

# HCBS Final Rule Evidentiary Package

*The Emeralds at Grand Rapids*



## Setting information

Setting name: The Emeralds at Grand Rapids	ID # AL Lisc # 408607
Street address: 2815 U.S. 169 Grand Rapids, MN 55744	Phone: 218-326-8567
Setting website, if applicable: <a href="https://monarchmn.com/the-emeralds-at-grand-rapids">https://monarchmn.com/the-emeralds-at-grand-rapids</a> <a href="https://monarchmn.com/the-emeralds-at-grand-rapids">https://monarchmn.com/the-emeralds-at-grand-rapids</a>	Date of site visit: 8/31/2023

## Waiver service type

Waiver service	Service type:
<input type="checkbox"/> Alternative Care (AC) <input checked="" type="checkbox"/> Elderly Waiver (EW) <input type="checkbox"/> Brain Injury (BI) <input type="checkbox"/> Community Access for Disability Inclusion (CADI) <input type="checkbox"/> Community Alternative Care (CAC) <input type="checkbox"/> Developmental Disabilities (DD)	Customized Living

## Reason for heightened scrutiny

Prong type	Category	name of setting
Prong 2 Located adjacent to a Public Institution	Adjacent to Skilled Nursing Facility	The Emeralds at Grand Rapids Skilled Nursing Facility

Note: The term people/person (resident for residential settings) refers to people receiving Medicaid HCBS waiver service

## General summary

The Emeralds at Grand Rapids assisted living is located on a continuum of care campus in Grand Rapids, MN. Grand Rapids is located in Itasca County, in northeast Minnesota, about three hours north of the Minneapolis/St. Paul area. Grand Rapids had a population of 11,126 in the 2020 census, which is the most recent census data. The assisted living is surrounded on 3 sides by wooded areas. They have a church across the street and within a few miles from shopping, hotels, coffee shops and a movie theatre.

They have 43 people total in this setting currently and have 49 units.

- 31 people on Elderly Waiver
- 12 people with other payer sources such as private pay, veteran's benefits or long-term care insurance.

## Customized living provider standards/qualifications

Licensure requirements and other state regulations for customized living services clearly distinguish these services/settings from institutional licensure or regulations.

Customized Living settings must have an Assisted Living license through the MN Department of Health and meet all of the requirements and standards of the Assisted Living licensure, Minn. Stat. 144G Customized Living services provide an individualized package of regularly scheduled health-related and supportive services provided to a person who resides in a qualified setting with an assisted living license.

## Customized living service definitions that support the setting requirements

Customized living (CL) and 24-hour CL services include component services designed to meet the person's assessed needs and goals. Individualized CL services may include supervision, home care aide tasks (e.g., assistance with activities of daily living), home health aide task\_(e.g., delegated nursing tasks), home management tasks, meal preparation and service, socialization, assisting enrollees with arranging meetings and appointments, assisting with money management, assisting participants with scheduling medical and social services, and arranging for or providing transportation. If socialization is provided, it must be part of the service plan, related to established goals and outcomes and not diversional or recreational in nature.

For more details about the component services, including what is covered and distinctions between each see [CBSM - Resource: Customized living component service definitions and guide for computing time for rate-setting tools \(state.mn.us\)](https://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=dhs-339043)

([https://www.dhs.state.mn.us/main/idcplg?IdcService=GET\\_DYNAMIC\\_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=dhs-339043](https://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=dhs-339043))

Minnesota's Community Based Services Manual (CBSM) provides the following requirements for customized living services:

[CBSM page on Customized Living](https://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=id_001787#)

([http://www.dhs.state.mn.us/main/idcplg?IdcService=GET\\_DYNAMIC\\_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=id\\_001787#](https://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=id_001787#))

