

Home and Community Based Services

7.2024
Final Rule Heightened Scrutiny

Evidentiary Package

Background

In January 2014, the Centers for Medicare and Medicaid Services (CMS) announced a requirement for states to review and evaluate current Home and Community-Based Settings (HCBS), including residential and non-residential settings, and to demonstrate compliance with the Federal HCBS Setting Rules that went into effect March 17, 2014, Home & Community Based Services Final Regulation | Medicaid

These federal guidelines were developed to ensure that members receiving long-term services and supports through HCBS programs under Medicaid waiver authorities have full access to benefits of community living and the opportunity to receive services in the most integrated setting appropriate. For the purposes of this assessment, settings defined as having the qualities of institutions and therefore requiring a heightened scrutiny assessment and review are any settings that are:

- located in a hospital, nursing facility, intermediate care facility (ICF-DD) or institution for mental disease (IMD); or
- located adjacent to a public hospital, nursing facility, ICF-DD or IMD; or
- presumed to have the effect of isolating people from the broader community of people who do not receive HCBS.

Isolation Further Defined:

Isolating individuals receiving Medicaid HCBS from the broader community of individuals not receiving Medicaid HCBS. This would include settings that may not look isolating, but because of rules and procedures followed at the setting, have the effect of isolating members. In guidance, CMS has identified examples of settings that potentially isolate, including farmsteads, gated or secured communities for people with disabilities, residential schools, and multiple settings clustered together and operationally related.

CMS March 2014 https://www.medicaid.gov/medicaid/hcbs/downloads/settings-that-isolate.pdf

To overcome the presumption that a setting has institutional-like qualities, a heightened scrutiny evidentiary package must be compiled by the state for review by CMS. Information within this evidentiary package will focus on the qualities of the setting and how the setting is integrated in and supports access of individuals receiving HCBS into the broader community via the organization's policies and practices as well as in how the setting supports individuals consistent with their person-centered service plans.

This evidentiary package, for The Villa at Northern Pines, Cut Bank, Montana, will provide evidence of how the State of Montana, Department of Public Health and Humans Services (DPHHS or the department) has determined that this setting has overcome the presumption that it has the qualities of an institution and achieves compliance with Federal HCBS Settings Rule.

The Villa at Northern Pines, Cut Bank, Montana (HS-6)



Setting Information

Setting Name: The Villa at Northern Pines Phone: 406-873-5600 Fax: 406-873-5609

Street Address: 707 Third St. SE

Cut Bank, MT 59427

Setting Website:

https://northernpinesrehab.com

HCBS Members Currently Served

Waiver Type Serving HCBS Members

Waiver Service	Service Type
☑ Big Sky Waiver- Aged, Blind, and/or Physically Disabled	
☐ Severely Disabling Mental Illness Waiver	☐ Assisted Living Facility
☐ 0208 Waiver- Developmental Disabilities	

Heightened Scrutiny Indicator

	Prong Identifier	Selected Sub-Category	Type of Setting- Detail
\boxtimes	intermediate care facility (ICF-DD) or	□ Attached to a Hospital ☑ Attached to a Nursing Home □ Attached to an Intermediate Care Facility Attached to an institution for mental disease	Name of Institution The Villa at Northern Pines 707 Third St. SE Cut Bank, MT 59427
March 22, 2019			
SMD # 19-001 Re: Home and Community-Based Settings Regulation — Heightened Scrutiny https://www.medicaid.gov/federal-policy-guidance/downloads/smd19001.pdf			

Setting Overview

The Assisted Living Facility (ALF) is attached to a nursing facility. An onsite visit confirms the two entities are separated by one set of double-doors, and there are distinct separate entrances to each wing. The ALF is located in a separate wing of the building to include its own resident common and activity area, sitting/reading area, and dining room. It is confirmed this setting is not institutional nor isolating in nature.

Residents and staff interviewed confirm the residents are not required to receive medical, therapy or behavioral services on site. The state assures the specific unit/dwelling is owned, rented, or occupied under legally enforceable agreement that includes the same or comparable protections to those provided under the jurisdiction's landlord tenant law [42 CFR 441.301(c)(vi)(A)].

