

Advisory Committee on Developmental Disabilities

Meeting Minutes

May 14, 2025

I. Call to order:

Lorie Regier called to order the regular meetings of the Advisory Committee on Developmental Disabilities (DD) at 10:00 am on Wednesday, May 14, 2025 held at Conference Room P, 5220 South 16th St, Lincoln, NE.

II. Roll call:

The following persons were present:

Advisory Members Present:

Dianne DeLair, Mark Shriver, Kristen Larsen, Joe Valenti, Cris Petersen, Lorie Regier, Debbie Salomon, Dorothy Ackland, Mike Browne, Jennifer Hansen, Cathy Martinez, Jennifer Miller, Suzie Wahlgren

Advisory Members Absent: Lisa Pruitt, Christina Evans, Angie Willey, Linda Clements

DHHS Staff: Tony Green, Kristen Smith, Jenn Clark, Tyla Watson, Paul Edwards, Paul Murdock (Liberty Healthcare)

III. Approval of Agenda:

- Motion made by Joe Valenti 2nd by Dianne DeLair to approve the agenda as presented.
 - All in Favor: Dorothy Ackland, Mike Browne, Dianne DeLair, Kristen Larsen, Cathy Martinez, Cris Petersen, Debbie Salomon, Mark Shriver, Joe Valenti, Suzanne Wahlgren
 - All Opposed: None
 - Abstain from voting: None
 - Not Present: Jennifer Hansen, and Jennifer Miller

IV. Approval of April Meeting Minutes:

- Motion made by Mike Browne 2nd by Cris Petersen to approve the minutes as presented.
 - All in Favor: Dorothy Ackland, Mike Browne, Dianne DeLair, Kristen Larsen, Cathy Martinez, Cris Petersen, Debbie Salomon, Mark Shriver, Joe Valenti, Suzanne Wahlgren
 - All Opposed: None
 - Abstain from voting: None
 - Not Present: Jennifer Hansen, and Jennifer Miller

V. Quality/Liberty Healthcare Corporation Update – presented by Paul Edwards and Paul Murdock:

- HANDOUT: Transition Planning for Activities/Initiatives – Liberty Healthcare Corporation

- Liberty has been a great partner. DHHS looks forward to continuing that relationship. We want to review/update the committee on the activities related with Liberty.
 - Critical Incident Management and Mortality Review – Have been going really well with Liberty. These reviews will continue to be done by Liberty.
 - Reviewing approx. 50% of the General Event Reports (GER's) for Critical Incident Management.
 - Reviewing approx. 40-50 mortality reviews are completed a month. This is for all waivers facilitated by the Division – Aged and Disabled (A&D), Traumatic Brain Injury (TBI) and Developmental Disabilities (DD) Waivers. The majority of the mortality reviews are for people that utilized the Aged and Disabled waiver.
 - Technical Assistance Program (TAP) was underutilized and redundant to what DHHS already can provide. This initiative was stopped in March 2025. Utilization Review had not been developed, was brought back in house, and we will review opportunities for development of this initiative in 2026.
 - The department will shift in-house Human and Legal Rights Advisory Committee & Onsite Provider Review
 - 04/01/2025 Human and Legal Rights Advisory Committee (HLRAC) transitioned to the DDD Quality Team.
 - Liberty built the committee, the department is taking over the facilitation of the committee. They will use the same policies and practices that Liberty helped create for the committee.
 - Onsite Provider review (OPR) – Liberty will support conduct of OPR through June 2025. We are going to pause this initiative. Liberty developed this program and it has been used in other states. Unfortunately, the program was not the right fit for Nebraska at this time. It is not statistically validated tool and there continued to be duplication to other initiatives (NCI, settings rule, etc).
- Committee comments/concerns:
 - Continue to be concerned about Provider Review. The service coordinators are already overburdened. Committee wants to make sure the providers are being held accountable.
 - Would still like to see a provider report card. Feel this would be helpful for families. – Division response: This is still on the table, is still in planning phase. We've currently working through elements people might find most important and what we can give out.
 - Concerns about getting to the information. The system is very cumbersome.
 - Committee member interest areas for critical incident tracking include: the root cause, provider name, and elopement side

