether they were sufficient to ensure compliance with the Final Rule. In its response to Alabama's initial STP, CMS had also specifically requested that all regulations and other guiding documents related to restraint practices be identified and assessed. These were thoroughly examined in the current process. An expanded crosswalk was developed to identify each applicable administrative code, policy, rule and/or regulation that addressed each of the Final Rule requirements:

1. 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.
2. 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.
3. The setting ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.
4. The setting 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.
5. The setting facilitates individual choice regarding services and supports, and who provides them.
6. In a provider-owned or controlled residential setting, in addition to the qualities specified above, the additional conditions must be met.
7. HCBS settings exclude locations that have the qualities of an institutional setting. For 1915(c) home and community-based waivers, settings that are not home and community-based are defined at §441.301(c)(5) as follows:
  - a. A nursing facility;
  - b. An institution for mental diseases;
  - c. An intermediate care facility for individuals with intellectual disabilities;
  - d. A hospital; or
  - e. Any other locations that have qualities of an institutional setting, as determined by the Secretary.

AMA worked with ADMH/DDD to complete a thorough review of various documents pertaining to the ID Waiver, including the following:

- AMA January 2016 Provider Manual, Chapter 107, Waiver Services
- ID Waiver
- Alabama Administrative Code, Chapter 58
- AMA Administrative Code, Chapter 35
- Alabama Title 38
- Behavioral Services Procedural Guidelines, 2014 Update
- Assessment Tool for Basic Assurance, 2012
- Provider Certification and Guidance Manual, Revised June 2014

- Home And Community Based Settings Check List
- AMA Long Term Care Waivers Quality Assurance Manual
- Medicaid Waiver Survey for ID participants

Each of these documents was reviewed for consistency and compliance with each of the qualities defined at §441.301(c)(4) and §441.710 respectively, based on the needs of the individual as indicated in their person-centered plan. The completed crosswalk provides the appropriate citation for each administrative code, policy, rule and/or regulation and indicates whether it was deemed compliant or non-compliant, including the basis for that determination. If no applicable citation could be identified that addressed a Final Rule requirement, the state’s rules were considered to be silent in that area. For those Final Rule requirements for which the state’s administrative code, policies, rules and/or regulations were not sufficiently compliant, or were silent, remedial strategies were devised and are included in the crosswalk with projected milestones and timelines.

**IV. Systemic Findings and Remediation**

The findings of the systemic assessment and proposed remediation strategies for the ID waiver are summarized in the table below. This crosswalk applies to all settings in which waiver services are delivered. These may include the residential group homes, private homes of individuals, day habilitation programs, workplace and various community settings. The complete ID Waiver crosswalk may be found in Attachment A. It includes detailed descriptions of each finding, the basis for each determination of compliance, and any needed remedial strategies with milestones and projected completion date.

Requirement	Summary of Compliance and Proposed Remediation
1. 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.	This requirement of the Final Rule is addressed for the ID Waiver in most respects. Covered services promote integrated settings and support 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. Attachment 2 of the ID waiver acknowledges additional work to be accomplished to fully support integrated employment opportunities and remedial action is underway as described in the Crosswalk. Revisions will also be required for the following documents: <ul style="list-style-type: none"> <li>• AMA Administrative Code, Chapter 35</li> <li>• AMA January 2016 Provider Manual, Chapter 107</li> <li>• Long Term Care Waiver Quality Assurance Manual</li> <li>• Medicaid Waiver Survey for Participants</li> </ul>
2. 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.	This requirement was not fully compliant. Facilitation of choices of supports and services, as well as providers, throughout the person-centered planning process is addressed, but the requirement to ensure selection is made from among setting options including non-disability specific settings is not fully reflected. For example, for the definition of Residential Habilitation in the waiver document, residence selection is discussed only in the context of provider responsibilities. There is no discussion of residence selection being based upon the preferences of the individual. Revisions will be required for the following documents:

Requirement	Summary of Compliance and Proposed Remediation
	<ul style="list-style-type: none"> <li>• ID Waiver</li> <li>• Alabama Administrative Code, Chapter 58</li> <li>• Assessment Tool for Basic Assurance</li> </ul>
<p>3. Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.</p>	<p>The ID Waiver is largely compliant with this requirement as it relates to privacy, dignity and respect, which are addressed in a comprehensive manner. As to freedom from coercion and restraint, the ID Waiver provides that the State permits the use of restraints and certain restrictive interventions, but prohibits the use of seclusion. The waiver, related regulations and the Behavioral Services Procedural Guidelines describe the requirements for implementing, monitoring and documenting use of restraints and certain restrictive interventions that are permitted during the course of the delivery of waiver services. These include due process protections, staff training requirements and reporting procedures. Revisions will be required for the Provider Certification and Guidance Manual, as restrictive interventions are currently probed only in the context of mental health or behavior supports an individual receives to help achieve goals, but there are no probes regarding unauthorized use. In addition, the Medicaid Waiver Survey for Participants Includes questions/probes regarding being treated with dignity and respect, but revisions should be considered to add probes regarding freedom from coercion and restraint.</p>
<p>4. 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>	<p>The ID Waiver is in compliance with this requirement.</p>
<p>5. Facilitates individual choice regarding services and supports, and who provides them.</p>	<p>The ID Waiver is largely compliant with this requirement, addressing the right of individuals regarding services and supports, and who provides them, including how this choice will be facilitated in the person-centered planning processes as well as on an ongoing basis. AMA Administrative Code, Chapter 52 does not address individual choice regarding services and supports, and who provides them and will require revision. The instrument used for licensing and certification, Assessment Tool for Basic Assurance, does not include specific probes related to individual choice regarding services and supports, and who provides them. These will be added.</p>
<p>6. In a provider-owned or controlled residential setting, in addition to the qualities specified above, additional conditions must be met.</p>	<p>Waiver services may be delivered in provider owned or controlled residential settings. The ID Waiver is not fully compliant with this requirement, particularly as it was silent as to entrance doors lockable by the individual and to legally enforceable leases/occupancy agreements that include protections from eviction and appeal rights in the same manner as all persons in the State who are not receiving Medicaid HCBS. ADMH/DDD had identified these areas requiring remediation and has begun the process of revising the pertinent administrative code sections. In addition, revisions will be required for the following:</p>

Requirement	Summary of Compliance and Proposed Remediation
	<ul style="list-style-type: none"> <li>• ID Waiver</li> <li>• Provider Certification and Guidance Manual</li> <li>• Assessment Tool for Basic Assurance</li> </ul>
<p>7. HCBS settings exclude locations that have the qualities of an institutional setting.</p>	<p>Only the Home and Community Based Checklist fully addresses this requirement as it relates to settings that have the qualities of an institution or are presumed to have qualities of an institution. Other documents pertaining to the ID Waiver do not fully address exclusion of all institutional or presumed-institutional setting nor do they describe a process for identification and scrutiny of such settings. Revisions will be required to the following documents:</p> <ul style="list-style-type: none"> <li>• ID Waiver</li> <li>• AMA Provider Manual, Explanation of Covered Services</li> <li>• AMA Administrative Code, Chapter 35</li> <li>• Alabama Administrative Code Chapter 58</li> <li>• Provider Certification and Guidance Manual</li> <li>• Assessment Tool for Basic Assurance</li> <li>• Long Term Care Waiver Quality Assurance Manual</li> <li>• Medicaid Waiver Survey for ID Participants</li> </ul>

**ATTACHMENT A:  
SYSTEMIC ASSESSMENT WAIVER CROSSWALKS**

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
TA WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
1. 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.	Application for TA Waiver Renewal, February 2016, Appendix C-5: Home and Community-Based Settings			X	Does not fully address this requirement. Indicates that a description of the settings will be amended after the Statewide Transition Plan has been approved.	Amend Appendix C-5, and other sections as appropriate, after the Statewide Transition Plan has been approved to reflect requirements that settings are integrated in and support 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.	Submission of Settings Assessment for Statewide Transition Plan	3/31/16
							Approval of Statewide Transition Plan Settings Assessment	6/30/16
							Waiver amendment submission to reflect approved Statewide Transition Plan	9/30/16
	AMA January 2016 Provider Manual, Chapter 107.2.4, Explanation of Covered Services			X	The Provider Manual includes some references that support this requirement of the Rule, such as the definition of Personal Care/Attendant Services (107.2.4, Explanation of Covered Services)	Revise Chapter 107 to reflect requirement as noted above.	Draft revisions to Provider Manual	6/30/16
							Administrative review and approval	8/30/16
							Publish revised Provider Manual	1/1/17

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
TA WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					<p>which states PC/AS is designed to “...support individuals with physical disabilities...seeking or maintaining competitive employment either in the home or in an integrated or work setting. See also below. The overall purpose of Waiver Services (including the TA Waiver) does indicate they are designed to serve individuals who would otherwise require institutionalization, but the definition of purpose is limited to protecting health, safety and dignity of participants while reducing Medicaid expenditures. It does not address the other components of this requirement, including supporting 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>			

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
TA WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	AMA Admin. Code, Chapter 54, Rule No. 560-X-58-.01, Authority and Purpose			X	States purpose of HCBS is to protect health, safety and dignity of individuals at risk for institutional care, but does not address full scope of requirement regarding integration, full access to community, 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	Revise rule to reflect all requirement as noted above.	Draft revisions to rule Publish rule for public comment Publish final rule	9/30/16 12/1/16 2/1/17
	AMA Admin. Code, Chapter 54, Rule No. 560-X-54-.03.	X			Covered services support community access, integration and exertion of personal control, including the following: (1) (a)-(b)Personal Care/Attendant Services (a) Personal Care/Attendant Service (PC/AS) provides in-home and out-of-home (job site) assistance; (b) PC/AS is designed to increase an individual's independence and ability to perform daily activities and to support individuals with physical disabilities in need of these services as well as those seeking	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
TA WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					or maintaining competitive employment either in the home or an integrated work setting; and, (3) Medical supplies and appliances which enable the individual to increase abilities to perform activities of daily living, or to perceive, control or communicate with the environment in which he/she lives			
	Long Term Care Waiver Quality Assurance Manual			X	The mission statement of the Long Term Care Waiver Quality Assurance Manual is to assure participants receive quality care in the home and community setting, but does not fully define "home and community-based setting" in keeping with this requirement of Final Rule or include specific quality assurance activities to assure compliance.	Amend the Long Term Care Waiver Quality Assurance Manual to fully define "home and community-based setting" and include quality assurance strategies, including but not limited to revision of Medicaid Waiver Survey for participants, to ensure compliance with this requirement.	Draft revisions to Waiver Quality Assurance Manual	6/30/16
							Administrative review and approval	8/30/16
							Publish and implement revised Waiver Quality Assurance Manual	10/1/16
	Medicaid Waiver Survey for Participants			X	Survey questions do not address/probe compliance with this element	Revise Survey to include questions/probes that address compliance with this element	Draft revisions to Survey	6/30/16
							OA and Administrative review and approval	8/30/16
							Implement revised Survey	10/1/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
TA WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	AMA TA Waiver Policy Manual, Revised October 2015			X	Does not address this element.	Amend manual to reflect element.	Revise AMA TA Waiver Policy Manual	6/30/16
							Administrative review and approval	8/30/16
							Publish and implement revised TA Waiver Policy Manual	10/1/16
	ADSS Medicaid Waivers Case Management Guide, August 2014; Assessment Forms, Home Visit Tool (Form MW-1)			X	Allows client the opportunity to choose services in an institution or the community and to have information to make decisions about his/her plan of care. Also specifically states that individuals receiving waiver services can be employed. Does not, however, fully address this element as it relates to case management responsibilities for assessment, monitoring and documentation to ensure compliance.	Revise manual to address this element as it relates to case manager roles to assess and monitor the setting in which services are delivered for compliance with this element and to document the findings	Revise manual Waivers Case Management Guide and related forms	12/31/16
						Provide training to case management staff	2/28/17	
2. 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	Pending Application for TA Waiver Renewal, February 2016	X			The individual is served in a private home of their choice. TA Waiver Coordinator and ADSS Targeted Case Managers ensure waiver participants are actively involved in decision-making related to the provision of waiver services.	None required	NA	NA
	AMA TA Waiver Policy Manual, revised October	X			The client is given information necessary to make informed choices regarding the location of	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
TA WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
available for room and board.	2015				care and given choice of either institutional or the home and community based services			
	ADSS Medicaid Waivers Case Management Guide, August 2014; Assessment Forms, Home Visit Tool (Form MW-1)	X			A Rights and Responsibilities form outlines participants' ability to choose.	None required	NA	NA
3. Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.	Application for TA Waiver Renewal, February 2016: Appendix G-2	X			The State does not permit or prohibits the use of restrictive interventions, restraints and seclusion. The Alabama Department of Senior Services will monitor the unauthorized use of restraints or seclusion during the monthly face-to-face visits. Alabama Medicaid Agency will monitor through Satisfaction Surveys and the established Complaint and Grievance process. Additionally, the ADSS and AMA will monitor when onsite visits are conducted.	None required	NA	NA
	AMA Administrative Code Ch. 54, Rule No. 560-X-58-.08, Confidentiality.	X			Providers are not to use or disclose any information regarding an eligible recipient without written consent of the recipient, their attorney or guardian, or upon subpoena	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
TA WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	AMA TA Waiver Policy Manual, Revised October 2015, Chapter 3.A.10	X			Services cannot be provided to client in an environment where the client is not treated with dignity and respect.	None required	NA	NA
	AMA TA Waiver Policy Manual, Revised October 2015, Chapter 8.A.2.c	X			Requires safeguarding of applicant and recipient information in accordance with provisions of Code of Federal Regulations governing confidentiality.	None required	NA	NA
	Medicaid Waiver Survey for Participants			X	Includes questions/probes regarding being treated with dignity and respect, but may need revisions to probe freedom from coercion and restraint.	Consider revisions to probe for freedom from coercion and restraint	Draft proposed revisions to Survey	6/30/16
							OA and Administrative review and approval	8/30/16
								Implement revised Survey
	Alabama Medicaid Agency Technology Assisted Waiver For Adults, Private Duty Nursing –Rights And Duties, APPENDIX D-4B	X			Defines right to be treated with respect by all people who provide care or bring equipment or supplies	None required	NA	NA
	ADSS Medicaid Waivers Case Management Guide, August 2014; Assessment Forms, Home Visit Tool (Form MW-1)			X	Confidentiality is addressed as noted above. Does not fully address this element as it relates to case manager responsibility for assessment, monitoring and documentation to ensure compliance with safeguards	Revise manual to address freedom from coercion and restraint as it relates to case manager roles to assess and monitor the setting in which services are	Revise manual and related forms	12/31/16
								Provide training to case management staff

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
TA WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					against restraint, restrictive interventions and seclusion.	delivered for compliance with this element and to document the findings.		
4. 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.	AMA TA Policy Manual, Revised October 2015			X	The Policy and Procedure Manual includes some references that support this requirement of the Rule, such as: The case manager works with clients to provide information needed to make informed choices regarding care and services. Services are to restore, maintain, and promote health status of clients through support and assistances with activities of daily living. It does not fully address the component of this requirement related to choices related to with whom to interact.	Revise Policy and Procedure Manual to include all components of requirement	Revise AMA TA Waiver Policy Manual	6/30/16
							Administrative review and approval	8/30/16
							Publish and implement revised TA Waiver Policy Manual	10/1/16
	AMA Admin. Code, Chapter 54, Rule No. 560-X-54-.03.	X			Covered services support community individual initiative, independence and autonomy specifically for integrated work settings and as an outcome for medical supplies and appliances and assistive technology.	None required	NA	NA
	ADSS Medicaid Waivers Case Management Guide, August			X	Does not fully address this element as it relates to case manager responsibility for assessment, monitoring and	Revise manual to address this element as it relates to case manager roles to assess	Revise Waivers Case Management Guide and related forms Provide training to	

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
TA WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	2014; Assessment Forms, Home Visit Tool (Form MW-1)				documentation to ensure compliance	and monitor the setting in which services are delivered for compliance with this element and to document the findings.	case management staff	
5. Facilitates individual choice regarding services and supports, and who provides them.	Application for TA Waiver Renewal, February 2016, Appendix B-7 Freedom of Choice; Appendix D-1b and D-1f Service Plan Development	X			B-7: During the initial contact made by the ADSS TCM, the applicant is informed of the feasible alternatives available under the waiver allowing free choice of waiver services or institutional care. The applicant is also informed about the services available under the waiver and the scope of each service. Activities or tasks performed within each service are described in detail as well as any specific limitations within each service. D-1b: Participant and/or representative are encouraged to ask questions about specific services and direct services providers. Throughout the POC development process, the participant and/or representative are engaged in the process of the development of the POC. The participant is assured through the process that	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
TA WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					they have the right to choose from any willing and qualified waiver provider. D-1f: On the initial visit, the targeted case manager provides the participant with a list of providers (listed in alphabetical order) for all waiver services available in the area. If subsequent changes or additions of providers are made verbally they are documented in the case narrative or as a case note. A copy of an updated list of providers is given to participants at each redetermination visit so that the participant will always be informed of providers serving the area. Participants are also advised of their freedom to select a provider that is not on this list as long as the provider meets the provider qualifications for the specific services included on the plan of care.			
	AMA Administrative Code Ch. 58, Rule No. 560-X-58-.05.	X			Each individual is given freedom of choice based on the participant centered plan of care	None required	NA	NA
	AMA TA Waiver Policy Manual,	X			Intake and screening process must include documentation	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
TA WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	Revised October 2015, Chapter 4.B				applicant has been provided with freedom of choice of all providers and has received information to make informed choice.			
	AMA January 2016 Provider Manual, Chapter 107.2.6			X	Describes Medicaid responsibilities to ensure beneficiaries are advised of feasible service alternatives and receive a choice of institutional and HCB services. Further states that when residents of long term care facilities become eligible for HCBS, will be advised of available services and given choice of providers. Does not clarify that all individuals receiving HCBS will be so advised and given choice of providers.	Revise Provider Manual to add clarifying language will be advised of available services and given choice of providers.	Draft revisions to Provider Manual	6/30/16
Administrative review and approval							8/30/16	
Publish revised Provide Manual							1/1/17	
	Medicaid Waiver Survey for Participants	X			Includes questions/probes regarding choice of providers	None required	NA	NA
	Alabama Medicaid Agency Technology Assisted Waiver For Adults, Private Duty Nursing –Rights And Duties, APPENDIX D-4B	X			Defines right of individual to change provider for nursing care or equipment	None required	NA	NA
6. In a provider-owned or controlled residential setting, in addition to the qualities specified	NA. No services provided in provider owned or							

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
TA WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
above, the following additional conditions must be met:	controlled residential settings.							
7. HCBS settings exclude locations that have the qualities of an institutional setting. For 1915(c) home and community-based waivers, settings that are not home and community-based are defined at §441.301(c)(5) as follows: a. A nursing facility; b. An institution for mental diseases; c. An intermediate care facility for individuals with intellectual disabilities; d. A hospital; or e. Any other locations that have qualities of an institutional setting, as determined by the Secretary. For 1915(c) home and community-based waivers, section 441.301(c)(5)(v) specifies that the following settings are presumed to have the qualities of an institution: a. Any setting that is located in a building that is also a publicly or privately operated facility that provides inpatient institutional	Application for TA Waiver Renewal, February 2016			X	Does not fully address this requirement as it relates to settings that have the qualities of an institution or are presumed to have qualities of an institution. Does not address process for identifying settings that may be subject to heightened scrutiny or process for implementing heightened scrutiny.	Amend after the Statewide Transition Plan has been approved to reflect requirements regarding settings that are presumed institutional	Submission of Settings Assessment for Statewide Transition Plan	3/31/16
							Approval of Statewide Transition Plan Settings Assessment	6/30/16
							Waiver amendment submission to reflect approved Statewide Transition Plan	9/30/16
AMA Administrative Code, Chapter 54, Rule No. 560-X-58-.02(1)  AMA TA Waiver Policy Manual, Revised October 2015, Chapter 3.A.10				X	States that no services may not be provided in a hospital or nursing facility.  Rule does not address exclusion of other institutional or presumed-institutional setting or process for identification and scrutiny of such settings.	Revise rule to explicitly define all excluded settings as defined in Final Settings Rule.	Draft revisions to rule	9/30/16
							Publish rule for public comment	12/1/16
							Publish final rule	2/1/17
				X	Specifies exclusions for nursing facilities, hospital and ICF/ID.  Does not address specific exclusion of other presumed institutional settings or process for identification and scrutiny of such settings.	Revise manual to explicitly define all excluded settings as defined in Final Settings Rule	Draft revision to TA Waiver Policy Manual	6/30/16
							Obtain administrative approval	8/30/16
							Publish amended TA Waiver Policy Manual	10/1/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
TA WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
treatment, b. Any setting that is located in a building on the grounds of, or immediately adjacent to, a public institution, or c. Any other setting that has the effect of isolating individuals receiving Medicaid HCBS from the broader community of individuals not receiving Medicaid HCBS.	AMA January 2016 Provider Manual, Chapter 107.2.3, Limitations			X	States that Medicaid does not provide waiver services to recipients in a hospital or nursing facility.	Revise Provider Manual to explicitly define all excluded settings as defined in Final Settings Rule.	Draft revisions to Provider Manual	6/30/16
							Administrative review and approval	8/30/16
							Publish revised Provider Manual	1/1/17
	ADSS Medicaid Waivers Case Management Guide, August 2014; Assessment Forms, Home Visit Tool (Form MW-1)			X	Guide indicates services are not to be provided in a nursing home setting, but does not fully address this element as it relates to case management assessment, monitoring and documentation that services may not be provided in other settings that are presumed to be institutional.	Revise guide to address this element as it relates to case manager roles to assess and monitor the setting in which services are delivered for compliance with this element and to document the findings.	Revise manual and related forms	12/31/16
							Provide training to case management staff	2/28/17
	Long Term Care Waiver Quality Assurance Manual			X	The mission statement of the Long Term Care Waiver Quality Assurance Manual is to assure participants receive quality care in the home and community setting, but does not fully define "home and community-based setting" in keeping with this requirement of Final Rule or	Amend the Long Term Care Waiver Quality Assurance Manual to fully define "home and community-based setting" and include quality assurance strategies, including but not limited to revision	Draft revisions to Waiver Quality Assurance Manual	6/30/16
							Administrative review and approval	8/30/16
							Publish and implement revised Waiver Quality Assurance Manual	10/1/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
TA WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					include specific quality assurance activities to assure compliance.	of Medicaid Waiver Survey for participants, to ensure compliance with this requirement.		

