

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
7500 Security Boulevard, Mail Stop S2-14-26  
Baltimore, Maryland 21244-1850



## Medicaid Benefits and Health Programs Group

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June 12, 2024

Stuart Portman, Executive Director  
Medical Assistance Plans Division  
Georgia Department of Community Health  
2 Peachtree Street, NW, Suite 36450  
Atlanta, GA 30303

Dear Director Portman:

This letter and accompanying attachment represent the Centers for Medicare & Medicaid Services (CMS) approved corrective action plan (CAP) for the State of Georgia to bring settings into compliance with the federal home and community-based services (HCBS) regulations found at 42 CFR §441.301(c)(4)-(5). The CAP is retroactively effective to March 17, 2023.

The CAP provides the state with additional time to bring settings into compliance with the regulatory criteria directly impacted by the COVID-19 public health emergency. For remaining HCBS settings regulations not subject to the CAP, the state and all settings are expected to be fully compliant as of the end of the transition period on March 17, 2023.

The state will report to CMS on progress with activities, milestones, and timeframes outlined in the attachment. Full compliance is achieved when all Medicaid-funded HCBS is rendered in a compliant setting. Closure of the CAP will be granted after the state completes the activities described in the attachment, at which point the state will be in full compliance with all HCBS settings provisions of the regulation.

It is important to note that CMS approval of a CAP solely addresses the state's compliance with the applicable Medicaid authorities. CMS approval does not address the state's independent and separate obligations under the Americans with Disabilities Act, Section 504 of the Rehabilitation Act or the Supreme Court's *Olmstead v. LC* decision. Guidance from the Department of Justice concerning compliance with the Americans with Disabilities Act and the *Olmstead* decision is available at: [http://www.ada.gov/olmstead/q&a\\_olmstead.htm](http://www.ada.gov/olmstead/q&a_olmstead.htm).

Thank you for your efforts in establishing a CAP and completing this work to ensure all settings are in compliance with the federal HCBS regulations. If you have questions or need further assistance, please contact Ondrea Richardson at [ondrea.richardson@cms.hhs.gov](mailto:ondrea.richardson@cms.hhs.gov) or (410) 786-4606.

Sincerely,

Ryan Shannahan, Deputy Director  
Division of Long-Term Services and Supports

Attachment

cc: George Failla, Director, Division of HCBS Operations and Oversight, CMCS, CMS

**MEDICAID HOME AND COMMUNITY-BASED SERVICES SETTINGS REGULATIONS**  
**CORRECTIVE ACTION PLAN FOR THE STATE OF GEORGIA**

**Medicaid authorities subject to the CAP**

**1915(c) HCBS Waivers:**

- Elderly and Disabled Waiver Program (EDWP), GA.0112;
- Independent Care Waiver Program (ICWP), GA.4170;
- Comprehensive Services and Supports Waiver (COMP), GA.0323; and
- New Options Waiver (NOW), GA.0175.

**Regulatory criteria subject to the CAP**

*All settings:*

- The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS at 42 CFR §441.301(c)(4)(i) (entire criterion except for “control personal resources”),
- The setting is selected by the individual from among setting options including non-disability specific settings and an option for a private unit in a residential setting. The setting options are identified and documented in the person-centered service plan and are based on the individual’s needs, preferences, and for residential settings, resources available for room and board at 42 CFR §441.301(c)(4)(ii),
- Optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact at 42 CFR §441.301(c)(4)(iv), and
- Facilitates individual choice regarding services and supports, and who provides them at 42 CFR §441.301(c)(4)(v).

*Provider-owned or controlled residential settings:*

- Individuals sharing units have a choice of roommate in that setting at 42 CFR §441.301(c)(4)(vi)(B)(2), and
- Individuals have the freedom and support to control their own schedules and activities at 42 CFR §441.301(c)(4)(vi)(C) (entire criterion except for “have access to food at any time”).

**State milestones and timeframes under the CAP**

<b>Milestone</b>	<b>Begin Date</b>	<b>Completion Date</b>
<b>Statewide Transition Plan</b>		
Complete the state’s final Statewide Transition Plan and receive final approval from CMS.	October 25, 2017	March 11, 2024
<b>Policy Guidance Activities</b>		
Department of Community Health (DCH): Amend state rule 111-8-62-16(h) and the associated provider guidance.	March 11, 2024	January 30, 2025
Complete modifying rules and regulations, including provider manuals, inspection manuals, procedures, laws, qualification criteria, etc.	April 1, 2024	January 30, 2025
<b>Assessment, Remediation, or Validation Activities</b>		
<b><i>Host Home Settings<sup>1</sup></i></b>		
Complete site-specific assessment via desk review or onsite visit of Host Home Settings. 25% complete	—	October 31, 2024
Complete site-specific assessment via desk review or onsite visit of Host Home Settings. 50% complete	November 1, 2024	December 31, 2024
Complete site-specific assessment via desk review or onsite visit of Host Home Settings. 75% complete	March 12, 2025	March 28, 2025
Complete site-specific assessment via desk review or onsite visit of Host Home Settings. 100% complete	April 18, 2025	April 30, 2025
Complete remediation and validation activities via desk review or onsite visit of Host Home Settings. 25% complete	November 1, 2024	April 3, 2024