VI. Elimination of Waitlist Update - presented by Kristen Smith and Tony Green

- HANDOUT: Elimination of Waitlist Updates April 30, 2025
- Total of 2,815 offers have been made since March 2024
 - 1242 Offers have been accepted
 - 884 Offers are pending

- 689 Offers have declined
- 290 Offers to be made during the month of May.
- 68 individuals have accepted the Comprehensive Developmental Disabilities Waiver
- Family Support Waiver (FSW)
 - 890 people have accepted the waiver offer of those 890
 - 118 are undecided on provider and/or awaiting summer to utilize.
 - 149 currently have an approved service authorization in Therap.
- Committee feedback/questions:
 - Some service coordinators are giving incorrect information to families. When you are new to the waiver it can be overwhelming. Example of incorrect information: Cannot use Family Support Waiver to support childcare services and that someone turning 19 will get the Day waiver (this should be 21). *FOLLOW UP:* Committee members asked to send names of those service coordinators to Jenn Clark so she can follow up with the team.
 - Shared living provider concerns on a long-term basis. What happens during transition. When a shared living provider ages, there is trauma in transition. These things need to be recognized.
 - Does the division get a sense of people's preference between types of service? It truly depends on family. A majority of families are choosing the have people supported at home. No support or living at home is our largest group of people utilizing services.
 - How are we going to address the loss of grants and other funding that we have relied on to support families. If all the community supports and grants go away how are those going to be covered. These may be things that communities at a local level may need to support.
 - March 2025 - 4782 people on the comprehensive waiver
 - 1797 Shared Living Provider (SLP)
 - 925 Group Home
 - 3 Host Home
 - 607 Independent Living
 - 774 Supported Family Living
 - 687 No Residential Services

VII. **interRAI Update presented by Tony Green**

- HANDOUT: Number of People in Each Tier and Annual Budget Per Tier
- We have people that are on the comprehensive waiver, that are not using residential services. Some of them are using respite every 90 days, so they don't lose the comprehensive waiver. The division understands people do not want to lose that safety net, however if all someone needs or wants is respite occasionally, they do not need the comprehensive waiver. Note: this does not mean that everyone not using services because they don't need them, some people may be looking for a provider or have resource issues.
- *FOLLOW UP:* Committee request to see the tier budget numbers quarterly, adding the average utilization of each tier.

VIII. Electronic Visit Verification Update presented by Jeremy Brunssen, Deputy Director of Finance and Program Integrity.

- HANDOUT: Medicaid Provider Bulletin 25-24
- Auditor of public account findings shared an opinion that the department needs more control in a system on the utilization of services.
- Reviewing the 25-24 Provider bulletin. Changes effective June 25, 2025:
 - Require a (National Provider Identification) NPI number on the claims (who is providing and billing the services.)
 - The caregiver or independent provider exceeds 16 hours of visits per day for applicable service code.
 - Residential receiving more than 16 hours of service per day for applicable service codes.
- Committee Feedback/Questions:
 - I have one provider that will provide support for the weekend. It's about 17- 18 hours. This may limit the number of hours this person can be paid. 16 hours doesn't always work for people. This is not always realistic for families. Situations come up, it isn't always black and white.
 - Are there quite a few providers that do not have NPI numbers? Response: Utilizing NPI number is the national standard, it follows someone between providers. The majority of the DD specialized providers have their NPI numbers, the majority still needing numbers would be independent providers. We don't want something come up at the end of June there people can't be paid. NPI can be added after however we want to be as proactive as possible.
 - This is phase 2, are there additional phases planned? Answer – No, there are no significant changes currently being looked at or discussed related to the auditor public account.
 - Does Medicaid read/see the comments from the DD waivers? There were comments related to requiring 100% accuracy that people have expressed concern about that might be helped. Answer: Medicaid and Developmental Disabilities do share this information between the divisions. Medicaid has seen the concerns expressed regarding requiring 100% accuracy.
 - Why can't we standardize the EVV application? Netsmart won the bid for the state. Some providers were already using other vendors such as Therap and/or Wellsky. Those vendors connect with Netsmart as 3rd party vendors. We encourage consistency between those vendors on set up, however there are differences between them.