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA HIV WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline	
		Compliance	Noncompliance	Silent					
1. 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.	HIV Waiver AL.40382.R02.00			X	The HIV Waiver provides for some assistance with full access of individuals receiving Medicaid HCBS to the greater community, particularly as it relates to assistance with transition from institutional settings and case management activities to ensure access to both waiver and non-waiver services in the community. It does not fully address 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.	Waiver will be amended, consistent with the Statewide Transition Plan, to address 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.	Submission of Settings Assessment for Statewide Transition Plan	3/31/16	
				Approval of Statewide Transition Plan Settings Assessment			6/30/16		
				Make necessary changes to reflect approved Statewide Transition Plan for Waiver for renewal submission			8/1/17		
	AMA January 2016 Provider Manual, Chapter 107.2.4, Explanation of Covered Services				X	The Provider Manual includes some references that support this requirement of the Rule, such as the definition of Personal Care/Attendant Services (107.2.4, Explanation of Covered Services) which states PC/AS is designed to "...support individuals with physical disabilities...seeking or maintaining competitive	Revise Chapter 107 to reflect requirement 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	Draft revisions to Provider Manual	6/30/16
					Administrative review and approval			8/30/16	
					Publish revised Provider Manual			1/1/17	

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA HIV WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					employment either in the home or in an integrated or work setting. See also below. The overall purpose of Waiver Services (including the HIV Waiver) does indicate they are designed to serve individuals who would otherwise require institutionalization, but the definition of purpose is limited to protecting health, safety and dignity of participants while reducing Medicaid expenditures. It does not address the other components of this requirement, including supporting 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	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.		
	AMA Administrative Code, Chapter 58, Rule No.			X	Stated purpose does not address full scope of requirement regarding integration, full access to community, opportunities to	Revise rule to reflect requirement as noted above.	Draft revisions to rule Publish rule for public comment Publish final rule	9/30/16 12/1/16 2/1/17

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA HIV WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	560-X-58-.01: Authority and Purpose				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			
	AMA Administrative Code, Chapter 58, Rule No. 560-X-58-.02: Description of Services			X	Covered services do not references support community access, integration and exertion of personal control.		Draft revisions to rule Publish rule for public comment Publish final rule	9/30/16 12/1/16 2/1/17
	Long Term Care Waiver Quality Assurance Manual			X	The mission statement of the Long Term Care Waiver Quality Assurance Manual is to assure participants receive quality care in the home and community setting, but does not fully define "home and community-based setting" in keeping with this requirement of Final Rule or include specific quality assurance activities to assure compliance.	Amend the Long Term Care Waiver Quality Assurance Manual to fully define "home and community-based setting" and include quality assurance strategies, including but not limited to revision of Medicaid Waiver Survey for participants, to ensure compliance with this requirement.	Draft revisions to Waiver Quality Assurance Manual Administrative review and approval Publish and implement revised Waiver Quality Assurance Manual	6/30/16 8/30/16 10/1/16
	Medicaid Waiver Survey for Participants			X	Survey includes questions that address/probe compliance with this element in the areas of	Consider revising the Survey to include questions/probes that	Draft possible revisions to Survey OA and Administrative	6/30/16 8/30/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA HIV WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					community integration and access, but consideration should be given to whether probes are sufficient to test for compliance.	address compliance with this element	review and approval Implement any revisions to Survey deemed needed and appropriate.	10/1/16
	AMA HIV Waiver Policy Manual, March 2011			X	Does not address this element.	Amend manual to reflect element.	Revise AMA HIV Waiver Policy Manual Administrative review and approval Publish and implement revised HIV Waiver Policy Manual	6/30/16 8/30/16 10/1/16
	ADSS Medicaid Waivers Case Management Guide, August 2014; Assessment Forms, Home Visit Tool (Form MW-1)			X	Allows client the opportunity to choose services in an institution or the community and to have information to make decisions about his/her plan of care. Also specifically states that individuals receiving waiver services can be employed. Does not, however, fully address this element as it relates to case management responsibilities for assessment, monitoring and documentation to ensure compliance.	Revise manual to address this element as it relates to case manager roles to assess and monitor the setting in which services are delivered for compliance with this element and to document the findings	Revise manual Waivers Case Management Guide and related forms Provide training to case management staff	12/31/16 2/28/17
2. 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	HIV Waiver AL.40382.R02.00 Appendix B-7 and Appendix D-1	X			Individuals are served in private homes of their choice. No residential or non-residential services settings are offered under the HIV waiver. HIV Case	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA HIV WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
<p>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.</p>					Managers ensure waiver participants are informed as to all feasible alternatives under the waiver, including free choice of waiver services or institutional care. During the person-centered care plan meeting all parties discuss the needs of the client, informal supports provided by family or other community resources, identify the gaps in supports and are informed of what waiver services may fill in those gaps. The participant decides which personal representative will be involved in development of the plan of care.			
	AMA HIV Waiver Policy Manual, March 2011	X			The client is given information necessary to make informed choices regarding the location of care and given choice of either institutional or the home and community based services	None required	NA	NA
	ADSS Medicaid Waivers Case Management Guide, August 2014; Assessment Forms, Home Visit Tool (Form MW-1)	X			A Rights and Responsibilities form outlines participants' ability to choose.	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA HIV WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
3. Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.	HIV Waiver AL.40382.R02.00, Appendix G-2			X	The State does not permit or prohibits the use of restrictive interventions, restraints and seclusion. The waiver document does not provide any information as to oversight procedures to ensure no occurrence of unauthorized use of restraint, seclusion and/or restrictive interventions.	Amend waiver to provide description of oversight procedures to ensure no occurrence of unauthorized use of restraint, seclusion and/or restrictive interventions.	Submit waiver amendment with renewal	8/1/17
							Obtain approval of waiver renewal	10/1/17
							Implement revised procedures per approved renewal	10/1/17
	AMA Administrative Code Chapter. 58, Rule No. 560-X-58-.09, Confidentiality.	X			Providers are not to use or disclose any information regarding an eligible recipient without written consent of the recipient, their attorney or guardian, or upon subpoena	None required	NA	NA
	AMA HIV Waiver Policy Manual, March 2011, Chapter 3.A.10	X			Services cannot be provided to client in an environment where the client is not treated with dignity and respect.	None required	NA	NA
	AMA HIV Waiver Policy Manual, March 2011, Chapter 8.A.2.c	X			Requires safeguarding of applicant and recipient information in accordance with provisions of Code of Federal Regulations governing confidentiality.	None required	NA	NA
Medicaid Waiver Survey for Participants				X	Includes questions/probes regarding being treated with dignity and respect, but may need revisions to probe freedom from coercion and restraint.	Consider revisions to probe for freedom from coercion and restraint	Draft proposed revisions to Survey	6/30/16
							OA and Administrative review and approval	8/30/16
							Implement revised	10/1/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA HIV WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
							Survey	
	ADSS Medicaid Waivers Case Management Guide, August 2014; Assessment Forms, Home Visit Tool (Form MW-1)			X	Confidentiality is addressed as noted above. Does not fully address this element as it relates to case manager responsibility for assessment, monitoring and documentation to ensure compliance with safeguards against restraint, restrictive interventions and seclusion.	Revise manual to address freedom from coercion and restraint as it relates to case manager roles to assess and monitor the setting in which services are delivered for compliance with this element and to document the findings.	Revise manual and related forms	12/31/16
							Provide training to case management staff	2/28/17
4. 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.	AMA HIV Policy Manual, March 2011			X	The Policy and Procedure Manual includes some references that support this requirement of the Rule, such as: The case manager works with clients to provide information needed to make informed choices regarding care and services. Services are to restore, maintain, and promote health status of clients through support and assistances with activities of daily living. It does not fully address the component of this requirement related to choices of with whom to interact.	Revise Policy and Procedure Manual to include all components of requirement.	Revise AMA HIV Waiver Policy Manual	6/30/16
							Administrative review and approval	8/30/16
							Publish and implement revised HIV Waiver Policy Manual	10/1/16
	AMA Admin. Code, Chapter 58, Rule No. 560-X-58-.02: Description of			X	States services will provide health, social and related support needed to ensure optimal functioning of the individual	Revise rule to address the optimization of individual initiative, autonomy, and	Draft revisions to rule	9/30/16
						Publish rule for public comment	12/1/16	
						Publish final rule	2/1/17	

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA HIV WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	Services				within a community setting, but does not fully address the optimization of individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact.	independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact.		
	ADSS Medicaid Waivers Case Management Guide, August 2014; Assessment Forms, Home Visit Tool (Form MW-1)			X	Does not fully address this element as it relates to case manager responsibility for assessment, monitoring and documentation to ensure compliance	Revise manual to address this element as it relates to case manager roles to assess and monitor the setting in which services are delivered for compliance with this element and to document the findings.	Revise Waivers Case Management Guide and related forms	12/31/16
							Provide training to case management staff	2/28/17
5. Facilitates individual choice regarding services and supports, and who provides them.	HIV Waiver AL.40382.R02.00 Appendix B-7 Freedom of Choice; Appendix D-1 Service Plan Development			x	Under Appendix B-7 and D-1, the case manager informs eligible individuals or their legal representatives of the feasible alternatives available under the waiver, allowing free choice of waiver services or institutional care, during the assessment/application process for admission, readmission, and redetermination of eligibility. Participants and/or their	Revise waiver to ensure participants are provided with individual choice regarding services and supports, and who provides them, including the freedom to make such choices at other times than assessment/application process for admission, readmission, and	Submit waiver amendment	8/1/17
							Obtain approval of waiver amendment	10/1/17
							Implement revised procedures per approved amendment	10/1/17

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA HIV WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					representative are given as much information as possible to allow them to make an informed choice based upon their individual and personal preferences without putting their health and safety at risk. Does not indicate that individuals have the right to change service providers at other times.	redetermination of eligibility.		
	AMA HIV Waiver Policy Manual, March 2011, Chapter 4.B	X			Intake and screening process must include documentation applicant has been provided with freedom of choice of all providers and has received information to make informed choice.	None required	NA	NA
	AMA January 2016 Provider Manual, Chapter 107.2.6			X	Describes Medicaid responsibilities to ensure beneficiaries are advised of feasible service alternatives and receive a choice of institutional and HCB services. Further states that when residents of long term care facilities become eligible for HCBS, will be advised of available services and given choice of providers. Does not clarify that all individuals receiving HCBS will be so advised and given choice of providers.	Revise Provider Manual to add clarifying language will be advised of available services and given choice of providers.	Draft revisions to Provider Manual Administrative review and approval Publish revised Provide Manual	6/30/16 8/30/16 1/1/17

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA HIV WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline	
		Compliance	Noncompliance	Silent					
	Medicaid Waiver Survey for Participants	X			Includes questions/probes regarding choice of providers	None required	NA	NA	
6. In a provider-owned or controlled residential setting, in addition to the qualities specified above, the following additional conditions must be met:	NA. No services provided in provider owned or controlled residential settings.								
7. HCBS settings exclude locations that have the qualities of an institutional setting. For 1915(c) home and community-based waivers, settings that are not home and community-based are defined at §441.301(c)(5) as follows: a. A nursing facility; b. An institution for mental diseases; c. An intermediate care facility for individuals with intellectual disabilities; d. A hospital; or e. Any other locations that have qualities of an institutional setting, as determined by the Secretary. For 1915(c) home and community-based waivers, section 441.301(c)(5)(v) specifies that the following settings are	HIV Waiver AL.40382.R02.00			X	Does not fully address this requirement as it relates to settings that have the qualities of an institution or are presumed to have qualities of an institution. Does not address process for identifying settings that may be subject to heightened scrutiny or process for implementing heightened scrutiny.	Amend after the Statewide Transition Plan has been approved to reflect requirements regarding settings that are presumed institutional	Submission of Settings Assessment for Statewide Transition Plan	3/31/16	
							Approval of Statewide Transition Plan Settings Assessment	6/30/16	
								Waiver amendment submission to reflect approved Statewide Transition Plan	9/30/16
		AMA Administrative Code, Chapter 58, Rule No. 560-X-58-.03. (3)			X	States that no services may not be provided in a hospital or nursing facility.  Rule does not address exclusion of other institutional or presumed-institutional setting or process for identification and scrutiny of such settings.	Revise rule to explicitly define all excluded settings as defined in Final Settings Rule.	Draft revisions to rule	9/30/16
								Publish rule for public comment	12/1/16
									Publish final rule
	AMA HIV Waiver Policy Manual, March 2011,			X	Specifies exclusions for nursing facilities, hospital and ICF/ID.	Revise manual to explicitly define all excluded settings as	Draft revision to HIV Waiver Policy Manual	6/30/16	
							Obtain administrative	8/30/16	

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA HIV WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
<p>presumed to have the qualities of an institution:</p> <p>a. Any setting that is located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment,</p> <p>b. Any setting that is located in a building on the grounds of, or immediately adjacent to, a public institution, or</p> <p>c. Any other setting that has the effect of isolating individuals receiving Medicaid HCBS from the broader community of individuals not receiving Medicaid HCBS.</p>	Chapter 3.A.10				Does not address specific exclusion of other presumed institutional settings or process for identification and scrutiny of such settings.	defined in Final Settings Rule	approval	
	AMA January 2016 Provider Manual, Chapter 107.2.3, Limitations			X	States that Medicaid does not provide waiver services to recipients in a hospital or nursing facility.	Revise Provider Manual to explicitly define all excluded settings as defined in Final Settings Rule.	Draft revisions to Provider Manual	6/30/16
					Does not address exclusion of other institutional or presumed-institutional setting. Does not address process for identifying settings that may be subject to heightened scrutiny or process for implementing heightened scrutiny		Administrative review and approval	8/30/16
							Publish revised Provider Manual	1/1/17
	ADSS Medicaid Waivers Case Management Guide, August 2014; Assessment Forms, Home Visit Tool (Form MW-1)			X	Guide indicates services are not to be provided in a nursing home setting, but does not fully address this element as it relates to case management assessment, monitoring and documentation that services may not be provided in other settings that are presumed to be institutional.	Revise guide to address this element as it relates to case manager roles to assess and monitor the setting in which services are delivered for compliance with this element and to document the findings.	Revise manual and related forms	12/31/16
							Provide training to case management staff	2/28/17
	Long Term Care Waiver Quality Assurance Manual			X	The mission statement of the Long Term Care Waiver Quality Assurance Manual is to assure participants receive quality care	Amend the Long Term Care Waiver Quality Assurance Manual to fully define "home and	Draft revisions to Waiver Quality Assurance Manual	6/30/16
							Administrative review	8/30/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA HIV WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					in the home and community setting, but does not fully define “home and community-based setting” in keeping with this requirement of Final Rule or include specific quality assurance activities to assure compliance.	community-based setting” and include quality assurance strategies, including but not limited to revision of Medicaid Waiver Survey for participants, to ensure compliance with this requirement.	and approval Publish and implement revised Waiver Quality Assurance Manual	10/1/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ELDERLY & DISABLED WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
1. 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.	E&D Waiver AL.0068.R06.00			X	The E&D Waiver provides for some assistance with full access of individuals receiving Medicaid HCBS to the greater community, particularly as it relates to assistance with transition from institutional settings and case management activities to ensure access to both waiver and non-waiver services in the community. It does not fully address 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.	Waiver will be amended, consistent with the Statewide Transition Plan, to address 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.	Submission of Settings Assessment for Statewide Transition Plan	3/31/16
							Approval of Statewide Transition Plan Settings Assessment	6/30/16
							Make necessary changes to reflect approved Statewide Transition Plan for Waiver for renewal submission	8/1/17
	AMA January 2016 Provider Manual, Chapter 107.2.4, Explanation of Covered Services			X	The Provider Manual includes some references that support this requirement of the Rule, such as the definition of Personal Care/Attendant Services (107.2.4, Explanation of Covered	Revise Chapter 107 of the Provider Manual to reflect requirement as noted above.	Draft revisions to Provider Manual	6/30/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ELDERLY & DISABLED WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					<p>Services) which states PC/AS is designed to "...support individuals with physical disabilities...seeking or maintaining competitive employment either in the home or in an integrated or work setting. The overall purpose of Waiver Services (including the E&amp;D Waiver) indicates they are designed to serve individuals who would otherwise require institutionalization, but the definition of purpose is limited to protecting health, safety and dignity of participants while reducing Medicaid expenditures. It does not address the other components of this requirement, including supporting 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>		Administrative review and approval	8/30/16
							Publish revised Provider Manual	1/1/17

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ELDERLY & DISABLED WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	AMA Admin. Code, Chapter 36, Rule No. 560-X-36-.01, Authority and Purpose			X	Home and community-based services are provided to individuals who would otherwise require institutionalization in a nursing facility. Stated purpose of HCBS includes to protect health, safety and dignity of individuals at risk for institutional care, but does not address full scope of requirement regarding integration, full access to community, 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	Revise rule to reflect all requirements as noted above.	Draft revisions to rule	9/30/16
							Publish rule for public comment	12/1/16
							Publish final rule	2/1/17
	AMA Admin. Code, Chapter 36, Rule No. 560-X-36-.04. Covered Services			X	Covered services include some references to promoting client independence, but otherwise do not fully address the integration of settings and full access to opportunities in the greater community as indicated in this element of the Final Rule.	Revise rule to reflect all requirements	Draft revisions to rule	9/30/16
							Publish rule for public comment	12/1/16
							Publish final rule	2/1/17

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ELDERLY & DISABLED WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
Long Term Care Waiver Quality Assurance Manual				X	The mission statement of the Long Term Care Waiver Quality Assurance Manual is to assure participants receive quality care in the home and community setting, but does not fully define "home and community-based setting" in keeping with this requirement of Final Rule or include specific quality assurance activities to assure compliance.	Amend the Long Term Care Waiver Quality Assurance Manual to fully define "home and community-based setting" and include quality assurance strategies, including but not limited to revision of Medicaid Waiver Survey for participants, to ensure compliance with this requirement.	Draft revisions to Waiver Quality Assurance Manual	6/30/16
							Administrative review and approval	8/30/16
							Publish and implement revised Waiver Quality Assurance Manual	10/1/16
Medicaid Waiver Survey for Participants				X	Survey questions do not address/probe compliance with this element	Revise Survey to include questions/probes that address compliance with this element.	Draft revisions to Survey	6/30/16
							OA and Administrative review and approval	8/30/16
							Implement revised Survey	10/1/16
AMA E&D Waiver Policy Manual, 2010				X	States waiver provides home and community-based services to assist elderly and disabled individuals to live in the community who would otherwise require nursing facility care, but does not fully address each of the elements of this requirement.	Amend manual to fully reflect element.	Revise AMA E&D Waiver Policy Manual	6/30/16
							Administrative review and approval	8/30/16
							Publish and implement revised E&D Waiver Policy Manual	10/1/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ELDERLY & DISABLED WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	ADSS Medicaid Waivers Case Management Guide, August 2014; Assessment Forms, Home Visit Tool (Form MW-1)			X	Allows client the opportunity to choose services in an institution or the community and to have information to make decisions about his/her plan of care. Also specifically states that individuals receiving waiver services can be employed. Does not, however, fully address this element as it relates to case management responsibilities for assessment, monitoring and documentation to ensure compliance.	Revise manual to address this element as it relates to case manager roles to assess and monitor the setting in which services are delivered for compliance with this element and to document the findings	Revise manual Waivers Case Management Guide and related tools	12/31/16
				Provide training to case management staff			2/28/17	
2. 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.	E&D Waiver AL.0068.R06.00	X			The individual is served in a private home of their choice for all services with the exception of Adult Day Health (refer to separate crosswalk for ADH setting).	None required	NA	NA
	AMA E&D Waiver Policy Manual 2010	X			The client is given information necessary to make informed choices regarding the location of care and given choice of either institutional or the home and community based services.	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ELDERLY & DISABLED WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	ADSS Medicaid Waivers Case Management Guide, August 2014; Assessment Forms, Home Visit Tool (Form MW-1)	X			A Rights and Responsibilities form outlines participants' ability to choose. HCBS-1 Form also documents participant's choice between community services and institutional care.	None required	NA	NA
3. Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.	E&D Waiver: AL.0068.R06.00: Appendix G-2	X			The State does not permit or prohibits the use of restrictive interventions, restraints and seclusion for this waiver. The Alabama Department of Senior Services is responsible for detecting the unauthorized use of restrictive interventions through monthly face to face visits as well as supervisory visits every 60 days. The Alabama Medicaid Agency: Annual review of ADSS investigations. Certain incidents of abuse, neglect and exploitation must also be reported to the Alabama Department of Resources by law.	None required	NA	NA
	AMA Administrative Code Ch. 36, Rule No. 560-X-36-.10, Confidentiality.	X			Providers are not to use or disclose, except to duly authorized representatives of federal or state agencies, any information regarding an eligible	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ELDERLY & DISABLED WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					recipient except upon written consent of the recipient, their attorney and/or guardian, or upon subpoena from a court of appropriate jurisdiction.			
	AMA E&D Waiver Policy Manual, 2010			X	Does not address rights of privacy, dignity and respect.	Amend manual to fully reflect this element.	Revise AMA E&D Waiver Policy Manual	6/30/16
							Administrative review and approval	8/30/16
							Publish and implement revised E&D Waiver Policy Manual	10/1/16
	AMA E&D Waiver Policy Manual 2010, , Chapter 8.A.2.c	X			Requires safeguarding of applicant and recipient information in accordance with provisions of Code of Federal Regulations governing confidentiality.	None required	NA	NA
	Medicaid Waiver Survey for Participants			X	Includes questions/probes regarding being treated with dignity and respect, but may need revisions to probe freedom from coercion and restraint.	Consider revisions to probe for freedom from coercion and restraint.	Draft proposed revisions to Survey	6/30/16
							OA and Administrative review and approval	8/30/16
							Implement revised Survey	10/1/16
	ADSS Medicaid Waivers Case Management Guide, August 2014;			X	Confidentiality is addressed as noted above. Case Management Guide also references the	Revise manual to address privacy, dignity and respect as well as	Revise Waivers Case Management Guide and related tools	12/31/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ELDERLY & DISABLED WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	Assessment Forms, Home Visit Tool (Form MW-1)				individual's right to respect and dignity and states the goal includes maintaining the greatest amount of independence and human dignity. Does not fully address this element as it relates to case manager responsibility for assessment, monitoring and documentation to ensure compliance with safeguards against restraint, restrictive interventions and seclusion and to ensure an individual's rights of privacy, dignity and respect.	freedom from coercion and restraint as it relates to case manager roles to assess and monitor the setting in which services are delivered for compliance with this element and to document the findings.	Provide training to case management staff	2/28/17
4. 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.	AMA E&D Policy Manual, 2010			X	Does not address this element.	Revise Manual to include all components of requirement.	Revise AMA E&D Waiver Policy Manual	6/30/16
							Administrative review and approval	8/30/16
							Publish and implement revised E&D Waiver Policy Manual	10/1/16
	AMA Admin. Code, Chapter 36, Rule No. 560-X-36-.04. Covered Services			X	Adult Day Health and Companion services provide some language related to this requirement, such as education and training for	Revise rule to reflect all requirements.	Draft revisions to rule	9/30/16
						Publish rule for public comment	12/1/16	