# Prong 1 and Prong 2 settings

## Meaningful distinction between the facility and HCBS setting.

States must submit strong evidence that the setting presumed institutional has the characteristics of a HCBS setting and not an institutional setting.	
Determination	Summary
<input checked="" type="checkbox"/> Met <input type="checkbox"/> Unmet <input type="checkbox"/> Not applicable	<p><b>Interconnectedness between the facility and the setting in question, including administrative or financial interconnectedness, does not exist or is minimal.</b></p> <p>The customized living setting is completely separate from the skilled nursing facility (SNF). The two buildings are connected by a hallway, but the leadership of the customized living is almost all separate from the SNF. The campus administrator does oversee both settings, but the customized living has its own Housing Director and separate direct care staff. The customized living site has its own LPN, and there is an RN on campus. Each building has its own separate entrance.</p>
<input checked="" type="checkbox"/> Met <input type="checkbox"/> Unmet <input type="checkbox"/> Not applicable	<p><b>To the extent any facility staff are assigned occasionally or on a limited basis to support or back up the HCBS staff, the facility staff are cross trained to meet the same qualifications as the HCBS staff.</b></p> <p>The customized living setting does not share staff with the skilled nursing facility. All staff who work in the customized living setting receive training that is compliant with the HCBS rule. Both the administrators and the staff confirmed this.</p>
<input checked="" type="checkbox"/> Met <input type="checkbox"/> Unmet <input type="checkbox"/> Not applicable	<p><b>Participants in the setting in question do not have to rely primarily on transportation or other services provided by the facility setting to the exclusion of other options;</b></p> <p>The people at the customized living have many different transportation options. The setting has its own van. There is a local public transportation called Arrowhead. There is a program called Elder Circle that provides rides to seniors as volunteers. Grand Rapids also has taxi services. People are given information on the different transportation options. Staff are willing to help people set up transportation. One of the people I interviewed told me that she knows staff will help her set up transportation if needed.</p>

Staff I interviewed said that the people know they can go to any staff to help them set up transportation if needed. One person living there said “I set up my own transportation, but they would help if I needed it.”

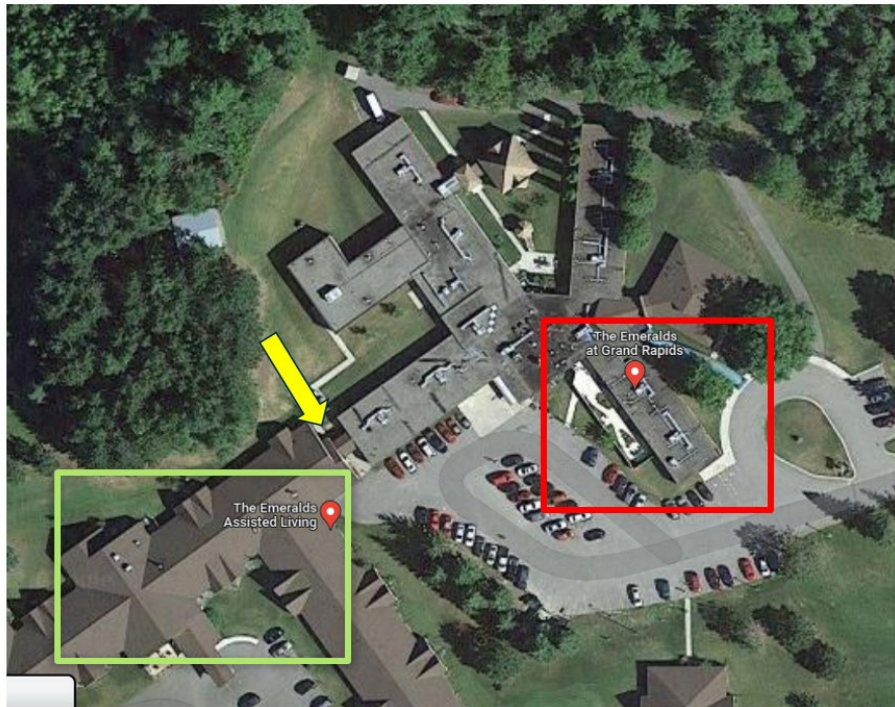
Below is a picture of the van owned by “The Emeralds.”



