



We are glad you are here!

HCBS Policy Open House

December 2024

Presented by the Division of Developmental Disabilities
Home and Community-Based Services

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Agenda

- General Information for All Waivers
- Overview of Appendices
- Timeline
- Resources
- Questions and Comments



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General Information for all Medicaid Home and Community Based 1915(c) Waivers

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Medicaid Home and Community-Based Services (HCBS) Waivers

- Nebraska uses 1915(c) HCBS waivers to waive certain Medicaid requirements in order to furnish an array of home and community-based services that promote community living for Medicaid beneficiaries and avoid institutionalization in a nursing facility (NF) or Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID).
- To provide waiver services, Nebraska must submit an application to the federal Centers for Medicare and Medicaid (CMS) for a three-year initial and then at least every five years.
- In Nebraska, the Division of Developmental Disabilities (DDD) is responsible for Medicaid 1915(c) HCBS Waivers.

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The Medicaid (HCBS) Waiver Application

The waiver application contains 10 appendices:

- Appendix A: Waiver Administration and Operation
- **Appendix B: Participant Access and Eligibility**
- **Appendix C: Participant Services**
- **Appendix D: Participant-Centered Planning and Service Delivery**
- Appendix E: Participant Direction of Services
- Appendix F: Participant Rights
- Appendix G: Participant Safeguards
- Appendix H: Systems Improvement
- Appendix I: Financial Accountability
- Appendix J: Cost Neutrality Demonstration

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Medicaid HCBS Waiver Services

- Waiver services supplement services available through the Medicaid State Plan.
 - The State Plan is the official document describing the nature and scope of the Nebraska Medicaid Program: <https://dhhs.ne.gov/Pages/Medicaid-Services.aspx>
- Medicaid waiver funds are paid to waiver providers for services rendered.
 - All providers of waiver services must be Medicaid providers.
- Waiver funds cannot be:
 - Used for room and board, general home repair, or services available from other sources, such as Vocational Rehabilitation or the public educational system;
 - Used for things like ordinary childcare; or
 - Given directly to the participant.

Medicaid HCBS Waiver Eligibility Requirements

All people receiving services from a Nebraska Medicaid HCBS Waivers must:

- Be a citizen or legal resident of the US;
- Be a legal resident of the state of Nebraska;
- Be eligible for and receiving Nebraska Medicaid;
 - This may include a Social Security Income (SSI) Disability determination made by the Social Security Administration or the State Review Team (SRT)
- Have a need for waiver services; and
- Meet statutory requirements for eligibility based on waiver
- Meet the level of care requirement for the waiver (NF/ICF)

Nebraska's Medicaid HCBS Waivers

A person may meet eligibility requirements for more than one waiver but can *only receive services under one waiver at a time.*

- **Family Support Waiver (FSW)** – Ages **birth to 21 years**, eligible for DD services, and meet ICF/IID level of care. Intended to support the child and their family.
- **Developmental Disabilities Day Services For Adults (DDAD) Waiver** – **Age 21 and older**, eligible for DD services, and meet ICF/IID level of care. Intended to maximize independence to work in the community; focus on competitive, integrated employment.
- **Comprehensive Developmental Disabilities (CDD) Waiver** – **All ages**, eligible for DD services, and meet ICF/IID level of care. Intended to maximize independence as people live, work, and socialize in their community.
- **Aged and Adults and Children with Disabilities (AD) Waiver** – **All ages with a physical disability** and ages 65 and older, meet nursing facility level of care. Intended to help people live safely in their own home or assisted living; instead of a nursing facility.
- **Traumatic Brain Injury (TBI) Waiver** – **Ages 18 and older**, meet nursing facility level of care. Intended to help people live safely in their own home or assisted living.

Input is Essential

When changing a waiver, it is an opportunity for DDD to receive input and comments from stakeholders to ensure our changes meet the needs of current and future participants.

We want to consider what is important to participants, families, and providers.



