

DEPARTMENT OF DEVELOPMENTAL SERVICES

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DATE: May 20, 2022

TO: REGIONAL CENTER EXECUTIVE DIRECTORS

SUBJECT: HOME AND COMMUNITY-BASED SERVICES (HCBS) FINAL RULE:
PLANS FOR THE VALIDATION AND REMEDIATION OF SERVICE
PROVIDERS

Background

The federal Centers for Medicare and Medicaid Services (CMS) issued requirements referred to as the Home and Community-Based Services (HCBS) Final Rule, which affect services provided to individuals with developmental disabilities through California's regional center system. The HCBS Final Rule focuses on the quality of individuals' experiences and not just the settings where the services are delivered. The Final Rule was developed to ensure that individuals have full access to the benefits of community living and the opportunity to receive services in the most appropriate integrated setting.

The [California Statewide Transition Plan \(STP\)](#) outlines the steps the State will take to be in alignment with the HCBS Final Rule. The first step was for HCBS service providers, including both non-residential and residential programs, to complete a provider self-assessment that measured their current level of compliance with the HCBS Final Rule. This online process was closed in September 2020, and regional centers were sent copies of each provider's report. The next step in the provider assessment process is to complete the validation of the results of the self-assessment. This process is underway, and described in more detail below.

Providers must achieve compliance by March 17, 2023, the date by which states have to implement the federal requirements.

Validation of Provider Self-Assessments

The Department of Developmental Services (Department) contracted with Public Consulting Group (PCG) to conduct on-site assessments of a randomized, statistically valid sample of 1,200 HCBS providers among all 21 regional centers. Due to COVID-19 State of Emergency, the on-site assessments were conducted virtually to ensure the safety and well-being of everyone involved. This process was completed in November 2021, and regional centers were sent copies of each provider's report on April 25, 2022.

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As the state chose to utilize a self-assessment process, CMS requires validation of all provider information before the state can submit the STP for final approval. This ensures that compliance data within the STP reflects verified data, rather than data that is solely self-reported. To complete the validation of providers who did not receive a virtual site assessment, providers who reported in the self-assessment to be fully compliant are required to submit existing evidence supporting their compliant status. Providers that require validation are listed in the enclosed (Enclosure 1) Excel spreadsheet. Enclosure 1 is for informational purposes only. To update information within the document, regional centers should use the version saved in SharePoint, described below. Each provider listed must complete either the non-residential or residential validation template form (Enclosure 2a and 2b) and return to the regional center with all supporting documentation within 30 days of receipt from the regional center, and not later than June 30, 2022. Instructions on completion of the form are included within the document, and also posted to the Department's [website](#), along with updated frequently asked questions.

The Department is contracting with PCG to assist in the review of supporting documentation submitted by providers to verify their compliant status. For ease of documentation review across the Department, the regional centers, PCG, and the Department are utilizing a shared file with each regional center through Microsoft SharePoint. Provider documents should be uploaded as soon as possible after they are received, using the file naming process included in the enclosed (Enclosure 3) instruction. This instruction provides technical assistance to access, upload, and utilize the Microsoft SharePoint folders, and includes troubleshooting questions and answers. Regional centers, along with the Department and PCG, must review the form and documents submitted to ensure each provider has evidence supporting compliance under each applicable federal requirement. If a provider has not submitted sufficient evidence, then they will need to submit a remediation plan, as described below.

Remediation of all Non-Compliant Providers

Providers who reported to not be fully compliant in the self-assessment, or who were determined to not fully meet the requirements through the virtual site assessment process, are required to submit a plan for remediating each area out of compliance before March 17, 2023. Providers that are required to submit a remediation plan are listed in the enclosed (Enclosure 1) excel spreadsheet. Each provider listed must complete either the non-residential or residential remediation plan template form (Enclosure 4a and 4b) and return to the regional center within 45 days of receipt from the regional center, and not later than July 22, 2022. Instructions on completion of the form is included within the document, and also posted to the Department's website, along with frequently asked questions.

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Similar to the validation process, regional centers are asked to upload provider remediation plans to the Microsoft SharePoint folders, so the Department can provide oversight and review of these documents as well. Regional centers, with assistance and support from the Department, shall review the remediation plan to ensure each provider has completed the form correctly and for each applicable federal requirement.

Training

In addition to the instruction provided within the documents, the Department will hold two, one-hour webinars for regional center staff to walk through the processes outlined above, including accessing and navigating Microsoft SharePoint. The webinars will be held on May 26, 2022, from 10am – 11am, and Wednesday June 1, 2022, from 2pm – 3pm. Zoom links will be provided through email to all HCBS Program Evaluators. In addition to the webinar trainings, the Department will host weekly office hours for regional centers throughout this process. The Department will soon notify regional centers through email the dates, times, and log-in information for the office hours. Emails to providers with the template forms should be sent and not be delayed until after training. Please contact the Department at the email below if you have questions.

Instructional materials, template forms, and frequently asked questions are posted to the Department's website at <https://www.dds.ca.gov/initiatives/cms-hcbs-regulations/assessment-information/>. A recorded training providing information on aligning services with the HCBS Final Rule, titled "HCBS Final Rule Webinar: Strategies for Providing Services in Alignment with the Final Rule", along with a series of trainings on implementing person-centered planning and practices can be found on the Department's website at <https://www.dds.ca.gov/initiatives/cms-hcbs-regulations/training-information/>.

If you have any questions regarding this correspondence, please contact hcbsregs@dds.ca.gov.

Sincerely,

Original signed by:

MARICRIS ACON
Deputy Director
Federal Programs Division

Enclosures

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cc: Regional Center Administrators
Regional Center Directors of Consumer Services
Regional Center Community Services Directors
Regional Center HCBS Program Evaluators
Association of Regional Center Agencies
State Council on Developmental Disabilities
Nancy Bargmann, DDS
Brian Winfield, DDS
Carla Castañeda, DDS
Jim Knight, DDS
Tim Travis, DDS
Ernie Cruz, DDS