The Emeralds van for transportation

**The setting provides HCBS services in a space that is distinct from the space that institutional services are provided.**

The red box is showing where the skilled nursing facility is located and the light green box is showing where the assisted living is located. The yellow arrow is showing where the two settings are connected by a hallway.



- Met
- Unmet
- Not applicable

Below is a picture of the connecting hallway between the settings.



The hallway connecting the two settings.

## Community engagement opportunities and experiences

This setting encourages the people who live there to get out and do activities in the community. Some people go out as often as daily, while others choose to go out less than that. Activities are listed on a monthly calendar, which people receive. In addition, daily and monthly calendars are posted on bulletin boards and staff let people know what the activities are for the day. Sign-up sheets are on the bulletin board, and staff remind people what they have signed up for, in addition to encouraging others to join. People let staff know what they would like to do, both informally in conversation and more formally in the monthly resident meeting. There is also a family meeting, and families can suggest activities as well. Some of the activities the setting has planned in the community include:

- The Historical Museum
- County Fairs
- Drives along Scenic Highway 7
- Restaurants such as Timberlodge
- Picnics in the park
- The Judy Garland Museum
- Casino Trips
- Seasonal drives to see leaves or Christmas lights.
- Shopping
- Fishing with the “Let’s Go Fishing” program.
- Dessert at Dairy Queen
- Pontoon rides



*Bulletin board with menus and activities*

People have activities they attend in the community, either with their families or fellow residents of the customized living. Some people still drive and they will grab some friends and head out into the community. They attend:

- Church
- Family Gatherings such as weddings, birthdays, graduation, baby showers and other special occasions.
- Salons to get their hair done.
- Out to eat
- One gentleman volunteers to help veterans.

The setting offers onsite activities as well, including taking care of the flowers outside, card and other games like Bingo. Some of the people plan events with each other like meeting for card games once a week. People meet with staff and get to choose events that they want to attend. The day I was there it was malt day.

## HCBS characteristics

**This section is a summary of the individual HCBS characteristics required in the HCBS rule. The findings for each characteristic are identified through the setting attestation documentation, on site observation, or both.**



HCBS Rule requirement	Compliance status (Please select)
<p><b>Each person at the setting has a written lease or residency agreement in place providing protections to address eviction processes and appeals.</b></p> <p><input checked="" type="checkbox"/> Compliant documentation submitted with attestation.  <input type="checkbox"/> Observation made during on-site visit.</p> <p>Setting submitted an HCBS compliant lease that addresses the protections and policies regarding evictions. Staff at the setting are trained specifically in the HCBS Rule and have a sign off sheet to document it.</p>	Compliant
<p><b>Each person at the setting has privacy in his/her sleeping or living unit including a lockable door.</b></p> <p><input checked="" type="checkbox"/> Compliant documentation submitted with attestation.  <input checked="" type="checkbox"/> Observation made during on-site visit.</p> <p>People receive the Assisted Living Bill of Rights at move in. It's also posted on bulletin boards. The person (or their representative ) sign the Bill of Rights to show they received it. It is listed in the lease agreement. They also receive a separate comprehensive four-page privacy notice. Staff at the setting are trained specifically in the HCBS Rule and have a sign off sheet to document the training.</p> <p>One staff I interviewed said “We always knock before we enter, it’s their home.” A person living there that I interviewed told me that “The staff are always really good about knocking” and all of the residents I interviewed said they feel their privacy is respected. I witnessed staff always knocking during my visit.</p>	Compliant
<p><b>The setting facilitates that a person, who shares a bedroom, is with a roommate of their choice.</b></p> <p><input checked="" type="checkbox"/> Compliant documentation submitted with attestation.  <input type="checkbox"/> Observation made during on-site visit.</p>	Compliant

People receive the Assisted Living Bill of Rights at move in. It's also posted on bulletin boards. The person (or their representative ) signs the Bill of Rights to show they received it. It is also listed in the lease agreement. Staff at the setting are trained specifically in the HCBS Rule and have a sign off sheet to document it.

