

## West Virginia HCBS State-Wide Transition Plan Competency Post-Test

Name: \_\_\_\_\_

Date: \_\_\_\_\_

1. Who completes the Member-Controlled Settings Assessment?
  - a. Direct Care Worker
  - b. LPN
  - c. Agency Director
  - d. Case Manager or Wraparound Facilitator
  
2. A Member-Controlled Setting is a:
  - a. House or apartment that is owned or leased by the Medicaid waver member or someone in their family
  - b. Day program
  - c. Assisted living facility
  - d. Foster care home
  
3. Members that live in a Provider Controlled Setting must have a signed lease that protects them from unlawful eviction.  
True  
False
  
4. CMS mandated the Integrated Settings Rule to make sure the member's experience is considered when deciding if the place they receive services is a home or community-based setting.  
True  
False
  
5. How often are Setting Assessments done?
  - a. Every 6 months
  - b. Once a year unless the member moves or makes significant changes to their home
  - c. Every 30 days
  - d. Every 90 days

6. CMS requires that waiver members receive services only in formal settings, such as hospitals.

True

False

7. The Settings Assessment helps to ensure that members have control over their Person-Centered Plan and the right to make choices in their lives, such as:

a. Deciding day-to-day activities

b. Having privacy including locks on doors

c. Having control over their finances

d. All of the above

8. If an answer to one or more questions on the Settings Assessment is “No,” then the member’s Case Manager or Wraparound Facilitator must work with the member to correct the issue.

True

False

9. How long does it take to complete the Settings Assessment?

a. A few minutes

b. One day

c. One week

d. One month

10. The questions on the Settings Assessment are easy – the member will not have to look up the answers.

True

False

**Signature:** \_\_\_\_\_