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ELDERLY & DISABLED WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					health and self-care and promoting client independence, but this section of the Code does not fully address the optimization of individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact.		Publish final rule	2/1/17
	ADSS Medicaid Waivers Case Management Guide, August 2014; Assessment Forms, Home Visit Tool (Form MW-1)			X	Does not fully address this element as it relates to case manager responsibility for assessment, monitoring and documentation to ensure compliance	Revise manual to address this element as it relates to case manager roles to assess and monitor the setting in which services are delivered for compliance with this element and to document the findings.	Revise Waivers Case Management Guide and related forms Provide training to case management staff	12/31/16 2/28/17
5. Facilitates individual choice regarding services and supports, and who provides them.	E&D Waiver: AL.0068.R06.00Appendix B-7 Freedom of Choice	X			Appendix B-7 states clients are provided with adequate information to make an informed decision as to where care will be received. Service coordination addresses problems and feasible solutions and includes an exploration of all the resources utilized by the client, both formal and informal,	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ELDERLY & DISABLED WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					as well as those waiver services which may be available to meet the client's needs and those needs which cannot be met. Case Managers inform applicants of all direct service providers and allow freedom of choice of providers; and the choice of either institutional or home and community based services.			
	AMA Administrative Code Ch. 36, Rule No. 560-X-36-.01. Authority and Purpose	X			Each individual is given freedom of choice of all qualified providers based on the written plan of care.	None required	NA	NA
	AMA E&D Waiver Policy Manual, 2010, Chapter 4.B	X			Intake and screening process must include documentation applicant has been provided with freedom of choice of all providers and has received information to make informed choice.	None required	NA	NA
	AMA January 2016 Provider Manual, Chapter 107.2.6			X	Describes Medicaid responsibilities to ensure beneficiaries are advised of feasible service alternatives and receive a choice of institutional	Revise Provider Manual to add clarifying language will be advised of available services	Draft revisions to Provider Manual	6/30/16
							Administrative review and approval	8/30/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ELDERLY & DISABLED WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					and HCB services. Further states that when residents of long term care facilities become eligible for HCBS, will be advised of available services and given choice of providers. Does not clarify that all individuals receiving HCBS will be so advised and given choice of providers.	and given choice of providers.	Publish revised Provide Manual	1/1/17
	Medicaid Waiver Survey for Participants	X			Includes questions/probes regarding choice of providers.	None required	NA	NA
6. In a provider-owned or controlled residential setting, in addition to the qualities specified above, the following additional conditions must be met:	NA. No services provided in provider owned or controlled residential settings.							
7. HCBS settings exclude locations that have the qualities of an institutional setting. For 1915(c) home and community-based waivers, settings that are not home and community-based are defined at §441.301(c)(5) as follows: a. A nursing facility; b. An institution for mental diseases; c. An intermediate care facility for individuals with intellectual disabilities;	E&D Waiver: AL.0068.R06.00			X	Does not fully address this requirement as it relates to settings that have the qualities of an institution or are presumed to have qualities of an institution. Does not address process for identifying settings that may be subject to heightened scrutiny or process for implementing heightened scrutiny.	Amend waiver after the Statewide Transition Plan has been approved to reflect requirements regarding settings that are presumed institutional	(1) Submission of Settings Assessment for Statewide Transition Plan	3/31/16
							Approval of Statewide Transition Plan Settings Assessment	6/30/16
							Make necessary changes to reflect approved Statewide Transition Plan for Waiver for renewal submission	8/1/17

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ELDERLY & DISABLED WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
<p>d. A hospital; or e. Any other locations that have qualities of an institutional setting, as determined by the Secretary. For 1915(c) home and community-based waivers, section 441.301(c)(5)(v) specifies that the following settings are presumed to have the qualities of an institution:</p> <p>a. Any setting that is located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment, b. Any setting that is located in a building on the grounds of, or immediately adjacent to, a public institution, or c. Any other setting that has the effect of isolating individuals receiving Medicaid HCBS from the broader community of individuals not receiving Medicaid HCBS.</p>	AMA Administrative Code, Chapter 36, Rule No. 560-X-36-.02. (3)			X	<p>States that no services may not be provided in a hospital or nursing facility.</p> <p>Rule does not address exclusion of other institutional or presumed-institutional setting or process for identification and scrutiny of such settings.</p>	Revise rule to explicitly define all excluded settings as defined in Final Settings Rule.	Draft revisions to rule	9/30/16
							Publish rule for public comment	12/1/16
							Publish final rule	2/1/17
	AMA E&D Waiver Policy Manual, 2010, Chapter 3.A.10			X	<p>Specifies exclusions for nursing facilities, hospital and ICF/ID.</p> <p>Does not address specific exclusion of other presumed institutional settings or process for identification and scrutiny of such settings.</p>	Revise manual to explicitly define all excluded settings as defined in Final Settings Rule	Draft revision to EDW Waiver Policy Manual	6/30/16
							Obtain administrative approval	8/30/16
							Publish amended EDW Waiver Policy Manual	10/1/16
	AMA January 2016 Provider Manual, Chapter 107.2.3, Limitations			X	<p>States that Medicaid does not provide waiver services to recipients in a hospital or nursing facility.</p> <p>Does not address exclusion of other institutional or presumed-institutional setting. Does not address process for identifying settings that may be subject to heightened scrutiny or process for implementing heightened scrutiny</p>	Revise Provider Manual to explicitly define all excluded settings as defined in Final Settings Rule.	Draft revisions to Provider Manual	6/30/16
							Administrative review and approval	8/30/16
							Publish revised Provider Manual	1/1/17

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ELDERLY & DISABLED WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	ADSS Medicaid Waivers Case Management Guide, August 2014; Assessment Forms, Home Visit Tool (Form MW-1)			X	Guide indicates services are not to be provided in a nursing home setting, but does not fully address this element as it relates to case management assessment, monitoring and documentation that services may not be provided in other settings that are presumed to be institutional.	Revise guide to address this element as it relates to case manager roles to assess and monitor the setting in which services are delivered for compliance with this element and to document the findings.	Revise manual and related forms	12/31/16
				Provide training to case management staff			2/28/17	
	Long Term Care Waiver Quality Assurance Manual			X	The mission statement of the Long Term Care Waiver Quality Assurance Manual is to assure participants receive quality care in the home and community setting, but does not fully define "home and community-based setting" in keeping with this requirement of Final Rule or include specific quality assurance activities to assure compliance.	Amend the Long Term Care Waiver Quality Assurance Manual to fully define "home and community-based setting" and include quality assurance strategies, including but not limited to revision of Medicaid Waiver Survey for participants, to ensure compliance with this requirement.	Draft revisions to Waiver Quality Assurance Manual	6/30/16
				Administrative review and approval			8/30/16	
				Publish and implement revised Waiver Quality Assurance Manual			10/1/16	

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ADULT DAY HEALTH (ELDERLY & DISABLED WAIVER)**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
1. 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.	Alabama Medicaid Adult Day Health Standards			X	This element of the HCBS Final Rule requirement was not addressed in the Alabama Adult Day Health Standards.	This element of the HCBS Final Rule requirement will be incorporated into the Alabama Medicaid Adult Day Health Standards.	Finalize revisions to Adult Day Health Standards	6/30/16
							Provide training Adult Day Health providers	8/30/16
							Implement revised Adult Day Health Standards	10/1/16
	ADH Scope of Service for ADH service for HCBS Waivers			X	This element of the HCBS Final Rule requirement was not addressed in the ADH Scope of Service for ADH service for HCBS Waivers	The Scope of Service for ADH service will be revised to include this element of the HCBS Final Rule requirement.	Finalize revisions to Adult Day Health Scope of Services	8/30/16
							10/1/16	10/1/16
	Alabama Administrative code Chapter. 44, Rule No. 560-X-44-.04(10)			X	This element of the HCBS Final Rule requirement was not addressed in the Alabama Medicaid Agency Administrative code Chapter. 44, Rule No. 560-X-44-.04.(10)	This element of the HCBS Final Rule will be incorporated into the Alabama Medicaid Agency's Administrative Code Chapter. 44, Rule No. 560-X-44-.04.(10)	Draft revisions to rule	9/30/16
							Publish rule for public comment	12/1/16
							Publish final rule	2/1/17
	Alabama Medicaid Agency Administrative code				This element of the HCBS Final Rule requirement was not addressed in the Alabama Medicaid Agency Administrative	This element of the HCBS Final Rule will be incorporated into the Alabama	Draft revisions to rule	9/30/16
							Publish rule for public comment	12/1/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ADULT DAY HEALTH (ELDERLY & DISABLED WAIVER)**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
	Chapter 36, Rule No. 560-X-36-.04(4)				code Chapter 36, Rule No. 560-X-36-04(4)	Medicaid Agency's Administrative Code Chapter 36, Rule No. 560-X-36-04(4)	Publish final rule	2/1/17
	Alabama Medicaid Adult Day Health Review Tool			X	This element of the HCBS Final Rule requirement was not addressed on the Alabama Medicaid Adult Day Health Review Tool	The Alabama Medicaid Adult Day Health Review Tool will be revised to include this element of the HCBS Final Rule requirement.	Finalize revisions to Adult Day Health Review Tool	6/30/16
							Provide training Adult Day Health providers	8/30/16
							Implement revised Adult Day Health Tool	10/1/16
2. 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.	Alabama Medicaid Adult Day Health Standards			X	Does not provide language regarding this element of the HCBS Final Rule.	This element of the HCBS Final Rule requirement will be incorporated into the Alabama Medicaid Adult Day Health Standards. The person centered service plan will reflect a. the settings options made available to the individual and b. the setting options were based on the	Finalize revisions to Adult Day Health Standards	6/30/16
							Provide training Adult Day Health providers	8/30/16
							Implement revised Adult Day Health Standards	10/1/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ADULT DAY HEALTH (ELDERLY & DISABLED WAIVER)**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
						individual's needs and preferences.		
	Alabama Medicaid Agency Administrative code Chapter. 44, Rule No. 560-X-44-.04.(10)			X	This element of the HCBS Final Rule requirement was not addressed in the Alabama Medicaid Agency Administrative code Chapter. 44, Rule No. 560-X-44-.04.(10)	This element of the HCBS Final Rule will be incorporated into the Alabama Medicaid Agency's Administrative Code Chapter. 44, Rule No. 560-X-44-.04.(10)	Draft revisions to rule Publish rule for public comment Publish final rule	9/30/16 12/1/16 2/1/17
	Scope of Service for Adult Day Health Service			X	Does not provide language regarding this element of the HCBS Final Rule	This element of the HCBS Final Rule requirement will be incorporated into the Scope of Service for Adult Day Health Service	Finalize revisions to Adult Day Health Scope of Services Publish revised scope of services	8/30/16 10/1/16
	Alabama Medicaid Adult Day Health Review Tool			X	Does not provide language regarding this element of the HCBS Final Rule	The Alabama Medicaid Adult Day Health Review Tool will be revised to include this element of the HCBS Final Rule requirement.	Finalize revisions to Adult Day Health Review Tool Provide training Adult Day Health providers Implement revised Adult Day Health Tool	6/30/16 8/30/16 10/1/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ADULT DAY HEALTH (ELDERLY & DISABLED WAIVER)**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline	
		Compliance	Non-Compliance	Silent					
3. Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.	Alabama Medicaid Agency's Adult Day Health Standards			X	Does not provide language regarding this element of the HCBS Final Rule	This element of the HCBS Final Rule requirement will be incorporated into the Alabama Medicaid Adult Day Health Standards.	Finalize revisions to Adult Day Health Standards	6/30/16	
							Provide training Adult Day Health providers	8/30/16	
							Implement revised Adult Day Health Standards	10/1/16	
	Scope of Service for ADH service				X	Does not provide language regarding this element of the HCBS Final Rule	This element of the HCBS Final Rule requirement will be incorporated into the Scope of Service for Adult Day Health Service	Finalize revisions to Adult Day Health Scope of Services	8/30/16
								Publish revised scope of services	10/1/16
	Alabama Medicaid Agency Administrative code Chapter. 44, Rule No. 560-X-44-.04(10)				X	Does not provide language regarding this element of the HCBS Final Rule	This element of the HCBS Final Rule will be incorporated into the Alabama Medicaid Agency's Administrative Code Chapter. 44, Rule No. 560-X-44-.04.(10)	Draft revisions to rule	9/30/16
								Publish rule for public comment	12/1/16
								Publish final rule	2/1/17
	Alabama Medicaid Adult Day Health Review Tool				X	Does not provide language regarding this element of the HCBS Final Rule	The Alabama Medicaid Adult Day Health Review Tool will be revised to	Finalize revisions to Adult Day Health Review Tool	6/30/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ADULT DAY HEALTH (ELDERLY & DISABLED WAIVER)**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
						include this element of the HCBS Final Rule requirement.	Provide training Adult Day Health providers	8/30/16
							Implement revised Adult Day Health Tool	10/1/16
4. 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.	Alabama Medicaid Adult Day Health Standards.	X			Definition: The ADH service provides waiver recipients with a variety of health, social, recreational, and support activities. The objective of ADH is to provide an organized program of rehabilitative, therapeutic and supportive health and social services in the community to individuals otherwise not capable of living independently in the community.	None required	NA	NA
	Scope of Service for Adult Day Health Services	X			ADH services is provided within a maintenance model of care, which provides services that include health and social activities such as planned therapeutic activities on a daily basis to stimulate the client's mental and physical activity, communication and self-expression. These activities include reality orientation exercises, crafts, music,	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ADULT DAY HEALTH (ELDERLY & DISABLED WAIVER)**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
					educational and cultural programs.			
	Alabama Medicaid Agency Administrative code Chapter. 44, Rule No. 560-X-44-.04(10)				(4) Adult Day Health Services. (a) Adult Day Health Service provides social and health care in a community facility approved to provide such care. Health education, self-care training, therapeutic activities, and health screening shall be included in the program.	None required	NA	NA
	Alabama Medicaid Adult Day Health Review Tool				The review tool contains the following evaluation elements: Weekly activity plans posted; Both indoor and outdoor activities offered; individual and group activities offered; Areas are available for different activities; Therapeutic activities that stimulate mental communication and self-expression offered	None required	NA	NA
5. Facilitates individual choice regarding services and supports, and who provides them.	Alabama Medicaid Adult Day Health Standards. C. 8				C. Services Provided in ADH Centers to ensure optimal functioning of the client. 8. Assists in the development of self-care, personal hygiene and social support services.	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ADULT DAY HEALTH (ELDERLY & DISABLED WAIVER)**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
	Scope of Service for Adult Day Health Service Section E1; 2c: Procedure of Service				1.The case manager will submit a Service Authorization Form and Plan of Care to the Adult Day Health center authorizing Adult Day Health Service designating the units, frequency, beginning date and types of activities in accordance with the client's needs. 2c On the first day of service the provider will review the plan of care, provide the client written information regarding rights and responsibilities and how to register complaints and discuss the provisions and supervision of services.	None required	NA	NA
	Alabama Medicaid Agency Administrative code Chapter. 44, Rule No. 560-X-44-.04(10)				This element of the HCBS Final Rule requirement was not addressed in the Alabama Medicaid Agency Administrative code Chapter. 44, Rule No. 560-X-44-.04.(10)	This element of the HCBS Final Rule will be incorporated into the Alabama Medicaid Agency's Administrative Code Chapter. 44, Rule No. 560-X-44-.04(10)	Draft revisions to rule	9/30/16
							Publish rule for public comment	12/1/16
							Publish final rule	2/1/17
	Alabama Medicaid Adult Day Health Review Tool				This element of the HCBS Final Rule requirement was not addressed in the Alabama	This element of the HCBS Final Rule requirement will be incorporated into	Finalize revisions to Adult Day Health Review Tool	6/30/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ADULT DAY HEALTH (ELDERLY & DISABLED WAIVER)**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
					Medicaid Adult Day Health Review Tool	the Alabama Medicaid Adult Day Health Review Tool.	Provide training Adult Day Health providers	8/30/16
							Implement revised Adult Day Health Tool	10/1/16
6. In a provider-owned or controlled residential setting, in addition to the qualities specified above, the following additional conditions must be met:	NA. This is not a residential service							
7. HCBS settings exclude locations that have the qualities of an institutional setting. For 1915(c) home and community-based waivers, settings that are not home and community-based are defined at §441.301(c)(5) as follows: a. A nursing facility; b. An institution for mental diseases; c. An intermediate care facility for individuals with intellectual disabilities; d. A hospital; or e. Any other locations that have qualities of an institutional	Alabama Adult Day Health Standards				Does not provide language regarding the exclusion of settings that have qualities of an institution.	This element of the HCBS Final Rule requirement will be incorporated into the Alabama Medicaid Adult Day Health Standards.	Finalize revisions to Adult Day Health Standards	6/30/16
							Provide training Adult Day Health providers	8/30/16
							Implement revised Adult Day Health Standards	10/1/16
	Scope of Service for Adult Day Health Service				Does not provide language regarding the exclusion of settings that have qualities of an institution.	This element of the HCBS Final Rule requirement will be incorporated into the Scope of Service for Adult Day Health Service for all applicable waivers.	Finalize revisions to Adult Day Health Scope of Services	8/30/16
							Publish revised scope of services	10/1/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ADULT DAY HEALTH (ELDERLY & DISABLED WAIVER)**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline	
		Compliance	Non-Compliance	Silent					
<p>setting, as determined by the Secretary. For 1915(c) home and community-based waivers, section 441.301(c)(5)(v) specifies that the following settings are presumed to have the qualities of an institution:</p> <p>a. Any setting that is located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment,</p> <p>b. Any setting that is located in a building on the grounds of, or immediately adjacent to, a public institution, or</p> <p>c. Any other setting that has the effect of isolating individuals receiving Medicaid HCBS from the broader community of individuals not receiving Medicaid HCBS.</p>	Alabama Medicaid Agency Administrative Code, Chapter. 44, Rule No. 560-X-44-.04(10)				Code states: "Adult Day Health Services are provided in a community facility." However, does not provide language regarding the exclusion of settings that have qualities of an institution.	This element of the HCBS Final Rule requirement will be integrated to include language regarding the exclusion of settings that have qualities of an institution.	Draft revisions to rule	9/30/16	
							Publish rule for public comment	12/1/16	
							Publish final rule	2/1/17	
		Alabama Medicaid Adult Day Health Review Tool				Does not provide language regarding this element of the HCBS Final Rule	The Alabama Medicaid Adult Day Health Review Tool will be revised to include this element of the HCBS Final Rule requirement.	Finalize revisions to Adult Day Health Review Tool	6/30/16
								Provide training Adult Day Health providers	8/30/16
								Implement revised Adult Day Health Tool	10/1/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ALABAMA COMMUNITY TRANSITION WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
1. 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.	ACT Waiver: AL0878R0002-Appendix D, D-1, Appendix C			X	The Transition Coordinator provides Options Counseling during the transition process, discussing each of the HCBS waivers and assists recipients with making educated decision about which waiver they prefer. When completing the Return to Community Assessment, the Transition Coordinator inquires as to whether the recipient would like to return to employment. Vocational Rehab is offered. Personal Assistant Service is available to ACT participants to assist individuals with physical disabilities in competitive employment in their home or integrated work setting. Does not fully reflect requirements that settings are integrated in and support full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to engage in community life, and control personal resources to the same degree of access as individuals not receiving Medicaid HCBS.	Amend waiver after the Statewide Transition Plan has been approved to reflect requirements that settings are integrated in and support 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.	Submission of Settings Assessment for Statewide Transition Plan	3/31/16
							Approval of Statewide Transition Plan Settings Assessment	6/30/16
							Waiver amendment submission to reflect approved Statewide Transition Plan	No later than 12/17/18
	AMA January 2016			X	The Provider Manual includes	Revise Chapter 107	Draft revisions to	6/30/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ALABAMA COMMUNITY TRANSITION WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	Provider Manual, Chapter 107.2.4, Explanation of Covered Services				some references that support this requirement of the Rule, such as the definition of Personal Care/Attendant Services (107.2.4, Explanation of Covered Services) which states PC/AS is designed to "...support individuals with physical disabilities...seeking or maintaining competitive employment either in the home or in an integrated or work setting. The overall purpose of Waiver Services (including the ACT Waiver) indicates they are designed to serve individuals who would otherwise require institutionalization, but the definition of purpose is limited to protecting health, safety and dignity of participants while reducing Medicaid expenditures. It does not address the other component of this requirement to have to the same degree of access as individuals not receiving Medicaid HCBS to the same degree of access as individuals not receiving Medicaid HCBS.	of the Provider Manual to reflect requirement as noted above.	Provider Manual Administrative review and approval Publish revised Provider Manual	8/30/16 1/1/17
	AMA Admin. Code, Ch. 44, Rule No. 560-X-44-.01.			X	Enables individuals, who currently reside in a nursing facility the ability to transition out and	Revise rule to reflect all requirements as noted above.	Draft revisions to rule Publish rule for public comment	9/30/16 12/1/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ALABAMA COMMUNITY TRANSITION WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					receive services in the community. Stated purpose of HCBS includes to protect health, safety and dignity of individuals at risk for institutional care, but does not address full scope of requirement regarding integration and full access to community to the same degree of access as individuals not receiving Medicaid HCBS.		Publish final rule	2/1/17
	AMA Admin. Code, Chapter 44, Rule No. 560-X-44-.04. Covered Services	X			Covered services promote client independence, community access and integrated employment	None required	NA	NA
	Long Term Care Waiver Quality Assurance Manual			X	The mission statement of the Long Term Care Waiver Quality Assurance Manual is to assure participants receive quality care in the home and community setting, but does not fully define "home and community-based setting" in keeping with this requirement of Final Rule or include specific quality assurance activities to assure compliance.	Amend the Long Term Care Waiver Quality Assurance Manual to fully define "home and community-based setting" and include quality assurance strategies, including but not limited to revision of Medicaid Waiver Survey for participants, to ensure compliance with this requirement.	Draft revisions to Waiver Quality Assurance Manual	6/30/16
							Administrative review and approval	8/30/16
							Publish and implement revised Waiver Quality Assurance Manual	10/1/16
	Medicaid Waiver Survey for Participants			X	Survey questions do not address/probe compliance with this element	Revise Survey to include questions/probes that address compliance	Draft revisions to Survey	6/30/16
							OA and Administrative	8/30/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ALABAMA COMMUNITY TRANSITION WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
						with this element.	review and approval	
							Implement revised Survey	10/1/16
	ACT Scopes of Services, September 2015			X	Includes services designed to promote access to community living through supports for transition from an institution, including transitional assistance and community case management, as well as services to support integrated employment and increased independence. It does not address the other component of this requirement, to have the same degree of access as individuals not receiving Medicaid HCBS as individuals not receiving Medicaid HCBS.	Amend ACT Scopes of Services to fully reflect element.	Revise ACT Scopes of Services	6/30/16
							Administrative review and approval	8/30/16
							Publish and implement revised ACT Scopes of Services	10/1/16
	ADSS Medicaid Waivers Case Management Guide, August 2014; Assessment Forms, Home Visit Tool (Form MW-1)			X	Allows client the opportunity to choose services in an institution or the community and to have information to make decisions about his/her plan of care. Also specifically states that individuals receiving waiver services can be employed. Does not, however, fully address this element as it relates to case management responsibilities for assessment, monitoring and documentation to	Revise manual to address this element as it relates to case manager roles to assess and monitor the setting in which services are delivered for compliance with this element and to document the findings	Revise Waivers Case Management Guide and related forms	12/31/16
							Provide training to case management staff	02/28/17

