

MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES
BEHAVIORAL HEALTH AND DEVELOPMENTAL DISABILITIES ADMINISTRATION

**Michigan Home and Community Based Services (HCBS) Transition to CMS Rule Compliance
Frequently Asked Questions for Survey Respondents**

HCBS Survey

**General
Questions**

Question 1: What is the purpose of this survey?

Answer: In 2014, the Centers for Medicare and Medicaid Services published new rules regarding the delivery of Medicaid's Home and Community Based Services (HCBS) waiver programs. These rules aim to improve the individual's experience in HCBS programs by enhancing access to the community, promoting service delivery in more integrated settings, and expanding the use of person-centered planning. The findings will help to bring Michigan's Waivers into compliance with the new rules.

Question 2: Who will be surveyed?

Answer: HCBS waiver participants (individuals who receive home and community-based services) who have not been previously surveyed and their providers who deliver these services may receive a survey. For more details see question 13 for individuals and questions 17-19 for providers.

Question 3: Am I required to respond?

Answer: Providers are required to complete the survey. Each provider is required to respond to each survey invitation if the provider wishes to continue to provide HCBS services. The survey email invitation provides a unique link for each survey. **A survey link cannot be used more than once or reused.** However, the provider can forward the link to the appropriate staff to complete the survey. HCBS waiver participants are not required to respond, however there are benefits to completing the survey (see question 14 for further details).

Question 4: Is there a risk in completing the survey?

Answer: No, there is no risk associated with completing the survey. The responses of HCBS waiver participants will not be shared with their providers.

Question 5: How will the surveys be administered?

Answer: The surveys will be administered online through the online survey system, Qualtrics, via your email address.

Question 6: What if I do not have an email?

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Answer: If you do not have an email, staff from the Michigan Developmental Disabilities Institute (MI-DDI) will contact you by phone to complete the survey. If you are an HCBS waiver participant, the survey will be sent to your Supports Coordinator or Case Manager. Your Supports Coordinator or Case Manager can assist you to complete the survey.

Question 7: How do I complete the survey if I do not have a desktop computer or laptop?

Answer: You can complete the survey using a tablet or smartphone with an internet connection.

Question 8: How long does it take to complete the survey?

Answer: The survey will take between 10 and 15 minutes to complete. Most questions only require a “yes” or “no” response.

Question 9: Is Qualtrics HIPPA compliant?

Answer: Yes, Qualtrics requires awareness of and compliance with all applicable federal and state regulations governing the use of confidential information. This includes HIPAA for protected health information and other sensitive data.

Question 10: When is it my turn to respond to the survey?

Answer: Data will be collected from July-August 2020. Individuals and providers will receive a survey invitation and can respond during this time.

Question 11: What is the WSA number that is listed in the survey invitation?

Answer: The WSA number is the Waiver Supports Application (WSA) number. It is a number that uniquely identifies the individual or beneficiary who receives services and supports. Contact the Pre-Paid Inpatient Health Plan (PIHP) or the Community Mental Health Service Provider (CMHSP) Home and Community Based Service (HCBS) Lead Coordinator in your region for assistance to identify the individual. Click on the links to find the HCBS PIHP or CMHSP Lead in your region [[HCBS PIHP Lead Coordinators](#)].

Question 12: What if I have more questions or need further assistance with the survey?

Answer: If you have general questions about completing the survey or need survey assistance, please contact the Michigan Developmental Disabilities Institute (MI-DDI) by email at hcbs@wayne.edu or call (313) 577-7979. If you need help to identify who the survey is for using the WSA number, contact your region’s [Pre-Paid Inpatient Health Plan \(PIHP\)](#) or [Community Mental Health Service Provider \(CMHSP\)](#) Home and Community Based Service Lead Coordinator (HCBS). If you have questions about the HCBS statewide transition process, the heightened scrutiny process, or the survey process, please email your questions to the Michigan Department of Health and Human

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Services Home and Community Based Services transition team at
HCBSTransition@michigan.gov.

HCBS waiver participants

Question 13: Who is the survey respondent?

Answer: A survey respondent is a person who receives certain community mental health services and supports. The individual can have help to complete the survey and choose who they would prefer to assist (i.e. peer mentor, trusted family member, ...) with the survey. Your Supports Coordinator or Case Manager can assist you to complete the survey. The person who assisted the individual complete the survey **cannot** be a provider of services (residential services, community living services, skill building, or supported employment).

Question 14: What is the benefit to completing the survey?

Answer: There are a number of benefits to completing the survey:

- a) Your responses will help the Michigan Department of Health and Human Services improve how it delivers community mental health services and supports to you and your peers.
- b) Those who complete the survey will be entered into a raffle for a gift card.

