

# HCBS Final Rule Evidentiary Package

## Johnson Memorial Assisted Living



### Setting information

Setting name: Johnson Memorial Assisted Living	ID #: 30241
Street address: 1255 Walnut St., Dawson, MN 56232	Phone: 320-312-2107
Setting website: <a href="https://jmhsmn.org/services/assisted-living">Johnson Memorial Assisted Living</a> ( <a href="https://jmhsmn.org/services/assisted-living">https://jmhsmn.org/services/assisted-living</a> )	Date of site visit: 8/13/2018

### Waiver service type

Waiver service	Service type:
<input type="checkbox"/> Alternative Care (AC) <input checked="" type="checkbox"/> Elderly Waiver (EW) <input type="checkbox"/> Brain Injury (BI) <input type="checkbox"/> Community Access for Disability Inclusion (CADI) <input type="checkbox"/> Community Alternative Care (CAC) <input type="checkbox"/> Developmental Disabilities (DD)	Customized Living

# Reason for heightened scrutiny

Prong type	Category	Type of setting
Prong 1 Located in a Public or Private Institution	Name of Institution	Name of Institution Johnson Memorial Care Center

Note: The term people/person (resident for residential settings) refers to people who receive Medicaid HCBS waiver service

## General summary

Johnson Memorial Assisted Living is located in the city of Dawson, in Lac qui Parle County, about 150 miles west of Minneapolis. Dawson had a population of 1,540 in 2010.

At the time of the provider attestation, Johnson Memorial Assisted Living provided customized living services to 13 people. At that same time, the setting served six people supported by a home and community-based waiver program.

The customized living setting is part of Johnson Memorial Health Services and is located on a campus with several other services, including a primary and specialty care clinic, a hospital, short- and long-stay skilled nursing, a home care agency and an ambulance service. The campus is owned and operated by Johnson Memorial Health Services, a publicly run health care system governed by a board of directors supported by local towns and cities.

## Customized living provider standards/qualifications

Licensure requirements and other state regulations for customized living services clearly distinguish these services/settings from institutional licensure or regulations.

Customized living services are provided in housing-with-services establishments with the service provider directly licensed as a comprehensive home care provider by the Minnesota Department of Health. Customized living services provide an individualized package of regularly scheduled health-related and supportive services to a person who lives in a qualified, registered housing-with-services establishment.

# Customized living service definitions that support the setting requirements

Customized living (CL) and 24-hour CL services include component services designed to meet the person’s assessed needs and goals. Individualized CL services may include supervision, home care aide tasks (e.g., assistance with activities of daily living), home health aide task (e.g., delegated nursing tasks), home management tasks, meal preparation and service, socialization, assisting enrollees with arranging meetings and appointments, assisting with money management, assisting participants with scheduling medical and social services, and arranging for or providing transportation. If socialization is provided, it must be part of the service plan, related to established goals and outcomes and not diversional or recreational in nature.

For more details about the component services, including what is covered and distinctions between each see [Customized Living Component Service Definitions, DHS-6790H \(PDF\)](#).

(<https://edocs.dhs.state.mn.us/lfserver/Public/DHS-6790H-ENG>)

Minnesota’s Community-Based Services Manual (CBSM) provides the following requirements for customized living services:

[CBSM page on Customized Living](#)

([http://www.dhs.state.mn.us/main/idcplg?IdcService=GET\\_DYNAMIC\\_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=id\\_001787#](http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=id_001787#))

## 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.**

Determination	Summary
<input checked="" type="checkbox"/> Met <input type="checkbox"/> Unmet <input type="checkbox"/> Not applicable	<p><b>Interconnectedness between the facility and the setting in question, including administrative or financial interconnectedness, does not exist or is minimal.</b></p> <p>Johnson Memorial Assisted Living, the customized living setting, has separate management staff who oversee housing and nursing services in the setting. These staff report to the administrator of the care campus. The setting is financially connected to the entire campus, but it manages decisions about financial matters at the setting level as well.</p>