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ALABAMA COMMUNITY TRANSITION WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					ensure compliance.			
2. 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.	ACT Waiver: AL0878R0002	X			The individual is served in a private home of their choice for all services with the exception of Adult Day Health (refer to separate crosswalk for ADH setting).	None required	NA	NA
	ACT Scopes of Services, September 2015	X			The client is given information necessary to make informed choices regarding the location of care and given choice of either institutional or the home and community based services. The client's choice of location to receive long term care and Medicaid eligibility will be verified.	None required	NA	NA
	ADSS Medicaid Waivers Case Management Guide, August 2014; Assessment Forms, Home Visit Tool (Form MW-1)	X			A Rights and Responsibilities form outlines participants' ability to choose. HCBS-1 Form also documents participant's choice between community services and institutional care	None required	NA	NA
3. Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.	ACT Waiver: AL0878R0002 Appendix G-2	X			The State does not permit or prohibits the use of restrictive interventions, restraints and seclusion for this waiver. The Alabama Department of Senior Services is responsible for detecting the unauthorized use of	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ALABAMA COMMUNITY TRANSITION WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					restrictive interventions through monthly face to face visits as well as supervisory visits every 60 days. The Alabama Medicaid Agency completes annual reviews of ADSS investigations. Certain incidents of abuse, neglect and exploitation must also be reported to the Alabama Department of Human Resources by law.			
	AMA Administrative Code Chapter 44, Rule No. 560-X-44.09, Confidentiality.	X			Providers are not to use or disclose, except to duly authorized representatives of federal or state agencies, any information regarding an eligible recipient except upon written consent of the recipient, their attorney and/or guardian, or upon subpoena from a court of appropriate jurisdiction.	None required	NA	NA
	ACT Scopes of Services, September 2015	X			Requires the Operating Agency to comply with federal and state confidentiality laws and regulations in regard to client files	None required	NA	NA
	Medicaid Waiver Survey for Participants			X	Includes questions/probes regarding being treated with dignity and respect, but may need revisions to probe freedom from coercion and restraint.	Consider revisions to probe for freedom from coercion and restraint.	Draft proposed revisions to Survey	6/30/16
							OA and Administrative review and approval	8/30/16
							Implement revised Survey	10/1/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ALABAMA COMMUNITY TRANSITION WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	ADSS Medicaid Waivers Case Management Guide, August 2014; Assessment Forms, Home Visit Tool (Form MW-1)			X	Confidentiality is addressed. Case Management Guide also references the individual's right to respect and dignity and states the goal includes maintaining the greatest amount of independence and human dignity. Does not fully address this element as it relates to case manager responsibility for assessment, monitoring and documentation to ensure compliance with safeguards against restraint, restrictive interventions and seclusion and to ensure an individual's rights of privacy, dignity and respect.	Revise manual to address privacy, dignity and respect as well as freedom from coercion and restraint as it relates to case manager roles to assess and monitor the setting in which services are delivered for compliance with this element and to document the findings.	Revise Waivers Case Management Guide and related tools Provide training to case management staff	12/31/16 2/28/17
4. 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.	ACT Waiver: AL0878R0001- Appendix C, Appendix D-1	X			In the choices provided in the return to community services, the Case Manager provides the participant with a choice of vendors for all services. Care plans are developed based on needs assessment, medical information from participant's physician, and input from participant and family members, or legal representative. The participant is then given choice of qualified and willing providers from which to choose. Care Plans are individualized for each participant and seek to	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ALABAMA COMMUNITY TRANSITION WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					balance the participant's rights, values, and preferences.			
	AMA Admin. Code, Chapter 44, Rule No. 560-X-44-.04. Covered Services			X	Services descriptions provide some language related to this requirement, such as education and training for health and self-care and promoting/increasing client independence, but this section of the Code does not fully address the optimization of individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact.	Revise rule to reflect all requirements.	Draft revisions to rule Publish rule for public comment Publish final rule	9/30/16 12/1/16 2/1/17
	ACT Scopes of Services, September 2015			X	Services descriptions provide some language related to this requirement, such as education and training for health and self-care and promoting client independence, but does not fully address how services will address the optimization of individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact.	Revise ACT Scopes of Services to reflect all components of requirement.	Revise ACT Scopes of Services Administrative review and approval Publish and implement revised ACT Scopes of Services	6/30/16 8/30/16 10/1/16
	ADSS Medicaid			X	Does not fully address this	Revise manual to	Revise Waivers Case	12/31/2016

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ALABAMA COMMUNITY TRANSITION WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	Waivers Case Management Guide, August 2014; Assessment Forms, Home Visit Tool (Form MW-1)				element as it relates to case manager responsibility for assessment, monitoring and documentation to ensure compliance.	address this element as it relates to case manager roles to assess and monitor the setting in which services are delivered for compliance with this element and to document the findings.	Management Guide and related forms Provide training to case management staff	02/28/2017
5. Facilitates individual choice regarding services and supports, and who provides them.	ACT Waiver: AL0878R0002 Appendix B-7 Freedom of Choice	X			Appendix B-7 states as part of the assessment and service coordination visit, participants and/or responsible parties are provided with adequate information to make an informed decision as to where the participant's care will be received. Service coordination addresses problems and feasible solutions. It also includes an exploration of all the resources utilized by the participant, both formal and informal, as well as those waiver services which may be available to meet the participant's needs. Each waiver participant must make a written choice for either institution or community care, which will remain in effect until such time as the participant changes their	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ALABAMA COMMUNITY TRANSITION WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					choice. Appendix D-1 states the plan of care development process provides involved persons with the information necessary to make an informed choice regarding the location of care and services to be utilized. It also states the participant can change providers at any time by notifying the Case Manager. Each month the Case Manager discusses freedom of choice of service providers with the participant to ensure proper delivery of services, participant's choice, and participant satisfaction.			
	AMA Administrative Code Ch. 44, Rule No. 560-X-44-.01. Authority and Purpose			X	Does not address individual choice regarding services and supports, and who provides them	Revise rule to integrate requirements regarding individual choice regarding services and supports, and who provides them.	Draft revisions to rule Publish rule for public comment Publish final rule	9/30/16 12/1/16 2/1/17
	ACT Scopes of Services , September 2015	X			Facilitation of free choice provisions in the ACT Scopes of Services include offer of the alternative of home and community-based services or institutional services; the Plan of Care development process which provides involved persons with information necessary to make an	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ALABAMA COMMUNITY TRANSITION WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					informed choice regarding the location of care and services to be utilized; services may be initiated or changed at any time within an authorization period to accommodate a client's changing needs; Client freedom of choice options regarding Case Management Service shall be honored.			
	AMA January 2016 Provider Manual, Chapter 107.2.6			X	Describes Medicaid responsibilities to ensure beneficiaries are advised of feasible service alternatives and receive a choice of institutional and HCB services. Further states that when residents of long term care facilities become eligible for HCBS, will be advised of available services and given choice of providers. Does not clarify that all individuals receiving HCBS will be so advised and given choice of providers.	Revise Provider Manual to add clarifying language will be advised of available services and given choice of providers.	Draft revisions to Provider Manual Administrative review and approval Publish revised Provide Manual	6/30/16 8/30/16 1/1/17
	Medicaid Waiver Survey for Participants	X			Includes questions/probes regarding choice of providers.	None required	NA	NA
6. In a provider-owned or controlled residential setting, in addition to the qualities specified above, the following additional	NA. No services provided in provider owned or controlled residential settings.							

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ALABAMA COMMUNITY TRANSITION WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
conditions must be met:								
7. HCBS settings exclude locations that have the qualities of an institutional setting. For 1915(c) home and community-based waivers, settings that are not home and community-based are defined at §441.301(c)(5) as follows: a. A nursing facility; b. An institution for mental diseases; c. An intermediate care facility for individuals with intellectual disabilities; d. A hospital; or e. Any other locations that have qualities of an institutional setting, as determined by the Secretary. For 1915(c) home and community-based waivers, section 441.301(c)(5)(v) specifies that the following settings are presumed to have the qualities of an institution: a. Any setting that is located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment,	ACT Waiver: AL0878R0002			X	Waiver transition plan was included in the most recent amendment, but does not fully address this requirement as it relates to a description of the settings pertinent to the waiver and how they meet federal HCB Settings requirements, or a description of the means by which the state Medicaid agency ascertains that all waiver settings meet federal HCB Setting requirements on an ongoing basis. Includes state assures that the settings transition plan included with amendment will be subject to any provisions or requirements included in the State’s approved Statewide Transition Plan.	The State will implement any required changes upon approval of the Statewide Transition Plan and will make conforming changes to its waiver when it submits the next amendment or renewal.	Submission of Settings Assessment for Statewide Transition Plan	3/31/16
							Approval of Statewide Transition Plan Settings Assessment	6/30/16
							Waiver amendment submission to reflect approved Statewide Transition Plan	No later than 12/17/18
	AMA Administrative Code, Chapter 44			X	Does not address exclusion of settings that are not home and community-based.  Rule does not address exclusion of other institutional or presumed-institutional setting or process for identification and scrutiny of such settings.	Revise rule to explicitly define all excluded settings as defined in Final Settings Rule.	Draft revisions to rule	9/30/16
						Publish rule for public comment	12/1/16	
						Publish final rule	2/1/17	
	ACT Scopes of			X	Does not address exclusion in	Revise manual to	Draft revision to ACT	6/30/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ALABAMA COMMUNITY TRANSITION WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
<p>b. Any setting that is located in a building on the grounds of, or immediately adjacent to, a public institution, or</p> <p>c. Any other setting that has the effect of isolating individuals receiving Medicaid HCBS from the broader community of individuals not receiving Medicaid HCBS.</p>	Services , September 2015				selection of service location of institutional or other presumed institutional settings or process for identification and scrutiny of such settings.	explicitly define all excluded settings as defined in Final Settings Rule	Scopes of Services	
							Obtain administrative approval	8/30/16
							Publish and implement amended ACT Scopes of Services	10/1/16
	AMA January 2016 Provider Manual, Chapter 107.2.3, Limitations			X	States that Medicaid does not provide waiver services to recipients in a hospital or nursing facility.	Revise Provider Manual to explicitly define all excluded settings as defined in Final Settings Rule.	Draft revisions to Provider Manual	6/30/16
					Does not address exclusion of other institutional or presumed-institutional setting. Does not address process for identifying settings that may be subject to heightened scrutiny or process for implementing heightened scrutiny		Administrative review and approval	8/30/16
							Publish revised Provider Manual	1/1/17
	ADSS Medicaid Waivers Case Management Guide, August 2014; Assessment Forms, Home Visit Tool (Form MW-1)			X	Guide indicates services are not to be provided in a nursing home setting, but does not fully address this element as it relates to case management assessment, monitoring and documentation that services may not be provided in other settings that are presumed to be institutional.	Revise guide to address this element as it relates to case manager roles to assess and monitor the setting in which services are delivered for compliance with this element and to document the findings.	Revise manual and related forms	12/31/16
							Provide training to case management staff	2/28/17
	Long Term Care			X	The mission statement of the	Amend the Long Term	Draft revisions to	6/30/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ALABAMA COMMUNITY TRANSITION WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	Waiver Quality Assurance Manual				Long Term Care Waiver Quality Assurance Manual is to assure participants receive quality care in the home and community setting, but does not fully define "home and community-based setting" in keeping with this requirement of Final Rule or include specific quality assurance activities to assure compliance.	Care Waiver Quality Assurance Manual to fully define "home and community-based setting" and include quality assurance strategies, including but not limited to revision of Medicaid Waiver Survey for participants, to ensure compliance with this requirement.	Waiver Quality Assurance Manual Administrative review and approval Publish and implement revised Waiver Quality Assurance Manual	 8/30/16 10/1/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ADULT DAY HEALTH (ALABAMA COMMUNITY TRANSITION WAIVER)**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
1. 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.	Alabama Medicaid Adult Day Health Standards			X	This element of the HCBS Final Rule requirement was not addressed in the Alabama Adult Day Health Standards.	This element of the HCBS Final Rule requirement will be incorporated into the Alabama Medicaid Adult Day Health Standards.	Finalize revisions to Adult Day Health Standards	6/30/16
							Provide training Adult Day Health providers	8/30/16
							Implement revised Adult Day Health Standards	10/1/16
	ADH Scope of Service for ADH service for HCBS Waivers			X	This element of the HCBS Final Rule requirement was not addressed in the ADH Scope of Service for ADH service for HCBS Waivers	The Scope of Service for ADH service will be revised to include this element of the HCBS Final Rule requirement.	Finalize revisions to Adult Day Health Scope of Services	8/30/16
							10/1/16	10/1/16
	Alabama Administrative code Chapter. 44, Rule No. 560-X-44-.04.(10)			X	This element of the HCBS Final Rule requirement was not addressed in the Alabama Medicaid Agency Administrative code Chapter. 44, Rule No. 560-X-44-.04.(10)	This element of the HCBS Final Rule will be incorporated into the Alabama Medicaid Agency's Administrative Code Chapter. 44, Rule No. 560-X-44-.04.(10)	Draft revisions to rule	9/30/16
							Publish rule for public comment	12/1/16
							Publish final rule	2/1/17
	Alabama Medicaid Adult Day Health Review Tool			X	This element of the HCBS Final Rule requirement was not addressed on the Alabama	The Alabama Medicaid Adult Day Health Review Tool will be revised to	Finalize revisions to Adult Day Health Review Tool	6/30/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ADULT DAY HEALTH (ALABAMA COMMUNITY TRANSITION WAIVER)**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
					Medicaid Adult Day Health Review Tool	include this element of the HCBS Final Rule requirement.	Provide training Adult Day Health providers	8/30/16
							Implement revised Adult Day Health Tool	10/1/16
2. 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.	Alabama Medicaid Adult Day Health Standards			X	Does not provide language regarding this element of the HCBS Final Rule.	This element of the HCBS Final Rule requirement will be incorporated into the Alabama Medicaid Adult Day Health Standards. The person centered service plan will reflect a. the settings options made available to the individual and b. the setting options were based on the individual's needs and preferences.	Finalize revisions to Adult Day Health Standards	6/30/16
							Provide training Adult Day Health providers	8/30/16
							Implement revised Adult Day Health Standards	10/1/16
	Alabama Medicaid Agency Administrative code Chapter. 44, Rule No. 560-X-44-.04.(10)			X	This element of the HCBS Final Rule requirement was not addressed in the Alabama Medicaid Agency Administrative	This element of the HCBS Final Rule will be incorporated into the Alabama Medicaid Agency's	Draft revisions to rule	9/30/16
						Publish rule for public comment	12/1/16	

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ADULT DAY HEALTH (ALABAMA COMMUNITY TRANSITION WAIVER)**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
					code Chapter. 44, Rule No. 560-X-44-.04.(10)	Administrative Code Chapter. 44, Rule No. 560-X-44-.04.(10)	Publish final rule	2/1/17
	Scope of Service for Adult Day Health Service			X	Does not provide language regarding this element of the HCBS Final Rule	This element of the HCBS Final Rule requirement will be incorporated into the Scope of Service for Adult Day Health Service	Finalize revisions to Adult Day Health Scope of Services	8/30/16
	Alabama Medicaid Adult Day Health Review Tool			X	Does not provide language regarding this element of the HCBS Final Rule	The Alabama Medicaid Adult Day Health Review Tool will be revised to include this element of the HCBS Final Rule requirement.	Publish revised scope of services	10/1/16
							Finalize revisions to Adult Day Health Review Tool	6/30/16
							Provide training Adult Day Health providers	8/30/16
							Implement revised Adult Day Health Tool	10/1/16
3. Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.	Alabama Medicaid Agency's Adult Day Health Standards			X	Does not provide language regarding this element of the HCBS Final Rule	This element of the HCBS Final Rule requirement will be incorporated into the Alabama Medicaid Adult Day Health Standards.	Finalize revisions to Adult Day Health Standards	6/30/16
							Provide training Adult Day Health providers	8/30/16
							Implement revised Adult Day Health Standards	10/1/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ADULT DAY HEALTH (ALABAMA COMMUNITY TRANSITION WAIVER)**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
	Scope of Service for ADH service			X	Does not provide language regarding this element of the HCBS Final Rule	This element of the HCBS Final Rule requirement will be incorporated into the Scope of Service for Adult Day Health Service	Finalize revisions to Adult Day Health Scope of Services	8/30/16
							Publish revised scope of services	10/1/16
	Alabama Medicaid Agency Administrative code Chapter. 44, Rule No. 560-X-44-.04.(10)			X	Does not provide language regarding this element of the HCBS Final Rule	This element of the HCBS Final Rule will be incorporated into the Alabama Medicaid Agency's Administrative Code Chapter. 44, Rule No. 560-X-44-.04.(10)	Draft revisions to rule	9/30/16
							Publish rule for public comment	12/1/16
							Publish final rule	2/1/17
	Alabama Medicaid Adult Day Health Review Tool			X	Does not provide language regarding this element of the HCBS Final Rule	The Alabama Medicaid Adult Day Health Review Tool will be revised to include this element of the HCBS Final Rule requirement.	Finalize revisions to Adult Day Health Review Tool	6/30/16
							Provide training Adult Day Health providers	8/30/16
							Implement revised Adult Day Health Tool	10/1/16
	4. Optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to,	Alabama Medicaid Adult Day Health Standards.	X			Definition: The ADH service provides waiver recipients with a variety of health, social, recreational, and support activities. The objective of ADH is	None required	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ADULT DAY HEALTH (ALABAMA COMMUNITY TRANSITION WAIVER)**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
daily activities, physical environment, and with whom to interact.					to provide an organized program of rehabilitative, therapeutic and supportive health and social services in the community to individuals otherwise not capable of living independently in the community.			
	Scope of Service for Adult Day Health Services	X			ADH services is provided within a maintenance model of care, which provides services that include health and social activities such as planned therapeutic activities on a daily basis to stimulate the client's mental and physical activity, communication and self-expression. These activities include reality orientation exercises, crafts, music, educational and cultural programs.	None required	NA	NA
	Alabama Medicaid Agency Administrative code Chapter. 44, Rule No. 560-X-44-.04.(10)				(4) Adult Day Health Services. (a) Adult Day Health Service provides social and health care in a community facility approved to provide such care. Health education, self-care training, therapeutic activities, and health screening shall be included in the program.	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ADULT DAY HEALTH (ALABAMA COMMUNITY TRANSITION WAIVER)**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
	Alabama Medicaid Adult Day Health Review Tool				The review tool contains the following evaluation elements: Weekly activity plans posted; Both indoor and outdoor activities offered; individual and group activities offered; Areas are available for different activities; Therapeutic activities that stimulate mental communication and self-expression offered	None required	NA	NA
5. Facilitates individual choice regarding services and supports, and who provides them.	Alabama Medicaid Adult Day Health Standards. C. 8				C. Services Provided in ADH Centers to ensure optimal functioning of the client. 8. Assists in the development of self-care, personal hygiene and social support services.	None required	NA	NA
	Scope of Service for Adult Day Health Service Section E1; 2c: Procedure of Service				1.The case manager will submit a Service Authorization Form and Plan of Care to the Adult Day Health center authorizing Adult Day Health Service designating the units, frequency, beginning date and types of activities in accordance with the client's needs. 2c On the first day of service the provider will review the plan of care, provide the client written information	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ADULT DAY HEALTH (ALABAMA COMMUNITY TRANSITION WAIVER)**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
					regarding rights and responsibilities and how to register complaints and discuss the provisions and supervision of services.			
	Alabama Medicaid Agency Administrative code Chapter. 44, Rule No. 560-X-44-.04.(10)				This element of the HCBS Final Rule requirement was not addressed in the Alabama Medicaid Agency Administrative code Chapter. 44, Rule No. 560-X-44-.04.(10)	This element of the HCBS Final Rule will be incorporated into the Alabama Medicaid Agency's Administrative Code Chapter. 44, Rule No. 560-X-44-.04.(10)	Draft revisions to rule	9/30/16
							Publish rule for public comment	12/1/16
							Publish final rule	2/1/17
	Alabama Medicaid Adult Day Health Review Tool				This element of the HCBS Final Rule requirement was not addressed in the Alabama Medicaid Adult Day Health Review Tool	This element of the HCBS Final Rule requirement will be incorporated into the Alabama Medicaid Adult Day Health Review Tool.	Finalize revisions to Adult Day Health Review Tool	6/30/16
							Provide training Adult Day Health providers	8/30/16
							Implement revised Adult Day Health Tool	10/1/16
6. In a provider-owned or controlled residential setting, in addition to the qualities specified above, the following additional conditions must be met:	NA. This is not a residential service							

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ADULT DAY HEALTH (ALABAMA COMMUNITY TRANSITION WAIVER)**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
<p>7. HCBS settings exclude locations that have the qualities of an institutional setting. For 1915(c) home and community-based waivers, settings that are not home and community-based are defined at §441.301(c)(5) as follows:</p> <p>a. A nursing facility;</p> <p>b. An institution for mental diseases;</p> <p>c. An intermediate care facility for individuals with intellectual disabilities;</p> <p>d. A hospital; or</p> <p>e. Any other locations that have qualities of an institutional setting, as determined by the Secretary.</p> <p>For 1915(c) home and community-based waivers, section 441.301(c)(5)(v) specifies that the following settings are presumed to have the qualities of an institution:</p> <p>a. Any setting that is located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment,</p>	Alabama Adult Day Health Standards				Does not provide language regarding the exclusion of settings that have qualities of an institution.	This element of the HCBS Final Rule requirement will be incorporated into the Alabama Medicaid Adult Day Health Standards.	Finalize revisions to Adult Day Health Standards	6/30/16
							Provide training Adult Day Health providers	8/30/16
							Implement revised Adult Day Health Standards	10/1/16
	Scope of Service for Adult Day Health Service				Does not provide language regarding the exclusion of settings that have qualities of an institution.	This element of the HCBS Final Rule requirement will be incorporated into the Scope of Service for Adult Day Health Service for all applicable waivers.	Finalize revisions to Adult Day Health Scope of Services	8/30/16
							Publish revised scope of services	10/1/16
	Alabama Medicaid Agency Administrative Code, Chapter. 44, Rule No. 560-X-44-.04.(10)				Code states: "Adult Day Health Services are provided in a community facility." However, does not provide language regarding the exclusion of settings that have qualities of an institution.	This element of the HCBS Final Rule requirement will be integrated to include language regarding the exclusion of settings that have qualities of an institution.	Draft revisions to rule	9/30/16
							Publish rule for public comment	12/1/16
						Publish final rule	2/1/17	
Alabama Medicaid Adult Day Health Review Tool				Does not provide language regarding this element of the HCBS Final Rule	The Alabama Medicaid Adult Day Health Review Tool will be revised to	Finalize revisions to Adult Day Health Review Tool	6/30/16	

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
ADULT DAY HEALTH (ALABAMA COMMUNITY TRANSITION WAIVER)**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
b. Any setting that is located in a building on the grounds of, or immediately adjacent to, a public institution, or c. Any other setting that has the effect of isolating individuals receiving Medicaid HCBS from the broader community of individuals not receiving Medicaid HCBS.						Provide training Adult Day Health providers	8/30/16	
						Implement revised Adult Day Health Tool	10/1/16	

