Provider Name: Click or tap here to enter text.		or tap here to enter text.	Setting Manager: Click or tap here to enter text.	Date(s) of Review: Click or tap here to enter text.			
Address: Click or tap here to enter text.		here to enter text.	Informant Name/Role: Click or tap here to enter text.	MIS#s of Individuals Interviewed: Click or tap here to enter text.			
NPI #: Click or tap here to enter text.		e to enter text.	Informant Contact: Click or tap here to enter text.	Number of individuals in this setting: Click or tap here to enter text.			
VID	#: Click or tap here	e to enter text.	Setting Type: ☐ Residential ☐ Day/Prevocational	State Agency: Click or tap here to enter text. State Agency Representative: Click or tap here to enter text.			
	Applicable Setting	Setting Criteria	Criteria for Compliance	Information Source(s)	Final Rule component met?	Rationale	
1	Day/Residential	Is the setting located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment?	☐ Building tenants do not provide inpatient or institutional treatment such as those found in a psychiatric hospital, developmental center or long term care facility (nursing home).	☐ Individual Interview ☐ Staff Interview ☐ Observation ☐ Record Review ☐ Other: Click or tap here to enter text.	☐ Yes ☐ No	Click or tap here to enter text.	
2	Day/Residential	Is the setting in a building located on the grounds of, or immediately adjacent to, a public institution where inpatient care is provided?	☐ Residence is located in a typical neighborhood or non-disability site.	☐ Individual Interview ☐ Staff Interview ☐ Observation ☐ Record Review ☐ Other: Click or tap here to enter text.	□ Yes □ No	Click or tap here to enter text.	
3	Day/Residential	Does the service setting have the effect of isolating individuals receiving Medicaid HCBS from the broader community of individuals not receiving HCBS?	☐ Off-site activities are regularly available. ☐ Individuals have a choice to participate in activities that engage with the broader community.	☐ Individual Interview ☐ Staff Interview ☐ Observation ☐ Record Review ☐ Other: Click or	☐ Yes ☐ No	Click or tap here to enter text.	

STATE OF NEW JERSEY HOME AND COMMUNITY BASED SETTINGS VERIFICATION TOOL

			 □ (RESIDENTIAL ONLY) Individuals have the ability to meet and spend time with others outside of the setting. □ Individuals have opportunities to seek employment and work in competitive integrated settings. 	tap here to enter text.		
4	Day/Residential	The setting is integrated in and supports full access to the greater community (work, live, recreate, and other services). There are opportunities to seek employment and work in competitive integrated settings, engage in community life, and control personal resources, and receive services in the community to the same degree of access as individuals not receiving Medicaid HCBS.	☐ Individuals have access to either public transportation or provider transportation and other supports as needed to regularly access services similar to those used by the community at large. ☐ Individuals interact directly with other members of the community who are not paid to do so. ☐ Individuals have opportunity to meet and spend time with others outside of the setting. ☐ Individuals have the opportunity, freedom and support to define what level of contact they want for themselves. ☐ Individuals decide the extent and type of their community participation based on their preferences and interests. There is no predetermined level of interaction expected. ☐ Documentation is present which reflects the degree to which individuals can and are controlling personal resources. ☐ Individuals are receiving services in the community to the same extent as individuals who are not receiving Medicaid HCBS. ☐ Individuals are provided with various opportunities to meaningfully engage in their communities, including employment opportunities.	☐ Individual Interview ☐ Staff Interview ☐ Observation ☐ Record Review ☐ Other: Click or tap here to enter text.	☐ Yes ☐ No	Click or tap here to enter text.