<input checked="" type="checkbox"/> Met <input type="checkbox"/> Unmet <input type="checkbox"/> Not applicable	<p><b>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;</b> (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 HCBS settings regulations.)</p> <p>All staff that work in the customized living setting receive HCBS settings rule training and other relevant training and orientation for the setting. Nursing facility staff occasionally work a shift in the setting, but everyone who works in the setting is fully trained on HCBS requirements.</p>
<input checked="" type="checkbox"/> Met <input type="checkbox"/> Unmet <input type="checkbox"/> Not applicable	<p><b>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;</b> (Describe the proximity to avenues of available public transportation or an explanation of how transportation is provided where public transportation is limited.)</p> <p>People living in this customized living setting have several options for transportation to support community engagement and inclusion, including a setting van; Prairie Five, the county public transit provider; rides provided by health plans or the Veterans Administration; rides from family and friends; and people’s own vehicles.</p>
<input checked="" type="checkbox"/> Met <input type="checkbox"/> Unmet <input type="checkbox"/> Not applicable	<p><b>The setting provides HCBS services in a space that is distinct from the space in which institutional services are provided.</b></p> <p>The customized living setting is separate from the nursing facility. The setting has a different style of construction, has its own signage, entrance and parking lot. People served in the setting and visitors come and go from a separate entrance from the nursing facility. The setting is connected to the nursing facility by a long hallway. The hospital, clinics and other health services are on the other side of a city block from the customized setting. You can reach these medical services by way of a series of campus hallways, or by sidewalks outdoors.</p>

## Community engagement opportunities and experiences

Community engagement is overseen by the setting’s staff. People served in the setting provide input through interest assessment forms, a resident council and direct communication with staff. People learn about activities offered in the setting through an activity calendar, personal reminders from staff and mealtime announcements.

The setting supports regular outings in the community with the support of its van and the family and friends of people served in the setting. Outings include the following:

- Errands to area stores
- Restaurants
- Community events and festivals
- Sightseeing to area lakes, farms and parks

The setting also offers several events each year that draw larger numbers of people from the wider community, including worship services, music recitals and concerts, annual high school prom parades and Halloween costume parades.

On-site, programmed activities include exercise sessions, music and art making, social gatherings, cooking and baking and various games. People in the setting can also access all of the nursing facility activities that are offered, as they desire.

## 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)
<p><b>Each person at the setting has a written lease or residency agreement in place providing protections to address eviction processes and appeals.</b></p> <p><input checked="" type="checkbox"/> Compliant documentation submitted with attestation</p> <p><input checked="" type="checkbox"/> Observation made during on-site visit</p> <p>The setting provided a lease agreement as documentation through the provider-attestation process. A person living in the setting who was interviewed confirmed that she signed a lease.</p>	Compliant

<p><b>Each person at the setting has privacy in his/her sleeping or living unit including a lockable door.</b></p> <p><input checked="" type="checkbox"/> Compliant documentation submitted with attestation</p> <p><input checked="" type="checkbox"/> Observation made during on-site visit</p> <p>Locks were observed on all unit doors in the setting. A person living in the setting who was interviewed confirmed that she has a lock on her unit door and that her privacy is respected.</p>	Compliant
<p><b>The setting facilitates that a person, who shares a bedroom, is with a roommate of his or her choice.</b></p> <p><input checked="" type="checkbox"/> Compliant documentation submitted with attestation</p> <p><input checked="" type="checkbox"/> Observation made during on-site visit</p> <p>People living in this setting do not share rooms unless they share a room with a spouse, partner or other person of their choice. A person living in the setting does not share her unit with anyone.</p>	Compliant
<p><b>The setting provides people with the freedom to furnish and decorate their bedroom and living unit within the lease or residency agreement.</b></p> <p><input checked="" type="checkbox"/> Compliant documentation submitted with attestation</p> <p><input checked="" type="checkbox"/> Observation made during on-site visit</p> <p>The lease allows people in the setting to decorate and personalize their living units. Living units were observed during the site visit and were decorated as people desired.</p>	Compliant
<p><b>The setting provides people the freedom and support to control their daily schedules including access to food at any time.</b></p> <p><input checked="" type="checkbox"/> Compliant documentation submitted with attestation</p> <p><input checked="" type="checkbox"/> Observation made during on-site visit</p> <p>A person living in the setting said that the staff are good about accommodating her preferences and she has found it easy to get snacks between meals from the common kitchen. She does very little cooking in her own room, though the unit does include a kitchenette for storing or preparing food. She said that it was very easy to access food and drinks between meals in the common dining room area. The</p>	Compliant





