

## NOTICES OF CONNECTICUT STATE AGENCIES

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### DEPARTMENT OF SOCIAL SERVICES

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#### Notice of Transition Plan

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In January 2014, the Centers for Medicaid and Medicare Services (CMS) announced a requirement for states to review and evaluate current home and community based settings (HCBS), including residential and nonresidential settings, and to demonstrate how Department of Social Services (Department) waivers comply with the new federal HCBS requirements that went into effect March 17, 2014. §§ 42 CFR 441.301(c)(4)-(5). CMS posted additional guidance to help states assess compliance and remediate areas that are not fully in compliance. The Department is seeking comments on the transition plan outlined in this notice.

The Department has reviewed all of Connecticut's Medicaid waiver programs for compliance with the federal HCBS requirements and submitted an initial plan to CMS. The initial plan was approved by CMS in November of 2016. The amendment to the plan was submitted to CMS for review and approval in the fall of 2018. CMS raised additional questions which are addressed in the amendment to the transition plan. Those questions focused primarily around the Assisted Living Services provided under CT's waiver programs. The updated version is available now for public comment and will be submitted to CMS for final approval after the comment period has closed. The plan includes the following information:

- A summary of site visits completed;
- An assessment of compliance of our current settings;
- An inventory of remedial actions taken;
- A summary of how each setting meets or does not meet the federal HCBS requirements;
- A list of site specific remedial actions;
- A plan and process for bringing all HCBS into compliance;
- A plan for monitoring settings on an ongoing basis; and
- Identifying settings that have been submitted to CMS for fheightened review

The plan may be found at:

<https://portal.ct.gov/-/media/Departments-and-Agencies/DSS/Health-and-Home-Care/Community-Options/Final-TransitionPlan-with-Appendices-5-14-19.pdf>

A complete text of the plan is available, at no cost, upon request to the Community Options Unit, Department of Social Services, 55 Farmington Ave., Hartford, Connecticut 06106; email [shirlee.stoute@ct.gov](mailto:shirlee.stoute@ct.gov).

All written comments regarding the plan may be submitted by June 23, 2019 to the Department of Social Services, Community Options Unit, 55 Farmington Ave, Hartford or to [Kathy.a.bruni@ct.gov](mailto:Kathy.a.bruni@ct.gov).

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**DEPARTMENT OF SOCIAL SERVICES  
OFFICE OF EARLY CHILDHOOD**

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**Notice of Proposed Medicaid Waiver**

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**Renewal of Selective Provider Contracting Waiver  
Pursuant to Section 1915(b)(4) of the Social Security Act  
for  
Early Intervention Services (EIS) Pursuant to Early and Periodic Screening,  
Diagnostic and Treatment (EPSDT) Qualified Program Waiver**

The State of Connecticut Department of Social Services (DSS), which is Connecticut's single state Medicaid agency and the State of Connecticut Office of Early Childhood (OEC), which administers the Connecticut Birth to Three System, including this waiver, provide notice that DSS proposes to submit the following Medicaid waiver renewal application to the Centers for Medicare & Medicaid Services (CMS) within the U.S. Department of Health and Human Services (HHS).

Description of the Waiver Renewal

Effective October 1, 2019, the above-referenced waiver renewal enables the state to continue limiting the number of qualified EIS providers in each municipality. This waiver renewal continues the same policy as in effect under the current waiver and does not affect Medicaid coverage or payment for EIS, which are described separately in the Medicaid State Plan.

OEC administers Connecticut's Birth to Three System, which is Connecticut's statewide program to provide EIS in accordance with Part C of the Individuals with Disabilities Education Act (IDEA), 42 U.S.C. §§ 1431 to 1444, inclusive, and 34 C.F.R. Part 303. This waiver enables OEC to continue operating the Birth to Three System using a competitive procurement for Birth to Three programs, which are entities that provide EIS, including EIS pursuant to EPSDT for Medicaid members. As part of this process, OEC conducts a competitive procurement and limits the number of qualifying providers in each municipality to ensure that there is sufficient access to services for all members, while also ensuring that each provider has sufficient caseloads to maintain efficiency, expertise, and high quality services.

Fiscal Information

This waiver renewal does not affect payments to providers of EIS. By continuing to limit the number of providers, the waiver is anticipated to reduce administrative expenditures for the state (compared to if no waiver were in effect).

Obtaining Waiver Renewal Language and Submitting Public Comments

The proposed waiver renewal is posted on the DSS website at this link: <http://portal.ct.gov/dss>. Scroll down to the bottom of the webpage and click on "Publications" and then click on "Updates." Then click on "Medicaid State Plan Amendments". The proposed waiver renewal may also be obtained at any DSS field office, at the Town of Vernon Social Services Department, or upon request from DSS (see below).

To request a copy of the waiver renewal from DSS or to send comments about the waiver renewal, please email: [Public.Comment.DSS@ct.gov](mailto:Public.Comment.DSS@ct.gov) or write to: Department of Social Services, Medical Policy Unit, 55 Farmington Avenue, 9th Floor, Hartford, CT 06105 (Phone: 860-424-5067). Please reference “Waiver Renewal – Selective Provider Contracting – EIS Pursuant to EPSDT”.

Anyone may send DSS written comments about this waiver renewal. Written comments must be received by DSS at the above contact information no later than June 20, 2019.

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