Question 15: Will my service providers be surveyed?

Answer: Yes, your service providers will be asked to complete a survey.

Question 16: Will I learn about the survey outcomes?

Answer: Yes, the results are expected to be available in 2021 and will be posted at the Michigan Department of Health and Human Services, Home and Community Based Services webpage. To see findings from previous survey processes, visit <https://ddi.wayne.edu/hcbssurvey>

Residential Providers and Non-Residential Providers

Question 17: Who should respond to the provider survey?

Answer: A representative of the residential and/or non-residential service agency who is familiar with the services and supports provided to the beneficiary and general operations of the agency and who has been given authority to provide a response on behalf of the agency.

Question 18: Does my organization need to complete this survey if the individual receiving community living supports lives in their own or family home?

Answer: If you provide community living supports to the individual in any of the following settings: specialized adult foster care home, a general adult foster care home, or a private residence that is owned by the Prepaid Inpatient Health Plan, Community Mental Health, or the provider then you must respond to the survey.

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If you received a survey for an individual who **does not** live in a provider owned or operated living arrangement then you do not fit the survey criteria and are not required to complete the HCBS survey. When responding to the survey, select that you do not deliver the service in a provider owned or operated setting and you will be exited from the survey. The Michigan Department of Health and Human Services will validate this response.

If you would like additional confirmation about whether a response is required, please contact the PIHP HCBS Lead in your region. [Click here](#) to view a listing of the contact information for the HCBS Lead in your region.

Question 19: Our organization is a fiscal intermediary (aka: fiscal management services) and we handle the payroll and logistics around payroll for the individual. Is our organization responsible for completing the HCBS survey?

Answer: An organization that delivers fiscal management services is **not** responsible for completing the HCBS surveys. If you are a fiscal intermediary and received a HCBS survey please forward the survey(s) to the individual's provider.

If the survey is for an individual who self-directs their supports **and** lives in their own home or family home (i.e. the individual does not live in a provider owned or operated residence) then a survey response is not required. Please inform MI-DDI and the PIHP HCBS Lead in your region. [Click here](#) to view a listing of the contact information for the HCBS Lead in your region.

Question 20: How does my organization prepare for the transition to the new rules?

Answer: Providers are encouraged to visit the MDHHS HCBS webpage ([click here](#)) to review information that will assist them in their efforts to prepare for remediation work. There are many tools on this webpage including the providers readiness tool, the CAP guidance table and information regarding how to prepare for a heightened scrutiny review in the remediation and ongoing compliance section.

Question 21: What will the survey ask?

Answer: The survey will ask questions about the residential and/or non-residential services the provider is delivering to a specific HCBS waiver participant.

Question 22: How many surveys will my provider agency receive?

Answer: You will receive a survey for individuals you serve that receive any of the services listed below, if your organization did not complete a survey for the individual during a previous survey process *or* the survey received had errors.

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- 1915(i) SPA waiver services: Skill Building, Supported Employment, or Community Living Supports (if living in a provider owned or operated residence).
- Habilitation Supports Waiver services: either live in 1 of 3 residential living arrangements (specialized residential, general residential home, or a private residence owned by the PIHP, CMHSP, or provider) *and/or* receive one or more employment services (out-of-home non-vocational, prevocational services, or supported employment).

Question 23: If my organization received a survey during the previous HCBS survey process, will my organization receive this survey again?

Answer: Providers will receive surveys if: (1) the survey(s) submitted during the last survey process was received with errors; (2) they did not submit a survey during the previous survey process; or (3) they completed a provisional survey and need to complete a full survey. All providers must respond to all surveys by the deadline of **August 14, 2020**.

Question 24: When will the survey results be available?

Answer: The results are expected to be available in 2021 and will be posted at the MDHHS' HCBS webpage. To see findings from previous survey processes, visit: <https://ddi.wayne.edu/hcbssurvey>.

Question 25: How will my provider agency learn about heightened scrutiny, remediation, expectations, strategies and timelines?

Answer: The Michigan Department of Health and Human Services is responsible for the development and implementation of the Statewide Transition Plan (STP). Information will be updated and available at the State's [HCBS website](#). If you have questions about the HCBS statewide transition process or the survey process, please email your questions to the Michigan Department of Health and Human Services Home and Community Based Services transition team at HCBSTransition@michigan.gov. If you have questions about your provider agency coming into compliance, contact the [HCBS PIHP Lead Coordinator](#) or the [HCBS CMHSP Lead Coordinator](#) in your region for assistance.