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5	Day/Residential	The setting is selected by the individual or their guardian from various setting options including non-disability specific settings and an option for a private unit in a residential setting.	☐ Individuals receive options counseling from the plan coordinator during the development of the plan of care and at regular plan reviews to ensure the individual is aware of varied community setting options. ☐ Upon request by the individual, referrals may be sent by the plan coordinator to a variety of service providers to seek alternate residential and/or day services. ☐ The setting options are identified and documented in the person-centered plan and are based on the individual's needs and preferences. ☐ Individuals are provided the option for a private unit.	☐ Individual Interview ☐ Staff Interview ☐ Observation ☐ Record Review ☐ Other: Click or tap here to enter text.	☐ Yes ☐ No	Click or tap here to enter text.
6	Day/Residential	The setting facilitates individual choice regarding services, supports, and who provides them. The setting ensures:	☐ Individuals choose when, where and with whom they want to live and receive services. ☐ Individuals have opportunity to explore and understand information about a variety of service options and providers. ☐ Individuals are afforded the supports needed to make choices. ☐ Individual's preferences and choices are supported and honored.	☐ Individual Interview ☐ Staff Interview ☐ Observation ☐ Record Review ☐ Other: Click or tap here to enter text.	☐ Yes ☐ No	Click or tap here to enter text.

7	Day/Residential	The setting is physically accessible to the individuals that receive services in the location.	☐ The setting does not include any barriers which limit access to an individual's access such as gates, Velcro strips, or doors, cabinets or refrigerators that are locked unless it is individually approved by the Human Rights Committee and documented in the person centered service plan. ☐ Settings that support individuals who require assistance with ambulation are equipped with accessible ramps, grab bars, or other accommodation as required by the ADA.	☐ Individual Interview ☐ Staff Interview ☐ Observation ☐ Record Review ☐ Other: Click or tap here to enter text.	☐ Yes ☐ No	Click or tap here to enter text.
8	Residential only	The individual has a lease or other legally enforceable agreement such as a residency agreement, providing protections under the NJ Tenant-Landlord Laws.	☐ Individuals have a direct lease with a 3 rd party landlord. ☐ Settings that are owned by the residential provider have a legally enforceable residency agreement in place. ☐ Lease/residency agreement contain the following components: ☐ Rental amount and due date ☐ Tenant responsibilities ☐ Lease termination requirements ☐ Eviction conditions ☐ Appeal procedure	☐ Individual Interview ☐ Staff Interview ☐ Observation ☐ Record Review ☐ Other: Click or tap here to enter text.	☐ Yes ☐ No ☐ NA (Not a residential setting)	Click or tap here to enter text.
9	Day/Residential	The setting ensures the rights of privacy, dignity and respect, and freedom from coercion and restraint.	☐ Individuals rights are not impeded due to another person's behavior supports. ☐ Individuals are treated in a respectful manner, have interactions that enhance the person's selfesteem, capitalizes on their capabilities and encourages engagement in new things.	☐ Individual Interview ☐ Staff Interview ☐ Observation ☐ Record Review ☐ Other: Click or tap here to enter text.	☐ Yes ☐ No	Click or tap here to enter text.

STATE OF NEW JERSEY HOME AND COMMUNITY BASED SETTINGS VERIFICATION TOOL ☐ Individuals are not subjected to actions, by anyone that cause physical or emotional harm. ☐ Individuals are not threatened or intimidated to comply with organizational policies or individual staff preferences. ☐ Individuals are provided understandable information about their rights to be free from abuse, neglect, mistreatment and exploitation. ☐ Agency supports individuals to report allegations of abuse, neglect, mistreatment, and exploitation. ☐ Individuals have access to a fair and impartial hearing of grievances and an independent review of limitations to personal freedoms. ☐ Restrictions, if present, have been individually justified and documented in the person centered plan of care. ☐ Individual rights including the right to privacy are reviewed during the plan of care development process and during annual reviews. Residential The setting ensures the individual ☐ Individuals have the space, opportunity, and ☐ Yes ☐ No ☐ Individual Click or tap here to enter text. has privacy in their sleeping or living afforded privacy to speak on the phone, open and only Interview read mail, use a computer/internet, and visit with unit including lockable doors, choice □NA (Not a ☐ Staff Interview others. of roommate, and freedom to ☐ Observation residential setting) furnish or decorate the unit. ☐ Record Review ☐ Individuals have privacy in their bedrooms and ☐ Other: Click or bathroom, including unit doors that close and lock 10 tap here to enter with only the individual and those selected by the individual permitted access. text. ☐ Staff support individuals to decorate and select room's décor which reflect personal preferences.