IX. Public Comment

- Edison McDonald, Executive Director. ARC of Nebraska, last official day will be at the end of this month with the ARC of Nebraska. Trying to keep hats separate between future plans and current activities. You all have covered a lot of the questions I wanted to cover today, which is a testament to how far this committee has come. Think about the definition of what ending the waitlist means. Figuring out the issues of those that need services, but between people the definition of "need" may not agree on. Thanks to the Department, especially on expanding services to Katie Beckett. Trying to balance out waitlist and rates. We've made steps to ending the waitlist, would encourage everyone to keep looking at rates.

Want to make sure people are getting what they need. We've seen more possible cuts in the last 5 months that we've seen in years. If how things are written now go through you all will need to look at how to replace some of those things at a state level. It would take hundreds of hours from citizens to replace the things that are currently being done by network. Glad there are leaders like you all that step up.

- Phil Gray, Family Member – At the national level there is an attack on the Disability community – we need to make sure the focus is that we are here and that these are services that we need. We aren't arguing for funding, we are arguing for the need of funding. I don't think it's something we can do on the local level, this is at a national level. I think Nebraska has been very fortunate with leadership.
- Kristen Larsen, Nebraska Council on Developmental Disabilities– Want to thank Edison for his leadership through the years on behalf of the Council and the DD community. We are currently facing federal threats that could impact the future of NCDD and the broader DD Network in Nebraska. Authorizations under the federal DD Act which establishes DD Network programs — and the annual appropriations from Congress to fund these programs are two different things. Under President Trump's proposed budget for federal fiscal year 2026, the DD Network Partners — including State DD Councils, UCEDDs, and Protection and Advocacy Systems — would not be funded. I strongly encourage everyone to reach out to their congressional representatives and senators to express concern about potential Medicaid cuts and the possibility that DD Act programs may go unfunded. These concerns would have an unprecedented impact on our vulnerable populations. HANDOUT: Nebraska Council on Developmental Disabilities (NCDD) Impact Statement.

X. Future Meeting dates

- Joe Valenti motion 2nd by Mike Browne to cancel the June meeting, skip July, and have the next meeting August 13, 2025. Going forward the committee will continue to meet monthly, 2nd Wednesday of each month (Sep 10, 2025; Oct 8, 2025; Nov 12, 2025; Dec 10, 2025; January 14, 2026; February 11, 2026; March 11, 2026; April 8, 2026; May 13, 2026).
 - All in Favor: Mike Browne, Dianne DeLair, Kristen Larsen, Cris Petersen, Debbie Salomon, Mark Shriver, Joe Valenti, Suzanne Wahlgren, Jennifer Hansen, and Jennifer Miller
 - All Opposed: None
 - Abstain from voting: None
 - Not Present: Cathy Martinez and Dorothy Ackland

XI. Medicaid Advisory Committee (MAC) and State Review Team (SRT) Recommendations presented by Phil Gray and Jennifer Hansen

- The State Review Team was previously under Medicaid. As a subcommittee under MAC there was to be a review of Family Support Waiver and State Review Team to improve communications and provide recommendations to parents and providers. After that review began the state review team from Medicaid to Developmental Disabilities (Which the subcommittee was in support of).

- Ended up doing two studies. Findings from Study:
 - Parents are still confused by the process. Getting conflicting information between both divisions.
 - Request for medical records was not consistent and confusing. Sometimes they were asked for paper records instead of electronic records.
 - Getting MCO cards, how does someone get MCO cards because
 - First study, parents never received a formal notice of eligibility. In the Second study, the majority did get written notice of eligibility. They did have one parent that was denied, however it did not give any details as to why.
- Recommendation from the Study:
 - Recommended that the requests for Medicaid and DD should come out in one packet and not two separate packets and there should be a cover letter describing what all of the handouts are.
 - Recommend a separate Family Support Waiver application. It is only the kid's medical information and income. The current applicant can be very cumbersome for families.
 - Medicaid needs to meet with Managed Care Organizations (MCO's) to make sure the MCO cards are mailed timely.
 - Thinks the committee should be doing these studies. Shouldn't be waiting for the Department to do it. If we are going to do a review or study in the future, we should be working with the state a head of time. Talking to front line supervisors. Shouldn't be talking to Tony, should be talking to those that use it.
 - We need to figure out how to strengthen our advocacy.
- MAC meeting tomorrow, Phil is expecting to get responses to their recommendations.
- Committee asked if they should have a representative from Medicaid at these meetings to hear the committee's input at DD Advisory. Answer: Would recommend inviting other divisions on an as needed or topic specific.
- *FOLLOW UP*: Phil to share the report/findings to share with the committee.

