Summary of Changes to Policy ManualJuly 2025



Summary of Changes to DD HCBS Policy Manual

The Department of Health and Human Services (DHHS), Division of Developmental Disabilities (DDD) has revised the Developmental Disabilities (DD) Home and Community-Based Services (HCBS) Policy Manual.

This document includes corrections to grammar and spelling, amends references to the ICAP and Developmental Index to the interRAI, updates other terminology to reflect current usage and practice, and replaces mentions of the Individual Support Plan (ISP) with Person-Centered Plan (PCP).

This document contains an overview of changes made to the DD HCBS Policy Manual published on July 1, 2025.

Chapter 1: Introduction

- 1.2 Purpose of the DD HCBS Policy Manual
 - Updated the document language to include DD HCBS Provider Policy Manual.
- 1.4 Purpose of the DD HCBS Policy Manual
 - Updated the section and removed DD-specific processes.
 - Shorten the process of distribution.
- 1.7 State and Federal Laws, Rules, Regulations, and Policies Governing Programs
 - Removed this section from the DD HCBS Policy Manual.
- 1.8 State and Federal Agencies Involved in Administration, Operation, and Oversight
 - Removed this section from the DD HCBS Policy Manual.
- 1.9 Honoring the Governor's Mission and Priorities
 - Removed this section from the DD HCBS Policy Manual.
- 1.10 Following the DHHS Mission
 - Removed this section from the DD HCBS Policy Manual.

Chapter 2: Eligibility Entry into Services

- 2.1 Eligibility Requirements
 - Updated eligibility requirements to align with Regulations and Waiver changes.
- 2.2 Medicaid Eligibility
 - Updated eligibility requirements to align with Regulations and Waiver changes.
- 2.3 Statutory Requirements for Developmental Disability
 - Added requirements from the DD Services Act.
- 2.4 Institutional Level of Care Requirements
 - Updated language from Individual Support Plan (ISP) to Person-Centered Plan (PCP).
 - Removed ICAP information.
- 2.6 Process of Eligibility Determination
 - Updated the Eligibility Determination process.
 - Removed and updated outdated language.
- 2.7. Registry for Medicaid HCBS DD Waiver Services
 - Replaced title to Prioritization for Medicaid HCBS DD Services.
 - Updated the section to include prioritization in the case that a wait list is necessary..
- 2.8 Waiver Participation Requirements Eligibility Requirements

- Removed outdated Funding Officers for Medicaid HCBS DD Services and replaced with Waiver Participation Requirements.
- 2.9 Determining Individual Budget Amount
 - Removed outdated Funding Offer Process and moved the process of Determining Individual Budget Amount (IBA) to this section.
- 2.10 Ending Services
 - New section, previously Waiver Participation Requirements.
 - Waiver Participation Requirements have been moved to section 2.8.

Chapter 3: Participant Rights and Rights Restrictions

- 3.3 Informed Consent for Rights Restrictions
 - Add language to include Legal Guardian.
- 3.6 Habilitation Programs and Behavior Support Plan
 - Updated Language to outline who can complete a behavior support plan.
- 3.8 Emergency Safety Intervention
 - Added language to include The Mandt System.
- 3.10 Complaints
 - Added language requiring complaints related to the HCBS Final Settings Rule.
- 3.11 Appeal/Fair Hearing
 - Removed language specific to DD processes.

Chapter 4: Service Coordination

- 4.1 Service Coordination for Waiver Services
 - Removed Section 4.1 Service Coordination for People on the Registry.
 - Moved section 4.2 Service Coordination for waivers to section 4.1.

Chapter 5: Person-Centered Planning and Implementation

- 5.2 Funding Tiers
 - Updated outdated language to align with waiver amendments and regulations.
 - Provided additional clarity in funding tiers for 24-hour care.
- 5.4 Documentation in the Person-Centered Plan
 - Updated the participant's identified risks and combined duplicative sections.
- 5.5 Person-Centered Plan Team
 - Updated outdated language to align with waiver amendments and regulations.
- 5.6 Individual Family Meeting
 - Updated language to align with regulations.
- 5.7 Annual Person-Centered Plan Meeting
 - Updated the outdated language to align with waiver amendments.
- 5.11 Habilitation Programs
 - Added the new services to the list of habilitative services.

Chapter 7: Provider Requirements

- 7.1 Core Requirements for All Providers
 - Updated the requirements for providers of the new services.
 - Updated the requirements for the National Provider Identifier (NPI) number.
 - Added new services to the EVV Requirement.
- 7.2 Agency Provider Requirements
 - Updated the list of services that are offered by the agency provider.
 - Added HCBS Final Settings Rule to the training section.
 - Updated the shared living requirements.

- 7.3 Independent Provider Requirements
 - Updated the list of services that are offered by an Independent provider.
- 7.4 Virtual and Remote Supports as Modalities within Existing Service Provider Requirements
 - Updated this section to include the Modalities within Existing Services.
 - Added services that can be provided via remote supports.
 - Updated language for Agency and Independent provider requirements.

Chapter 8: Partnership with Vocational Rehabilitation

Service summaries have been removed from this section and moved to the public website: https://dhhs.ne.gov/Pages/DD-Service-Array.aspx

- 8.1 Competitive Integrated Employment
 - This section has been moved from section 9.1.
- 8.2 Referrals for Vocational Rehabilitation Services
 - Added language to align with the Benefits Counseling service.
 - Removed the list of services not related to employment.
- 8.6 Availability of Developmental Disabilities Services
 - Updated list of Day Services.
 - Removed the list of services unrelated to employment.

Chapter 9: Central Office Approval

This chapter was previously the Partnership with Vocational Rehabilitation chapter. That information has been moved to Chapter 8

The following sections are new to Chapter 9:

- 9.1 Benefits Counseling Authorizations Beyond 30 Hours Per Year
- 9.2 Community Integration Serving Individuals 18 Years and Older with Children 13 Years and Younger
- 9.3 Youth Continuous Home Extension
- 9.4 Residential Settings for Youth Ages 18 and Younger (Continuous Home, Host Home, Shared Living)
- 9.5 Home and Vehicle Modifications Above \$10,000 and Prior to 5 Years
- 9.6 Legally Responsible Individual Requesting to Become an Independent Provider
- 9.7 Relative Legal Guardians Requesting to Become an Independent Provider