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA INDEPENDENT LIVING WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
1. 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.	SAIL Waiver AL.0241.R05.00 Appendix D, D-1, Appendix C			X	Covered services promote client independence, community access and integrated employment. It does not fully address the other component of this requirement that individuals receiving HCBS have the same degree of access to community integration as individuals not receiving Medicaid HCBS.	Amend Appendix C-5, and other sections as appropriate, after the Statewide Transition Plan has been approved to reflect requirements that settings are integrated in and support 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.	Submission of Systemic Assessment of Statewide Transition Plan	3/31/16
							Approval of Statewide Transition Plan Systemic Assessment	6/30/16
							Waiver amendment submission to reflect approved Statewide Transition Plan	No later than 12/17/18
	AMA January 2016 Provider Manual,			X	The Provider Manual includes some references that support this	Revise Chapter 107 of the Provider Manual	Draft revisions to Provider Manual	6/30/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA INDEPENDENT LIVING WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
	Chapter 107.2.4, Explanation of Covered Services				requirement of the Rule, such as the definition of Personal Care/Attendant Services (107.2.4, Explanation of Covered Services) which states PC/AS is designed to "...support individuals with physical disabilities...seeking or maintaining competitive employment either in the home or in an integrated or work setting. The overall purpose of Waiver Services (including the SAIL Waiver) indicates they are designed to serve individuals who would otherwise require institutionalization, but the definition of purpose is limited to protecting health, safety and dignity of participants while reducing Medicaid expenditures. It does not address the other component of this requirement to have to the same degree of access as individuals not receiving Medicaid HCBS to the same degree of access as individuals not receiving Medicaid HCBS.	to reflect requirement as noted above.	Administrative review and approval	8/30/16
							Publish revised Provider Manual	1/1/17
	AMA Admin. Code, Chapter 57, Rule No. 560-X-57-.01			X	States purpose of providing HCBS is to protect health, safety and dignity, but does not address the	Revise rule to reflect all requirements as noted above.	Draft revisions to rule	9/30/16
							Publish rule for	12/1/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA INDEPENDENT LIVING WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
	Authority and Purpose				integration of settings that will support full access of individuals receiving Medicaid HCBS to the greater community.		public comment Publish final rule	2/1/17
	Alabama Administrative Code Chapter 795, Rule No. 795-9-1-.01 (7)	X			(7) Individual and Systems Advocacy: Individual advocacy related to assist the individual with a significant disability to be able to function for themselves in the community, in their home or their workplace. Advocacy and referral to the Adult Vocational Rehabilitation program if those individuals, after assistance from the Independent Living program, are deemed ready for a vocational program. The Independent Living Specialist assists the individual with a disability to access and receive services from community resources. The Independent Living Specialist provides public awareness relating to issues that affect the individual with a significant disability.	None required	NA	NA
	AMA Admin. Code, Chapter 57, Rule No. 560-X-57-.04. Covered Services			X	Covered services promote client independence, community access and integrated employment. Does not address the other	Revise rule to reflect all requirements.	Draft revisions to rule Publish rule for public comment	10/1/16 12/1/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA INDEPENDENT LIVING WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
					component of this requirement that individuals receiving HCBS have the same degree of access to community integration as individuals not receiving Medicaid HCBS.		Publish final rule	2/1/17
	ADRS Blueprint	X			All ADRS services are provided with regard to individual's choice as outlined in agency Blueprint (Mission and Values of ADRS): Promote and respect consumer choice regarding provision of services.	None required	NA	NA
	ADRS VR Policy Manual, page 3 (Informed Choice)	X			SAIL Waiver Participants are provided opportunities to seek employment through ADRS Hybrid VR counselors in the SAIL program.	None required	NA	NA
	SAIL Waiver Policy and Procedure Manual			X	Allows client the opportunity to choose services in an institution or the community and to be involved in the development of the plan of care. Does not, however, fully address this element as it relates to case management responsibilities for assessment, monitoring and documentation to ensure compliance of full access to opportunities to seek	Revise SAIL Waiver Policy and Procedure Manual to address this element as it relates to case manager roles to assess and monitor the setting in which services are delivered for compliance with this element and to document the	Revise SAIL Waiver Policy and Procedure Manual	10/1/16
							Provide training to case management staff	2/1/17

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA INDEPENDENT LIVING WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
					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.	findings.		
	Long Term Care Waiver Quality Assurance Manual			X	The mission statement of the Long Term Care Waiver Quality Assurance Manual is to assure participants receive quality care in the home and community setting, but does not fully define "home and community-based setting" in keeping with this requirement of Final Rule or include specific quality assurance activities to assure compliance.	Amend the Long Term Care Waiver Quality Assurance Manual to fully define "home and community-based setting" and include quality assurance strategies, including but not limited to revision of Medicaid Waiver Survey for participants, to ensure compliance with this requirement.	Draft revisions to Waiver Quality Assurance Manual	6/30/16
							Administrative review and approval	8/30/16
								Publish and implement revised Waiver Quality Assurance Manual
	Medicaid Waiver Survey for Participants			X	Survey questions do not address/probe compliance with this element	Revise Survey to include questions/probes that address compliance with this element.	Draft revisions to Survey	6/30/16
								OA and Administrative review and approval

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA INDEPENDENT LIVING WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
							Implement revised Survey	10/1/16
2. 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.	SAIL Waiver AL.0241.R05.00 Appendix D, D-1, Appendix C	X			The individual is served in a private home, in the community or in an integrated place of employment of his/her choice for all services. The participant-centered plan of care is developed collaboratively with the client, case manager, family or legal representative, and other persons designated by the client. The Plan of Care development process provides involved persons with the information necessary to make an informed choice regarding the location of care and services to be utilized.	None required	NA	NA
	SAIL waiver policy and procedure manual	X			SAIL Waiver services are designed to allow individuals to remain in their chosen home and avoid nursing home placement. Manual states SAIL will recognize and strive to honor the client's decision regarding location of care and services received.	None required	NA	NA
3. Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.	SAIL Waiver AL.0241.R05.00 Appendix G	X			The State does not permit the use of restrictive interventions, restraints and seclusion for this waiver. The state agency	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA INDEPENDENT LIVING WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
					responsible for detecting the unauthorized use of restraints or seclusion is the Department of Rehabilitation Services (ADRS), which it achieves by monitoring participant health and welfare monthly and provider quality reviews. The Department of Human Resources monitors reports of abuse, neglect and exploitation. That Alabama Medicaid Agency conducts annual reviews of ADRS investigations. ADRS, in its function of certifying providers, and in its monitoring of direct service provision and service plan implementation, will detect any unauthorized use of restrictive interventions either through records (for instance, notes in a participant's file communicating the restriction), staff comments and discussion, or participant or family feedback during direct interviews.			
	AMA Administrative Code Ch. 57, Rule No. 560-X-57-.12, Confidentiality.	X			Providers are not to use or disclose, except to duly authorized representatives of federal or state agencies, any	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA INDEPENDENT LIVING WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
					information regarding an eligible recipient except upon written consent of the recipient, their attorney and/or guardian, or upon subpoena from a court of appropriate jurisdiction.			
	Alabama Administrative Code Chapter 795, Rule No. 795-9-1-.01(3)	X			(3) It is the policy of the Independent Living Service program to ensure that an individual with a significant disability is provided the services they need to live independently in the community and to respect the right of an individual with a disability to be treated with respect and dignity.	None required	NA	NA
	Medicaid Waiver Survey for Participants			X	Includes questions/probes regarding being treated with dignity and respect, but may need revisions to probe freedom from coercion and restraint.	Consider revisions to probe for freedom from coercion and restraint.	Draft proposed revisions to Survey	6/30/16
					OA and Administrative review and approval		8/30/16	
					Implement revised Survey		10/1/16	
	SAIL Waiver Policy and Procedure Manual			X	It is the policy of the SAIL Waiver program to respect each individual's dignity when providing Waiver services and to acknowledge and respect the	Revise SAIL Waiver Policy and Procedure Manual to address this element as it relates to case	Revise SAIL Waiver Policy and Procedure Manual	10/1/16
						Provide training	2/1/17	

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA INDEPENDENT LIVING WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
					client's right to be treated with consideration and dignity. Use and release of personal information must conform to applicable State and Federal laws and Regulations. All applicants, participants, or participant's representatives are to be informed of the confidentiality of records. Release of such information must be by written consent of the participant or authorized representative. SAIL policy and procedure does not address the case manager's role to assess, monitor and document any unauthorized use of restraint, seclusion or other restrictive interventions.	manager roles to assess and monitor for unauthorized use of restraint, seclusion and other restrictive interventions to ensure compliance with this element and to document the findings.	to case management staff	
4. 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.	SAIL Waiver AL.007.05.00 Appendix C, Appendix D-1	X			The Plan of Care process provides information for all individuals to make informed choices regarding available community services and support. The Plan of Care development must include exploration of the resources currently utilized by the client, both formal and informal, as well as those additional services which may be	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA INDEPENDENT LIVING WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
					available to meet the client's needs. The service plan development process involves all persons with information necessary to make an informed choice regarding the location of care and services to be utilized.			
	AMA Admin. Code, Chapter 57, Rule No. 560-X-57-.04. Covered Services	X			Covered services promote client independence, community access and integrated employment	None required	NA	NA
	SAIL Waiver Policy and Procedure Manual			X	States the case manager should constantly strive to empower the participant to become as independent as possible in advocating for him/her self and coordinating his/her own care. Through service coordination, the case manager consistently strives to meet the needs of the participant through the exploration of all formal and informal services. Does not fully address this element as it relates to case manager responsibility for assessment, monitoring and documentation to ensure compliance with this intent.	Revise SAIL Waiver Policy and Procedure Manual to address this element as it relates to case manager roles to assess and monitor the setting in which services are delivered for compliance with this element and to document the findings.	Revise SAIL Waiver Policy and Procedure Manual and related forms	10/1/16
Provide training to case management staff							2/1/17	

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA INDEPENDENT LIVING WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
5. Facilitates individual choice regarding services and supports, and who provides them.	SAIL Waiver Draft AL.007.05.00 - Apr 01, 2015 Appendix B-7 Freedom of Choice	X			Appendix B-7 states the participant-centered Plan of Care development process provides involved persons with the information necessary to make an informed choice regarding the services to be utilized. As part of the assessment and service coordination visit, participants and/or responsible parties are provided with adequate information to make an informed decision as to where the participant's care will be received. As the plan of care is developed, the case manager discusses and documents the client's freedom to choose a direct service provider from the list of approved contract providers that are qualified, available and willing to provide the services. The freedom of choice provider list form is kept in the participant's record to serve as evidence of individual choice. The participant can change providers at any time by notifying the case manager. Each month the case manager	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA INDEPENDENT LIVING WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
					discusses freedom of choice of service providers with the participant to ensure proper delivery of services and participant's choice.			
	AMA Administrative Code Chapter 57			X	Does not address individual choice regarding services and supports, and who provides them.	Revise rule to integrate requirements regarding individual choice regarding services and supports, and who provides them.	Draft revisions to rule	9/30/16
							Publish rule for public comment	12/1/16
							Publish final rule	2/1/17
	SAIL Waiver Policy and Procedure Manual	X			Policy mandates waiver recipients to have choice of services and providers and agency must document satisfaction. Facilitation of free choice provisions include offer of the alternative of home and community-based services or institutional services. Development of the Plan of Care includes educating the participant and responsible party or knowledgeable others with the long-term care options available to them and ensuring the participant's right to be involved in planning his/her care.	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA INDEPENDENT LIVING WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
					The various service options and their expected outcomes should be clearly explored with the participant and/or responsible party or knowledgeable others. Participant must always be informed of providers serving their area. At any time, the participant and/or primary caregiver may request an additional Waiver service or a change in providers. The case manager must narrate this information exchange as well as review the choice of providers.			
	AMA January 2016 Provider Manual, Chapter 107.2.6			X	Describes Medicaid responsibilities to ensure beneficiaries are advised of feasible service alternatives and receive a choice of institutional and HCB services. Further states that when residents of long term care facilities become eligible for HCBS, will be advised of available services and given choice of providers. Does not clarify that all individuals receiving HCBS will be so advised and given choice of providers.	Revise Provider Manual to add clarifying language will be advised of available services and given choice of providers.	Draft revisions to Provider Manual	6/30/16
						Administrative review and approval	8/30/16	
						Publish revised Provide Manual	1/1/17	

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA INDEPENDENT LIVING WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
	Medicaid Waiver Survey for Participants	X			Includes questions/probes regarding choice of providers.	None required	NA	NA
6. In a provider-owned or controlled residential setting, in addition to the qualities specified above, the following additional conditions must be met:	NA. No services provided in provider owned or controlled residential settings.							
7. HCBS settings exclude locations that have the qualities of an institutional setting. For 1915(c) home and community-based waivers, settings that are not home and community-based are defined at §441.301(c)(5) as follows: a. A nursing facility; b. An institution for mental diseases; c. An intermediate care facility for individuals with intellectual disabilities; d. A hospital; or e. Any other locations that have qualities of an institutional setting, as determined by the Secretary. For 1915(c) home and community-based waivers, section 441.301(c)(5)(v) specifies that the following settings are presumed to	SAIL Waiver AL.0241.R05.00			X	Waiver transition plan included in the most recent amendment, but it does not fully address this requirement as it relates to a description of the settings pertinent to the waiver and how they meet federal HCB Settings requirements, or a description of the means by which the state Medicaid agency ascertains that all waiver settings meet federal HCB Setting requirements on an ongoing basis. Assures that the settings transition plan included with amendment will be subject to any provisions or requirements included in the State's approved Statewide Transition Plan.	The State will implement any required changes upon approval of the Statewide Transition Plan and will make conforming changes to its waiver when it submits the next amendment or renewal, no later than March 1, 2019.	Submission of Settings Assessment for Statewide Transition Plan	9/30/16
					Approval of Statewide Transition Plan Settings Assessment		1/1/17	
							Waiver amendment submission to reflect approved Statewide Transition Plan	No later than 10/1/18
	AMA Administrative Code, Chapter 57			X	States no waiver services will be provided to recipients in a hospital or nursing facility, except	Revise rule to explicitly define all excluded settings as	Draft revisions to rule	9/30/16
							Publish rule for	12/1/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA INDEPENDENT LIVING WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
have the qualities of an institution: a. Any setting that is located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment, b. Any setting that is located in a building on the grounds of, or immediately adjacent to, a public institution, or c. Any other setting that has the effect of isolating individuals receiving Medicaid HCBS from the broader community of individuals not receiving Medicaid HCBS.					to assist individuals interested in transitioning from an institution to a community setting.  Rule does not address exclusion of other institutional or presumed-institutional setting or process for identification and scrutiny of such settings.	defined in Final Settings Rule.	public comment Publish final rule	2/1/17
	Alabama Administrative Code, Chapter 795, Rule No. 795-8-1-.04 Ineligibility; Rule No. 795-8-1-.08 Case Closure			X	Do not address exclusion in selection of service location of institutional or other presumed institutional settings or process for identification and scrutiny of such settings.	Revise rule to explicitly define all excluded settings as defined in Final Settings Rule.	Draft revisions to rule Publish rule for public comment Publish final rule	9/30/16 12/1/16 2/1/17
	AMA January 2016 Provider Manual, Chapter 107.2.3, Limitations			X	States that Medicaid does not provide waiver services to recipients in a hospital or nursing facility.  Does not address exclusion of other institutional or presumed-institutional setting. Does not address process for identifying settings that may be subject to heightened scrutiny or process for implementing heightened scrutiny	Revise Provider Manual to explicitly define all excluded settings as defined in Final Settings Rule.	Draft revisions to Provider Manual Administrative review and approval Publish revised Provider Manual	6/30/16 8/30/16 1/1/17
	SAIL Waiver Policy			X	SAIL Waiver Policy and Procedure	Revise SAIL Waiver	Revise SAIL	10/1/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA INDEPENDENT LIVING WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Non-Compliance	Silent				
	and Procedure Manual				Manual indicates services are not to be provided in a institutional settings, but does not fully address this element as it relates to case management assessment, monitoring and documentation that services may not be provided in other settings that are presumed to be institutional.	Policy and Procedure Manual to address this element as it relates to case manager roles to assess and monitor the setting in which services are delivered for compliance with this element and to document the findings.	Waiver Policy and Procedure Manual Provide training to case management staff	2/1/17
	Long Term Care Waiver Quality Assurance Manual			X	The mission statement of the Long Term Care Waiver Quality Assurance Manual is to assure participants receive quality care in the home and community setting, but does not fully define "home and community-based setting" in keeping with this requirement of Final Rule or include specific quality assurance activities to assure compliance.	Amend the Long Term Care Waiver Quality Assurance Manual to fully define "home and community-based setting" and include quality assurance strategies, including but not limited to revision of Medicaid Waiver Survey for participants, to ensure compliance with this requirement.	Draft revisions to Waiver Quality Assurance Manual Administrative review and approval Publish and implement revised Waiver Quality Assurance Manual	6/30/16 8/30/16 10/1/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
1. 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.	AL HCBS Living at Home Waiver for Persons with ID 0391.R02.00		X		Covered services promote integrated settings and support full access of individuals receiving Medicaid HCBS to the greater community, 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. Additional emphasis on opportunities to seek employment and work in competitive integrated settings continued to be needed.	DDD has begun the process of developing a comprehensive MOA/MOU that will include multiple state agencies responsible for providing resources, supports and services to people with disabilities as it relates to work preparation, trial work experiences, obtaining employment, and long term supports. It is through this MOA/MOU that each agency will identify its role and how services will be blended or braided with each other in order to maximize the funding needed to support a person throughout his/her life. The Plan also specifies that DDD	Draft MOA/MOU with multiple state agencies	Completed
							Revise MOA/MOU as needed	3/15/16
							MOA/MOU executed	6/30/16
							Draft MOU with Vocational Rehabilitation	Completed
							Internal legal office review of MOU with Vocational Rehabilitation	3/31/16
							MOU with Vocational Rehabilitation executed	6/30/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
						will develop a MOU with the Department of Rehabilitation Services. This MOU will actually be department-wide so the Plan will be edited to say DMH rather than DDD.		
	AMA Admin. Code, Chapter 52, Rule No. 560-X-57-.01 Authority and Purpose			X	States purpose of providing HCBS is to provide health, social, and related support needed to ensure optimal functioning of an individual with an intellectual disability within a community setting, but does not address the integration of settings that will support full access of individuals receiving Medicaid HCBS to the greater community.	Revise rule to reflect all requirements as noted above.	Draft revisions to rule	9/30/16
							Publish rule for public comment	12/1/16
								Publish final rule
	AMA January 2016 Provider Manual, Chapter 107.2.4, Explanation of Covered Services			X	The Provider Manual includes some references that support this requirement of the Rule. The overall purpose of Waiver Services (including the LAH Waiver) does	Revise Chapter 107 to reflect requirement setting is integrated in and supports full access of individuals receiving Medicaid	Draft revisions to Provider Manual	6/30/16
							Administrative review and approval	8/30/16
								Publish revised Provider Manual

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					indicate they are designed to serve individuals who would otherwise require institutionalization, but the definition of purpose is limited to protecting health, safety and dignity of participants while reducing Medicaid expenditures. It does not address the other components of this requirement, including supporting 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.	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.		
	Alabama Administrative Code, Chapter 58, Rule No.	X			(1) ...The goal of providing services and supports to individuals with intellectual disabilities is to provide	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	580-5-30-.08 Community Placement				inclusive community living options, transition outcomes, and employment for individuals that achieve full integration and inclusion in society in a manner consistent with the strengths, resources, and capabilities for each individual.			
	Alabama Administrative Code 580-33-.15 3(c)	X			The goal of service arrangement is to (i) Assist persons in accessing learning, participation and support opportunities and optimizing independence through support and training in the use of personal and community resources.	None required	NA	NA
	Title 38: Public Welfare, Section 38-9C-4 - Rights	X			(3) The right to inclusion in the community. (4) The right to live, work, be educated, and recreate with people who do not have disabilities. (12) The right to reasonable access to and privacy of mail, telephone,	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					communications, and visitors. (18) The right to access general services in their community and local neighborhood.			
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.05 Dignity and Respect	X			(12) Organizational practices enhance dignity and respect while recognizing individual choices and preferences and include supports: (d) To provide transportation and other supports to access community services in a manner similar to others at large. (13) The organization provides personal assessments that identify preferred work and activities . . .	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.06 Natural Support Networks	X			(1) The organization has policies and procedures that define natural supports and acknowledge the importance of natural supports in promoting identity, personal security and continuity for people	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					<p>served by the organization. Natural supports include families and friends as well as community resources such as local organizations, clubs, places of worship, schools or other places where new and existing relationships can be built and facilitated outside of the organization.</p> <p>(2) Policies and practices reflect how an organization facilitates continuity in existing relationships and supports building new relationships using community resources.</p> <p>(4) Facilitation of natural supports includes promoting visits to the homes of families and friends and visits of families and friends to people's homes...</p> <p>(10) The organization ...has clearly identified expectations related to visits or other interactions with natural supports based on the desires of the</p>			

