

Survey ID: 0000
 Provider address: 320 S Walnut Lansing MI 48933
 WSA ID: 00000
 Name of provider: Lewis Cass House
 Type of survey: R
 Status: Non Compliance
 License number/Provider ID : AS000000000

INFORMATION ONLY

Dear Owner/Manager:

You are receiving this letter because Lewis Cass House recently completed a HCBS Residential(R) Provider Survey for a beneficiary (WSA ID 00000) enrolled on the Habilitation Supports Waiver.

In January 2014, the Centers for Medicare and Medicaid Services (CMS) published in the Federal Register a Final Rule on Home and Community Based Services (HCBS). The intent of this Final Rule is to ensure that individuals receiving long-term services and supports through the Medicaid HCBS programs have full access to the benefits of community living and the opportunity to receive services in the most integrated setting appropriate.

CMS has allotted an implementation period of up to five years, with the expectation that all HCBS Medicaid programs are fully compliant by March 17th, 2019. In order to be compliant with the CMS requirements, MDHHS is conducting HCBS surveys for residential and non-residential providers of the HSW population.

After the review of your completed survey, MDHHS has determined that Aurora House **is currently out of compliance** with the CMS HCBS Final Rule. Below is a list of out of compliance issues that were identified based on your answers to the survey.

Out of compliance Issues:

| Quest No | Question description | Answers |
|----------|---|---------|
| 16 | Does each individual have a lease for the residential setting? | No |
| 21 | Do the staff talk about individuals' personal issues in private? | No |
| 11 | Can people with different types of disabilities and individuals without disabilities live in the home? | No |
| 37 | If the individual lives with other people, did the individual pick their roommate(s)? | No |
| 34 | If the individual lives with other people, did the individual pick their housemates? | No |
| 27 | Do individuals pick the agency who provides their residential services and supports? | No |
| 33 | Did the individual choose to live at this residential setting? | No |
| 28 | Do individuals pick the direct support workers (direct care workers) who provide their services and supports? | No |
| 10 | Is the residence located away from multiple home settings (for people with disabilities)? | No |
| 69 | Can individuals choose to come and go from the home when they want? | No |
| 163 | Does the residence offer a continuum of care? | Yes |

| | | |
|----|---|----|
| 70 | Can individuals move inside and outside the home when they want? | No |
| 17 | Does the lease explain how an eviction happens and what to do? | No |
| 38 | Can individuals close and lock their bedroom door? | No |
| 24 | Do individuals have control over their personal funds? | No |
| 32 | Did the individual have choices of where to live? | No |
| 14 | Does the residence allow friends and family to visit without rules on hours or times? | No |

Please submit a Corrective Plan (CAP) within 30 days of this letter to your PIHP. Please do not send your CAP directly to MDHHS. The CAP should outline how your setting plans to resolve the issue above and come into compliance with the HCBS Final Rule. The PIHP will review your CAP and notify you when it is approved. Once the CAP is approved, you will need to complete the remediation within 90 days. The PIHP will conduct a new survey once they have verified the remediation has been completed. Please do not send your CAP directly to MDHHS.

Also included below are some resources that will be helpful for the remediation in order to meet requirements of the HCBS Final Rule. If you have any questions, you may contact your local CMH or PIHP.

- MDHHS HCBS Website: http://www.michigan.gov/mdhhs/0,5885,7-339-71547_2943-334724--,00.html
- Links to the provider readiness tools:
- CMS HCBS Website: <https://www.medicaid.gov/medicaid/hcbs/guidance/index.html>
- Wayne State University Developmental Disabilities Institute HCBS Page: <https://ddi.wayne.edu/hcbs>

Thank you for your cooperation!
Belinda Hawks

Federal Compliance Section Manager & OBRA/PASARR
Behavioral Health and Developmental Disabilities Administration
Division of Quality Management and Planning

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