The ALF is located in a quiet residential neighborhood in a frontier Montana community. Cut Bank is located 30 miles south of the Canada-US border and is just east of the Blackfeet Indian Reservation. As estimated in 2024, Cut Bank has a population of 3,018. There is access to a small variety of shopping and eating establishments. The general public can walk and bike on the roads surrounding the setting. The facility provides for multiple on-site activities, as well as opportunities for members to participate in community events, services, and activities. The facility shares information with members regarding community events and activities. This was evidenced by an activities calendar, as well as confirmed by staff and resident interviews. Members can attend community activities and services of their choosing to include appointments, senior center, religious services, drives to Glacier National Park and dining experiences. There is no public transportation available in Cut Bank but staff, friends and family assist as needed for any scheduling and/or transportation arrangements. Members are free to come and go from the facility at their leisure, and the facility is staffed 24/7 for entry access. Members are encouraged to have friends and family visit, and they are free to have visitors at any time and any day they choose.

Rooms at the facility are one-bedroom suites which can accommodate either a single occupant, or couples who wish to room together. Members are able to decorate and furnish their rooms at their discretion. All rooms are equipped with locks on the entrance door, as well as locks on bathroom and bedroom doors for privacy. Staff knock on the door for access into the member's private area. The facility is arranged to ensure privacy during personal care, as well as while using the telephone, internet, or any other personal communication devices. Members and staff reported that members set their own schedule of daily activities to include sleep and wake schedules, hygiene, care delivery, recreation, and meals. Members always have access to meals and snacks both in their rooms and in the common kitchen area. All rooms are equipped with kitchen areas with cupboards, refrigerators, and microwaves. Members have full access to the dining area, laundry room, and common areas. Members can choose to do their own laundry if they desire.

Providers are required to comply with Montana's waiver regulations, and specifically provider requirements with the regulations. The facility is physically accessible to both members and the public to include two accessible entrances with no steps. Accommodations such as grab bars, and seats in the bathrooms are available for members in need of supports to move about the facility. The facility does not utilize any barriers that limit access, such as Velcro strips, locked doors or locked cupboards or refrigerators. The facility does not use restraints.

The facility provides initial and ongoing training to staff and volunteers on resident rights. The facility uses Relias standardized training. New employees take twelve courses during onboarding that cover areas such as settings criteria, resident rights, person-centered planning, and HIPAA. Existing employees take one course each month through Relias. Employees also participate in quarterly in-service training which covers person-centered planning.

Resident rights were reviewed by the department and are provided in plain language to members and/or family members, and there is a process available to them to file a grievance which includes contact information for protective services and advocacy organizations.

Montana provides the following assurances to CMS:

☑Montana attests to the review of person-centered service plans for members residing at The Villa at Northern Pines.

 \boxtimes Montana attests that individuals in the settings have a person-centered service plan in-place that meets the requirements outlined at 42 CFR 441.301(c)(1)-(3).

Montana validates that the settings support full access of individuals to control their personal resources pursuant to [42 CFR 441.301(c)(4)(i)] Montana Code Annotated 50-5-1104, 50-5-1105, and 50-5-1107 and Administrative Rules of Montana 37.106. 37.106.2828.

Montana validates that the settings support full access for individuals to have opportunities to seek employment and work in competitive integrated settings [42 CFR 441.301I(4)(i)].

⊠Montana validates that there are transportation options available at The Villa at Northern Pines and assistance to utilize transportation to access the broader community [42 CFR 441.301(c)(4)(i)].

⊠Montana attests that the setting is selected by the individual from among a variety of setting options and there was an option of a private living unit [42 CFR 441.301 (c)(4)(ii)].

⊠Montana attests that the setting options will be 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 [42 CFR 441.301(c)(4)(ii)].

☑Montana attests that the setting ensures an individual's freedom from coercion and restraint pursuant to [42 CFR 441.301(c)(4)(iii)]

and Montana Code Annotated 50-5-1104, 50-5-1105, 50-5-1107 and Administrative Rules of Montana 37.106.2828.

Montana validates that a lease, residency agreement or other form of written agreement is in place for each HCBS participant, and that the document provides protections that address eviction processes and appeals comparable to those provided under the jurisdiction's landlord tenant law pursuant to [42 CFR 441.301(c)(4)(vi)(A)] and Administrative Rules of Montana 37.106.2823, 37.106.2824 and 37.106.37.106.2828.

☑Montana confirms that individuals are able to have visitors of their choosing at any time [42 CFR 441.301(c)(4)(vi)(D)].

