

The DHHS Division of Developmental Disabilities (DHHS-DD) is in the process of making revisions to the Medicaid Home and Community-Based Services (HCBS) Developmental Disabilities Waivers. When these revisions go into effect, it may change the services available to waiver participants. This reference answers common questions that participants and their families may have about how the waiver changes will impact their services.

Discontinued Services

- Q** What services are being discontinued with the waiver changes?
- A** Adult Companion, In-Home Residential Habilitation, and Crisis Intervention Support.
- Q** What happens to my services if I am currently receiving one of the services that is being discontinued?
- A** You may choose to crosswalk to new or updated services intended to take the place of the discontinued services, or you may choose from other available waiver services.

Adult Companion

- Q** I currently receive Adult Companion services. What new services will take the place of Adult Companion under the revised waivers?
- A** Independent Living and Supported Family Living are new services which include similar supports and activities as Adult Companion. Independent Living is for participants who live in their own private homes, and Supported Family Living is for participants who live in a home with their family.
- Q** If I transition from Adult Companion to Independent Living or Supported Family Living, will there be any changes to the amount of services I can receive?
- A** For participants on the Day Services waiver (DDAD), the services cap remains the same at 25 hours per week. For participants on the Comprehensive Waiver (CDD), the services cap for the new services increases to 70 hours per week.
- Q** Are the rates for Independent Living and Supported Family Living different from the rate for Adult Companion?
- A** Yes – the table of proposed rates can be found at <http://dhhs.ne.gov/Pages/DD-Rate-Reform.aspx>.
- Q** What happens if I can no longer afford within my annual budget to purchase the same amount of one of the new services as I currently purchase of Adult Companion, due to the rate increase?
- A** DHHS-DD will grant continuity of care exception funding requests so that you can continue to purchase the same amount of similar services under the waiver amendments as you are able to purchase now.

Q I currently use 25 hours per week of Adult Companion and I'm on the CDD. I want to purchase 50 hours of Independent Living or Supported Family Living per week now that the cap has increased, but I don't have enough money in my budget to do so. Can I get a continuity of care exception to purchase more hours than I currently receive due to the increased cap?

A No – continuity of care exceptions are used to allow you to continue the same amount of similar services as you currently receive if you cannot do so within your current budget. If you are able to purchase a larger amount of services within your budget, you may do so.

But in order to get exception funding to increase the amount of services from what you currently receive, you and your ISP team must show that your needs aren't being met by the current amount of services or the services you can purchase within your budget.

In-Home Residential Habilitation

Q I currently receive In-Home Residential Habilitation services. What new services will take the place of In-Home Residential Habilitation under the revised waivers?

A Independent Living and Supported Family Living are new services which include similar supports and activities as In-Home Residential Habilitation. Independent Living is for participants who live in their own private homes, and Supported Family Living is for participants who live in a home with their family.

Q If I transition from In-Home Residential Habilitation to Independent Living or Supported Family Living, will there be any changes to the amount of services I can receive?

A There was no cap on In-Home Residential Habilitation; however, both Independent Living and Supported Family Living have a cap of 70 hours per week on the CDD waiver.

Remember: These services have a cap of 25 hours per week for participants on the DDAD waiver, but all participants transitioning from In-Home Residential Habilitation were only on the CDD waiver, so only the 70 hour cap is applicable to this scenario.

Q Are the rates for Independent Living and Supported Family Living different from the rate for In-Home Residential Habilitation?

A Yes, there are slight changes in rate - the table of proposed rates can be found at <http://dhhs.ne.gov/Pages/DD-Rate-Reform.aspx>.

Q I currently purchase more than 70 hours per week of In-Home Residential Habilitation. Can I receive an exception to the 70 hour cap on Independent Living or Supported Family Living?

A No – DHHS-DD will not grant exceptions to the 70 hour cap on Independent Living and Supported Family Living.

- Independent Living and Supported Family Living are intended to be *intermittent* residential services.
- If you need continuous residential services, more than 70 hours of services per week, you may choose Residential Habilitation – Continuous Home. This service is typically provided in a group home-type setting, but can be provided in your own private home or family home when you choose to live in a private residence, but require continuous residential services and supports.

- Q** If I need to transition to Residential Habilitation – Continuous Home to receive the amount of residential services I currently receive, how does the rate for Residential Habilitation – Continuous Home compare to the rate for In-Home Residential Habilitation?
- A** In-Home Residential Habilitation is billed at an hourly rate, and Residential Habilitation – Continuous Home is billed at a full day or partial day rate, and there are different rates for each funding tier. Depending on your funding tier and the number of hours the service is provided, the overall cost of Residential Habilitation – Continuous Home may be more or less than the current cost of In-Home Residential Habilitation.
- Q** If I need to transition to Residential Habilitation – Continuous Home to receive the amount of residential services I currently receive, what happens if I can no longer afford within my annual budget to purchase the same amount of Residential Habilitation – Continuous Home as I currently purchase of In-Home Residential Habilitation?
- A** DHHS-DD will grant continuity of care exception funding requests so that you can continue to purchase the same amount of similar services under the revised waiver as you are able to purchase now.
- Q** If I need to transition to Residential Habilitation – Continuous Home to receive the amount of residential services I currently receive, does this change the providers I am able to choose from?
- A** Possibly – Residential Habilitation – Continuous Home can only be provided by an agency provider of DD services. If you are currently receiving greater than 70 hours per week of In-Home Residential Habilitation from an independent provider, you may choose to:
- Reduce the number of hours you purchase to continue with your independent provider using Independent Living or Supported Family Living; or
 - Choose an agency provider and transition to Residential Habilitation – Continuous Home.