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Waiver Amendment Goals



- 1. Eliminate the DD Waitlist**
- 2. Encourage Person-Centered Planning and Independence**
- 3. Create New Service Options**

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Appendix B

Participant Access and Eligibility

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CDD Appendix B: Participant Access and Eligibility

All ICF Waivers—Level of Care Assessment

- Updates to the Waiver Criteria including Level of Care Assessment to move towards a standardized assessment tool
 - Developmental Index → interRAI ID (Adults) & interRAI ChYMH-DD (Youth)
- The interRAI assessments were selected for their alignment with Nebraska's LOC criteria and their utility for person-centered planning and needs assessment.
 - This would replace the Developmental Index (DI), Inventory for Client & Agency Planning (ICAP), and current Risk Screens

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CDD Appendix B: Participant Access and Eligibility

CDD Waiver—Additional Criteria

- Participants who cannot have their assessed needs met as determined by the State's approved functional needs assessment, through the following 1915(c) programs:
 - Nebraska Developmental Disabilities Adult Day (DDAD) waiver (NE.0394); or
 - Nebraska Family Supports Waiver (FSW) (NE.2366); and
- For participants under -the age of 19, need for placement outside of their family home necessitating access to (Youth) Continuous (Group) Home Service as defined in this 1915(c) waiver application, due to any of the following assessed risks as determined by the State's approved functional needs assessment:
 - Behavioral/Harm to Self and Others; and
 - Lack of natural supports for appropriate supervision and monitoring, based on the care needs of the participant; or
 - Residential instability in the last two years.
- If requested, a clinical review of a participant's unique needs may be requested to determine if enrollment in the CDD waiver is appropriate if not otherwise indicated by the State's approved functional needs assessment.
- A participant's needs are assessed using the state-approved functional needs assessment tool and further informed through person-centered planning conversations

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Appendix C

Participant Services Changes

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Appendix C: Participant Services

- Unbundling Residential Habilitation (CDD Only)
- New Services to support Participant Independence
- New and Updated Services to support Participant Employment
- Legally Responsible and Guardian Payments
- General Updates

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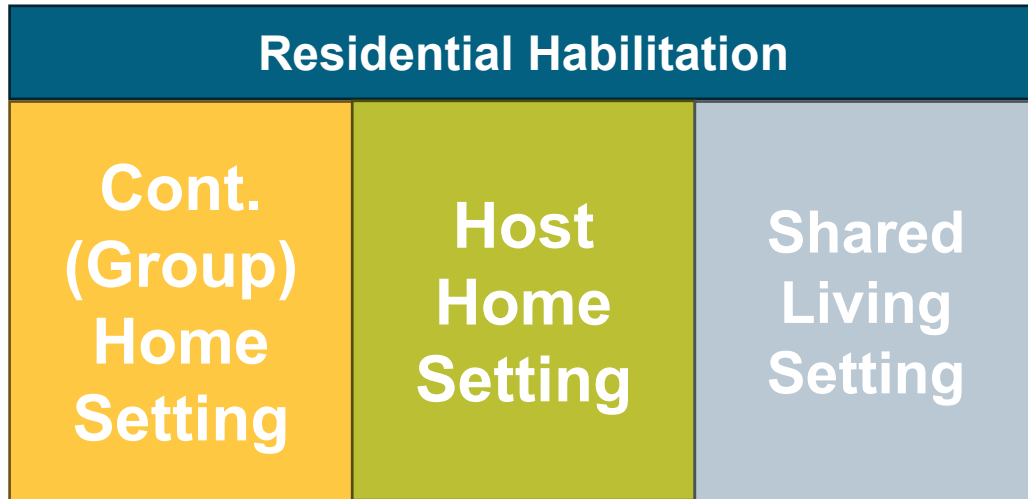
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Appendix C: Participant Services (CDD Only)

Unbundling Residential Services

Current Model



Future Model



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Appendix C: Participant Services (All ICF Waivers)

Remote Monitoring for Independence

Remote Support leverages technology to allow providers to assist participants from another location through live, two-way communication. This setup enables providers to monitor participants' health and safety using real-time data from sensors and alerts, without being physically present. The goals of Remote Support include promoting independence, increasing self-determination, and fostering self-reliance and confidence, thereby reducing the need for paid staff in home and community activities. Remote Supports are not intended for surveillance; electronic support systems, such as on-demand video or web cameras, are used only when requested by the individual and identified in their person-centered plan (PCP). Full consent from the individual and their guardian is required for the use of Remote Support technology, and consent can be revoked at any time.