<sup>1</sup> For host home settings, the state will complete a total of 22 site-specific assessments. An additional 7 settings related to the characteristics present in provider owned or controlled HCBS Settings will also receive a site-specific assessment. The state is adopting a hybrid approach for conducting assessments where some assessments will be completed by desk review and others by an onsite visit. The number of settings that require remediation and validation will be determined after site-specific assessments are completed.

<b>Milestone</b>	<b>Begin Date</b>	<b>Completion Date</b>
Complete remediation and validation activities via desk review or onsite visit of Host Home Settings. 50% complete	April 4, 2025	April 18, 2025
Complete remediation and validation activities via desk review or onsite visit of Host Home Settings. 75% complete	April 19, 2025	May 3, 2025
Complete remediation and validation activities via desk review or onsite visit of Host Home Settings. 100% complete	May 4, 2025	May 18, 2025
Furnish notices to disenroll noncompliant settings and provide notice to participants, if applicable. 25% complete	January 1, 2025	April 18, 2025
Furnish notices to disenroll noncompliant settings and provide notice to participants, if applicable. 50% complete	April 19, 2025	May 1, 2025
Furnish notices to disenroll noncompliant settings and provide notice to participants, if applicable. 75% complete	May 2, 2025	May 18, 2025
Furnish notices to disenroll noncompliant settings and provide notice to participants, if applicable. 100% complete	May 19, 2025	June 2, 2025
Complete disenrollment of providers and relocation of participants to compliant settings or secure alternative funding, if applicable. 25% complete	February 1, 2025	May 18, 2025
Complete disenrollment of providers and relocation of participants to compliant settings or secure alternative funding, if applicable. 50% complete	May 19, 2025	May 31, 2025
Complete disenrollment of providers and relocation of participants to compliant settings or secure alternative funding, if applicable. 75% complete	June 1, 2025	June 18, 2025
Complete disenrollment of providers and relocation of participants to compliant settings or secure alternative funding, if applicable. 100% complete	June 19, 2025	July 15, 2025
<b><i>Personal Care Home Settings<sup>2</sup></i></b>		
Complete site-specific assessment via desk review or onsite visit of Personal Care Home Settings. 25% complete	—	October 31, 2024

<sup>2</sup> For personal care home settings, the state will complete a total of 22 site-specific assessments. An additional 7 settings based on characteristics present in provider-owned or controlled HCBS Settings will also receive a site-specific assessment. The state is adopting a hybrid approach for conducting assessments where some assessments will be completed by desk review and others by an onsite visit. The number of settings that require remediation and validation will be determined after site-specific assessments are completed.

Milestone	Begin Date	Completion Date
Complete site-specific assessment via desk review or onsite visit of Personal Care Home Settings. 50% complete	November 1, 2024	December 31, 2024
Complete site-specific assessment via desk review or onsite visit of Personal Care Home Settings. 75% complete	March 12, 2025	March 28, 2025
Complete site-specific assessment via desk review or onsite visit of Personal Care Home Settings. 100% complete	April 18, 2025	April 30, 2025
Complete remediation and validation activities via desk review or onsite visit of Personal Care Home Settings. 25% complete	November 1, 2024	April 3, 2025
Complete remediation and validation activities via desk review or onsite visit of Personal Care Home Settings. 50% complete	April 4, 2025	April 18, 2025
Complete remediation and validation activities via desk review or onsite visit of Personal Care Home Settings. 75% complete	April 19, 2025	May 1, 2025
Complete remediation and validation activities via desk review or onsite visit of Personal Care Home Settings. 100% complete	May 2, 2025	May 18, 2025
Furnish notices to disenroll noncompliant settings and provide notice to participants, if applicable. 25% complete	January 1, 2025	April 18, 2025
Furnish notices to disenroll noncompliant settings and provide notice to participants, if applicable. 50% complete	April 19, 2025	May 1, 2025
Furnish notices to disenroll noncompliant settings and provide notice to participants, if applicable. 75% complete	May 2, 2025	May 18, 2025
Furnish notices to disenroll noncompliant settings and provide notice to participants, if applicable. 100% complete	May 19, 2025	June 2, 2025
Complete disenrollment of providers and relocation of participants to compliant settings or secure alternative funding, if applicable. 25% complete	February 1, 2025	May 18, 2025
Complete disenrollment of providers and relocation of participants to compliant settings or secure alternative funding, if applicable. 50% complete	May 19, 2025	May 31, 2025
Complete disenrollment of providers and relocation of participants to compliant settings or secure alternative funding, if applicable. 75% complete	June 1, 2025	June 18, 2025
Complete disenrollment of providers and relocation of participants to compliant settings or secure alternative funding, if applicable. 100% complete	June 19, 2025	July 15, 2025