XII. Adjournment: Committee meeting ended at 2:00 PM

Next Meeting:
August 13, 2025

Advisory Committee on Developmental Disabilities

Order of Business

In-Person - Conference Room P, 5220 South 16th St, Lincoln, NE

Wednesday, May 14, 2025

10:00 AM – 2:00 PM CT

- 10:00 a.m.** Call Meeting to Order
- 10:01 a.m.** Roll Call
- 10:06 a.m.** Order of Business:
Committee action: Motion to approve the Order of Business
- 10:10 a.m.** April Meeting Minutes:
Committee action: Motion to approve the March meeting minutes.
- 10:15 a.m.** Quality/Liberty Healthcare Corporation Update
- Mortality Reviews
 - Critical incident Management (CIMP) and Root Cause Analysis (RCA)
 - Human and Legal Rights Advisory Committee (HLRAC)
 - Technical Assistance Program (TAP)
 - Onsite Provider Review (OPR) and Report Card
- 10:40 a.m.** Elimination of Waitlist Update: Division of Developmental Disabilities to update committee on activities related to the Elimination of the Waitlist since the March 2025 meeting. *Handout:* Waiver offers Update 4.30.2025
- 11:00 a.m.** interRAI Update
- Level of Care
 - Case Planning
 - Budgets
- 11:45 a.m.** Electronic Visit Verification Update
- *Handout:* Medicaid Provider Bulletin 25-04
- 12:00 (Noon)** Public Comment
- 12:05 p.m.** Lunch Break – Lunch to be provided to DD Advisory Committee.
- 12:25 p.m.** Future meeting dates: The last meeting currently on the calendar is June 11, 2025. The committee has been meeting monthly, 2nd Wednesday of each month. If the committee would like to continue with this pattern, meeting dates would be:
- | | |
|----------------------|---------------------|
| ▪ July 9, 2025 | ▪ January 14, 2026 |
| ▪ August 13, 2025 | ▪ February 11, 2026 |
| ▪ September 10, 2025 | ▪ March 11, 2026 |
| ▪ October 8, 2025 | ▪ April 8, 2026 |
| ▪ November 12, 2025 | ▪ May 13, 2026 |
| ▪ December 10, 2025 | ▪ June 10, 2026 |
- Committee action: Consider a motion to set future meeting dates.

12:45 p.m. Medicaid Advisory Committee (MAC) and State Review Team (SRT)
Recommendations – Phil Gray & Jennifer Hansen

2:00 p.m. Adjournment

DRAFT

Transition Planning for Activities/Initiatives

DDD began partnership with Liberty Healthcare Corporation in 2020.



Mortality Reviews

Liberty reviews **100%** of mortalities on Home and Community-Based Services (HCBS) Waivers and at the Beatrice State Developmental Center.

Critical Incident Management Process (CIMP) and Root Cause Analysis (RCA)

CIMP reviews 100% of high notification GERs, 10% of medium GERs on the CDD and DDAD waivers; and 100% of GERs for the AD and TBI waivers.

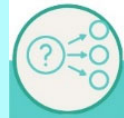


Technical Assistance Program (TAP)

DDD will integrate the training assistance program within the current in-house training operations, provider relation, and support roles.

Utilization Review

DDD is currently planning to add the Utilization Review program as a strategic goal for 2026.



Onsite Provider Review (OPR)

Liberty Healthcare will support conduct of OPR through June 2025. DDD Leadership & the Quality team are evaluating how best to utilize current provider assessments and participant feedback activities in the creation of potential provider review process moving forward.