☐ Staff know to receive permission from the individual before entering the private areas such as

			bedrooms and bathrooms. Only appropriate staff have keys to doors. Individuals have a place and opportunity to be by themselves during the day if they so choose. If the individual shares a bedroom there is evidence that a choice of roommate was offered.			
11	Residential Only	Individuals have 24-hour access to all common spaces in the residential setting.	 ☐ Individuals can get a drink or snack or make meals at any time to increase independence and autonomy. ☐ Individuals can access the laundry room and are have the opportunity to do their own laundry. ☐ Individuals can lounge in the living room or other common spaces to watch tv or engage in some other type of leisure activity. ☐ Restrictions, if present, have been individually justified and documented in the ISP. 	☐ Individual Interview ☐ Staff Interview ☐ Observation ☐ Record Review ☐ Other: Click or tap here to enter text.	☐ Yes ☐ No ☐ NA (Not a residential setting)	Click or tap here to enter text.
12	Residential Only	Individuals are allowed to come and go at any time from the residential setting.	 ☐ Individuals are treated in a respectful manner which considers and person's right to dignity of risk. ☐ Restrictions, if present, have been individually justified and documented in the ISP. ☐ Individuals have a key or access code to their home. 	☐ Individual Interview ☐ Staff Interview ☐ Observation ☐ Record Review ☐ Other: Click or tap here to enter text.	☐ Yes ☐ No ☐ NA (Not a residential setting)	Click or tap here to enter text.
13	Residential only	Individuals are able to have visitors when they choose.	 ☐ Individuals have the space and opportunity to visit with others. ☐ Individuals are afforded privacy when having a visitor. ☐ Individuals are supported in visiting others and having visitors of their own choosing. ☐ Individuals can have the opportunity to have overnight guests. 	☐ Individual Interview ☐ Staff Interview ☐ Observation ☐ Record Review ☐ Other: Click or tap here to enter text.	☐ Yes ☐ No ☐ NA (Not a residential setting)	Click or tap here to enter text.

STATE OF NEW JERSEY HOME AND COMMUNITY BASED SETTINGS VERIFICATION TOOL ☐ Individuals are able to have contact with their friends and family. ☐ Individuals can choose their visitors and have no restrictions on visit duration. ☐ Restrictions, if present, have been individually iustified and documented in the ISP. Day/Residential Individuals can choose to participate Click or tap here to enter text. ☐ Staffing supports are made available to ☐ Individual ☐ Yes ☐ No. in, or decline to participate in accommodate individuals' choices. Interview activities. ☐ Staff Interview ☐ Observation 14 ☐ Record Review ☐ Other: Click or tap here to enter text. Individuals set their own daily Day/Residential ☐ Provider has a process to gather input from ☐ Individual ☐ Yes ☐ No Click or tap here to enter text. routines for things such as hygiene, individuals related to daily schedules activity planning. Interview care delivery, recreation and meals. ☐ Staff Interview ☐ Activities are flexible and work around the ☐ Observation individuals preferred schedule. ☐ Record Review \square Individuals can choose when to wake up and when ☐ Other: Click or to go to bed. tap here to enter text. 15 ☐ Individuals have the right not to participate in an activity. ☐ Individuals can choose the time and place for their meals. ☐ Individuals can choose with whom they eat, including the opportunity to eat alone should they choose to do so.

•	Day/Residential	Individuals are encouraged to	☐ Agency provides supports to assist individuals to	□ Individual	☐ Yes ☐ No	Click or tap here to enter text.
		participate in activities that allow	maintain relationships with members of the	Interview		
		interaction with members of the	community.	☐ Staff Interview		
		community outside of the residential	☐ Agency fosters relationships with family and	☐ Observation		
		setting	friends.	☐ Record Review		
				☐ Other: Click or		
			☐ Information is shared that discusses community	tap here to enter		
16			events and activities outside of the setting based on	text.		
			the preferences identified by the individual(s) residing in the setting			
			in the setting			
			☐ Individuals have freedom and support to control			
			their own schedules and activities.			
			☐ Individuals engage in non-disability related clubs,			
			leisure and everyday activities within their local			
			community of their choosing.			

