

June 13, 2014

Cindy Mann  
Director, Center for Medicaid and CHIP Services  
Centers for Medicare and Medicaid Services  
U.S. Department of Health and Human Services  
200 Independence Ave., SW  
Washington D.C. 20201

**Re: CMS Action on Implementation of Federal Regulations for HCBS Settings**

Dear Director Mann:

States are beginning the transition planning process required under the new federal regulations for HCBS settings.

Our organizations are committed to ensuring states and stakeholders work together to ensure the rules' intent— that HCBS are provided in a community-setting — becomes a reality. We write to request the Centers for Medicare and Medicaid Services take action to address three issues: 1) the inadequate public comment processes being proposed by some states, 2) the need for public comment for HCBS provided through 1915(k) programs, and 3) the inappropriateness of payment-source discrimination in provider-controlled settings.

The attached memo from consumer advocates details the concern we are hearing from states initiating the transition process. Further, the memo request clarification from CMS that standards for provider-owned or controlled settings apply to all individuals in the setting.

Please contact Eric Carlson ([ECarlson@nscl.org](mailto:ECarlson@nscl.org)) to follow up on these issues.

Thank you.

Sincerely,

American Association on Health and Disability  
Assisted Living Consumer Alliance  
Disability Rights Education and Defense Fund  
The Consumer Voice on Quality Long-Term Care  
National Council on Aging  
National Disability Rights Network  
National Health Law Program  
National Senior Citizens Law Center