Montana confirms that any modifications to the additional conditions under 441.301(c)(4)(vi)(A) through (D) will be supported by a specific assessed need and justified in the person-centered service plans. [42 CFR 441.301(c)(4)(vi)(F)] when applicable.

Montana provides HCBS service delivery systems, the resources necessary to successfully navigate and facilitate staff training, and education. HCBS providers are monitored by department staff and contracted entities on their understanding and execution of the settings rule while actively engaging providers on the importance and value of their roles in person-centered planning. Provider education and resources are to be consistent with state standards as described in the waiver and state plan. Education on HCBS core values extends beyond that of solely HCBS provider systems, but to at a minimum, partnering community associations and organizations, advocates, stakeholders, and the public.



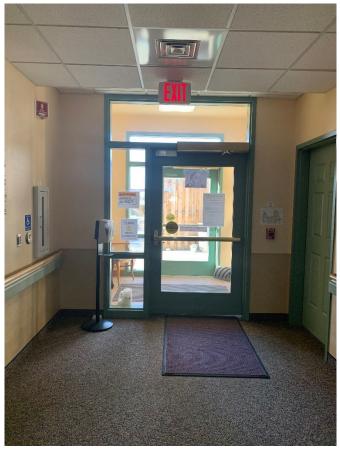
https://www.cityofcutbank.org/ https://www.cutbankchamber.com/