Human and Legal Rights Advisory Committee (HLRAC)

The HLRAC will transition to the DDD Quality Team starting in April 2025.

DDD will continue to develop and operate the HLRAC program as part of a long-term strategic plan.



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DEPT. OF HEALTH AND HUMAN SERVICES

Helping People Live Better Lives.

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Waiver Offers March 2024 – April 30, 2025

A total of 2,815 offers have been made.

Family Support Waiver (FSW)

Accepted	890
Declined	577
Pending	517
Total	1984

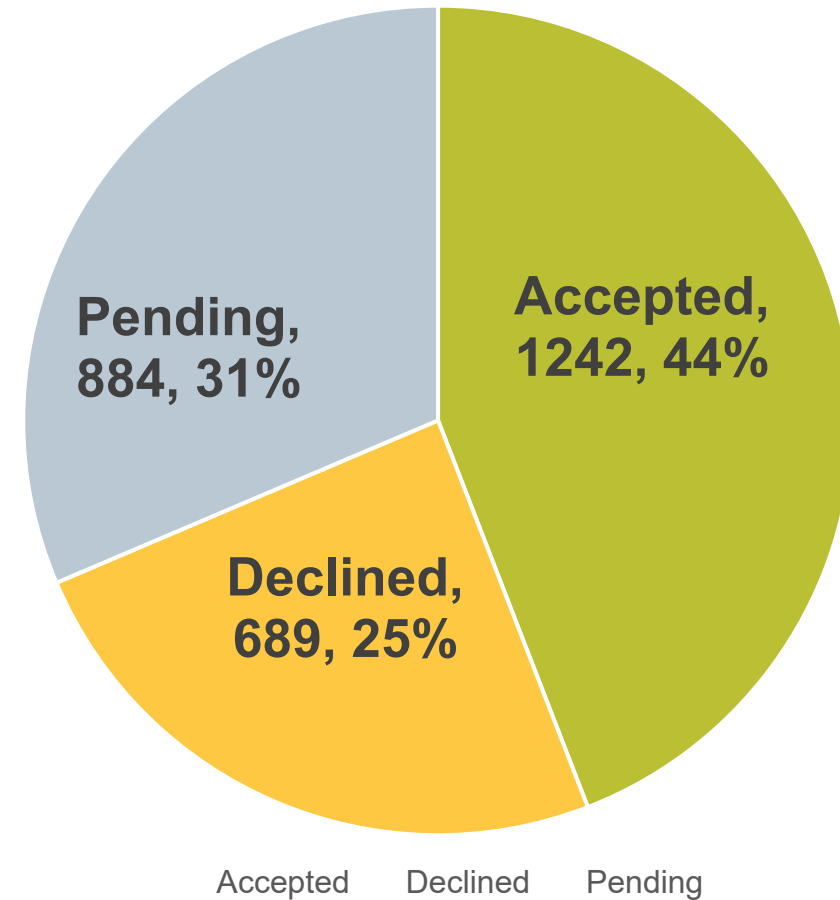
Comprehensive Developmental Disabilities Waiver (CDD)