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Appendix C: Participant Services (All ICF Waivers)

Remote Monitoring for Independence

As Stand Alone Service

- ▶ Billable without Residential Services or in combination with Independent Living and Supported Family Living
- ▶ Includes Assessment of Need, Equipment, and Service Delivery
- ▶ Must fit within **existing** participant budget

As an allowable Modality

- ▶ Allowed as a limited modality (similar to Virtual Supports) within residential services
- ▶ Same limits and protections of participants' rights apply
- ▶ No additional budget or authorization

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Appendix C: Participant Services (All ICF Waivers)

Health Maintenance Monitoring

Health Maintenance Monitoring leverages digital technology to collect and transmit a participant's health data, such as vital signs and biometrics, for analysis and care planning. This service uses remote monitoring tools, including wearable sensors and telehealth communication, to support the management of chronic conditions and proactively identify changes or concerns. By enabling real-time data transmission to healthcare professionals, it facilitates timely interventions and helps prevent serious health complications. While integrated into a participant's person-centered plan and supervised by qualified medical providers, Health Maintenance Monitoring is not intended to replace primary care or active treatment from physicians or medical professionals available under the State Plan.

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Appendix C: Participant Services (All ICF Waivers)

Health Maintenance Monitoring

As Stand Alone Service

- ▶ Billable without Residential Services or in combination with Independent Living and Supported Family Living
- ▶ Includes Assessment of Need, Equipment, and Service Delivery
- ▶ Agency Provider must have Home Health Aide Service license (175 NAC 14)
- ▶ Must fit within **existing** participant budget

As an allowable Modality

- ▶ Allowed as a modality (similar to Virtual Supports) within residential services
- ▶ Same limits and protections of participants rights apply
- ▶ Agency Provider must have Home Health Aide Service license (175 NAC 14)
- ▶ No additional budget or authorization

Appendix C: Participant Services (CDD & DDAD)

Retirement Service

Adult Day Retirement is a **non-habilitative** service designed for individuals aged 50 and older, or with exception, focusing on meaningful day activities in the participant's home. It provides active support to foster independence, including assistance with daily living activities, health maintenance, and supervision.

Unlike habilitation services, Adult Day Retirement does not involve training goals or strategies and offers limited opportunities for community engagement due to the participants' age, health issues, and limitations.

Providers are also restricted from requiring participants to participate in work or volunteer activities.

Rate: Based on Respite (non-habilitative) and must fit within existing participant budget

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Appendix C: Participant Services (CDD & DDAD)

Benefits Counseling

Benefits Counseling informs participants about pathways to achieving individualized integrated employment or self-employment, leading to increased economic self-sufficiency through various work incentives. This service alleviates fears related to seeking and maintaining employment by providing accurate, individualized assessments. It offers comprehensive information on available work incentives for essential benefit programs, including SSI, SSDI, Medicaid, Medicare, housing subsidies, and food stamps.

Providers: Required Community Work Incentives Counselor or Community Partner Work Incentives Counselor certification that is accepted by the Social Security Administration.

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Appendix C: Participant Services (All Waivers)

Legally Responsible Individual – Personal Care

We are considering expanding allowable payments to Parents of Minor Children and Spouses within a new service called LRI (Legally Responsible Individual) – Personal Care.

LRI—Personal Care would provide for support for the exceptional needs of the participant by supporting Activities of Daily Living (ADLs) and Instrumental Activities of Daily Living (IADLs).

LRI would be required to work for an Agency Provider to provide monitoring and support, except in limited cases where an Agency Provider was not available due to geographic remoteness or lack of providers willing to serve as an employer.

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Appendix C: Participant Services (All Waivers)

Legally Responsible Individual – Personal Care (Cont.)

Participants must require Extraordinary Care, defined as hands-on assistance with Activities of Daily Living (ADLs) and Incidental Activities of Daily Living (IADLs) care that exceeds the range of activities a parent or spouse would ordinarily perform in the household on behalf of a person without a disability or chronic illness of the same age to be eligible to receive the service.

DDD will develop an Extraordinary Care Tool where a participant will need to “Always Require Physical Support” in at least three ADLs or IADLs such as bathing, dressing, turning/positioning, feeding, toileting, or ambulation. Participants will then only be eligible to receive support for areas where they need verbal or physical supports for ADLs or IADLs.