ALF Entrance

Nursing Home Entrance



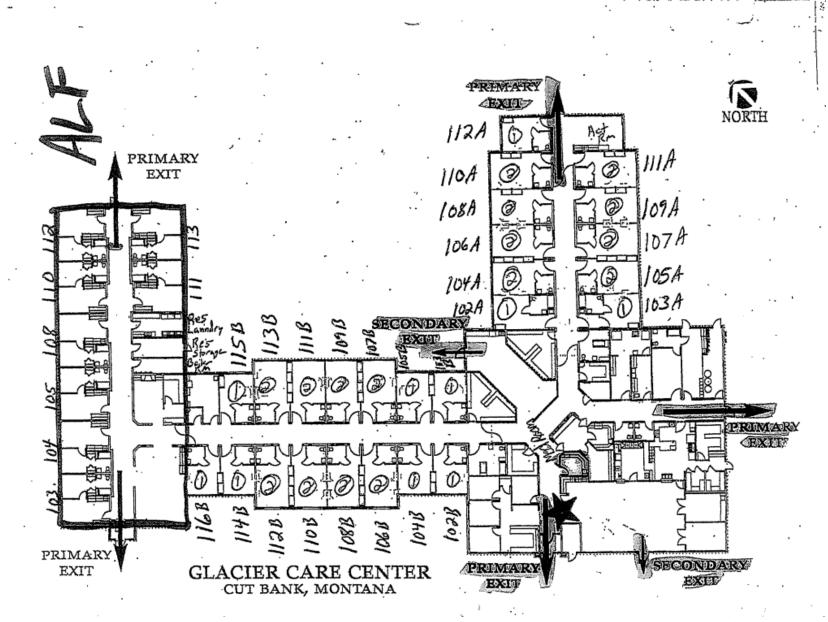
Front Entrance



Back Entrance



Door separating ALF and Nursing Home



Floorplan





Dining/Activity Area

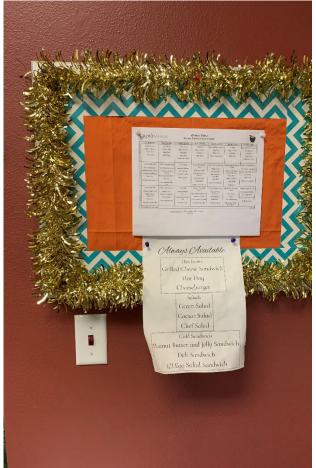


Activity Schedule



Resident Common Area





Kitchen/Dining Menu



Resident Suite Entrance



Resident Suite Door Lock



Resident Suite-Kitchenette Area



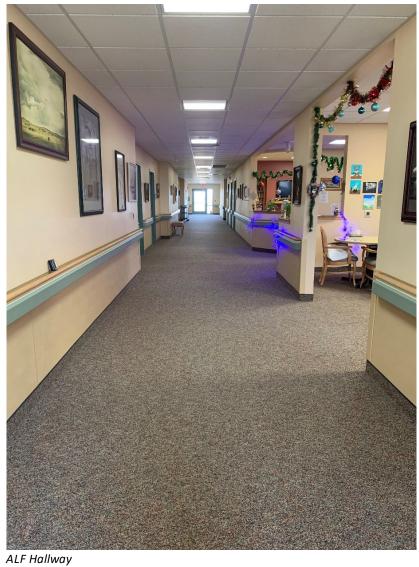
Resident Suite-Kitchenette/Living Area

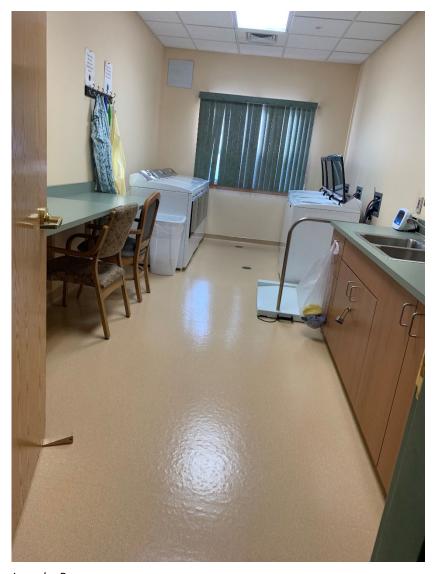


Resident Suite-Bedroom



Resident Suite-Bathroom





Laundry Room

Prong 1 Setting- Heightened Scrutiny Review

The setting is located in a hospital, nursing facility, intermediate care facility (ICF-DD) or institution for mental disease	(IMD).
Reviewed sample of individuals' daily activities, person-centered service plans, and/or interviews to determine the variation in the scope, frequency, and breadth of individual beneficiary interactions and engagement in and with community.	
Department: The department verified through an onsite visit, review of person-centered service plans, and conducting resident interviews, that the standard is met.	staff and
Provider: Members' activity preferences are identified and documented in their person-centered service plans. The facility offers a variety of activity programs. For example, members may choose to participate in crafts, bingo, card games, walking clubs, bowling, coffee hour, group exercise, puzzles, movies, and religious services. Activities can also be set up in the resident's room if they do not want to participate in group activities. Members have the ability to leave the facility and participate in community-based activities. These outing include shopping, appointments, senior center, drives to Glacier National Park, and dining experiences. Some members schedule their own outings such as family outings. The facility assists members with scheduling transportation.	⊠Met □Not Met □N/A
Procedures (including, for example, the types of activities, transportation, and staffing that are in place) and services the setting that indicate evidence of access to and demonstrated support for beneficiary integration in community act broader community consistent with individuals' person-centered service plans.	-
Department: The Villa at Northern Pines provided the department with a Resident Rights Handout, Assisted Living Facil Agreement, Menus and Activity Calendars. In addition, the department conducted an onsite visit, as well as staff and n interviews, to confirm the members have opportunities and support to access the broader community and are made avopportunities. The department confirmed that members can freely choose from these services and/or activities; and h services and/or activities are consistent with individual needs, as noted in the person-centered service plan. One example facility developing partnerships and alliances with community-based entities that result is inclusion in the broader community-based entities.	member ware of these now these apple of the

members regularly go to the senior center to engage with non-HCBS individuals. The facility encourages family and friends to engage in community activities with the members in the broader community.		
The department also conducted an on-site visit to the facility. The department determined through these efforts and attached is met.	tests that the	
Provider: Public transportation is not available in the community which has a population of 3,018. Staff assist members as needed for any scheduling and/or transportation needs. Family and friends are encouraged to assist and often provide transportation. Information on community events and activities are shared with members and they are involved with various community activities.	⊠Met □Not Met □N/A	
Description of how the facility directly supports and enhances an individual's access to the broader community.		
Department: The department reviewed documentation provided by The Villa at Northern Pines, including Activity Calendars, Menus and Assisted Living Facility Resident Agreements, and also conducted staff and resident interviews to confirm the facility supports, enhances, assists and encourages individual access to the broader community. The facility provides staff to drive members to various destinations and actively engage them in community activities. The facility encourages family and friends to take members to appointments and/or community events.		
Provider: The facility assists members with scheduling of transportation services. Transportation is provided by family, friends or the facility.	⊠Met □Not Met □N/A	
A summary of examples of how schedules are varied according to individual beneficiaries' preferences and in recognineed to integrate into the local community at times when the general community attends an activity.	nition of the	
Department: Through staff and resident interviews, the department can confirm schedules are varied and specific to the individuals' preferences as outlined in service plans. For example, one resident doesn't like to go outside so activities are made available to her that she can participate in activities. Another resident goes on outings 3-4 times per week with her family.		
Provider: Each resident's schedule and activity preferences are varied and unique in accordance with their preferences. Individuals' activities often take place at different times and locations. The facility staff strive to accommodate these preferences. Facility staff assist with scheduling and arranging transportation.	⊠Met □Not Met □N/A	

