

MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES

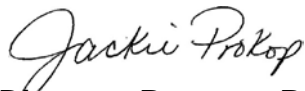
NOTICE OF PROPOSED POLICY

Public Act 280 of 1939, as amended, and consultation guidelines for Medicaid policy provide an opportunity to review proposed changes in Medicaid policies and procedures.

Please review the policy summary and the attached materials that describe the specific changes being proposed. Let us know why you support the change or oppose the change.

Submit your comments to the analyst by the due date specified. Your comments must be received by the due date to be considered for the final policy bulletin.

Thank you for participating in the consultation process.



Director, Program Policy Division  
Bureau of Medicaid Policy and Health System Innovation

**Project Number:** 1712-HCBS      **Comments Due:** August 30, 2017      **Proposed Effective Date:** October 1, 2017

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**Policy Subject:** Compliance with Federal Home and Community Based Services (HCBS) Final Rule by New Providers

**Affected Programs:** Habilitation Supports Waiver, Managed Specialty Services & Supports Waiver, MI Choice Waiver

**Distribution:** MI Choice Waiver Agencies, Prepaid Inpatient Health Plans

**Policy Summary:** This bulletin informs new HCBS providers and their provider network that effective October 1, 2017, they must be in immediate compliance with the federal HCBS Final Rule in order to render services to Medicaid beneficiaries.

**Purpose:** The purpose of this policy is to comply with the federal HCBS Final Rule deadline of March 17, 2022.

# Proposed Policy Draft

Michigan Department of Health and Human Services  
Medical Services Administration

**Distribution:** MI Choice Waiver Agencies, Prepaid Inpatient Health Plans

**Issued:** September 1, 2017 (Proposed)

**Subject:** Compliance with Federal Home and Community Based Services (HCBS) Final Rule by New Providers

**Effective:** October 1, 2017 (Proposed)

**Programs Affected:** Habilitation Supports Waiver, Managed Specialty Services & Supports Waiver, MI Choice Waiver

Effective October 1, 2017, any new HCBS provider and their provider network must be in immediate compliance with the federal HCBS Final Rule in order to render services to Medicaid beneficiaries. This policy does not apply to existing providers and their provider networks who render HCBS to Medicaid beneficiaries before the effective date of this policy. The Michigan Department of Health and Human Services (MDHHS) will continue to work with the existing providers towards coming into compliance with the federal HCBS Final Rule as specified in the State Transition Plan.

In order to comply with the federal HCBS Final Rule, new providers must:

- Ensure individual rights of privacy, dignity and respect, and freedom from coercion and restraint;
- Enhance independence;
- Enhance independence in making life choices;
- Enable choice regarding services and who provides them; and
- Ensure that the setting is integrated in and supports full access to the greater community.

New residential providers must demonstrate that services are delivered within a setting affording the beneficiary sufficient opportunity and choice to engage with the broader community by ensuring that the:

- Setting is selected by the individual from among setting options;
- Individual has a lease or other legally enforceable agreement providing similar protection;
- Individual has privacy in his/her unit including lockable doors;
- Individual has a choice of roommates (if applicable) and freedom to furnish or decorate the unit;

- Individual controls his/her own schedule, including access to food at any time;
- Individual can have visitors at any time; and
- Setting is physically accessible.

New non-residential providers must demonstrate that services are delivered within a setting affording the beneficiary sufficient opportunity and choice to engage with the broader community by ensuring that the setting:

- Does not isolate the individual from the broader community; and
- Is not institutional in nature or has the characteristics of an institution.