



Division of Provider Services & Quality Assurance
P.O. Box 8059, Slot S409, Little Rock, AR 72203-8059

FREQUENTLY ASKED QUESTIONS HCBS SELF ASSESSMENT SURVEY

TO: All HCBS Providers

FROM: Martina Smith, Director, Division of Provider Services and Quality Assurance

DATE: December 16, 2022

On December 12, 2022, you received a **HCBS Provider Self-Assessment Survey Required**. The Division of Provider Services and Quality Assurance (DPSQA) along with the Division of Aging Adults Behavioral Health Services (DAABHS), Division of Medical Services (DMS) and Division of Developmental Disabilities Services (DDS) are currently working on the Home and Community-based Settings Rule Plan to ensure compliance and to report to CMS. Some providers may have received the Survey on December 12th because of former programs and certifications.

To clarify, you are to complete this survey only if you are one of the following provider-types:

- ARChoices Providers (ie Adult Day Care, Adult Day Health Care)
- Assisted Living Providers
- Community Support System Providers for clients with IDD and/or Behavioral Health Needs
- CES Waiver Providers
- Outpatient Behavioral Health Agency Providers

Frequently Asked Questions:

1. Our agency provides non-skilled services in the client's home. We do not operate an Assisted-living facility, Adult Day Care or any other "facility".

You do not have to complete the survey. Services in client's individual homes are not subject to the Settings Rule unless the home is owned and operated by the Provider.

2. My facility has operated an adult day health care in the past, and this may be why we are on the distribution list. However, we have not operated one in several years. My facility is a Medicaid unskilled home health provider going into individual homes, but I don't think that is applicable for this survey.

You are correct. Home Health providers that provide care in a client's personal home are not included unless the home is owned and operated by the Provider.

3. On the survey I saw no way to put my name on it, so what I'm asking is how will I be given credit for taking this survey?

The link on the non-residential survey has been modified and it now includes the name of the settings. If you completed the survey without the settings name, let us know.

4. I realized that most questions don't necessarily apply to what we do as an attendant care provider. We go into the homes of the participant and provide personal care. None of the participants are able to work outside the home. Should we still go through the survey?

No, you do not have to complete the survey. Personal care and attendant care providers that provide care in a client's personal home are not included unless the home is owned and operated by the Provider.

5. Do Adult Developmental Day Treatment (ADDT) and Early Intervention Day Treatment (EIDT) centers fall under the Settings Rule and therefore need to complete the survey?

No, EIDT and ADDT are not home and community-based services and do not fall under the Settings Rule.

6. We operate a CES Waiver program and an ICF-IDD facility. Some of our CES Waiver clients live in group homes. Do we need to complete the survey just once or for each location?

On the survey, you are asked to discuss a particular setting. The survey asks: Setting/Facility Name * 2. Name of person completing the survey (First Name, Last Name) * 3. Email address of person completing the survey Address City Zip County * 4. Setting/Facility Address * 5. Number of Beds in Setting/Facility.

On question 5, Number of Beds in Setting/Facility, if you have multiple locations that fall under the Settings Rule, i.e. you own and operate a residential facility, apartment, house, condo, day program, etc. please just enter that you have multiple locations that fall under the Settings Rule in Answer #5. We will then do follow up with you to get the individual addresses and specific information. Please also enter the total number of buildings you think fall under the Settings Rule.

7. Will we be able to print or save a copy of the survey to verify we have completed it?

Once a survey is completed, DPSQA will have record of completion and can provide a copy of the Provider's survey upon request.

8. What should we do if we are no longer actively providing services? Should we still complete the survey? If so, what should we enter as far as a location of services?

If you are no longer actively providing services, you do not have to complete the survey.

9. Some of the survey questions require more than a simple yes or no response but there is not an option to provide further detail. What should I do?

Complete the survey the best you can. This is an initial assessment. Further assessments will be conducted during the process of ensuring compliance with the Settings Rule.

Below is the link to complete the self-assessment on behalf of your facility:

Non-Residential Self-Assessment Survey- <https://www.surveymonkey.com/r/HNHH2JF>

Residential Self-Assessment Survey- <https://www.surveymonkey.com/r/HFL832K>

This assessment is now due by **December 30, 2022**, to allow facilities more time to complete the survey in light of the FAQs. We appreciate your cooperation as we gather information.

If you have any questions, please send them to: Kristie.Hayes@dhs.arkansas.gov