Procedures in place to routinely monitor individual access to services and activities of the broader community to identified in person centered service plans.	the extent
Department: The department reviewed Person Centered Service Plans of the members receiving services and can attemde free choices of services and qualified providers for each service included in their service plan. The department vestandard is met by resident preference and choices identified in the person-centered service plans as a standard practice reviews. The facility routinely provides training to staff on person-centered service plans.	erifies the
Provider: Individuals pick and choose what they want to do during the day and aren't required to partake in activities if they choose not to.	⊠Met □Not Met □N/A
Description of how staff are trained and monitored on their understanding of the settings criteria and the role of persplanning, consistent with state standards as described in the waiver or state plan amendment or in community training procedures established by the state.	
Department: The facility uses Relias standardized training. New employees and volunteers take twelve courses during that cover areas such as settings criteria, resident rights, person-centered planning, and HIPAA. Existing employees take each month through Relias. Employees also participate in quarterly in-service training which covers person-centered planning.	te one course
Provider: Facility staff and volunteers receive training and continuing education.	⊠Met □Not Met □N/A
Description of the setting's proximity to public transportation or how transportation is facilitated.	
Department: According to staff and member interviews, Members have choice and access to the greater community. It regularly attend family events, appointments outside of the facility, and community activities. Staff assist members in so arranging transportation.	
Provider: Public transportation services are not available in the community. Staff assist members in scheduling and arranging transportation.	⊠Met □Not Met □N/A

Attestation that the state has reviewed provider-owned or controlled settings and concluded through observation meanite visit and/or through a reasonable sample of consumer interviews, or through a review of person-centered that any modifications to the settings criteria are documented in person-centered service plans as required by the	service plans
Department: The department completed an onsite visit, reviewed person-centered service plans, and conducted staff	⊠Met
and resident interviews. The department attests that this regulation is met by The Villa at Northern Pines as required.	□Not Met
	□N/A
Description of the setting's remediation plan to achieve compliance by the end of the transition period, along wit oversight to ensure completion of actions.	h the state's
oversight to ensure completion of actions.	
Department: There is no remediation plan required for The Villa at Northern Pines, as the department confirms	□Met
compliance with the HCBS standards. The department will continue to provide on-going monitoring and oversight as	□Not Met
required.	⊠N/A
Attestation that the setting has been selected by the individual from among settings options, including non-disal settings.	oility-specific
Department: The department completed an onsite visit, reviewed documentation, and conducted staff and resident interviews. The department attests that HCBS as well as non-HCBS members are given the choice of settings options for their long term care service delivery. Member choice and rights are acknowledged and documented throughout the service planning process.	⊠Met □Not Met □N/A
March 22, 2019 SMD # 19-001 Re: Home and Community-Based Settings Regulation – Heightened Scrutiny	
Heightened Scrutiny SMD-SMDL Final (medicaid.gov)	