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					person being supported and provides private space for visits and interaction with natural supports.			
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.09 Safe Environments	X			(12) The organization maintains the appearance of the home, inside and out, consistent with that of other homes in the neighborhood.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.11 Positive Services and Supports	X			(9) At a minimum, the following areas are addressed and documented in the functional assessment: (a) Personal preferences. (e) Vocational needs. (15) Goals promote being present and participating in community life, gaining and maintaining satisfying relationships, expressing preferences and making choices in everyday life, having opportunities to fulfill respected roles and to live with dignity and continuing development of personal competencies.	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					(18) At least weekly community integration activities are documented as offered			
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.02 Definitions	X			(7) Supported Employment Services at an Integrated Worksite... includes supporting individuals at a worksite where other workers do not have disabilities... The principles of Supported Employment at an Integrated Worksite are: <i>[not listed here due to the length, but includes the concepts of Employment First, addressing work for all adults of working age, work as a normal expectation of adults in our society, no one being excluded who wants to participate, choices and decisions about work receiving deference].</i>	None required	NA	NA
	Title 38: Public Welfare – Section 38-9C-4 - Rights	X			(4) The right to live, work, be educated, and recreate with people who do not have disabilities.	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.11 Positive Services and Supports	X			(15) Goals promote being present and participating in community life, gaining and maintaining satisfying relationships, expressing preferences and making choices in daily life, having opportunities to fulfill respected roles and to live with dignity and continuing development of personal competence.	None required	NA	NA
	Title 38: Public Welfare – Section 38-9C-4 - Rights	X			(17) The right to make decisions that affect their lives.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.04 Promotion and Protection of Individual Rights	X			(7) The rights assessment... includes, but is not limited to the ability to do the following: (a) Manage money. (f) Access personal possessions.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.12 Continuity and	X			(10) Accounting and fiscal practices do not restrict personal access to funds or monies that belong to people receiving services.	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	Personal Security							
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.15 Case Management Standards	X			(3) The core elements of case management performed by the assigned case manager includes a Needs Assessment including (9) Resource analysis and planning to include: (ii) Maintaining accountability to the individual for his funds, as applicable.	None required	NA	NA
	Title 38: Public Welfare – Section 38-9C-4 - Rights	X			(10) The right to own and possess real and personal property.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-3-25-.07 Client Funds	X			Each entity shall have a written plan/policy regarding the management of client’s personal funds which requires, at a minimum, the following. (1) Clients shall manage their personal fund account unless there is a payee, guardian or similar appointee who manages the account for them. (2) Each entity that manages a client’s funds	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					shall have on record the appropriate written consent to manage that client's personal funds. (3) Clients/guardians shall be informed of the process whereby the client may access his/her personal funds.			
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.12 Continuity and Personal Security	X			(14) Food is nutritious and will be available in quantity and variety to meet individual dietary needs and preferences.	None required	NA	NA
	Assessment Tool for Basic Assurance, 2012	X			Tool used for licensing and certification includes probes related to preferred work and activities, practices to help people make choices based on preferences and to assist people to achieve goals, whether activity and work options available are age appropriate and culturally normative and options promote a positive self-image and whether work is	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					compensated at a fair wage.			
	Provider Certification and Guidance Manual, Revised June 2014	X			The Manual describes the process for certification of Community Providers and contains guidance in interpreting and gathering information for thirteen factors and related indicators. It addresses full access of individuals receiving waiver services 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.	None required	NA	NA
	Home And Community Based Settings Check List	X			Tool used for provider self-assessment includes probes based on CMS exploratory questions for this requirement	None required	NA	NA
	Long Term Care Waiver Quality			X	The mission statement of the Long Term Care Waiver	Amend the Long Term Care Waiver	Draft revisions to Waiver Quality Assurance	6/30/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	Assurance Manual				Quality Assurance Manual is to assure participants receive quality care in the home and community setting, but does not fully define "home and community-based setting" in keeping with this requirement of Final Rule or include specific quality assurance activities to assure compliance.	Quality Assurance Manual to fully define "home and community-based setting" and include quality assurance strategies, including but not limited to revision of Medicaid Waiver Survey for participants, to ensure compliance with this requirement.	Manual	
							Administrative review and approval	8/30/16
							Publish and implement revised Waiver Quality Assurance Manual	10/1/16
	Medicaid Waiver Survey for Participants			X	Survey questions do not address/probe compliance with this element	Revise Survey to include questions/probes that address compliance with this element.	Draft revisions to Survey	6/30/16
							OA and Administrative review and approval	8/30/16
							Implement revised Survey	10/1/16
2. The setting is selected by the individual from among setting options including non-disability specific settings and an option for	AL HCBS Living at Home Waiver for Persons with ID 0391.R02.00			X	Services provided under the LAH Waiver are generally provided in the person's own home or family's	Amend waiver to reflect choice of settings for day services is made	Submit waiver amendment	12/31/16
							Obtain approval of waiver renewal	3/31/17

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
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.					home. Day services that may be offered in a disability specific setting under the waiver include Day Habilitation and Prevocational Services while Supported Employment services do not include facility based, or other similar types of vocational services furnished in specialized facilities that are not part of the general workplace. Appendices B-7 and D-1 address facilitation of choices of supports and services, as well as providers, throughout the person-centered planning process, but do not specifically address the requirement to ensure selection is made from among setting options including non-disability specific settings.	from among setting options including non-disability specific settings.	Implement revised procedures per approved renewal	4/1/17
				X		Revise Alabama	Draft revisions to rule	9/30/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	Alabama Administrative Code Chapter 58, Rule No. 580-5-33.11 Positive Services and Supports POM Data Case Management Title 38 Public Welfare Section 38-9C-4 - Rights				Alabama Administrative Code 580-5-33 is based on the Basic Assurances of the Council on Quality Leadership Personal Outcome Measures and affirms the right of individuals to make decisions that affect their lives. It does not specifically address the element of this requirement.	Administrative Code Chapter 58 to include language specific to the process for ensuring individuals are aware of all setting options, including non-disability specific settings and an option for a private unit in a residential setting, and that these will be identified and documented in the person centered service plan.	Publish rule for public comment Publish final rule	12/31/16 3/31/17
	Assessment Tool for Basic Assurance, 2012			X	Tool used for licensing and certification includes probes related to housing preferences, but does not have probes that address the process for ensuring individuals are aware of all setting options, including non-disability specific settings and an option for a private unit in a residential setting, and that these will be identified and	Revise tool to include probes related to this requirement.	Draft revisions to Assessment Tool for Basic Assurances Provide training to all involved stakeholders Implement changes	6/30/16 9/30/16 10/1/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					documented in the person centered service plan.			
	Provider Certification and Guidance Manual, Revised June 2014	X			The Manual describes the process for certification of Community Providers and contains guidance in interpreting and gathering information for thirteen factors and related indicators. It addresses the selection of the setting by the individual from among setting options including non-disability specific settings.	None required	NA	NA
	Home And Community Based Settings Check List	X			Tool used for provider self-assessment includes probes based on CMS exploratory questions for this requirement	None required	NA	NA
3. Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.	AL Home and Community-Based Waiver for Persons with Intellectual Disabilities 0001.R07.00 Appendix G-2	X			Appendix G-2 describes the requirements for implementing, monitoring and documenting use of restraints that are permitted during the course of the delivery of waiver services, including due process protections, staff training requirements and reporting procedures.	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					DDD is responsible for overseeing the use of restraints or seclusion and ensures that State safeguards concerning their use including, for example, certification reviews and reviews of incident reports. Other restrictive interventions and seclusion are not used. DDD, in its function of certifying providers and in its monitoring of direct service provision and service plan implementation, will detect any unauthorized use of any restrictive interventions.			
	AMA Administrative Code Ch. 52, Rule No. 560-X-52-.12, Confidentiality.	X			Providers shall not use or disclose, except to duly authorized representatives of federal or state agencies, any information concerning an eligible recipient except upon the written consent of the recipient, his/her attorney, or his/her guardian, or upon subpoena from a court of appropriate jurisdiction.	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.04 Promotion and Protection of Individual Rights	X			(7) The rights assessment addresses people’s civil and legal rights and personal freedoms. The assessment includes, but is not limited to the ability to do the following: (a) Send and receive mail. (b) Make and receive telephone calls and use other means of communication.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.03 Policies and Procedures	X			(3) Policies and procedures address, at a minimum, the following areas: (b) Dignity and Respect. (12) Organizational practices enhance dignity and respect while recognizing individual choices and preferences and include supports: (a) To ensure healthy hygiene and personal cleanliness. (b) To choose clothing that fits appropriately. (12) Organizational practices enhance dignity and respect while recognizing individual	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					<p>choices and preferences and include supports.</p> <p>(13) ... Options for people shall be age and culturally appropriate, normative and promote a positive self-image.</p> <p>(16) The organization maintains a cumulative record of information and documentation of services and supports needed by and provided to people. The organization ensures that all information in a person's record, including financial and health information, is kept confidential, and in accordance with HIPAA regulations and other state and federal laws. Only those directly involved in a person's care, authorized administrative review or in the monitoring of services have access to records.</p> <p>(17) The organization is responsible for the safekeeping of each person's records and for</p>			

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					securing it against loss, destruction, or use by unauthorized persons. (18) Personal information includes only information needed to provide supports and services to people.			
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.05 Dignity and Respect	X			(1) The organization’s policies and procedures reflect and reinforce the use of courteous practices towards people, the avoidance of labels to describe people based on physical characteristics or disabilities and the practice of addressing people by their preferred names (4) The organization has a mechanism that provides people supported and their legally authorized representatives with information regarding filing complaints and grievances. (6) Grievance procedure information is available in frequently used areas, particularly where people receive services. Such notices include the 800	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					<p>numbers of the DMH Advocacy Office, federal protection and advocacy system (ADAP) and local Department of Human Resources.</p> <p>(7) The organization provides access to persons and advocates, including a DMH internal advocate and the grievance process without reprisal.</p> <p>(10) The organization provides space for people to speak or interact with others in private and to open and read mail or other materials.</p> <p>(11) The organization affords every person the right to privacy. Staff demonstrates respect for people’s privacy when providing supports for personal hygiene, bathing, or dressing as well as when entering personal spaces.</p>			
	Title 38: Public Welfare – Section 38-9C-4 - Rights	X			(5) The right to be presumed competent until a court of competent	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					jurisdiction determines otherwise. (9) The right to confidential handling of personal, financial, and medical records. (11) The right to privacy and dignity. (12) The right to reasonable access to and privacy of mail, telephone, communications, and visitors. (20) The right to be accorded human respect and dignity on an individual basis in a consistently humane fashion.			
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-07 Protection from Abuse, Neglect, Mistreatment and Exploitation	X			(5) There is a complaint process that is understandable and easy to use and people are supported to report allegations of abuse, neglect, mistreatment and exploitation.	None required	NA	NA
	Title 38: Public Welfare – Section 38-9C-4 - Rights	X			(25) The right to be informed specifically of the procedures for initiating a complaint or grievance	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					procedure and the applicable appeals process, including the means of requesting a hearing or review of the complaint. (26) The right to be informed of the means for accessing advocates, ombudsmen, or rights protection services within the program and, as applicable, the State of Alabama Mental Health System, the Department of Human Resources, the federal advocacy system, and other advocacy services. Such access must be allowed without fear of reprisal.			
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.04 Promotion And Protection Of Individual Rights	X			(13) Written, informed consent is obtained prior to any intrusive medical or behavioral intervention, and prior to participation in research. Information regarding procedures to be followed, potential discomforts and/or risks, and expected benefits of participation shall be	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					presented in a non-threatening environment, and explained in language that the person can understand. The person is also informed that he/she may withhold or withdraw consent at any time.			
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.04 Promotion And Protection Of Individual Rights	X			(30) The HRC reviews the frequencies and reasons surrounding the use of restraint for behavioral or medical purposes.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.10 Staff Resources And Supports	X			(18)(d) Employees who provide direct supports to people receive annual refresher training in management of aggressive behavior.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.10 Staff Resources And Supports	X			(25) Behavior Support Plans are developed based on information gathered through a functional behavioral assessment that is completed by a qualified professional and identifies	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					physical or environmental issues that need to be addressed to reduce, replace or eliminate the behavior. The Behavior Support Plan outlines the specific behavioral supports that may and may not be used.			
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.10 Staff Resources And Supports	X			(26) All direct support staff receive training in behavioral techniques and plans prior to implementation of support(s) to people.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.10 Staff Resources And Supports	X			(27) Data related to the effectiveness of an individual's Behavior Support Plan is reviewed periodically, but at least quarterly, or more often as required by the individual's needs.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.10 Staff Resources And Supports	X			(29) All behavior support plans are approved by the person's Support Team. Each Behavior Support Plan with Level 2 or 3 procedures is reviewed and/or approved by the	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					<p>Behavior Program Review Committee, the Human Rights Committee and the person or the person’s legally authorized representative in accordance with DDD PBS 02 Guidelines for Levels of Intervention.</p> <p>(a) The use of emergency or unplanned behavior interventions that are highly intrusive are in compliance with DDD PBS 02 Level 3 Procedures and are not used more than three (3) times in a six (6) month period without a Support Team meeting to determine needed changes in the person’s behavior support plan.</p> <p>(b) If people require behavioral or medical supports to prevent harm to themselves or others, such supports are provided in accordance with DDD Behavioral Services Procedural Guidelines (DDD-PBS 01 –05).</p>			

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					<p>(c) The use of any restraint complies with the provisions of DDD PBS 02 Level 3 Procedures and is applied only by staff with demonstrated competency for the device or procedure used.</p> <p>(d) The organization ensures that people are not subjected to highly intrusive behavior interventions or punishment for the convenience of staff, or in lieu of a Behavior Support Plan.</p> <p>(e) The organization prohibits the use of corporal punishment, seclusion, noxious or aversive stimuli forced exercise, or denial of food or liquids that are part of a person’s nutritionally adequate diet.</p> <p>(f) Behavior procedures considered the most restrictive comply with the Level 4 Provisions of DDD PBS 02. Requests for the</p>			

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					use of Level 4 Procedures are sent to the Director of Psychological and Behavioral Services for the Division of Developmental Disabilities after reviews have been completed by the Behavior Program Review Committee (BPRC), Human Rights Committee (HRC) and the legally authorized representative. The Director of Psychological and Behavioral Services determines the frequency of further review. (g) The only exception to the above approval requirement is Emergency Mechanical Restraint, which has an IPMS documentation requirement and a limit regarding number of times it can be used.			
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.10	X			(31) PRN orders for psychotropic medications are administered in accordance with the Nurse Delegation Program and	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	Staff Resources And Supports				the Behavioral Services Procedural Guidelines.			
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.10 Staff Resources And Supports	X			(32) A person's Support Team meets to assess and address behavioral and psychiatric needs when PRN medications are used as an Emergency Procedure three (3) times within a six (6) month period.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.11 Positive Services And Supports	X			(29)(c) The use of any restraint complies with the provisions of DDD PBS 02 Level 3 Procedures and is applied only by staff with demonstrated competency for the device or procedure used. (29f) Behavior procedures considered the most restrictive comply with the Level 4 Provisions of DDD PBS 02. Requests for the use of Level 4 Procedures are sent to the Director of Psychological and Behavioral Services for the Division of Developmental Disabilities after reviews have been completed by the Behavior Program	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					Review Committee (BPRC), Human Rights Committee (HRC) and the legally authorized representative. The Director of Psychological and Behavioral Services determines the frequency of further review. (29g) The only exception to the above approval requirement is Emergency Mechanical Restraint, which has an IPMS documentation requirement and a limit regarding number of times it can be used.			
	Behavioral Services Procedural Guidelines, 2014 Update	X			Guidelines prescribe protections and due process for restrictive interventions at varying levels. Also provides guidelines for Behavior Support Plans.	None required	NA	NA
	Assessment Tool for Basic Assurance, 2012	X			Tool used for licensing and certification includes probes related individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	Provider Certification and Guidance Manual, Revised June 2014			X	The Manual describes the process for certification of Community Providers and contains guidance in interpreting and gathering information for thirteen factors and related indicators. It comprehensively addresses individual's rights of privacy, dignity and respect, and freedom from coercion. Restraint and restrictive interventions are probed only in the context of mental health or behavior supports an individual receives to help achieve goals, but there are no probes regarding unauthorized use.	Revise Manual to address certification processes, factors and indicators specific to this requirement	Draft revisions to Assessment Tool for Basic Assurances	6/30/16
							Provide training to all involved stakeholders	9/30/16
	Home And Community Based Settings Check List	X			Tool used for provider self-assessment includes probes based on CMS exploratory questions for this requirement	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	Medicaid Waiver Survey for Participants			X	Includes questions/probes regarding being treated with dignity and respect, but may need revisions to probe freedom from coercion and restraint.	Consider revisions to probe for freedom from coercion and restraint.	Draft proposed revisions to Survey OA and Administrative review and approval Implement revised Survey	6/30/16 8/30/16 10/1/16
4. 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.	AL HCBS Living at Home Waiver for Persons with ID 0391.R02.00	X			Each participant has a person-centered plan based on a history and profile of the individual and family. The planning meeting itself also produces an extensive profile and identifies wants and needs, the resources and supports currently available, and those needed, to meet the wants and needs. These include but are not limited to: Housing, Safety, Supervision, Communication, Mobility, Family and Friends, Recreation and Leisure, Health and Medical Care, Transportation, Education and Training, Employment or Day Activities, Daily Living, Finances and Money Management, and Emotional or Behavioral	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					Needs. Profiles also cover what and who is important to the individual, what are the individual's daily routines and what choices does he or she get to make, what works and doesn't work for the individual, and what does the team need to know and do to support the individual.			
	AMA Admin. Code, Chapter 52, Rule No. 560-X-57-.04. Covered Services	X			Covered services promote client independence, community access and integration and provide opportunity for integrated work.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.11 Positive Services and Supports	X			(6) Each person and, with the person's permission, his/her family members or significant other, are invited to actively participate in person-centered planning, including discharge and transition planning. Information is presented to the person in language and terms appropriate for the person to understand.	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					(15) Goals promote being present and participating in community life, gaining and maintaining satisfying relationships, expressing preferences and making choices in daily life, having opportunities to fulfill respected roles and to live with dignity and continuing development of personal competence.			
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.04 Promotion and Protection of Individual Rights	X			(7) The rights assessment addresses people’s civil and legal rights and personal freedoms. The assessment includes, but is not limited to the ability to do the following: (a) Exercise freedom of movement within physical environments. (16) No person is presumed incompetent or denied the right to manage his/her personal affairs or exercise all other rights guaranteed persons of society solely by reason of his/her having received support services,	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					unless legally determined otherwise.			
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.08 Best Possible Health	X			(2) People are supported to make their own health care appointments and choices regarding their medical care as needed.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.14 Personal Care Companion, Respite, Crisis Intervention Services and Supported Employment at an Integrated Work Site	X			(1) ...the organization provides training to staff on the services to be provided and how the person wants to be supported. This training includes: (b) Information about the specific conditions and required supports of the person to be served, including ...his/her support needs and preferences related to that support.	None required	NA	NA
	Assessment Tool for Basic Assurance, 2012	X			Tool used for licensing and certification includes probes related to , individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities,	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					physical environment, and with whom to interact.			
	Provider Certification and Guidance Manual, Revised June 2014	X			The Manual describes the process for certification of Community Providers and contains guidance in interpreting and gathering information for thirteen factors and related indicators. It addresses individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact.	None required	NA	NA
	Home And Community Based Settings Check List	X			Tool used for provider self-assessment includes probes based on CMS exploratory questions for this requirement.	None required	NA	NA
5. Facilitates individual choice regarding services and supports, and who provides them.	AL HCBS Living at Home Waiver for Persons with ID 0391.R02.00	X			An individual coming into services is provided information about services and supports by the 310/case management entity. Once there is a determination of needs from the person centered planning process,	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					<p>information is provided to the individual and/or family regarding providers in their respective area. Visits are arranged, upon request, to the various service provider's sites to give individuals an opportunity to make an informed decision. The individual and family verify their choice(s) of provider(s) by signing a document that lists choices. Information is again provided with an opportunity to exercise choice at the individual's annual review meeting. A Dissatisfaction of Services form is presented to each waiver participant and his/her family/representative as part of the planning process. If the individual decides that he /she wants to change current services at any other time, a special team meeting is convened to address concerns and ensure information is</p>			

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					provided about other available services and supports.			
	AMA Administrative Code, Chapter 52, Rule No. 560-X-52-.01. Authority and Purpose			X	Does not address individual choice regarding services and supports, and who provides them.	Revise rule to integrate requirements regarding individual choice regarding services and supports, and who provides them.	Draft revisions to rule Publish rule for public comment Publish final rule	9/30/16 12/1/16 2/1/17
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.08 Best Possible Health	X			(1) People are given the opportunity to choose health care providers.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-30-.12 Program Enrollment/Participation in DMH Medicaid Waiver Programs	X			(6) All individuals, along with their family or guardian, served under either of the two Waivers must be given free choice among qualified providers as to who is going to provide each waiver service.	None required	NA	NA
	Alabama Administrative Code, Chapter	X			The Division of Developmental Disabilities shall assure that each	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	58, Rule No. 580-5-30-.14 Free Choice of Providers Within DMH Medicaid Waiver Programs.				individual and their family/guardian are given a free choice of individuals or entities from which to receive services. Free choice of provider is an essential right of individuals and their families as required by federal Medicaid regulations and is upheld by the case management agency. (1) The designated case management agency ...shall ensure that individuals and their family are provided with adequate information about all providers of services from which to base their choice(s), and that their choice is unhindered by coercion or manipulation arising from conflict of interest.			
	Assessment Tool for Basic Assurance, 2012			X	Tool used for licensing and certification does not include specific probes related to individual choice regarding services and supports, and who provides them.	Revise tool to include probes specific to this requirement	Draft revisions to Assessment Tool for Basic Assurances Provide training to all involved stakeholders Implement changes	6/30/16 9/30/16 10/1/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	Provider Certification and Guidance Manual, Revised June 2014	X			The Manual describes the process for certification of Community Providers and contains guidance in interpreting and gathering information for thirteen factors and related indicators. It addresses the facilitation of individual choice regarding services and supports, and who provides them.	None required	NA	NA
	Home And Community Based Settings Check List	X			Tool used for provider self-assessment includes probes based on CMS exploratory questions for this requirement	None required	NA	NA
	Medicaid Waiver Survey for Participants	X			Includes questions/probes regarding choice of providers.	None required	NA	NA
6. In a provider-owned or controlled residential setting, in addition to the qualities specified above, the following additional conditions must be met:	NA. No services provided in provider owned or controlled residential settings.							
7. HCBS settings exclude locations that have the qualities of an institutional setting. For 1915(c) home and community-based waivers, settings that are not	AL HCBS Living at Home Waiver for Persons with ID 0391.R02.00			X	Does not fully address this requirement as it relates to settings that have the qualities of an institution or are presumed to have	Amend Appendix C-5 and other appropriate sections of the waiver after the	Submission of Settings Assessment for Statewide Transition Plan	3/31/16
							Approval of Statewide	6/30/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
<p>home and community-based are defined at §441.301(c)(5) as follows:</p> <p>a. A nursing facility;</p> <p>b. An institution for mental diseases;</p> <p>c. An intermediate care facility for individuals with intellectual disabilities;</p> <p>d. A hospital; or</p> <p>e. Any other locations that have qualities of an institutional setting, as determined by the Secretary.</p> <p>For 1915(c) home and community-based waivers, section 441.301(c)(5)(v) specifies that the following settings are presumed to have the qualities of an institution:</p> <p>a. Any setting that is located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment,</p> <p>b. Any setting that is located in a building on the grounds of, or immediately adjacent to, a public institution, or</p> <p>c. Any other setting that has the effect of isolating individuals receiving Medicaid HCBS from the</p>					qualities of an institution. Does not address process for identifying settings that may be subject to heightened scrutiny or process for implementing heightened scrutiny.	Statewide Transition Plan has been approved to reflect requirements regarding settings that are presumed institutional	Transition Plan Settings Assessment	
							Waiver amendment submission to reflect approved Statewide Transition Plan	12/31/16
	AMA Administrative Code, Chapter 52, Rule No. 560-X-52-.03			X	Rule does not address exclusion of institutional or presumed-institutional settings or process for identification and scrutiny of such settings.	Revise rule to explicitly define all excluded settings as defined in Final Settings Rule.	Draft revisions to rule	9/30/16
							Publish rule for public comment	12/31/16
							Publish final rule	3/31/17
	Assessment Tool for Basic Assurance, 2012			X	Tool used for licensing and certification does not include probes related to settings that may be presumed to be institutional.	Revise tool to include probes specific to this requirement	Draft revisions to Assessment Tool for Basic Assurances	6/30/16
							Provide training to all involved stakeholders	9/30/16
							Implement changes	10/1/16
	Provider Certification and Guidance Manual, Revised June 2014			X	The Manual describes the process for certification of Community Providers and contains guidance in interpreting and gathering information for thirteen factors and related indicators, but does not address the exclusion of institutional or presumed-institutional settings or	Revise Manual to address certification processes, factors and indicators specific to this requirement	Draft revisions to Assessment Tool for Basic Assurances	6/30/16
							Provide training to all involved stakeholders	9/30/16
							Implement changes	10/1/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
broader community of individuals not receiving Medicaid HCBS.					process for identification and scrutiny of such settings.			
	Home And Community Based Settings Check List	X			Tool used for provider self-assessment includes probes based on CMS exploratory questions for this requirement	None required	NA	NA
	AMA January 2016 Provider Manual, Chapter 107.2.3, Limitations			X	States that Medicaid does not provide waiver services to recipients in a hospital or nursing facility.	Revise Provider Manual to explicitly define all excluded settings as defined in Final Settings Rule.	Draft revisions to Provider Manual	6/30/16
					Does not address exclusion of other institutional or presumed-institutional setting. Does not address process for identifying settings that may be subject to heightened scrutiny or process for implementing heightened scrutiny		Administrative review and approval	8/30/16
							Publish revised Provider Manual	1/1/17
Long Term Care Waiver Quality Assurance Manual			X	The mission statement of the Long Term Care Waiver Quality Assurance Manual is to assure participants receive quality care in the home and community setting, but does not fully define "home and	Amend the Long Term Care Waiver Quality Assurance Manual to fully define "home and community-based setting" and include quality assurance	Draft revisions to Waiver Quality Assurance Manual	6/30/16	
						Administrative review and approval	8/30/16	
						Publish and implement revised Waiver Quality Assurance Manual	10/1/16	

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
STATE OF ALABAMA LIVING AT HOME WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					community-based setting” in keeping with this requirement of Final Rule or include specific quality assurance activities to assure compliance.	strategies, including but not limited to revision of Medicaid Waiver Survey for participants, to ensure compliance with this requirement.		