Accepted	68
Declined	0
Pending	0
Total	68

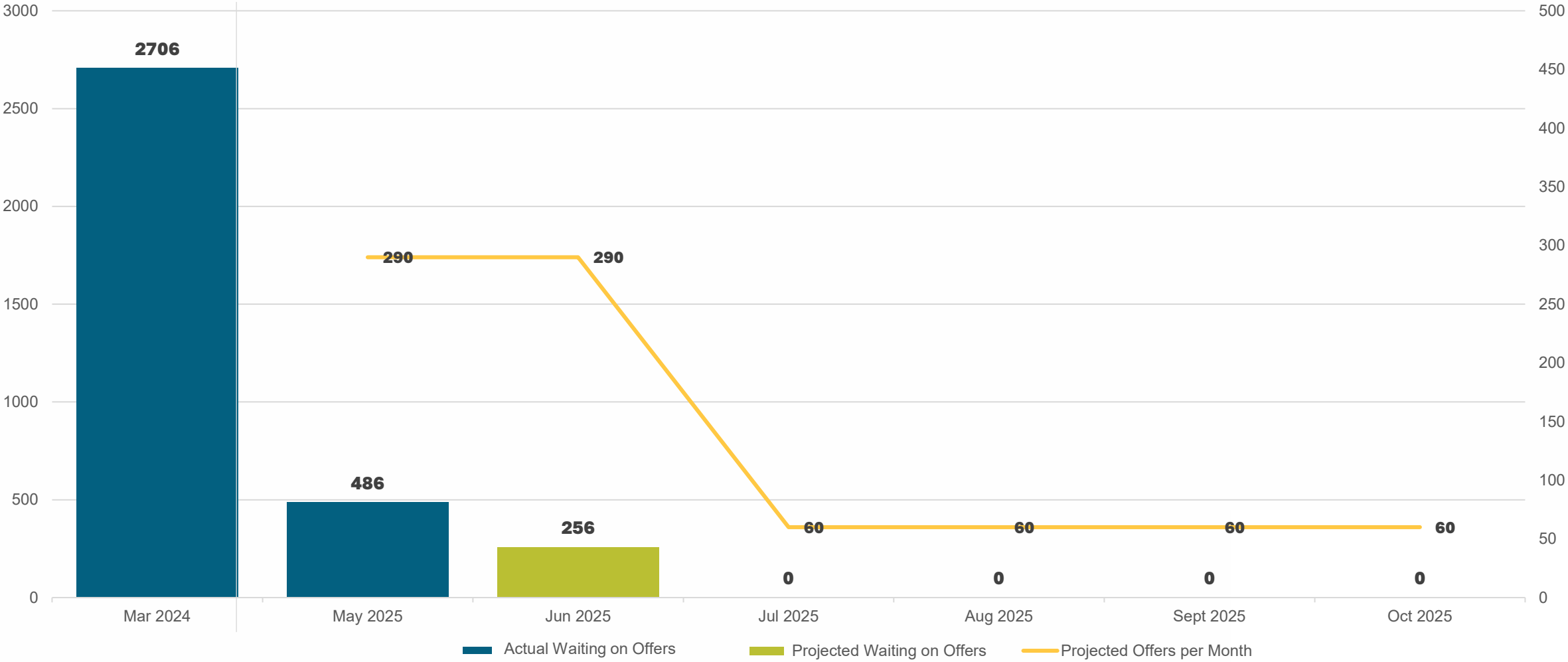
Developmental Disabilities Adult Day Waiver (DDAD)