HCBS Characteristics and Qualities

The setting is selected by the individual from setting options, including non-disability specific settings (such as a typic community or living in one's own home) and an option for a private unit in a residential setting. (42 CFR 441.301)	
The department: The department attests The Villa at Northern Pines meets this standard and that the setting is integrated in and supports full access to the greater community. The department performed an onsite visit and conducted staff and resident interviews to verify 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.	
Provider: Individuals select the facility from setting options and have options for a private unit.	⊠Met
	□Not Met
	□N/A
Ensures an individual's rights to privacy, dignity, and respect, and freedom from coercion and restraint. (42 CFR 441	.301(c)(4)(iii))
The department attests The Villa at Northern Pines meets this standard and performed an onsite visit and conducted so resident interviews to verify that members have privacy, dignity, and respect, and freedom from coercion and restraint this facility have the right to make private phones calls and have visits inside and outside the facility with friends and fam have lockable doors to ensure privacy. Staff consistently knock and wait for permission before entering the member's No restraints are used at this facility.	. Members of nily. Members
There are several ways members residing in this ALF are ensured to have freedom from coercion and restraint. The Montana Office on Aging Long-Term Care Ombudsman visits facilities once per month. The Office of Inspector General also visits all Montana ALFs any time there is a complaint. The Office of Inspector General conducts onsite visits for licensing purposes every 1, 2, or 3 years depending upon license issuance.	
Provider: Individuals have privacy, dignity, and respect, and freedom from coercion and restraint.	⊠Met □Not Met □N/A

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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. (42 CFR 441.301(c)(4)(iv))		
The department: The department attests The Villa at Northern Pines meets this standard and performed an onsite visit and conducted staff and resident interviews to verify that the facility 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. Members have opportunities for community involvement, supports to engage in the community, and can exercise individual choices.		
Provider: Individuals make their own choices about daily activities, their physical environment and with whom to interact.	⊠Met □Not Met □N/A	
Facilitates individual choice regarding services and supports and who provides them. (42 CFR 441.301(c)(4)(v))		
The department: The department attests The Villa at Northern Pines meets this standard and performed an onsite visit and conducted staff and resident interviews to verify that the facility promotes individual choice regarding services and supports and who provides them. Members regularly leave the facility to attend appointments to obtain services independently at their preferred locations.		
Provider: Individuals make their own choices regarding services and supports.	⊠Met □Not Met □N/A	
The freedom and support to control their own schedules activities and have access to food at any time (42 CFR 4	41.301(c)(4)).	
Department: The department attests that members have the freedom and support to control their own schedules as well as choices of and access to food at any time, as per 42 CFR 441.301(c)(4)(vi)(C)]. The department verified through review of the provider self-assessment and documentation provided by the facility, the on-site visit conducted by department staff as well as staff interviews and resident interviews.		
Provider: Members can participate in activities inside and outside of the facility as they choose and are able to dictate their own schedules. All apartments have refrigerators so that members can access foods that they prefer at any time. The facility offers members meals and snacks.	⊠Met □Not Met □N/A	

Individuals may have visitors at any time. (42 CFR 441.301(c)(4)(vi)).	
Department: The department attests that members are able to have visitors of their choosing at any time. The depart	tment verified
through review of the provider self-assessment and documentation provided by the facility, the on-site visit conducted by	y department
staff as well as staff interviews and resident interviews.	
Provider: Members are able to have visitors 24 hours each day. Members make their own decisions in regard to	⊠Met
having visitors.	□Not Met
	□N/A
Individual has privacy in their sleeping or living unit.	,
Department: The department attests that individual units have entrance and bathroom doors that individuals can lock	for dignity,
privacy, and security and that only appropriate staff have keys to doors. The department verified through review of the	provider self-
assessment and documentation provided by the facility, the on-site visit conducted by department staff as well as staff i	nterviews and
resident interviews.	
Provider: Members have full privacy within their individual rooms. All room doors have locks to ensure privacy.	⊠Met
Member rooms have a locking entry door and bathroom door. Facility staff knock before they enter member's	□Not Met
rooms.	□N/A
Individuals sharing units have the documented choice of roommates.	
Department: The department attests that members have choice of roommates. There are only single occupancy rooms	at this facility.
The facility does give the members choice to share with a spouse, but not another member. The department verified the	nrough review
of the provider self-assessment and documentation provided by the facility, the on-site visit conducted by department s	taff as well as
staff interviews and resident interviews.	
Provider: There are no individuals sharing a room in the facility. The facility allows spouses to share a room if	⊠Met
desired, but the member has the choice.	□Not Met
	□N/A
Individuals have freedom to furnish or decorate their private living spaces.	
Department: The department attests that members have the freedom to furnish and decorate their private living spaces.	ces. The
department verified through review of the provider self-assessment and documentation provided by the facility, the o	
conducted by department staff as well as staff interviews and resident interviews	3.12