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
INTELLECTUAL DISABILITIES WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
1. 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.	AL Home and Community-Based Waiver for Persons with Intellectual Disabilities 0001.R07.00		X		Covered services promote integrated settings and support 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. Attachment 2 acknowledges additional work to be accomplished to fully support integrated employment opportunities.	DDD has begun the process of developing a comprehensive MOA/MOU that will include multiple state agencies responsible for providing resources, supports and services to people with disabilities as it relates to work preparation, trial work experiences, obtaining employment, and long term supports. It is through this MOA/MOU that each agency will identify its role and how services will be blended or braided with each other in order to maximize the funding needed to support a person throughout his/her life. The Plan also	Draft MOA/MOU with multiple state agencies	Completed
						Revise MOA/MOU as needed	3/15/16	
						MOA/MOU executed	6/30/16	
						Draft MOU with Vocational Rehabilitation	Completed	
						Internal legal office review of MOU with Vocational Rehabilitation	3/31/16	
						MOU with Vocational Rehabilitation executed	6/30/16	

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
INTELLECTUAL DISABILITIES WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
						specifies that DDD will develop a MOU with the Department of Rehabilitation Services. This MOU will actually be department-wide so the Plan will be edited to say DMH rather than DDD.		
	AMA Administrative. Code, Chapter 52, Rule No. 560-X-36-.01 Authority and Purpose			X	States purpose of providing HCBS is to provide health, social, and related support needed to ensure optimal functioning of an individual with an intellectual disability within a community setting, but does not address the integration of settings that will support full access of individuals receiving Medicaid HCBS to the greater community.	Revise rule to reflect all requirements as noted above.	Draft revisions to rule Publish rule for public comment Publish final rule	9/30/16 12/1/16 2/1/17
	AMA January 2016 Provider Manual, Chapter 107.2.4, Explanation of Covered Services			X	The Provider Manual includes some references that support this requirement of the Rule, The overall purpose of Waiver Services (including	Revise Chapter 107 to reflect requirement setting is integrated in and supports full access of individuals	Draft revisions to Provider Manual Administrative review and approval Publish revised Provider Manual	6/30/16 8/30/16 1/1/17

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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
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					the ID Waiver) does indicate they are designed to serve individuals who would otherwise require institutionalization, but the definition of purpose is limited to protecting health, safety and dignity of participants while reducing Medicaid expenditures. It does not address the other components of this requirement, including supporting 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.	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.		
	Alabama Administrative Code, Chapter	X			(1) ...The goal of providing services and supports to individuals with intellectual	None required	NA	NA

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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	58, Rule No. 580-5-30-.08 Community Placement				disabilities is to provide inclusive community living options, transition outcomes, and employment for individuals that achieve full integration and inclusion in society in a manner consistent with the strengths, resources, and capabilities for each individual.			
	Alabama Administrative Code 580-33-.15 3(c)	X			The goal of service arrangement is to (i) Assist persons in accessing learning, participation and support opportunities and optimizing independence through support and training in the use of personal and community resources.	None required	NA	NA
	Title 38: Public Welfare, Section 38-9C-4 - Rights	X			(3) The right to inclusion in the community. (4) The right to live, work, be educated, and recreate with people who do not have disabilities. (12) The right to reasonable access to and privacy of mail, telephone,	None required	NA	NA

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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					communications, and visitors. (18) The right to access general services in their community and local neighborhood.			
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.05 Dignity and Respect	X			(12) Organizational practices enhance dignity and respect while recognizing individual choices and preferences and include supports: (d) To provide transportation and other supports to access community services in a manner similar to others at large. (13) The organization provides personal assessments that identify preferred work and activities . . .	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.06 Natural Support Networks	X			(1) The organization has policies and procedures that define natural supports and acknowledge the importance of natural supports in promoting identity, personal security and continuity for people	None required	NA	NA

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INTELLECTUAL DISABILITIES WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					<p>served by the organization. Natural supports include families and friends as well as community resources such as local organizations, clubs, places of worship, schools or other places where new and existing relationships can be built and facilitated outside of the organization.</p> <p>(2) Policies and practices reflect how an organization facilitates continuity in existing relationships and supports building new relationships using community resources.</p> <p>(4) Facilitation of natural supports includes promoting visits to the homes of families and friends and visits of families and friends to people's homes...</p> <p>(10) The organization ...has clearly identified expectations related to visits or other interactions with natural supports based on the desires of the</p>			

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
INTELLECTUAL DISABILITIES WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					person being supported and provides private space for visits and interaction with natural supports.			
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.09 Safe Environments	X			(12) The organization maintains the appearance of the home, inside and out, consistent with that of other homes in the neighborhood.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.11 Positive Services and Supports	X			(9) At a minimum, the following areas are addressed and documented in the functional assessment: (a) Personal preferences. (e) Vocational needs. (15) Goals promote being present and participating in community life, gaining and maintaining satisfying relationships, expressing preferences and making choices in everyday life, having opportunities to fulfill respected roles and to live with dignity and continuing development of personal competencies.	None required	NA	NA

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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					(18) At least weekly community integration activities are documented as offered			
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.02 Definitions	X			(7) Supported Employment Services at an Integrated Worksite... includes supporting individuals at a worksite where other workers do not have disabilities... The principles of Supported Employment at an Integrated Worksite are: <i>[not listed here due to the length, but includes the concepts of Employment First, addressing work for all adults of working age, work as a normal expectation of adults in our society, no one being excluded who wants to participate, choices and decisions about work receiving deference].</i>	None required	NA	NA
	Title 38: Public Welfare – Section 38-9C-4 - Rights	X			(4) The right to live, work, be educated, and recreate with people who do not have disabilities.	None required	NA	NA

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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.11 Positive Services and Supports	X			(15) Goals promote being present and participating in community life, gaining and maintaining satisfying relationships, expressing preferences and making choices in daily life, having opportunities to fulfill respected roles and to live with dignity and continuing development of personal competence.	None required	NA	NA
	Title 38: Public Welfare – Section 38-9C-4 - Rights	X			(17) The right to make decisions that affect their lives.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.04 Promotion and Protection of Individual Rights	X			(7) The rights assessment... includes, but is not limited to the ability to do the following: (a) Manage money. (f) Access personal possessions.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.12 Continuity and	X			(10) Accounting and fiscal practices do not restrict personal access to funds or monies that belong to people receiving services.	None required	NA	NA

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INTELLECTUAL DISABILITIES WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	Personal Security							
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.15 Case Management Standards	X			(3) The core elements of case management performed by the assigned case manager includes a Needs Assessment including (9) Resource analysis and planning to include: (ii) Maintaining accountability to the individual for his funds, as applicable.	None required	NA	NA
	Title 38: Public Welfare – Section 38-9C-4 - Rights	X			(10) The right to own and possess real and personal property.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-3-25-.07 Client Funds	X			Each entity shall have a written plan/policy regarding the management of client’s personal funds which requires, at a minimum, the following. (1) Clients shall manage their personal fund account unless there is a payee, guardian or similar appointee who manages the account for them. (2) Each entity that manages a client’s funds	None required	NA	NA

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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
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					shall have on record the appropriate written consent to manage that client's personal funds. (3) Clients/guardians shall be informed of the process whereby the client may access his/her personal funds.			
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.12 Continuity and Personal Security	X			(14) Food is nutritious and will be available in quantity and variety to meet individual dietary needs and preferences.	None required	NA	NA
	Assessment Tool for Basic Assurance, 2012	X			Tool used for licensing and certification includes probes related to preferred work and activities, practices to help people make choices based on preferences and to assist people to achieve goals, whether activity and work options available are age appropriate and culturally normative and options promote a positive self-image and whether work is	None required	NA	NA

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INTELLECTUAL DISABILITIES WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					compensated at a fair wage.			
	Provider Certification and Guidance Manual, Revised June 2014	X			The Manual describes the process for certification of Community Providers and contains guidance in interpreting and gathering information for thirteen factors and related indicators. It addresses full access of individuals receiving waiver services 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.	None required	NA	NA
	Home And Community Based Settings Check List	X			Tool used for provider self-assessment includes probes based on CMS exploratory questions for this requirement	None required	NA	NA
	Long Term Care Waiver Quality			X	The mission statement of the Long Term Care Waiver	Amend the Long Term Care Waiver	Draft revisions to Waiver Quality Assurance	6/30/16

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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	Assurance Manual				Quality Assurance Manual is to assure participants receive quality care in the home and community setting, but does not fully define “home and community-based setting” in keeping with this requirement of Final Rule or include specific quality assurance activities to assure compliance.	Quality Assurance Manual to fully define “home and community-based setting” and include quality assurance strategies, including but not limited to revision of Medicaid Waiver Survey for participants, to ensure compliance with this requirement.	Manual	
							Administrative review and approval	8/30/16
							Publish and implement revised Waiver Quality Assurance Manual	10/1/16
	Medicaid Waiver Survey for Participants			X	Survey questions do not address/probe compliance with this element	Revise Survey to include questions/probes that address compliance with this element.	Draft revisions to Survey	6/30/16
							OA and Administrative review and approval	8/30/16
							Implement revised Survey	10/1/16
2. 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	AL Home and Community-Based Waiver for Persons with Intellectual Disabilities 0001.R07.00			X	Residence selection is discussed only in the context of provider responsibilities. There is no discussion of residence selection being based upon the preferences of the individual.	Amend waiver to revise Residential Habilitation definition.	Submit waiver amendment	12/31/16
							Obtain approval of waiver renewal	3/31/17
							Implement revised procedures per approved renewal	4/1/17

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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
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are based on the individual's needs, preferences, and, for residential settings, resources available for room and board.	Appendix C1/C3 Residential Habilitation							
	Alabama Administrative Code Chapter 58, Rule No. 580-5-33.11 Positive Services and Supports POM Data Case Management			X	Alabama Administrative Code 580-5-33 is based on the Basic Assurances of the Council on Quality Leadership Personal Outcome Measures and affirms the right of individuals to make decisions that affect their lives. It does not specifically address the element of this requirement.	Revise Alabama Administrative Code Chapter 58 to include language specific to the process for ensuring individuals are aware of all setting options, including non-disability specific settings and an option for a private unit in a residential setting, and that these will be identified and documented in the person centered service plan.	Draft revisions to rule	9/30/16
							Publish rule for public comment	12/31/16
							Publish final rule	3/31/17
	Assessment Tool for Basic Assurance, 2012			X	Tool used for licensing and certification includes probes related to housing preferences, but does not have probes that address the process for ensuring individuals are aware of all	Revise tool to include probes related to this requirement.	Draft revisions to Assessment Tool for Basic Assurances	6/30/16
							Provide training to all involved stakeholders	9/30/16
							Implement changes	10/1/16

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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					setting options, including non-disability specific settings and an option for a private unit in a residential setting, and that these will be identified and documented in the person centered service plan.			
	Provider Certification and Guidance Manual, Revised June 2014	X			The Manual describes the process for certification of Community Providers and contains guidance in interpreting and gathering information for thirteen factors and related indicators. It addresses the selection of the setting by the individual from among setting options including non-disability specific settings.	None required	NA	NA
	Home And Community Based Settings Check List	X			Tool used for provider self-assessment includes probes based on CMS exploratory questions for this requirement	None required	NA	NA
3. Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.	AL Home and Community-Based Waiver for Persons with Intellectual	X			Appendix G-2 describes the requirements for implementing, monitoring and documenting use of restraints and certain	None required	NA	NA

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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
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	Disabilities 0001.R07.00 Appendix G-2				restrictive interventions that are permitted during the course of the delivery of waiver services, including due process protections, staff training requirements, reporting procedures. The DDD Regional Community Services offices review any instances of unauthorized use of restraint or restrictive interventions and follows up on the investigation, adding recommendations when necessary to prevent further occurrence. Additionally, at any time that Regional Office staff are conducting their usual monitoring of providers and they witness or become aware that any restraint has been used without authorization, it is reported and investigated. Finally, certification staff routinely reviews the use of any restrictive procedure during surveys to ensure			

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					appropriateness and adequate due process. Seclusion is not permitted; DDD, in its function of certifying providers and in its monitoring of direct service provision and service plan implementation, will detect any unauthorized use of any restrictive interventions.			
	AMA Administrative Code Ch. 52, Rule No. 560-X-35-.12, Confidentiality.	X			Providers shall not use or disclose, except to duly authorized representatives of federal or state agencies, any information concerning an eligible recipient except upon the written consent of the recipient, his/her attorney, or his/her guardian, or upon subpoena from a court of appropriate jurisdiction.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.04 Promotion and	X			(7) The rights assessment addresses people’s civil and legal rights and personal freedoms. The assessment includes, but is not limited to the ability to do the following:	None required	NA	NA

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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
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	Protection of Individual Rights				(a) Send and receive mail. (b) Make and receive telephone calls and use other means of communication.			
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.03 Policies and Procedures	X			(3) Policies and procedures address, at a minimum, the following areas: (b) Dignity and Respect. (12) Organizational practices enhance dignity and respect while recognizing individual choices and preferences and include supports: (a) To ensure healthy hygiene and personal cleanliness. (b) To choose clothing that fits appropriately. (12) Organizational practices enhance dignity and respect while recognizing individual choices and preferences and include supports. (13) ... Options for people shall be age and culturally appropriate, normative and promote a positive self-image.	None required	NA	NA

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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					<p>(16) The organization maintains a cumulative record of information and documentation of services and supports needed by and provided to people. The organization ensures that all information in a person’s record, including financial and health information, is kept confidential, and in accordance with HIPAA regulations and other state and federal laws. Only those directly involved in a person’s care, authorized administrative review or in the monitoring of services have access to records.</p> <p>(17) The organization is responsible for the safekeeping of each person’s records and for securing it against loss, destruction, or use by unauthorized persons.</p> <p>(18) Personal information includes only information needed to provide supports and services to people.</p>			

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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.05 Dignity and Respect	X			(1) The organization’s policies and procedures reflect and reinforce the use of courteous practices towards people, the avoidance of labels to describe people based on physical characteristics or disabilities and the practice of addressing people by their preferred names (4) The organization has a mechanism that provides people supported and their legally authorized representatives with information regarding filing complaints and grievances. (6) Grievance procedure information is available in frequently used areas, particularly where people receive services. Such notices include the 800 numbers of the DMH Advocacy Office, federal protection and advocacy system (ADAP) and local Department of Human Resources.	None required	NA	NA

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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
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					<p>(7) The organization provides access to persons and advocates, including a DMH internal advocate and the grievance process without reprisal.</p> <p>(10) The organization provides space for people to speak or interact with others in private and to open and read mail or other materials.</p> <p>(11) The organization affords every person the right to privacy. Staff demonstrates respect for people’s privacy when providing supports for personal hygiene, bathing, or dressing as well as when entering personal spaces.</p>			
	Title 38: Public Welfare – Section 38-9C-4 - Rights	X			<p>(5) The right to be presumed competent until a court of competent jurisdiction determines otherwise.</p> <p>(9) The right to confidential handling of personal, financial, and medical records.</p>	None required	NA	NA

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INTELLECTUAL DISABILITIES WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					(11) The right to privacy and dignity. (12) The right to reasonable access to and privacy of mail, telephone, communications, and visitors. (20) The right to be accorded human respect and dignity on an individual basis in a consistently humane fashion.			
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-07 Protection from Abuse, Neglect, Mistreatment and Exploitation	X			(5) There is a complaint process that is understandable and easy to use and people are supported to report allegations of abuse, neglect, mistreatment and exploitation.	None required	NA	NA
	Title 38: Public Welfare – Section 38-9C-4 - Rights	X			(25) The right to be informed specifically of the procedures for initiating a complaint or grievance procedure and the applicable appeals process, including the means of requesting a hearing or review of the complaint.	None required	NA	NA

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INTELLECTUAL DISABILITIES WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
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					(26) The right to be informed of the means for accessing advocates, ombudsmen, or rights protection services within the program and, as applicable, the State of Alabama Mental Health System, the Department of Human Resources, the federal advocacy system, and other advocacy services. Such access must be allowed without fear of reprisal.			
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.04 Promotion And Protection Of Individual Rights	X			(13) Written, informed consent is obtained prior to any intrusive medical or behavioral intervention, and prior to participation in research. Information regarding procedures to be followed, potential discomforts and/or risks, and expected benefits of participation shall be presented in a non-threatening environment, and explained in language that the person can understand. The person is	None required	NA	NA

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					also informed that he/she may withhold or withdraw consent at any time.			
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.04 Promotion And Protection Of Individual Rights	X			(30) The HRC reviews the frequencies and reasons surrounding the use of restraint for behavioral or medical purposes.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.10 Staff Resources And Supports	X			(18)(d) Employees who provide direct supports to people receive annual refresher training in management of aggressive behavior.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.10 Staff Resources And Supports	X			(25) Behavior Support Plans are developed based on information gathered through a functional behavioral assessment that is completed by a qualified professional and identifies physical or environmental issues that need to be addressed to reduce, replace or eliminate the behavior. The Behavior	None required	NA	NA

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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
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					Support Plan outlines the specific behavioral supports that may and may not be used.			
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.10 Staff Resources And Supports	X			(26) All direct support staff receive training in behavioral techniques and plans prior to implementation of support(s) to people.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.10 Staff Resources And Supports	X			(27) Data related to the effectiveness of an individual's Behavior Support Plan is reviewed periodically, but at least quarterly, or more often as required by the individual's needs.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.10 Staff Resources And Supports	X			(29) All behavior support plans are approved by the person's Support Team. Each Behavior Support Plan with Level 2 or 3 procedures is reviewed and/or approved by the Behavior Program Review Committee, the Human Rights Committee and the person or the person's legally authorized	None required	NA	NA

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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
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					<p>representative in accordance with DDD PBS 02 Guidelines for Levels of Intervention.</p> <p>(a) The use of emergency or unplanned behavior interventions that are highly intrusive are in compliance with DDD PBS 02 Level 3 Procedures and are not used more than three (3) times in a six (6) month period without a Support Team meeting to determine needed changes in the person’s behavior support plan.</p> <p>(b) If people require behavioral or medical supports to prevent harm to themselves or others, such supports are provided in accordance with DDD Behavioral Services Procedural Guidelines (DDD-PBS 01 –05).</p> <p>(c) The use of any restraint complies with the provisions of DDD PBS 02 Level 3 Procedures and is applied only by staff with</p>			

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					<p>demonstrated competency for the device or procedure used.</p> <p>(d) The organization ensures that people are not subjected to highly intrusive behavior interventions or punishment for the convenience of staff, or in lieu of a Behavior Support Plan.</p> <p>(e) The organization prohibits the use of corporal punishment, seclusion, noxious or aversive stimuli forced exercise, or denial of food or liquids that are part of a person’s nutritionally adequate diet.</p> <p>(f) Behavior procedures considered the most restrictive comply with the Level 4 Provisions of DDD PBS 02. Requests for the use of Level 4 Procedures are sent to the Director of Psychological and Behavioral Services for the Division of Developmental</p>			

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					Disabilities after reviews have been completed by the Behavior Program Review Committee (BPRC), Human Rights Committee (HRC) and the legally authorized representative. The Director of Psychological and Behavioral Services determines the frequency of further review. (g) The only exception to the above approval requirement is Emergency Mechanical Restraint, which has an IPMS documentation requirement and a limit regarding number of times it can be used.			
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.10 Staff Resources And Supports	X			(31) PRN orders for psychotropic medications are administered in accordance with the Nurse Delegation Program and the Behavioral Services Procedural Guidelines.	None required	NA	NA
	Alabama Administrative	X			(32) A person's Support Team meets to assess and address behavioral and	None required	NA	NA

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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	Code, Chapter 58, Rule No. 580-5-33-.10 Staff Resources And Supports				psychiatric needs when PRN medications are used as an Emergency Procedure three (3) times within a six (6) month period.			
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.11 Positive Services And Supports	X			(29)(c) The use of any restraint complies with the provisions of DDD PBS 02 Level 3 Procedures and is applied only by staff with demonstrated competency for the device or procedure used.  (29f) Behavior procedures considered the most restrictive comply with the Level 4 Provisions of DDD PBS 02. Requests for the use of Level 4 Procedures are sent to the Director of Psychological and Behavioral Services for the Division of Developmental Disabilities after reviews have been completed by the Behavior Program Review Committee (BPRC), Human Rights Committee (HRC) and the legally authorized representative. The Director of	None required	NA	NA