Accepted	284
Declined	112
Pending	367
Total	763

Status of Total DD Waiver Offers

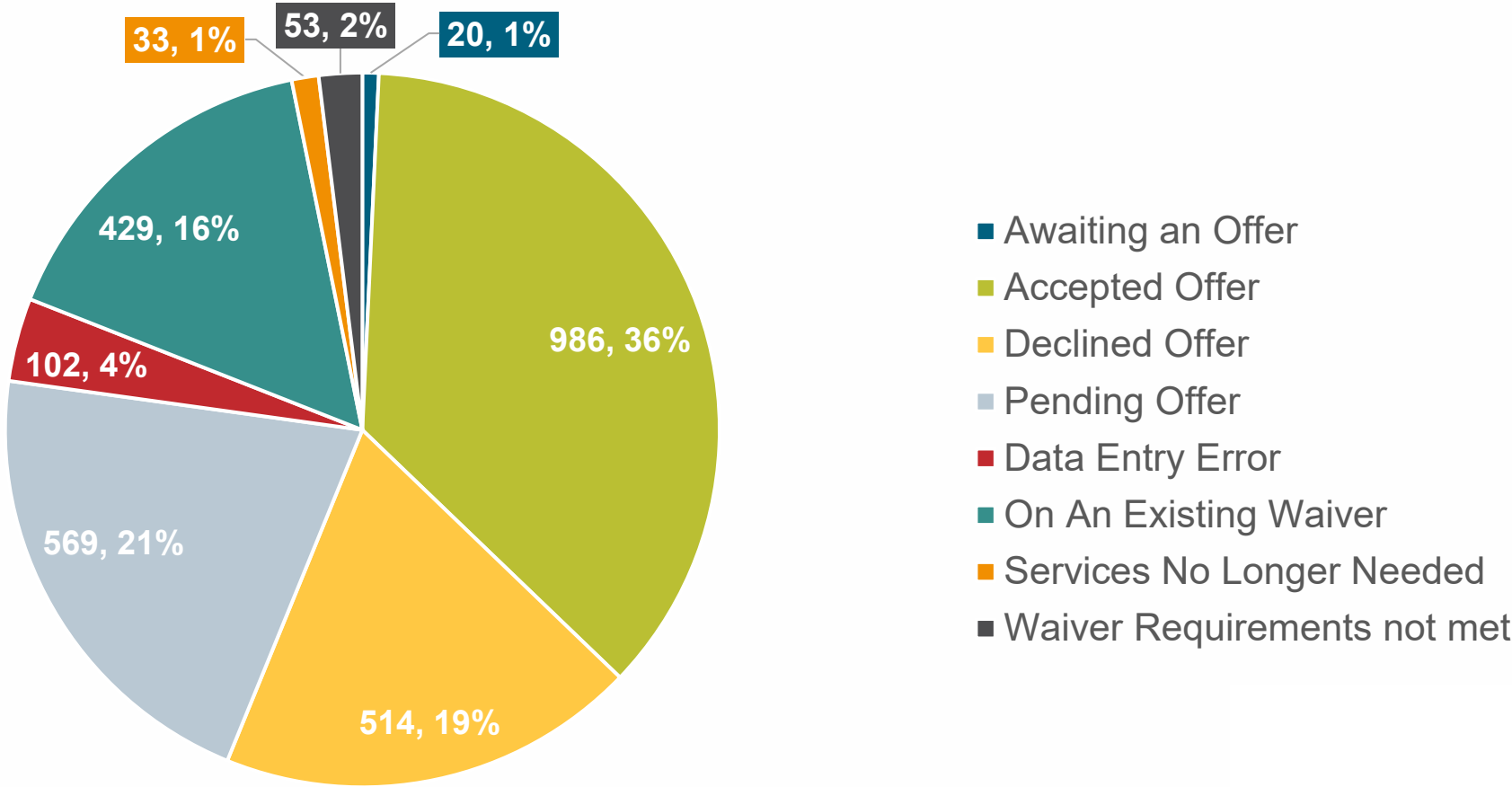


Specialized Service Offer Projections



Helping People Live Better Lives.

Registry March 2024 - Where are they now?



Final Disposition Status of individuals on the starting waitlist (3/1/2024) totaling 2706 individuals including 102 duplicate entries. Updated 4/30/25

Helping People Live Better Lives.

Division of Developmental Disabilities
 Advisory Committee on Developmental Disabilities
 Number of People in Each Tier and Annual Budget Per Tier

	Tiers								No Current Budget		Totals:
	Advanced		High		Intermediate		Basic				
Waiver:											
CDD	445	9%	1206	25%	1978	41%	1167	24%	12	0%	4808
DDAD	10	2%	58	10%	301	50%	205	34%	33	5%	607
	Annual Budget per Tier										
CDD	\$306,794.22		\$194,379.86		\$126,437.19		\$104,528.76				
DDAD	\$99,161.09		\$58,835.07		\$33,576.34		\$24,111.48				

To: All Providers Participating in the Nebraska Medicaid Program
From: Drew Gonshorowski, Director *DG*
Date: April 23, 2025
Re: All PAS and HCBS Waiver (AD, DDAD, CDD, TBI, FSW) Providers: Upcoming Changes to EVV

The information in this bulletin updates Provider Bulletin [17-09](#).

Attention: Nebraska Medicaid is issuing this provider bulletin for all Personal Assistance Service (PAS) and Home and Community-Based Service (HCBS) providers to inform them that additional changes are being made to the Electronic Visit Verification (EVV) system to ensure that Nebraskans get the services they need.

In 2020, Nebraska Medicaid announced that PAS and HCBS providers were required to use the EVV system for their billing as of January 2021. Recent audit findings show that not all providers have fully complied with the regulations outlined in the requirements of the 21st Century Cures Act and Nebraska Administrative Code (NAC) titles, 403, 404, 471, and 480.