**The setting provides people with the freedom to furnish and decorate their bedroom and living unit within the lease or residency agreement.**

Compliant

- Compliant documentation submitted with attestation.
- Observation made during on-site visit.



*Decorated apartment*



*Decorated door*

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<p>The people I interviewed said that they are able to decorate their homes as they like. One woman showed me all of the pictures on her wall and told me “ Those are all my kids. I like seeing their pictures every day” During the tour, I observed decorations outside of people’s doors, and during my interviews I saw homes that were decorated to each person’s style. One person’s place was decorated with hanging pictures of her spouse, as well as pictures of grandkids. There were other items, such as porcelain figures in her apartment.</p>	
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**The setting provides people the freedom and support to control their daily schedules including access to food at any time.**

Compliant

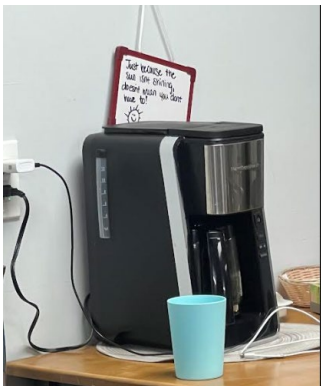
- Compliant documentation submitted with attestation.
- Observation made during on-site visit.



*Vending machine*

People receive the Assisted Living Bill of Rights at move in. It's also posted on bulletin boards. The person (or their representative ) signs the Bill of Rights to show they received it. It is also listed in the lease agreement. There are monthly resident meetings where people can give feedback and suggestions to the staff. Staff at the setting are trained specifically in the HCBS Rule and have a sign off sheet to document it.

When I asked staff about people planning their own days and schedules, one staff said "Of course they do. It's their life."



*Coffee and snack station*

A person I interviewed said that she doesn't ever feel pressured to go out into the community. She said even if she signs up for something,

<p>she sometimes changes her mind and the staff are accommodating to her needs.</p> <p>The people who live at this customized living do have access to food at any time. They have several options. Each person has a full kitchen in their unit, including a refrigerator, microwave and stove for food storage and preparation. Throughout the setting, there are snack stations, along with coffee and water. There is list of meal times, but a sign under it says if people want food at other times to ask any staff. Staff will supply meal items such as sandwiches or soup in addition to snacks such yogurt, crackers and treats which they keep on hand. There is also a vending machine in the building. While I was waiting to start my tour, one man was saying” I can’t wait for dinner tonight. It’s a stuffed pork chop!” The person who he was talking to agreed and they chatted about food.</p> <p>When I asked someone what happens if they miss a meal time ,she said “Oh, they will wrap up my meal and save it for me.” Another person told me “They always have sandwiches and yogurts and other food we can ask for if we want.” Staff I interviewed confirmed that they will get food any time for a resident if asked, and that they wrap up meals for people who miss meals.</p> <p>People and staff that I interviewed both confirmed that people can make changes to scheduled cares if they want. For instance, a staff said if someone is going out with family, we make sure we ask if they want to take a shower on the day before, whether or not it’s their normal time or not.</p>	
<p><b>The setting allows people to have visitors at any time.</b></p> <p><input checked="" type="checkbox"/> Compliant documentation submitted with attestation.  <input type="checkbox"/> Observation made during on-site visit.</p> <p>People receive the Assisted Living Bill of Rights at move in. It’s also posted on bulletin boards. The person (or their representative ) signs the Bill of Rights to show they received it. It is also listed in the lease agreement. Staff at the setting are trained specifically in the HCBS Rule and have a sign off sheet to document it.</p>	<p>Compliant</p>



*Private dining room*

One of the people I interviewed about visitors said “ I have 9 kids, there is always family coming and going from here, no problems there.”

