

Updated State Risk Summary Grid

State Risk Category	Facility Characteristics	Questions to Consider
Medicaid Waivers – Final Home and Community-Based Services Rule - high Medicaid Census & combos including SNF beds	<ul style="list-style-type: none"> • Non-SNFs with Medicaid Waiver residents and either: <ul style="list-style-type: none"> ◦ Concentrated MI/DD population (e.g., $\geq 25\%$), or ◦ Very high Medicaid Census (e.g., $\geq 80\%$) • Combined SNF/ALFs with Medicaid Waiver residents whose DSCR falls below 1.0 with a minimal decline in Medicaid Census or Rate <p>(NOTE: CMS will require combined SNF/ALF settings to undergo “heightened scrutiny”)</p>	<p>Indicate whether facility is at risk of being unable to comply with the Rule.</p> <ul style="list-style-type: none"> • Refer to the Statewide Transition Plan (here), CMS responses to or approval of the Plan, State Regulatory language and State Medicaid Agency input, as applicable. • If unable to determine from the above, discuss the facility's compliance with HCBS Settings requirements (here). • If facility appears unable to comply, demonstrate ability to operate without Medicaid Waiver residents.
Money Follows the Person (MI/DD)	<p>Concentration of MI/DD population (e.g., $\geq 25\%$) in either:</p> <ul style="list-style-type: none"> • Combined SNF/ALFs • Projects with any Board & Care, or • Projects with ICF beds 	<ul style="list-style-type: none"> • If MI/DD residents are primarily non-elderly, how might facility be impacted by MFP, Balancing Incentives Program and other state “rebalancing” efforts? • Are there constraints on facility's ability to serve other types of residents? • Is State Medicaid funding for MI/DD residents stable?*
Money Follows the Person (Non-Elderly, Physically Disabled & Elderly)	<p>Projects with SNF beds whose DSCR falls below 1.0 with a minimal decline in Medicaid Census or Rate</p>	<ul style="list-style-type: none"> • How might the facility be impacted by MFP, Balancing Incentives Program, nursing facility “right-sizing” initiatives and other state “rebalancing” efforts? • If the subject facility may be impacted, are there any constraints on the facility's ability to serve other residents in these beds/units?
Olmstead Plans, Cases & Settlement Agreements	<p>Projects with a concentrated MI/DD population (e.g., $\geq 25\%$)</p>	<p>Consider pending or resolved Olmstead cases, Settlement Agreements, Olmstead Plans and initiatives in the state:</p> <ul style="list-style-type: none"> • Is the facility at risk of being unable to serve this population? • What constraints would limit the facility's ability to serve other types of residents? • What approaches would the facility employ to serve new residents if no longer able to serve an MI/DD population?*

*NOTE: For SNFs, ORCF determines concentration of MI/DD residents using data from CMS Form 672 related to the Mental Status of residents. If the CMS Form 672 indicates a concentration of MI/DD residents, but the subject facility does not actually serve this population, please provide evidence of the number of residents with primary and/or secondary psychiatric diagnoses.