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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					Psychological and Behavioral Services determines the frequency of further review. (29g) The only exception to the above approval requirement is Emergency Mechanical Restraint, which has an IPMS documentation requirement and a limit regarding number of times it can be used.			
	Behavioral Services Procedural Guidelines, 2014 Update	X			Guidelines prescribe protections and due process for restrictive interventions at varying levels. Also provides guidelines for Behavior Support Plans.	None required	NA	NA
	Assessment Tool for Basic Assurance, 2012	X			Tool used for licensing and certification includes probes related individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.	None required	NA	NA
	Provider Certification and Guidance Manual, Revised June 2014			X	The Manual describes the process for certification of Community Providers and contains guidance in interpreting and gathering	Revise Manual to address certification processes, factors and indicators specific to this	Draft revisions to Assessment Tool for Basic Assurances Provide training to all involved stakeholders	6/30/16 9/30/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
INTELLECTUAL DISABILITIES WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					information for thirteen factors and related indicators. It comprehensively addresses individual's rights of privacy, dignity and respect, and freedom from coercion. Restraint and restrictive interventions are probed only in the context of mental health or behavior supports an individual receives to help achieve goals, but there are no probes regarding unauthorized use.	requirement	Implement changes	10/1/16
	Home And Community Based Settings Check List	X			Tool used for provider self-assessment includes probes based on CMS exploratory questions for this requirement	None required	NA	NA
	Medicaid Waiver Survey for Participants			X	Includes questions/probes regarding being treated with dignity and respect, but may need revisions to probe freedom from coercion and restraint.	Consider revisions to probe for freedom from coercion and restraint.	Draft proposed revisions to Survey	6/30/16
							OA and Administrative review and approval	8/30/16
							Implement revised Survey	10/1/16
4. Optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but	AL Home and Community-Based Waiver for Persons with	X			Each participant has a person-centered plan based on a history and profile of the individual and family.	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
INTELLECTUAL DISABILITIES WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
not limited to, daily activities, physical environment, and with whom to interact.	Intellectual Disabilities 0001.R07.00				The planning meeting itself also produces an extensive profile and identifies wants and needs, the resources and supports currently available, and those needed, to meet the wants and needs. These include but are not limited to: Housing, Safety, Supervision, Communication, Mobility, Family and Friends, Recreation and Leisure, Health and Medical Care, Transportation, Education and Training, Employment or Day Activities, Daily Living, Finances and Money Management, and Emotional or Behavioral Needs. Profiles also cover what and who is important to the individual, what are the individual's daily routines and what choices does he or she get to make, what works and doesn't work for the individual, and what does the team need			

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					to know and do to support the individual.			
	AMA Admin. Code, Chapter 52, Rule No. 560-X-35-.04. Covered Services	X			Covered services promote client independence, community access and integration and provide opportunity for integrated work.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.11 Positive Services and Supports	X			(6) Each person and, with the person’s permission, his/her family members or significant other, are invited to actively participate in person-centered planning, including discharge and transition planning. Information is presented to the person in language and terms appropriate for the person to understand. (15) Goals promote being present and participating in community life, gaining and maintaining satisfying relationships, expressing preferences and making choices in daily life, having opportunities to fulfill respected roles and to live with dignity and continuing	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					development of personal competence.			
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.04 Promotion and Protection of Individual Rights	X			(7) The rights assessment addresses people’s civil and legal rights and personal freedoms. The assessment includes, but is not limited to the ability to do the following: (a) Exercise freedom of movement within physical environments. (16) No person is presumed incompetent or denied the right to manage his/her personal affairs or exercise all other rights guaranteed persons of society solely by reason of his/her having received support services, unless legally determined otherwise.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.08 Best Possible Health	X			(2) People are supported to make their own health care appointments and choices regarding their medical care as needed.	None required	NA	NA
	Alabama Administrative	X			(1) ...the organization provides training to staff on	None required	NA	NA

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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	Code, Chapter 58, Rule No. 580-5-33-.14 Personal Care Companion, Respite, Crisis Intervention Services and Supported Employment at an Integrated Work Site				the services to be provided and how the person wants to be supported. This training includes: (b) Information about the specific conditions and required supports of the person to be served, including ...his/her support needs and preferences related to that support.			
	Assessment Tool for Basic Assurance, 2012	X			Tool used for licensing and certification includes probes related to , individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact.	None required	NA	NA
	Provider Certification and Guidance Manual, Revised June 2014	X			The Manual describes the process for certification of Community Providers and contains guidance in interpreting and gathering information for thirteen factors and related indicators. It addresses individual initiative,	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact.			
	Home And Community Based Settings Check List	X			Tool used for provider self-assessment includes probes based on CMS exploratory questions for this requirement.	None required	NA	NA
5. Facilitates individual choice regarding services and supports, and who provides them.	AL Home and Community-Based Waiver for Persons with Intellectual Disabilities 0001.R07.00	X			An individual coming into services is provided information about services and supports by the 310/case management entity. Once there is a determination of needs from the person centered planning process, information is provided to the individual and/or family regarding providers in their respective area. Visits are arranged, upon request, to the various service provider's sites to give individuals an opportunity to make an informed decision. The individual and family verify their choice(s)	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					of provider(s) by signing a document that lists choices. Information is again provided with an opportunity to exercise choice at the individual's annual review meeting. A Dissatisfaction of Services form is presented to each waiver participant and his/her family/representative as part of the planning process. If the individual decides that he /she wants to change current services at any other time, a special team meeting is convened to address concerns and ensure information is provided about other available services and supports.			
	AMA Administrative Code, Chapter 52, Rule No. 560-X-35-.01. Authority and Purpose			X	Does not address individual choice regarding services and supports, and who provides them.	Revise rule to integrate requirements regarding individual choice regarding services and supports, and who provides them.	Draft revisions to rule Publish rule for public comment Publish final rule	9/30/16 12/1/16 2/1/17

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
INTELLECTUAL DISABILITIES WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.08 Best Possible Health	X			(1) People are given the opportunity to choose health care providers.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-30-.12 Program Enrollment/Participation in DMH Medicaid Waiver Programs	X			(6) All individuals, along with their family or guardian, served under either of the two Waivers must be given free choice among qualified providers as to who is going to provide each waiver service.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-30-.14 Free Choice of Providers Within DMH Medicaid Waiver Programs.	X			The Division of Developmental Disabilities shall assure that each individual and their family/guardian are given a free choice of individuals or entities from which to receive services. Free choice of provider is an essential right of individuals and their families as required by federal Medicaid regulations and is	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
INTELLECTUAL DISABILITIES WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					upheld by the case management agency. (1) The designated case management agency ...shall ensure that individuals and their family are provided with adequate information about all providers of services from which to base their choice(s), and that their choice is unhindered by coercion or manipulation arising from conflict of interest.			
	Assessment Tool for Basic Assurance, 2012			X	Tool used for licensing and certification does not include specific probes related to individual choice regarding services and supports, and who provides them.	Revise tool to include probes specific to this requirement	Draft revisions to Assessment Tool for Basic Assurances Provide training to all involved stakeholders Implement changes	6/30/16 9/30/16 10/1/16
	Provider Certification and Guidance Manual, Revised June 2014	X			The Manual describes the process for certification of Community Providers and contains guidance in interpreting and gathering information for thirteen factors and related indicators. It addresses the facilitation of individual choice regarding services	None required	NA	NA

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INTELLECTUAL DISABILITIES WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					and supports, and who provides them.			
	Home And Community Based Settings Check List	X			Tool used for provider self-assessment includes probes based on CMS exploratory questions for this requirement	None required	NA	NA
	Medicaid Waiver Survey for Participants	X			Includes questions/probes regarding choice of providers.	None required	NA	NA
6. In a provider-owned or controlled residential setting, in addition to the qualities specified above, the following additional conditions must be met:	AL Home and Community-Based Waiver for Persons with Intellectual Disabilities 0001.R07.00 Appendix C1/C3			X	The following components are not addressed in the Residential Habilitation Service definition: There is a legally enforceable agreement for the unit or dwelling where the individual resides; Individuals are protected from eviction and afforded appeal rights in the same manner as all persons in the State who are not receiving Medicaid HCBS; Does not discuss lockable doors and privacy.	Amend waiver to revise Residential Habilitation definition to address the additional conditions that must be met in a provider-owned or controlled residential setting	Submit waiver amendment	12/31/16
							Obtain approval of waiver renewal	3/31/17
							Implement revised procedures per approved renewal	4/1/17
	Medicaid Waiver Survey for Participants			X	Does not include probes related to any aspects of this requirement	Revision to add probes related to this requirement	Draft proposed revisions to Survey OA and Administrative review and approval	6/30/16 8/30/16

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INTELLECTUAL DISABILITIES WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
							Implement revised Survey	10/1/16
<p>a. The Unit or dwelling is a specific physical place that can be owned, rented, or occupied under a legally enforceable agreement by the individual receiving services...</p> <p>Individuals are protected from eviction and afforded appeal rights in the same manner as all persons in the State who are not receiving Medicaid HCBS.</p>	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.15 Case Management Standards			X	(3) The core elements of case management performed by the assigned case manager include 1. Prior to a person being discharged from a service, a transition plan and/or discharge plan as applicable is completed which includes a summary of services utilized, the reason for the discharge/transition and future supports which will be needed, if any. The case manager attends the transition plan meeting or follow up to see that a transition and/or discharge plan is completed. Does not specifically state dwelling is to be owned, rented, or occupied under a legally enforceable agreement by the individual receiving services, or that Individuals are protected from eviction and afforded appeal rights in the same manner as all	Revise Alabama Administrative Code, Chapter 58 to add language regarding requirement for legally enforceable agreements and protections related to eviction and appeals.	Draft revisions to rule	Completed
							Publish rule for public comment	Completed
							Publish final rule	12/31/16

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INTELLECTUAL DISABILITIES WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					persons in the State who are not receiving Medicaid HCBS.			
	Assessment Tool for Basic Assurance, 2012			X	Tool used for licensing and certification does not include related probes	Revise tool to include probes specific to this requirement	Draft revisions to Assessment Tool for Basic Assurances	6/30/16
							Provide training to all involved stakeholders	9/30/16
							Implement changes	10/1/16
	Provider Certification and Guidance Manual, Revised June 2014			X	The Manual describes the process for certification of Community Providers and contains guidance in interpreting and gathering information for thirteen factors and related indicators. It does not address this requirement.	Revise Manual to address certification processes, factors and indicators specific to this requirement	Draft revisions to Assessment Tool for Basic Assurances	6/30/16
							Provide training to all involved stakeholders	9/30/16
							Implement changes	10/1/16
	Home And Community Based Settings Check List	X			Tool used for provider self-assessment includes probes based on CMS exploratory questions for this requirement	None required	NA	NA
b. Each individual has privacy in their sleeping or living unit: Units have entrance doors lockable by the individual	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.05 Dignity and Respect			X	(11) The organization affords every person the right to privacy. Staff demonstrates respect for people’s privacy when providing supports for personal hygiene, bathing,	Revise Alabama Administrative Code, Chapter 58 to ensure individuals have privacy in their sleeping or living unit and that units have entrance	Draft revisions to rule	Completed
							Publish rule for public comment	Completed
							Publish final rule	12/31/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
INTELLECTUAL DISABILITIES WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					or dressing as well as when entering personal spaces. (12) Organizational practices enhance dignity and respect while recognizing individual choices and preferences; (c) To decorate personal space based on choice while maintaining an environment that is safe and sanitary. Does not fully address lockable entrance doors or privacy issues related to video/electronic device surveillance.	doors lockable by the individual		
	Assessment Tool for Basic Assurance, 2012			X	Tool used for licensing and certification does not include related probes	Revise tool to include probes specific to this requirement	Draft revisions to Assessment Tool for Basic Assurances Provide training to all involved stakeholders Implement changes	6/30/16 9/30/16 10/1/16
	Provider Certification and Guidance Manual, Revised June 2014			X	The Manual describes the process for certification of Community Providers and contains guidance in interpreting and gathering information for thirteen factors and related	Revise Manual to address certification processes, factors and indicators specific to this requirement	Draft revisions to Assessment Tool for Basic Assurances Provide training to all involved stakeholders Implement changes	6/30/16 9/30/16 10/1/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
INTELLECTUAL DISABILITIES WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					indicators. It does not address this requirement.			
	Home And Community Based Settings Check List	X			Tool used for provider self-assessment includes probes based on CMS exploratory questions for this requirement	None required	NA	NA
	Title 38: Public Welfare – Section 38-9C-4 - Rights	X			(20) The right to be accorded human respect and dignity on an individual basis in a consistently humane fashion.	None required	NA	NA
c. Each individual has privacy in their sleeping or living unit. Is the furniture arranged as individuals prefer and does the arrangement assure privacy and comfort?	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.05 Dignity and Respect	X			(11) The organization affords every person the right to privacy. Staff demonstrates respect for people’s privacy when providing supports for personal hygiene, bathing, or dressing as well as when entering personal spaces. (12) Organizational practices enhance dignity and respect while recognizing individual choices and preferences.	None required	NA	NA
	Assessment Tool for Basic Assurance, 2012	X			Tool used for licensing and certification does not include related probes	Revise tool to include probes specific to this requirement	Draft revisions to Assessment Tool for Basic Assurances Provide training to all involved stakeholders	6/30/16 9/30/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
INTELLECTUAL DISABILITIES WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
							Implement changes	10/1/16
	Provider Certification and Guidance Manual, Revised June 2014			X	The Manual describes the process for certification of Community Providers and contains guidance in interpreting and gathering information for thirteen factors and related indicators. It does not address this requirement.	Revise Manual to address certification processes, factors and indicators specific to this requirement	Draft revisions to Assessment Tool for Basic Assurances	6/30/16
							Provide training to all involved stakeholders	9/30/16
							Implement changes	10/1/16
	Home And Community Based Settings Check List	X			Tool used for provider self-assessment includes probes based on CMS exploratory questions for this requirement	None required	NA	NA
	Title 38: Public Welfare – Section 38-9C-4 - Rights	X			(20) The right to be accorded human respect and dignity on an individual basis in a consistently humane fashion.	None required	NA	NA
d. Each individual has privacy in their sleeping or living unit: Individuals have the freedom to furnish and decorate their sleeping or living units...	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.05 Dignity and Respect	X			(12) Organizational practices enhance dignity and respect while recognizing individual choices and preferences and include supports: (c) To decorate personal space based on choice while maintaining an environment that is safe and sanitary.	None required	NA	NA

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
INTELLECTUAL DISABILITIES WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	Assessment Tool for Basic Assurance, 2012	X			Tool used for licensing and certification includes probes related to the freedom to furnish and decorate their sleeping or living units.	None required	NA	NA
	Provider Certification and Guidance Manual, Revised June 2014			X	The Manual describes the process for certification of Community Providers and contains guidance in interpreting and gathering information for thirteen factors and related indicators. It does not address this requirement.	Revise Manual to address certification processes, factors and indicators specific to this requirement	Draft revisions to Assessment Tool for Basic Assurances	6/30/16
							Provide training to all involved stakeholders	9/30/16
							Implement changes	10/1/16
	Home And Community Based Settings Check List	X			Tool used for provider self-assessment includes probes based on CMS exploratory questions for this requirement	None required	NA	NA
e. The setting is physically accessible...	Life Safety Minimum Standards for Physical Facilities— Alabama Administrative Code, Chapter 58, Rule No. 580-3-22	X			Facilities must comply with ADA requirements for total access to and inside the facility.	None required	NA	NA

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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.08 Best Possible Health	X			(11) ...People have therapeutic and adaptive equipment that fits them and is in good repair.	None required	NA	NA
	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.15 Case Management Standards	X			(2) The goal of service arrangement is to: (ii) Assist persons in accessing supports, for example ...coordinating transportation as needed for the persons served.	None required	NA	NA
	Home And Community Based Settings Check List	X			Tool used for provider self-assessment includes probes based on CMS exploratory questions for this requirement	None required	NA	NA
f. Any modification of the additional conditions, under paragraphs (a)(1)(vi) A-D must be supported by a specific assessed need and justified in the person centered service plan.....	Alabama Administrative Code, Chapter 58, Rule No. 580-5-33-.11 Positive Services and Supports	X			(16) If formal individual supports are needed/identified for people to carry out daily routines and obtain other desired outcomes, then each learning opportunity has a strategy for implementation that specifies who is responsible, when, where	None required	NA	NA

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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					<p>and how the opportunity is to be carried out, frequency of implementation and methods of data collection to assess achievement.</p> <p>(20) The organization has a system to monitor the implementation of person centered plans which includes direct observation. Reliable evidence or information is recorded and reflects progress towards objectives and achieving desired outcomes.</p> <p>(21) Each learning, participation, or service opportunity is assessed for progress/achievement. The effectiveness of the implementation of each person centered plan is reviewed and that review documented at least every ninety (90) days in accordance with funding source requirements.</p> <p>(22) Revisions/changes in the person-centered plan are made if the person is not benefiting from</p>			

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					identified opportunities or as requested by the person. (23) Objectives and strategies are developed to address behaviors that interfere with the achievement of personal goals or the exercise of individual rights using the least intrusive interventions necessary and the most positively supporting interventions available.			
	Assessment Tool for Basic Assurance, 2012			X	Tool used for licensing and certification does not include related probes	Revise tool to include probes specific to this requirement	Draft revisions to Assessment Tool for Basic Assurances Provide training to all involved stakeholders Implement changes	6/30/16 9/30/16 10/1/16
	Provider Certification and Guidance Manual, Revised June 2014			X	The Manual describes the process for certification of Community Providers and contains guidance in interpreting and gathering information for thirteen factors and related indicators. It does not specifically address this requirement.	Revise Manual to address certification processes, factors and indicators specific to this requirement	Draft revisions to Assessment Tool for Basic Assurances Provide training to all involved stakeholders Implement changes	6/30/16 9/30/16 10/1/16

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	Home And Community Based Settings Check List	X			Tool used for provider self-assessment includes probes based on CMS exploratory questions for this requirement	None required	NA	NA
f. Individuals are able to have visitors of their choosing at any time.	Alabama Administrative Code 580-5-33-.04.7(e) Promotion and Protection of Individual Rights			X	Provides that individuals may visit and be visited by whomever they choose, but does not address right to have such visitors at any time. (6) The right to social interaction with members of either sex (No time restraints noted)	Addition of clear and concise language that supports setting rule.	Draft revisions to rule	9/30/16
							Publish rule for public comment	12/31/16
							Publish final rule	3/31/17
	Assessment Tool for Basic Assurance, 2012	X			Tool used for licensing and certification includes probes related to promoting visits of family and friends to individual's home	None required	NA	NA
Provider Certification and Guidance Manual, Revised June 2014	X			The Manual describes the process for certification of Community Providers and contains guidance in interpreting and gathering information for thirteen factors and related indicators. It addresses this requirement	None required	NA	NA	

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Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
	Home And Community Based Settings Check Lis	X			Tool used for provider self-assessment includes probes based on CMS exploratory questions for this requirement	None required	NA	NA
7. HCBS settings exclude locations that have the qualities of an institutional setting. For 1915(c) home and community-based waivers, settings that are not home and community-based are defined at §441.301(c)(5) as follows: a. A nursing facility; b. An institution for mental diseases; c. An intermediate care facility for individuals with intellectual disabilities; d. A hospital; or e. Any other locations that have qualities of an institutional setting, as determined by the Secretary. For 1915(c) home and community-based waivers, section 441.301(c)(5)(v) specifies that the following settings are presumed to have the qualities of an institution: a. Any setting that is located in a building that is also a publicly or privately operated facility that	AL Home and Community-Based Waiver for Persons with Intellectual Disabilities 0001.R07.00			X	Does not fully address this requirement as it relates to settings that have the qualities of an institution or are presumed to have qualities of an institution. Does not address process for identifying settings that may be subject to heightened scrutiny or process for implementing heightened scrutiny.	Amend Appendix C-5 and other appropriate sections of the waiver after the Statewide Transition Plan has been approved to reflect requirements regarding settings that are presumed institutional	Submission of Settings Assessment for Statewide Transition Plan	3/31/16
							Approval of Statewide Transition Plan Settings Assessment	6/30/16
							Waiver amendment submission to reflect approved Statewide Transition Plan	12/31/16
	AMA Administrative Code, Chapter 35, Rule No. 560-X-35			X	Rule does not address exclusion of institutional or presumed-institutional settings or process for identification and scrutiny of such settings.	Revise rule to explicitly define all excluded settings as defined in Final Settings Rule.	Draft revisions to rule	9/30/16
							Publish rule for public comment	12/31/16
							Publish final rule	3/31/17
	Assessment Tool for Basic Assurance, 2012			X	Tool used for licensing and certification does not include probes related to settings that may be presumed to be institutional.	Revise tool to include probes specific to this requirement	Draft revisions to Assessment Tool for Basic Assurances	6/30/16
							Provide training to all involved stakeholders	9/30/16
							Implement changes	10/1/16
Provider			X	The Manual describes the	Revise Manual to	Draft revisions to	6/30/16	

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INTELLECTUAL DISABILITIES WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
provides inpatient institutional treatment, b. Any setting that is located in a building on the grounds of, or immediately adjacent to, a public institution, or c. Any other setting that has the effect of isolating individuals receiving Medicaid HCBS from the broader community of individuals not receiving Medicaid HCBS.	Certification and Guidance Manual, Revised June 2014				process for certification of Community Providers and contains guidance in interpreting and gathering information for thirteen factors and related indicators, but does not address the exclusion of institutional or presumed-institutional settings or process for identification and scrutiny of such settings.	address certification processes, factors and indicators specific to this requirement	Assessment Tool for Basic Assurances	
							Provide training to all involved stakeholders	9/30/16
							Implement changes	10/1/16
	Home And Community Based Settings Check List	X			Tool used for provider self-assessment includes probes based on CMS exploratory questions for this requirement	None required	NA	NA
	AMA January 2016 Provider Manual, Chapter 107.2.3, Limitations			X	States that Medicaid does not provide waiver services to recipients in a hospital or nursing facility.	Revise Provider Manual to explicitly define all excluded settings as defined in Final Settings Rule.	Draft revisions to Provider Manual	6/30/16
					Does not address exclusion of other institutional or presumed-institutional setting. Does not address process for identifying settings that may be subject to heightened scrutiny or process for		Administrative review and approval	8/30/16
							Publish revised Provider Manual	1/1/17

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INTELLECTUAL DISABILITIES WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					implementing heightened scrutiny			
	Long Term Care Waiver Quality Assurance Manual			X	The mission statement of the Long Term Care Waiver Quality Assurance Manual is to assure participants receive quality care in the home and community setting, but does not fully define “home and community-based setting” in keeping with this requirement of Final Rule or include specific quality assurance activities to assure compliance.	Amend the Long Term Care Waiver Quality Assurance Manual to fully define “home and community-based setting” and include quality assurance strategies, including but not limited to revision of Medicaid Waiver Survey for participants, to ensure compliance with this requirement.	Draft revisions to Waiver Quality Assurance Manual	6/30/16
							Administrative review and approval	8/30/16
								Publish and implement revised Waiver Quality Assurance Manual
	Long Term Care Waiver Quality Assurance Manual			X	The mission statement of the Long Term Care Waiver Quality Assurance Manual is to assure participants receive quality care in the home and community setting, but does not fully define “home and community-based setting” in keeping with this requirement of Final Rule or include specific quality assurance activities to	Amend the Long Term Care Waiver Quality Assurance Manual to fully define “home and community-based setting” and include quality assurance strategies, including but not limited to revision of Medicaid Waiver Survey for participants, to	Draft revisions to Waiver Quality Assurance Manual	6/30/16
							Administrative review and approval	8/30/16
								Publish and implement revised Waiver Quality Assurance Manual

**HCBS FINAL SETTINGS RULE WAIVER CROSSWALK  
INTELLECTUAL DISABILITIES WAIVER**

Requirement	Applicable Regulations, Standards or Statutes	Status			Basis	Remediation Required	Milestones	Timeline
		Compliance	Noncompliance	Silent				
					assure compliance.	ensure compliance with this requirement.		