The setting offers a private dining room for guests that want to have a quieter atmosphere for their visit.

**The setting provides opportunities for people to seek employment and work in competitive integrated settings.**

Compliant

- Compliant documentation submitted with attestation.
- Observation made during on-site visit.

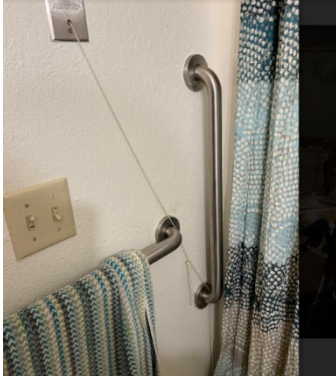
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None of the people at the setting are working as a paid employee in the community , but there are several who volunteer. Staff are flexible with things like packing meds, changing care times or other accommodations for people who are volunteering and would do so if they were working.

**The setting is physically accessible to the individual.**

Compliant

- Compliant documentation submitted with attestation.
- Observation made during on-site visit.



*Grab bars in the bathroom*

People receive the Assisted Living Bill of Rights at move in. It's also posted on bulletin boards. The person (or their representative ) signs the Bill of Rights to show they received it. It is also listed in the lease agreement. Staff at the setting are trained specifically in the HCBS Rule and have a sign off sheet to document it.

The people I interviewed said they were able to get around the building and their apartments just fine. They felt there wasn't any problems getting around. I observed wide hallways and people's homes seemed to have plenty of room.

I observed grab bars and pull cords in the bathrooms. There were other railings and chairs around the setting if people needed to rest or feel secure walking while holding a railing.

**The setting provides people opportunities to access and engage in community life.**

- Compliant documentation submitted with attestation.
- Observation made during on-site visit.

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The resident handbook informs people that they have the right to receive care from community- based providers in their home or get their care in the community. They even list some community based

Compliant

<p>providers in the resident handbook. One person I interviewed said that she has lived in this area all of her life and she still sees her same doctor in the community.</p> <p>See Community Engagement section</p>	
<p><b>The setting supports the person’s control of personal resources.</b></p> <p><input checked="" type="checkbox"/> Compliant documentation submitted with attestation.  <input type="checkbox"/> Observation made during on-site visit.</p> <p>People receive the Assisted Living Bill of Rights at move in. It’s also posted on bulletin boards. The person (or their representative ) signs the Bill of Rights to show they received it. Staff at the setting are trained specifically in the HCBS Rule and have a sign off sheet to document it.</p> <p>The people I interviewed did not have the setting manage their money. They either manage their own money or have family do it. Staff said they didn’t usually manage people’s money.</p>	<p>Compliant</p>
<p><b>The setting ensures people’s right to privacy.</b></p> <p><input checked="" type="checkbox"/> Compliant documentation submitted with attestation.  <input type="checkbox"/> Observation made during on-site visit.</p> <p>People receive the Assisted Living Bill of Rights at move in. It’s also posted on bulletin boards. The person (or their representative ) signs the Bill of Rights to show they received it. . It is listed in the lease agreement. They also receive a separate comprehensive four-page privacy notice. Staff at the setting are trained specifically in the HCBS Rule and have a sign off sheet to document it.</p> <p>A person I interviewed said that if there are any cares that are going to take place “Staff always double checks that the door is closed” another said that if she is in the bathroom or something the staff say right away that they will come back instead of waiting, so they have privacy. Staff said they learned in training that people’s privacy was very important.</p>	<p>Compliant</p>
<p><b>The setting ensures people’s dignity and respect.</b></p>	<p>Compliant</p>



- Compliant documentation submitted with attestation.
- Observation made during on-site visit.



*Reminder staff work in people's homes*

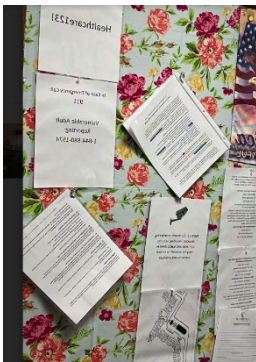
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One of the people I interviewed said " The staff are great; they treat me good". Another person said, " They are more like family". My observations of staff showed that they enjoyed working with the people and I saw respectful interactions.