<b>Milestone</b>	<b>Begin Date</b>	<b>Completion Date</b>
<b><i>All Settings for All Waivers Listed in the CAP<sup>3</sup></i></b>		
Complete remediation and validation activities via desk review or onsite visit to address access to the broader community, options for a private unit and choice of roommate, and individual’s choice of non-disability specific settings. 25% complete	—	October 31, 2024
Complete remediation and validation activities via desk review or onsite visit to address access to the broader community, options for a private unit and choice of roommate, and individual’s choice of non-disability specific settings. 50% complete	November 1, 2024	December 31, 2024
Complete remediation and validation activities via desk review or onsite visit to address access to the broader community, options for a private unit and choice of roommate, and individual’s choice of non-disability specific settings. 75% complete	January 1, 2025	February 28, 2025
Complete remediation and validation activities via desk review or onsite visit to address access to the broader community, options for a private unit and choice of roommate, and individual’s choice of non-disability specific settings. 100% complete	March 1, 2025	April 30, 2025
Furnish notices to disenroll noncompliant settings and provide notice to participants, if applicable. 25% complete	November 1, 2024	November 30, 2024
Furnish notices to disenroll noncompliant settings and provide notice to participants, if applicable. 50% complete	November 15, 2024	January 31, 2025
Furnish notices to disenroll noncompliant settings and provide notice to participants, if applicable. 75% complete	January 15, 2025	March 31, 2025
Furnish notices to disenroll noncompliant settings and provide notice to participants, if applicable. 100% complete	March 15, 2025	May 31, 2025
Complete disenrollment of providers and relocation of participants to compliant settings or secure alternative funding, if applicable. 25% complete	December 1, 2024	December 31, 2024
Complete disenrollment of providers and relocation of participants to compliant settings or secure alternative funding, if applicable. 50% complete	December 15, 2024	March 31, 2025

<sup>3</sup> For all settings under the state’s EDWP, ICWP, COMP, and NOW waivers, the state will complete remediation and validation activities for 18 non-residential settings. An additional 3 settings related to characteristics present in provider-owned or controlled HCBS Settings will also receive remediation and validation. For residential settings, the state will complete remediation and validation activities for 22 settings with an additional 7 settings related to characteristics present in provider owned or controlled HCBS Settings. The state is adopting a hybrid approach for conducting remediation and validation activities where some activities will be completed by desk review and others by an onsite visit.

Milestone	Begin Date	Completion Date
Complete disenrollment of providers and relocation of participants to compliant settings or secure alternative funding, if applicable. 75% complete	February 15, 2025	June 30, 2025
Complete disenrollment of providers and relocation of participants to compliant settings or secure alternative funding, if applicable. 100% complete	April 15, 2025	July 15, 2025
<b>CMS Onsite Visit Activities</b>		
Provide a written response to the CMS onsite visit report describing how the state will remediate findings and apply feedback to the state’s HCBS delivery system.	Date the state receives written findings from CMS	30 days post receipt of the written site visit findings from CMS
Address findings related to the CMS onsite visit including the systemic findings related to the processes for the development and ongoing monitoring of the person-centered service plans across all waivers, and remediation required to ensure compliance of the settings visited and in other settings that utilize a similar service delivery model.	May 21, 2024	12 months post the date CMS issues site visit findings to the state
<b>Heightened Scrutiny – Prospective Activities</b>		
As applicable, complete public comment for presumptively institutional settings identified for heightened scrutiny by the state during the completion of assessment, remediation, and validation work.	October 31, 2024	September 15, 2025
As applicable, submit the list of settings identified by settings type and category of institutional presumption to CMS.	September 16, 2025	October 15, 2025
As applicable, submit information to CMS on presumptively institutional settings selected by CMS for a sampled heightened scrutiny review.	Date CMS pulls the appropriate list of settings and sends the list of settings to the state	Within 30 days of receipt of the listing from CMS
As applicable, address heightened scrutiny findings related to CMS’ heightened scrutiny review including, as applicable, remediation of all similarly situated settings that utilize a similar service delivery model and, as applicable, any overall assessment processes of all providers of HCBS in the state to ensure that all providers are being assessed appropriately against the regulatory settings criteria.	Date CMS issues findings to the state	3 months post the date CMS issues findings to the state



Milestone	Begin Date	Completion Date
<b>Statewide Compliance</b>		
Final compliance statewide with HCBS settings rule.	—	The later of July 31, 2025, or 12 months post the date CMS issues site visit findings to the state or, if applicable, 3 months post the date CMS issues heightened scrutiny findings to the state