The Ohio Department of Medicaid recorded three videos, which included an overview of federal expectations in Ohio, setting criteria and modifications, and the role of care coordination in HCBS settings. Providers shall use these videos during initial and ongoing staff training to demonstrate compliance with the rule.

Please see the available videos below:

- ***Home and Community-Based Services Settings Rule***

  https://www.youtube.com/watch?v=s3zZF8nCQIY

- ***Home and Community-Based Service Settings Criteria and Modifications***

  https://www.youtube.com/watch?v=fleHEJhT4kY

- ***Care Coordination Role in Home and Community-Based Service Settings***

  https://www.youtube.com/watch?v=D4wrCE9_3M4

Video Overview

The "Home and Community Based Services (HCBS) Settings Rule" is a federal regulation that mandates that individuals receiving Medicaid HCBS services must have full access to community life, meaning they should be able to live and participate in community settings as much as possible, with the ability to make personal choices regarding their care and living arrangements, all while respecting their privacy, dignity, and freedom from coercion; essentially, ensuring their integration into the community is prioritized over segregated services.

Individual-centered planning:
The rule requires a person-centered approach where individuals receiving services actively participate in planning their care, selecting their preferred settings, and making decisions about their daily life.

Community integration:
HCBS services must be provided in settings that promote full access to the community, including employment opportunities, recreational activities, and social interaction with non-disabled individuals.

Choice and autonomy:
Individuals should have the ability to choose their living arrangements, service providers, and the type of support they receive, respecting their personal preferences and independence.

Privacy and dignity:
The rule mandates that individuals receiving HCBS services are treated with respect, privacy, and freedom from coercion or restraint.

Setting selection:
Individuals should be able to choose from various setting options, including non-disability specific settings, and have the opportunity to live in a private unit within a residential setting if desired. *Overall, the HCBS Settings Rule aims to ensure that individuals receiving Medicaid HCBS services can live as independently as possible in the community, with the ability to make choices about their lives and receive support that respects their individual needs and preferences.*

Home and Community-Based Service (HCBS) settings criteria primarily focus on ensuring individuals with disabilities can access services in their own homes and communities, allowing them to live as independently as possible, while adhering to their individual needs and preferences, including factors like integration within the community, personal choice, and respect for dignity and privacy; modifications to these settings may include adapting the physical environment, adjusting service delivery methods, and tailoring support plans to specific needs.

Community Integration:
Services must be accessible within the individual's community, allowing them to participate in everyday activities and interact with non-disabled peers.

Individual Choice:
Individuals must have the ability to select the services and settings that best meet their needs and preferences, including where they receive care.

Person-Centered Planning:
Service plans should be developed based on the individual's unique goals, strengths, and needs, with their active participation in the planning process.

Respect for Dignity and Privacy:
Services must be delivered in a manner that respects the individual's privacy, autonomy, and personal dignity

Freedom from Coercion and Restraint:
Individuals should not be subjected to any form of coercion or unnecessary restraint in accessing or receiving services
Examples of HCBS Settings:

Assisted Living Facility:

A residential setting with additional support services like meals, transportation, and medication management, while still promoting independence.

Supported Employment Programs:
Assistance with job placement and ongoing support to maintain employment in a community setting.

Modifications to HCBS Settings:

Physical Modifications:
Adapting the physical environment to meet individual needs, such as installing ramps, grab bars, or widening doorways.

Technology-Based Supports:
Utilizing assistive technology devices to enhance independence and communication.

Behavioral Supports:
Implementing strategies to address challenging behaviors and promote positive coping mechanisms.

Caregiver Training:
Providing education and training to caregivers on how to effectively support the individual's needs.

Service Delivery Flexibility:
Adjusting the timing, frequency, and location of services to align with the individual's schedule and preferences

Important Considerations:
Individual Assessment:
A comprehensive evaluation is necessary to determine the appropriate HCBS setting and modifications for each individual.

Quality Assurance:
Mechanisms should be in place to monitor the quality of HCBS services provided.

In a Home and Community-Based Services (HCBS) setting, a care coordinator plays a critical role in organizing and coordinating various support services for individuals, ensuring their needs are met within their home environment by facilitating communication between different providers, monitoring their progress, and advocating for their choices, all while prioritizing a person-centered approach to care delivery.

Key responsibilities of a care coordinator in HCBS settings include:

- **Comprehensive Needs Assessment:**

  Conducting thorough evaluations to identify an individual's physical, mental, social, and functional needs, including their preferences and goals for care.

- **Person-Centered Care Planning:**

  Developing individualized care plans based on the assessment, outlining specific services, goals, and desired outcomes, while ensuring the individual's autonomy and decision-making power.

- **Service Coordination:**

  Arranging and managing various HCBS services like personal care, home health aide services, transportation, meal delivery, and other community resources based on the care plan.

- **Communication and Collaboration:**

  Maintaining open communication with all involved parties including family members, healthcare providers, service providers, and other relevant stakeholders to ensure coordinated care delivery.

- **Care Transition Management:**

  Facilitating smooth transitions between different care settings, like hospital discharge to home, by coordinating necessary services and follow-up care.

- **Monitoring and Evaluation:**

  Regularly reviewing the individual's progress against their care plan, making adjustments as needed, and addressing any emerging issues or concerns.

- **Advocacy:**

  Representing the individual's needs and interests, advocating for necessary services and supporting them in navigating complex systems.

- **Crisis Intervention:**
  Responding to immediate needs or crisis situations, providing support and coordinating necessary interventions.

Benefits of Care Coordination in HCBS Settings:
- **Improved Quality of Life:**

  By coordinating services and addressing individual needs effectively, care coordination can enhance the quality of life for individuals receiving HCBS.

- **Cost-Effectiveness:**

  Proactive care planning and coordination can help prevent unnecessary service utilization and potential complications, leading to cost savings.

- **Patient-Centered Care:**

  Ensuring individuals have a voice in their care decisions and receive services aligned with their preferences.

- **Enhanced Continuity of Care:**
  Maintaining consistent communication across different providers and ensuring seamless transitions between services.

Key Considerations for Care Coordination in HCBS:

- **Cultural Competence:**

  Understanding and respecting the cultural and linguistic diversity of individuals receiving care.

- **Technology Utilization:**

  Employing technology to streamline communication, data sharing, and care coordination processes.

- **Staff Training:**
  Ensuring care coordinators have adequate training on HCBS regulations, person-centered care practices, and community resource navigation.

Staff Member Name: _____

Staff Member Title: _____

Based on the education I was provided with above I understand and have been trained on:

- ***Home and Community-Based Services Settings Rule***
- ***Home and Community-Based Service Settings Criteria and Modifications***
- ***Care Coordination Role in Home and Community-Based Service Settings***

Staff Member Signature: _____