Crisis Intervention Support

- Q** I currently receive Crisis Intervention Support services. What service will take the place of Crisis Intervention Support under the revised waivers?
- A** Consultative Assessment is an existing service that was revised to include the services currently provided under Crisis Intervention Support.
- Q** Will the transition from Crisis Intervention Support to Consultative Assessment change the amount of services I am able to purchase?
- A** No – the cap on Consultative Assessment was increased to 1000 hours per year, which is similar to the cap currently placed on Crisis Intervention Support.
- Q** Is the rate for Consultative Assessment different from the rate for Crisis Intervention Support?
- A** Yes – the table of proposed rates can be found at <http://dhhs.ne.gov/Pages/DD-Rate-Reform.aspx>.
- Q** What happens if I can no longer afford within my annual budget to purchase the same amount of Consultative Assessment as I currently purchase of Crisis Intervention Support, due to the higher rate?
- A** The purchase of Consultative Assessment does not count towards use of the annual budget, so the amount of services purchased is based on your documented needs and is not limited by your budget.

Changes to Current Services

Residential Habilitation

- Q** I currently receive Residential Habilitation services. Will my services change with the revised waivers?
- A** Yes – Residential Habilitation is continuing, but will be divided into 3 sub-types of service delivery: Continuous Home, Host Home, and Shared Living. Each sub-type has its own code and rates, so you will have to transition from the current Residential Habilitation code to one of the three sub-types, based on your current living situation.
- If you currently live in a group home, you will transition to Continuous Home.
 - If you currently live in an extended family home (EFH), you will transition to either Host Home or Shared Living. These two services are similar, but Host Home is provided by someone who is an employee of a provider agency and Shared Living is provided by someone who is contracted by a provider agency. Your Service Coordinator will help you determine which service you will transition to.
- Q** Is the current rate for Residential Habilitation different from the rate for the new sub-types of Residential Habilitation?
- A** Yes – the table of proposed rates can be found at <http://dhhs.ne.gov/Pages/DD-Rate-Reform.aspx>.
- Q** What happens if I can no longer afford within my annual budget to purchase the same amount of one of the new service codes as I currently purchase of Residential Habilitation, due to the rate increase?
- A** DHHS-DD will grant continuity of care exception funding requests so that you can continue to purchase the same amount of similar services under the waiver amendments as you are able to purchase now.

Transitioning Between Services

- Q** If a service I use is changing or being discontinued and I have to transition to a new service, when does this transition take place?
- A** Transitions from current services and service codes to new services and service codes must be complete within 90 days of the start date of the waiver amendments. Your service coordinator will contact you when the waiver amendments are approved to begin planning for when you want this transition to take place.
- Q** Some of my current services are staying the same, but have revised rates, and some have to transition to new services or service codes. Can I transition some of my services to the new service/service code/rate and transition the rest of my services to the new service/service code/rate at a later time?
- A** No – the transition to new services, service codes, and rates must take place at the same time for all services you are currently using and will continue to use.

General Budgeting and Exception Questions

- Q** I currently have a continuity of care exception because my budget decreased when I got a new ICAP. Will my continuity of care exception be allowed to continue with the new services and rates?
- A** DHHS-DD will grant continuity of care exception funding requests so that you can continue to purchase the same type amount of services under the waiver amendments as you are able to purchase now.
- Q** Due to changes in rates with the revised waivers, I'm concerned I won't be able to purchase the same services I have now within my annual budget.
- A** DHHS-DD will grant continuity of care exception funding requests so that you can continue to purchase the same amount of similar services under the waiver amendments as you are able to purchase now.
- Q** I want to purchase more of a service I already receive when the waiver revisions go into effect, but I don't have enough money in my budget. Can I get a continuity of care exception to purchase an increased amount of services?
- A** No – continuity of care exceptions are used to allow you to continue the same amount of similar services as you currently receive if you cannot do so within your current budget. If you are able to purchase a larger amount of services within your budget, you may do so.
- But in order to get exception funding to increase the amount of services from what you currently receive, you and your ISP team must show that your needs aren't being met by the current amount of services or the services you can purchase within your budget.
- Q** I currently have negotiated rates with my providers that are higher/lower than the new rates in the waiver amendments. Can I continue to negotiate rates that are different from those listed in the fee schedule?
- A** Yes – You are allowed to negotiate rates with DD service providers. The rates listed in the fee schedule are the **maximum** allowed rates for each service, so you may negotiate a rate that is lower than the rate listed, but cannot negotiate a rate higher than the rate listed.
- If you currently have a negotiated rate that is higher than the maximum allowed rates in the waiver amendments, these negotiated rates cannot continue. You will have to negotiate a new rate which is at or under the maximum allowed rate.