

## Increasing HCBS Provider Capacity in Rural Areas

### Overview

In response to a request from a state, NASUAD sent a survey to the state agencies in order to better understand the strategies states use to increase provider capacity in rural areas. Twenty-two states responded to this inquiry, including: Alabama, Arizona, California, Colorado, Delaware, Idaho, Illinois, Indiana, Iowa, North Carolina, Nevada, New Hampshire, Ohio, Oklahoma, Oregon, Pennsylvania, South Carolina, South Dakota, Texas, Virginia, and Washington.

### Response Summary

States were asked a series of questions about strategies they used or found helpful to encourage or require HCBS providers to serve elders and adults with disabilities in rural areas.

- Oklahoma and Pennsylvania both indicated using financial incentives, such as higher rate reimbursement for case management services, as encouragement to bring providers to these areas.
- Pennsylvania has also defined “sufficient access” to services by driving distance within a geographic area in order to ensure better access to services.
- Ohio uses Telehealth/Telemedicine to provide certain services to individuals in rural areas.
- Several states suggested increasing emphasis on the use of self-directed services and paid caregiving from family and friends.

States were also asked what strategies they have developed to support receipt of HCBS services by individuals wherever they live. Examples given included:

- Implementing institutional deeming for individuals participating in certain 1915(c) HCBS waivers.
- Providing consumer directed services which allow for non-agency providers to deliver services to consumers.
- Allowing Adult Care Homes, Group Homes, and Family Care homes to provide personal care and home management services to individuals in their own home.
- Using Area Agencies on Aging to provide Long Term Care Consultations (assessments) for Medicaid and Non-Medicaid individuals, regardless of age, to provide community access and options.

- Providing individualized service planning which supports choice, independence and dignity.
- Allowing for exceptional rates can be requested related to client's unique support needs; environmental adaptations and technology assistance (e.g. PERS) are available based upon client's assessed support needs.