Provider: Members are able to make their own choices in regard to how they furnish or decorate their apartments.	⊠Met	
	□Not Met	
	□N/A	
Individuals have a pleasant dining experience, can have a mealtime and place of their choosing, and have access	•	
beverages, and snacks at any time.	10 1000,	
Department: The department attests members have choice and access to food at any time, as per 42 CFR 441.301(c)(4	1)(vi)(C)]. The	
members have access to meals and snacks provided by the facility. They can either dine in the facility dining area or in t		
The members also have access to food within their own units as all rooms are equipped with kitchen areas with cupbo	ards,	
refrigerators, and microwaves. The department verified through review of the provider self-assessment and documenta	ation provided	
by the facility, the on-site visit conducted by department staff as well as staff interviews and resident interviews.		
Provider: The facility offers three meals per day. There are multiple options available for seating. Members are	⊠Met	
offered alternatives if they are not able to attend meal service. For example, the member may eat in their room	□Not Met	
upon request.	□N/A	
	,	
The policies and procedures of the setting align with the requirements of the settings rule.		
Department: The department attests the ALF's policy and procedures align with the requirements of the Settings Rule	. The	
department verified through review of the provider self-assessment and documentation provided by the facility, the or	n-site visit	
conducted by department staff as well as staff interviews and resident interviews.		
Provider: Facility policy and procedures align with the Settings Rule.	⊠Met	
	□Not Met	
	□N/A	
If an individual is determined to require a modification to the provider-owned or controlled residential settings requi	irements, the	
need is individually assessed and documented in the individuals person-centered service plan.		
Department: The department attests the facility creates and updates person-centered service plans that identify the w	zivor corvices	
as well as other services and supports that a member needs in order to live successfully in the facility and avoid institu		
This includes any modifications needed to maintain independence. The department verified through review of the pro-		
assessment and documentation provided by the facility, the on-site visit conducted by department staff as well as staff in	nterviews and	

resident interviews.	
Provider: Each member has their own individualized person-centered service plan. If a member requires	⊠Met
modifications to maintain independence, those modifications would be assessed and documented in the member's	□Not Met
service plan.	□N/A
Controlled Egress Settings	·
If an individual has chosen a setting with controlled egress (e.g., secured dementia care unit or home or secured ent	ry buildings),
the person-centered service plan documents the choice, including the other settings considered.	
Note: Settings with controlled egress must document each resident's need for the intervention as well as provide ways	for members
without the need for restriction to safely come and go	
Department: The department verified that this facility does not have controlled egress.	
Provider: The facility does not have controlled egress for assisted living.	□Met
	□Not Met
	⊠N/A
The federal HCB Settings regulations focus on community integration, individual choice and privacy, and other factors	
an individual's experience of the setting as being home-like and not that of an institutional setting.	
42 C.F.R. § 441.301(c)(4)(vi)	
CFR: 42 CFR Part 441 Subpart G Home and Community-Based Services: Waiver Requirements	
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Significant DPHHS Review Information for The Villa at Northern Pines

Detailed Facility Information	Heightened Scrutiny Evaluation https://dphhs.mt.gov/hcbs
☑Facility Activities Calendar	⊠ Public Notice
☑Community Activities and Integration Opportunities	☑Resident Interview 1
⊠Meal Menu	☑Resident Interview 2
☑Transportation Options and Policy	Staff Interview 1
⊠Resident Service/Care Plan	⊠Staff Interview 2
⊠HCBS Service Plan	
□Controlled Egress Policy (if applicable)	
☑Visitation Access and Policy	
☑Resident and Member Interviews	
☑ Staff Interviews	
⊠Resident Handbook	
⊠Resident Agreement	
☑Community Chamber of Commerce Detail	
☑Montana Office of Inspector General Survey Results	
⊠HCBS Member Records	
☑HCB Settings Provider Self- Assessment(s)	
☑HCB Settings Validation Tool(s)	

Public Comment

The public notice is still in process. The department has no reason to expect comments that would change the determination.

Montana's Recommendation

Montana DPHHS validates that in accordance with the federal home and community-based services (HCBS) regulations found at 42 CFR Section 441.301(c)(4)(5), The Villa at Northern Pines located in Cut Bank, Montana complies with the Federal HCBS Settings rules. As a result, Montana wishes to maintain active HCBS service delivery in this setting; therefore, HCBS provider termination efforts to include the development of a strategic HCBS member transition plan is not required.