**The setting ensures people's freedom from coercion and restraint.**

Compliant

- Compliant documentation submitted with attestation.
- Observation made during on-site visit.



*Bulletin board with rights*

People receive the Assisted Living Bill of Rights at move in. It's also posted on bulletin boards. The person (or their representative ) signs the Bill of Rights to show they received it. Staff at the setting are

trained specifically in the HCBS Rule and have a sign off sheet to document it.

People I interviewed said they always feel safe and never feel like they are pressured to do things they don't want to do. One said, "The staff are so kind, they would never do that."

**The setting optimizes individual initiative, autonomy, and independence in making life choices, including daily schedule and with whom to interact.**

Compliant

- Compliant documentation submitted with attestation.
- Observation made during on-site visit.



*Menu and schedule for the day*

People receive the Assisted Living Bill of Rights at move in. It's also posted on bulletin boards. The person (or their representative ) signs the Bill of Rights to show they received it. It is also listed in the lease agreement. Staff at the setting are trained specifically in the HCBS Rule and have a sign off sheet to document it.

The resident handbook informs people they have the right to bring outside providers into their home for any of their care. They even list community providers in the resident handbook.

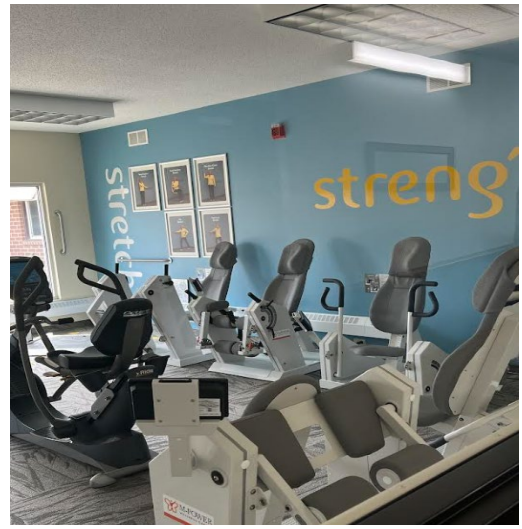
One person interviewed said "I like it here. I get to do things I want to." She said her mom was here previously so she "knew it was going

<p>to be good” The other person interviewed said “I like to keep my days open so I can nap when I want. I am 93 after all” she said when she does want to do activities that staff will help her as needed. Another person interviewed said she likes to go out as much as she can”. The people interviewed said that they are going out as much as they would like to.</p>	
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## Pictures of the HCBS setting



*Mural with Grand Rapids History*



*Fitness room*



*Salon/barber shop*



*Dining room*



*Lounge area*



*Little Cabin/Screened in area*



*Inside the cabin*



*Seating outside the cabin*



*The flowers the people tend to*

## Public comment summary

The Minnesota Department of Human Services (DHS) did not receive public comments for this setting.

Before submitting this settings evidentiary package to the Centers Medicare & Medicaid Services (CMS) for heightened scrutiny, Minnesota DHS sought public comment for 30 days, beginning at 08:00am on 11/29/2023 and ending at 04:00pm on 12/28/2023.

We sought public comments using the following methods:

- Evidentiary packages are posted online on the [Home and Community Based Services Rule transition plan, Requirement for new HCBS settings](#) page
- Notice of public comment period via eList announcement, [DHS requests public comments on an HCBS evidentiary package](#)
- Notification to providers via email with instruction to post in a common area of the setting.
- Notification to managed care organizations and Area Agencies on Aging (AA) via email
- Notification to long-term care ombudsman office via email

## Minnesota's recommendation

**Date of recommendation: 01/17/2024**

Minnesota DHS has determined that this setting meets all HCBS standards and does not have the qualities of an institution.