HOME AND COMMUNITY BASED SETTINGS VERIFICATION TOOL

Federal Reference: 42 CFR § 441.301(c)(4) Home and community-based settings (HCBS) must have all of the following qualities, and such other qualities as the Secretary determines to be appropriate, based on the needs of the individual as indicated in their person-centered service plan:

Federal Rule	HCBS Final Rule Setting Requirement
441.301(c)(4)(i)	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, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.
441.301(c)(4)(ii)	The setting is selected by the individual from a mong setting options including non-disability specific settings and an option for a private unitinar esidential 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.
441.301(c)(4)(iii)	Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.
441.301(c)(4)(iv)	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.
441.301(c)(4)(v)	Facilitates individual choice regardings ervices and supports, and who provides them.
441.301(c)(4)(vi)	In a provider-owned or controlled residentials etting, in addition to the qualities at §441.301(c)(4)(i) through (v), the following additional conditions must be met:
441.301(c)(4)(vi)(A)	The unit or dwelling is a specific physical place that can be owned, rented, or occupied under a legally enforceable agreement by the individual receiving services, and the individual has, at a minimum, the same responsibilities and protections from eviction that tenants have under the landlord/tenant law of the State, county, city, or other designated entity. For settings in which landlord tenant laws do not apply, the State must ensure that a lease, residency agreement or other form of written agreement will be in place for each HCBS participant, and that the do cument provides protections that address eviction processes and appeals comparable to those provided under the jurisdiction's landlord tenant law.
441.301(c)(4)(vi)(B)	Each individual has privacy in their sleeping or living unit:
441.301(c)(4)(vi)(B)(1)	Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors.
441.301(c)(4)(vi)(B)(2)	Individuals sharing units have a choice of roommates in that setting.
441.301(c)(4)(vi)(B)(3)	Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.
441.301(c)(4)(vi)(C)	Individuals have the freedom and support to control their own schedules and activities, and have access to food at any time.
441.301(c)(4)(vi)(D)	Individuals are able to have visitors of their choosing at any time.
441.301(c)(4)(vi)(E)	The setting is physically accessible to the individual.
441.301(c)(4)(vi)(F)	Any modification of the additional conditions, under §441.301(c)(4)(vi)(A) through (D), must be supported by a specific assessed need and justified in the person-centered service plan. The following requirements must be documented in the person-centered service plan:
441.301(c)(4)(vi)(F)(1) through (8)	Identify a specific and individualized assessed need; Document the positive interventions and supports used prior to any modifications to the person-centered service plan; Document less intrusive methods of meeting the need that have been tried but did not work; Include a clear description of the condition that is directly proportionate to the specific assessed need; Include regular collection and review of data to measure the ongoing effectiveness of the modification; Include established time limits for periodic reviews to determine if the modification is still necessary or can be terminated; Include the informed consent of the individual; Include an assurance that interventions and supports will cause no harm to the individual.
441.301(c)(5)	Settings that are not Home and Community-Based. Home and community-based settings do not include the following:
441.301(c)(5)(i)(ii)(iii)(iv)	A nursing facility; An institution for mental diseases; An intermediate care facility for individuals with intellectual disabilities; A hospital; or
441.301(c)(5)(v)	Any other locations that have qualities of an institutional setting, as determined by the Secretary. Any setting that is located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment, or in a building on the grounds of, or immediately adjacent to, a public institution, or any other setting that has the effect of is olating individuals receiving Medicaid HCBS from the broader community of individuals not receiving Medicaid HCBS will be presumed to be a setting that has the qualities of an institution unless the Secretary determines through heightened scrutiny, based on information presented by the State or other parties, that the setting does not have the qualities of an institution and that the setting does have the qualities of home and community-based settings.