<p>care campus also has a café-style restaurant in a common area between the nursing facility and the customized living setting.</p>	
<p><b>The setting allows people to have visitors at any time.</b></p> <p><input checked="" type="checkbox"/> Compliant documentation submitted with attestation</p> <p><input checked="" type="checkbox"/> Observation made during on-site visit</p> <p>A person living in the setting who was interviewed confirmed that visitors may come and go as they like. There are no restrictions on visiting the setting.</p>	<p>Compliant</p>
<p><b>The setting provides opportunities for people to seek employment and work in competitive, integrated settings.</b></p> <p><input checked="" type="checkbox"/> Compliant documentation submitted with attestation</p> <p><input checked="" type="checkbox"/> Observation made during on-site visit</p> <p>A person living in the setting who was interviewed no longer works. However, she said that the staff have been willing to adjust the service schedule to accommodate her plans, as needed.</p>	<p>Compliant</p>
<p><b>The setting is physically accessible to the individual.</b></p> <p><input checked="" type="checkbox"/> Compliant documentation submitted with attestation</p> <p><input checked="" type="checkbox"/> Observation made during on-site visit</p> <p>The common spaces and living units were observed to be accessible. Living units and bathrooms were observed to have accessibility features. Hallways were observed to have handrails, doorways were wide and did not have thresholds, and living unit bathrooms had easy access showers with grab bars and stools for seated bathing. The setting supports a reasonable accommodations process, as needed.</p>	<p>Compliant</p>
<p><b>The setting provides people opportunities to access and engage in community life.</b></p> <p><input checked="" type="checkbox"/> Compliant documentation submitted with attestation</p> <p><input checked="" type="checkbox"/> Observation made during on-site visit</p> <p>See Community Engagement section. The setting offers a varied activity calendar of on-site and off-site offerings. A person living in the setting who was interviewed receives rides into the community from her adult children and friends. She said that she gets into the wider community as often as she likes.</p>	<p>Compliant</p>

<p>A person interviewed said she decided to switch to the primary care clinic on the campus for her general medical care because it is so convenient, but she still receives some specialty care from providers in the wider community.</p>	
<p><b>The setting supports the person’s control of personal resources.</b></p> <p><input checked="" type="checkbox"/> Compliant documentation submitted with attestation</p> <p><input checked="" type="checkbox"/> Observation made during on-site visit</p> <p>This setting does not help people with their personal finances.</p>	<p>Compliant</p>
<p><b>The setting ensures people’s right to privacy.</b></p> <p><input checked="" type="checkbox"/> Compliant documentation submitted with attestation</p> <p><input checked="" type="checkbox"/> Observation made during on-site visit</p> <p>The setting has a compliant policy with respect to people’s privacy. A person living in the setting who was interviewed said that her privacy was always respected by staff. During the tour of the setting we looked at three living units, to see the setting’s three unit floor plans. The staff leading the tour knocked at each unit and waited to be invited in before entering the living unit.</p>	<p>Compliant</p>
<p><b>The setting ensures people’s dignity and respect.</b></p> <p><input checked="" type="checkbox"/> Compliant documentation submitted with attestation</p> <p><input checked="" type="checkbox"/> Observation made during on-site visit</p> <p>During the site visit, staff were observed treating people with respect. A person living in the setting who was interviewed confirmed that she was treated with dignity and respect. When we were touring common spaces in the setting, positive exchanges were observed between people living in the setting and the staff.</p>	<p>Compliant</p>
<p><b>The setting ensures people’s freedom from coercion and restraint.</b></p> <p><input checked="" type="checkbox"/> Compliant documentation submitted with attestation</p> <p><input type="checkbox"/> Observation made during on-site visit</p> <p>Staff are trained on the Minnesota Home Care Bill of Rights and the Minnesota Vulnerable Adults Act. A copy of the Home Care Bill of Rights is also given to people to inform them of their right to be free from coercion and restraint.</p>	<p>Compliant</p>



<p><b>The setting optimizes individual initiative, autonomy, and independence in making life choices, including daily schedule and with whom to interact.</b></p> <p><input checked="" type="checkbox"/> Compliant documentation submitted with attestation</p> <p><input checked="" type="checkbox"/> Observation made during on-site visit</p> <p>A person living in the setting who was interviewed confirmed that she felt she could make all of her own choices about her daily activities.</p>	<p>Compliant</p>
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## Pictures of the HCBS setting

 <p>Dining area with food and drink available throughout the day</p>	 <p>Common front porch area connected to the setting</p>
 <p>Standard kitchenette in living units</p>	 <p>Living unit bathroom with accessibility features</p>

## Public comment summary

**The Minnesota Department of Human Services (DHS) did not receive public comments for this setting.**

DHS sought public comment from April 30, 2019, to June 9, 2019, before submitting settings to the Centers Medicare & Medicaid Services (CMS) for heightened scrutiny.

We sought public comments using the following methods:

- Evidentiary packages posted online on the [Home and Community Based Services Rule transition plan page](#)
- Evidentiary packages specific to each setting posted in a common area of the setting
- Notice of public comment period via [May 10, 2019, eList announcement](#)
- Notification to lead agencies via regional resource specialists
- Notification to providers via email
- Notification to managed care organizations and Area Agencies on Aging (AA) via email
- Notification to long-term care ombudsman office via email
- Disability Hub MN virtual insight panel.

## Minnesota's recommendation

**Date of recommendation: 7/1/2019**

Minnesota supports that this setting overcomes the institutional presumption and meets the requirements of a home and community-based setting. Provider is required to maintain on-going compliance with all HCBS requirements.