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Appendix C: Participant Services (ICF Waivers)

Payments to Guardians

We are considering expanding allowable payments to relative guardians within existing services as allowed under Nebraska Revised Statute § 30-2627:

*“Nothing in this subsection shall prevent the **spouse, adult child, parent, or other relative** of the person alleged to be incapacitated from being appointed guardian...”*

Relative guardians would be required to work for an Agency Provider to provide monitoring and support, except in limited cases where an Agency Provider was not available due to geographic remoteness or lack of providers willing to serve as an employer.

Appendix C: Participant Services (AD Waiver)

Payments to Guardians

Currently, Guardians may provide direct support services to individuals on the AD Waiver.

DDD is considering a new provider requirement that Guardians could only provide services if **related to the participant (relative guardian)** and would be **required to work for an Agency Provider** except in limited circumstances such as geographic remoteness or lack of providers willing to serve as an employer.

This would not impact current (Guardian) providers and only apply to future providers of AD Waiver services.

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Appendix C: Participant Services

General Updates

- ▶ Removed EVV requirements from Medical In-Home and Behavioral In-Home (for CDD waiver only)
- ▶ Updated Prevocational Service to require a referral to Vocational Rehabilitation prior to reauthorization beyond 12 months and Central Office approval before authorizing beyond 24 months.
- ▶ Updated 35-hour day service limit to “an average of 35-hours per week and no more than 1,820 hours per year.”

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Appendix D

Participant-Centered Planning and Service Delivery

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Appendix D: Participant-Centered Planning and Service Delivery

- Updated Service Coordination & Eligibility Worker qualifications
 - Bachelor's Degree or 4 years of professional experience serving individuals with Intellectual and Developmental Disabilities or other disabilities.
 - Knowledge of current practices in the field of community-based services.
 - Knowledge of person-centered planning and Americans with Disability Act (ADA) standards
 - Knowledge of program resources/services available in Nebraska for persons with intellectual and other developmental disabilities.

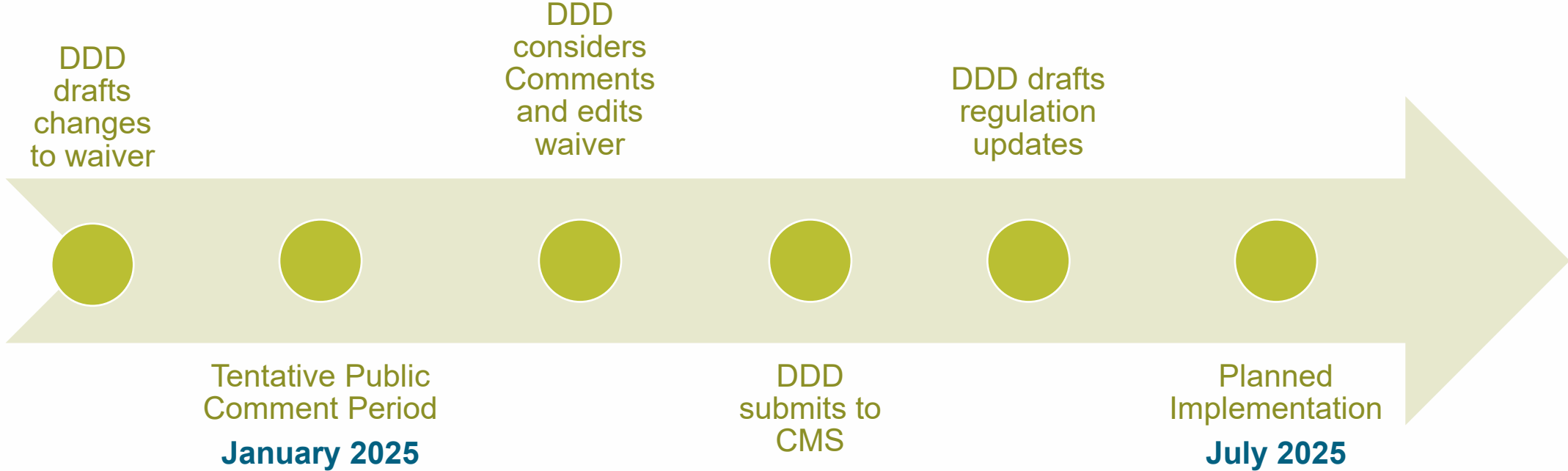
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Next Steps



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SHARE YOUR THOUGHTS



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