

Dear Ms. Pasternik-Ikard

Thank you for submitting Oklahoma's revised Statewide Transition Plan (STP) on January 15, 2016, to bring state standards and settings into compliance with new federal home and community-based settings requirements. The Centers for Medicare and Medicaid Services (CMS) has reviewed the revised STP and appreciates the state's efforts in responding to CMS' feedback and in moving forward with many transition activities. The attachment outlines the specific steps the state needs to take before resubmitting the state transition plan for CMS' **initial approval** of the state's systemic assessment, as well as recommendations on what the state needs to do to strengthen other components within the STP required for **final approval** by CMS.

The Centers for Medicare and Medicaid Services (CMS) has reviewed the draft STP and appreciates the state's efforts in responding to CMS' feedback and in moving forward with many transition activities. This letter outlines the specific steps the state needs to take before resubmitting the state transition plan for CMS' review and **initial approval** of the state's systemic assessment, as well as recommendations on what the state needs to do to strengthen other components within the STP required for **final approval** by CMS.

The expectation of CMS is that when a state formally submits its updated state transition plan for **initial approval**, the following will be completed and incorporated:

- A comprehensive systemic review, which should include the state's assessment of the extent to which its regulations, standards, policies, licensing requirements, and other provider requirements ensure settings are in compliance. States must cross-walk each relevant policy to each requirement under the rule, and provide specific details on the areas in each document found to be compliant, non-compliant, partially compliant, or silent. Additionally, the full title, code/number, and electronic link for every state policy in the assessment should be included. Finally, the systemic review must also include a detailed remediation plan, which outlines all changes to be made and action items to be completed in order to address areas where state policy needs to be updated to become compliant with the rule.
- Any updated information in the other areas of the plan (setting-specific assessment process/results; setting remediation activities; relocation; heightened scrutiny; ongoing monitoring and compliance; etc.) that both:
  - addresses specific questions or feedback previously provided to the state from CMS; and
  - reflects any changes/activities that have been completed since the last draft was submitted.
- The state posted the updated draft in its entirety for a minimum 30-day public comment period, reviewed and summarized those comments and included the summary in the STP submitted to CMS.

These are the minimal steps that must be completed in order for a state to receive **initial approval** of its STP. States should not send their draft STPs out for public comment or resubmit for review by CMS again without having completed all steps previously outlined.

**Final approval** will be made when the state develops a setting-specific assessment process that includes a strong validation process, completes its setting-specific assessment, provides the results of the settings assessments, and has established processes for remediation, relocation, the identification of settings presumed to have institutional characteristics, evaluation and submission of settings for heightened

scrutiny and ongoing compliance and monitoring that will assure CMS the settings in the state will be fully compliant by March 17, 2019.

To assist states with successfully finalizing one or more elements of their STP and HCBS implementation process, CMS will be hosting a number of small group, interactive TA virtual sessions over the next few months. We will invite states on a first-come, first-serve basis, offering targeted TA in a series of conversations that will take place over a month and will be repeated as many times as needed to meet the demand. If Oklahoma is interested in taking advantage of this additional opportunity, please let us know this at your earliest convenience. The next session is scheduled to start on July 12, 2016.

We appreciate the state's commitment to continuing its implementation of the federal HCBS rule. Please contact Michele MacKenzie at 410-786-5929; [michele.mackenzie@cms.hhs.gov](mailto:michele.mackenzie@cms.hhs.gov) or Susan Cummins at (206) 615-2078; [susan.cummins@cms.hhs.gov](mailto:susan.cummins@cms.hhs.gov), to inform CMS of the date that the state plans to resubmit the transition plan for initial approval. Attached are two examples of state systemic crosswalks for your reference. Additionally, please contact us should the state have any additional questions related to this letter.

Sincerely,

Michele

Michele MacKenzie  
Division of Long Term Services and Supports  
Disabled and Elderly Health Programs Group  
Center for Medicaid and CHIP Services  
Centers for Medicare & Medicaid Services  
[michele.mackenzie@cms.hhs.gov](mailto:michele.mackenzie@cms.hhs.gov)  
(p) 410.786.5929