



NC DHHS HCBS Transition Plan FAQs

Final Rule - March, 2014

General System and HCBS Questions:

1. What is the HCBS Final Rule?

The Home and Community-Based Services (HCBS) final rule provides new requirements which states must follow when providing home and community-based long-term services and supports.

For more information visit: [Medicaid.gov](http://www.Medicaid.gov).

2. What is the purpose of the rule?

The intent of this rule is to ensure that individuals receiving long-term services and supports through HCBS programs under the 1915 (c) Medicaid authorities have full access to benefits of community living and the opportunity to receive services in the most integrated setting appropriate and provide alternatives to institutions.

3. What does the State have to do to be in compliance with the new HCBS rule?

The Centers for Medicare and Medicaid (CMS) requires all states to develop a Transition Plan for each waiver program affected by this rule. The plan defines how the state will assess current settings, and must clearly outline strategies and timelines for meeting the requirements of the new rules.

4. When does the State have to be in compliance with the Rule?

The State must be in full compliance with HCBS requirements by the timeframe approved in their Statewide Transition Plan approved by CMS, which cannot exceed March 17, 2019.

5. What is CAP/DA?

The Community Alternatives Program for Disabled Adults (CAP/DA) is a HCBS waiver program that provides an array of services to adults with disabilities 18 years of age and older who are at risk for institutionalization in a nursing facility. For more information visit: <http://www.ncdhhs.gov/dma/services/capda.htm>.

6. What is CAP/C?

The Community Alternatives Program for Children (CAP/C) is a HCBS waiver program that provides services to medically fragile children who, because of their medical needs, are at risk for institutionalization in a nursing facility. For more information visit: <http://www.ncdhhs.gov/dma/medicaid/capchildren.htm>

7. What is NC Innovations?



The North Carolina Innovations Waiver is a HCBS waiver program that provides services and supports for people with intellectual and other developmental disabilities that are at risk for institutional care in an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF-IID). For more information visit: <http://www.ncdhhs.gov/dma/lme/Innovations.html>

8. What is a Local Lead Agency?

This entity is the local point of entry and approval authority for CAP/C; CAP/DA and CAP/Choice. The Division of Medical Assistance (DMA) determines and appoints the lead agency to assume responsibility for day-to-day case management functions for potential and eligible CAP waiver beneficiaries.

9. What is an LME-MCO?

DMA contracts with Local Management Entities (LME)-Managed Care Organizations (MCO) to manage, coordinate, facilitate and monitor the provision of mental health, developmental disabilities, and substance abuse services, and to operate the combined Medicaid Waiver program authorized under Section 1915(b) and Section 1915(c) of the Social Security Act.

10. Will the proposed changes result in providers having to cease providing HCBS?

No. If a provider cannot meet the rule immediately, the State/LME-MCOs will work with the provider to obtain compliance if they opt to do so. If a provider voluntarily chooses not to come into compliance, individuals will transition to a provider, of their choosing, who is able to meet the rule and there will be no interruption in services.

Transition Plan Questions:

11. When does the State have to submit its transition plan?

March 16, 2015

12. Who can provide feedback on the State's transition plan?

Anyone can provide feedback. All HCBS consumers/families, LME-MCOs, providers, provider organizations, and other valued stakeholder are encouraged to provide feedback and comments specific to North Carolina's Statewide Transition Plan.

13. How can feedback be provided?

- Email: HCBSTransPlan@dhhs.nc.gov.
- Face-to-Face Meetings.
- FAX: 919-508-0975 (please include ATTN: HCBS Transition Plan in the subject line)
- Call: 1-866-271-4894 – North Carolina Community Resource Connection Customer Line
- Written comments can be mailed to:

NC DHHS
ATTN: HCBS Transition Plan



3015 Mail Service Center
Raleigh, NC 27699-3015

There is “no wrong door” for submitting feedback/input.

Assessment Questions:

14. What evidence is needed for the self-assessment?

A companion document will be made available for providers to use when completing the self-assessment. It will provide guidance on what evidence will be needed to submit with their completed assessment.

15. When will the companion document for the provider self-assessment be available?

The companion document is being developed and will be circulated prior to the implementation of the self-assessment process. When the document is completed, it will be posted on the DHHS HCBS website.