An audit by the State Auditor determined that some providers are out of compliance with the state and federal regulations to document and verify that the caregiver was with the client completing services. Claims can only be submitted for payment when the caregiver follows these requirements to substantiate their presence with the client.

Per the 21st Century Cures Act, all providers participating in the Medicaid program who render Personal Care Services (PCS) or Home Health Services (HHCS) are required to use the EVV system. In this bulletin, providers are defined as agency providers, independent providers, and caregivers.

Changes Effective June 25, 2025

This provider bulletin aims to provide advance notice and the opportunity to ask questions and/or provide feedback.

- Effective June 25, 2025, PAS and HCBS EVV claims will not be paid if any of the following apply:
 - The provider or caregiver does not have a National Provider Identification (NPI) associated with the EVV visit. (See [Provider Bulletin 24-24](#) for more information.)
 - The caregiver or independent provider exceeds 16 hours of visits per day for applicable service codes.
 - A recipient receives more than 16 hours of services per day for applicable service codes.
 - The provider fails to comply with state and federal regulations.

Nebraska Medicaid is working with our EVV vendor, Netsmart, to implement system controls to enforce these regulations. Future information, including stakeholder engagement, will occur ahead of any scheduled implementation.

These requirements also apply to claims submitted by alternate EVV vendors. If you utilize an Alternative EVV vendor, please contact your vendor to ensure compliance.

Provider Resources

Information on using the EVV system including provider training, stakeholder meetings, informational materials, and service codes can be found online at: <https://dhhs.ne.gov/Pages/Electronic-Visit-Verification.aspx>.

Online training and additional resources are available at no cost on Nebraska Medicaid's website at: <https://dhhs.ne.gov/Pages/EVV-Provider-Training.aspx>. Providers can also access training on Netsmart's website at: <https://mobilecaregiverplus.com/training/>.

Provider information on using the EVV system for PAS services can be found online at: <https://dhhs.ne.gov/Pages/Personal-Care-Services.aspx>.

Provider information on using the EVV system for HCBS services can be found online at: <https://dhhs.ne.gov/Pages/Medicaid-Home-and-Community-Services-Provider-Information.aspx>.

Provider Bulletins, such as this one, are posted on the DHHS website at <https://dhhs.ne.gov/pages/Medicaid-Provider-Bulletins.aspx>. Please subscribe to the page to help you stay up to date about new Provider Bulletins.

If you have questions regarding this bulletin, please email DHHS.MedicaidFA-EVV@Nebraska.gov.

PUBLIC MEETING NOTICE

Advisory Committee on Developmental Disabilities

Wednesday, May 14, 2025

10:00 a.m. – 2:00 p.m. CT

PLEASE TAKE NOTICE that on Wednesday, May 14, 2024, at 10:00 AM CT, the Advisory Committee on Developmental Disabilities will hold an in-person meeting. Members of the Committee or the public may attend the meeting at the Nebraska Department of Health and Human Services, 5220 South 16th St, Conference Room P, Lincoln, NE 68512.

This notice with the agenda and other materials are available on the Committee's webpage at <https://dhhs.ne.gov/Pages/DD-Advisory-Committee.aspx>. The agenda will be kept continually current and readily available for public inspection at the Department of Health and Human Services, 301 Centennial Mall South, Third Floor, Lincoln, NE 68509 during normal business hours.

The meetings of the Advisory Committee on Developmental Disabilities fall under the Nebraska Open Meetings Act. A copy of the Act is posted on the wall in the meeting room.

The agenda was emailed to the committee members prior to the meeting, on Monday, May 5, 2025. Meetings documents were posted on the committee webpage <https://dhhs.ne.gov/Pages/DD-Advisory-Committee.aspx> on Tuesday, May 6, 2025.

The above meeting notice was posted in the statewide paper, Omaha World Herald on May 9, 2025. Meeting notice is also posted on the developmental disability public division calendar <https://dhhs.ne.gov/Pages/Developmental-Disabilities.aspx> and the Nebraska Public Meeting calendar <https://www.nebraska.gov/calendar/index.cgi>.