

HCBS Final Rule Evidentiary Package

Insert Name of Provider Here

Picture of Program Here

Setting information				
Setting Name:		ID #		
Street Address:		Phone:		
Setting website, if applicable:		Date of site visit: Click here to		
		enter a date.		
Waiver Service Type		Service Type:		
 Alternative Care (AC) Elderly Waiver (EW) Brain Injury (BI) Community Access for Disability Inclusion (CADI) Community Alternative Care (CAC) Developmental Disabilities (DD) 		Choose an item.		
Reason for Heightened Scrutiny				
Choose an item.	Choose an item.	Choose an item.		
	choose unitern.	Click here to enter text.		

General summary
Licensure requirements, provider standards/qualifications
Service definitions that support the setting requirements
Prong 1 and Prong 2 settings:
Meaningful distinction between the facility and HCBS setting
States must submit strong evidence that the setting presumed institutional has the characteristics of a HCBS setting and not an institutional setting.

□ Met □ Unmet □ Not applicable	Interconnectedness between the facility and the setting in question, including administrative or financial interconnectedness, does not exist or is minimal. (Enter narrative here)
□ Met □ Unmet □ Not applicable	To the extent any facility staff are assigned occasionally or on a limited basis to support or back up the HCBS staff, the facility staff are cross-trained to meet the same qualifications as the HCBS staff; , (staff training materials that speak of the need to support individuals' chosen activities), (person centered planning) (the staff is trained specifically for home and community-based support in a manner consistent with the HCB settings regulations.) (Enter narrative here)
□ Met □ Unmet □ Not applicable	Participants in the setting in question do not have to rely primarily on transportation or other services provided by the facility setting, to the exclusion of other options; (Describe the proximity to avenues of available public transportation or an explanation of how transportation is provided where public transportation is limited.) (Enter narrative here)
☐ Met ☐ Unmet ☐ Not applicable	Interconnectedness between the facility and the setting in question, including administrative or financial interconnectedness, does not exist or is minimal. (Enter narrative here)

Community Engagement Opportunities and Experiences

HCBS Characteristics

This section is a summary of the individual HCBS characteristics required in the HCBS rule. The findings for each characteristic are identified through the setting attestation documentation, on-site observation or both.

HCBS Rule Requirement	Compliance status (Please select)
Each person at the setting has a written lease or residency agreement	Not applicable to
in place providing protections to address eviction processes and appeals.	day service settings
Compliant documentation submitted with attestation	
□Observation made during on-site visit	
(Enter narrative here)	
Each person at the setting has privacy in his/her sleeping or living unit	Not applicable to
including a lockable door.	day service settings
Compliant documentation submitted with attestation	
□Observation made during on-site visit	
(Enter narrative here)	
The setting facilitates that a person, <i>who shares a bedroom</i> , is with a roommate of their choice.	Not applicable to day service settings
Compliant documentation submitted with attestation	
□Observation made during on-site visit	
(Enter narrative here)	
The setting provides people with the freedom to furnish and decorate	Not applicable to
their bedroom and living unit within the lease or residency agreement.	day service settings
Compliant documentation submitted with attestation	
□Observation made during on-site visit	
(Enter narrative here)	

The setting provides people the freedom and support to control their daily schedules including access to food at any time.	Compliant
Compliant documentation submitted with attestation	
Observation made during on-site visit	
(Enter narrative here)	
The setting allows people to have visitors at any time.	Compliant
\Box Compliant documentation submitted with attestation	
□Observation made during on-site visit	
(Enter narrative here)	
The setting provides opportunities for people to seek employment and work in competitive integrated settings.	Compliant
\Box Compliant documentation submitted with attestation	
□Observation made during on-site visit	
(Enter narrative here)	
The setting is physically accessible to the individual.	Compliant
Compliant documentation submitted with attestation	
Observation made during on-site visit	
(Enter narrative here)	
The setting provides people opportunities to access and engage in community life.	Compliant
\Box Compliant documentation submitted with attestation	
Observation made during on-site visit	
(Enter narrative here)	

The setting supports the person's control of personal resources.	Compliant
\Box Compliant documentation submitted with attestation	
□Observation made during on-site visit	
(Enter narrative here)	
The setting ensures people's right to privacy.	Compliant
Compliant documentation submitted with attestation	
□Observation made during on-site visit	
(Enter narrative here)	
The setting ensures people's dignity and respect.	Compliant
Compliant documentation submitted with attestation	
□Observation made during on-site visit	
(Enter narrative here)	
The setting ensures people's freedom from coercion and restraint.	Compliant
Compliant documentation submitted with attestation	
□Observation made during on-site visit	
(Enter narrative here)	
The setting optimizes individual initiative, autonomy, and independence in making life choices, including daily schedule and with whom to interact.	Compliant
Compliant documentation submitted with attestation	
□Observation made during on-site visit	
(Enter narrative here)	

Pictures of the HCBS setting

(insert pictures here)

Public comment summary

(Enter summary here)

Minnesota's Recommendation

Date of recommendation: Click or tap to enter a date.

Choose an item.