



**We are glad you are here!**

**HCBS Waiver Amendments  
Public Comment Period**

**December 5, 2025 through January 5, 2026**

**Zoom Presentations: December 10, 11, 16, and 17**

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

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# Background: Nebraska's Waivers and the Public Comment Process

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# Nebraska's Medicaid HCBS Waivers

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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**, intended to support the child and their family.
- **Developmental Disabilities Day Services For Adults (DDAD) Waiver** – **Age 21 and older**, intended to maximize independence to work in the community; focus on competitive, integrated employment.
- **Comprehensive Developmental Disabilities (CDD) Waiver** – **All ages**, 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, 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**, intended to help people live safely in their own home or assisted living.

# Public Comments are Essential

When submitting a waiver application, it is an opportunity to provide input on the proposed Waiver Amendments.

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

This is why *public comment periods* are vital.

Please submit your comments.



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# After the Public Comment Period

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- All comments will be reviewed and considered for changes to the HCBS waivers drafts.
- A summary of all public comments, responses, and resulting changes will be posted on the DDD website.
- A summary of public comments will be included in the waiver application when submitted to CMS.
- If public comments indicate a need for substantiative change(s), the HCBS waivers will be re-drafted and re-posted for another public comment period.

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# Overview of Proposed Drafts: Aged and Adults and Children with Disabilities (AD) Wavier and Traumatic Brain Injury (TBI) Wavier

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# Appendix A: Waiver Administration and Operation

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- Generalized updates to correct spelling and grammar and align with current practices and procedures.

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# Appendix B: Participant Access and Eligibility (AD/TBI)

- Added High Utilization Review at 150% by DDD Central Office-Clinical Support
- Added individual cost limit in excess of institutional costs of no more than 175%.
  - Added how the state is implementing an individual cost limit.
  - Added safeguards for when services exceed the cost limit.
- Institutional costs are based on the total State Fiscal Year (SFY) expenditures divided by the average number of recipients. In SFY2025, Nursing Facility costs were **\$92,438** per person.
- Updated the minimum frequency for the provision of waiver services from 60 to 90 days.
- Updated qualifications for assessors performing evaluations of the level of care (TBI) to align with other waivers, allowing years of experience to substitute for a degree.

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# Appendix C: Participant Services

(1 of 5)

## For All Services

- Generalized updates to correct spelling and grammar.
- Updates to TBI Waiver to better align with AD Waiver and CMS expectations.
- Updated language to note that services may not overlap with hours set by the local school district.

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# Appendix C: Participant Services

(2 of 5)

## Revised Service Specifications for the Following Services

- **Personal Care**

- Must primarily support participant ADL needs as determined through the Service Needs Assessment.
- Personal Care and LRI Personal Care are limited to a combined maximum of 40 hours per week for live-in caregivers.
- Personal Care, LRI Personal Care, and Companion services are limited to a combined maximum of 70 hours per week.  
*Exceptions to both combined limits may be approved by DDD Central Office to meet the immediate health and safety needs of a participant.*

- **LRI Personal Care**

- Added to TBI Waiver
- Personal Care and LRI Personal Care are limited to a combined maximum of 40 hours per week for live-in caregivers.
- Personal Care, LRI Personal Care, and Companion services are limited to a combined maximum of 70 hours per week.  
*Exceptions to both combined limits may be approved by DDD Central Office to meet the immediate health and safety needs of a participant.*

- **Companion**

- Must primarily support participant IADL needs as determined through the Service Needs Assessment.
- Personal Care, LRI Personal Care, and Companion services are limited to a combined maximum of 70 hours per week.  
*Exceptions to limit may be approved by DDD Central Office to meet the immediate health and safety needs of a participant.*

# Appendix C: Participant Services

(3 of 5)

## Revised Service Specifications for the Following Services

- **Extra Care for Children with Disabilities (AD Only)**
  - A cap of 50 hours per week was added to the service.
  - Licensed Practical Nurses (LPNs), Registered Nurses (RNs), Advanced Practice Registered Nurses (APRNs), and Certified Nursing Assistants (CNAs) are not guaranteed for service delivery, though some agencies may employ them.
- **Respite Care**
  - Expanded the definition to provide clarity and allow providers to provide respite across more than one waiver.
  - Added a daily rate for out-of-home respite.
- **Independence Skills Building**
  - Limited to adults focusing on rehabilitative training of ADLs, IADLs, and home management skills and 16- and 17-year-olds, when it does not duplicate.
  - May be authorized independently or in groups.

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# Appendix C: Participant Services

(4 of 5)

## Revised Service Specifications for the Following Services

- **Chore**

- Chore was updated and reorganized to provide support in five primary areas:
  - Minor Home Repair,
  - Pest Control,
  - Mowing and Site Clearance,
  - Snow and Ice Removal, and
  - Heavy Cleaning.
- Annual cap of \$3,500 per year.

- **Assistive Technology**

- The annual cap for assistive technology was changed from \$2,500 to \$10,000 in a five-year period, with a maximum of \$20,000 with DD Central Office approval.

- **Assisted Living Service, now Supported Residential Living (AD)**

- Available only through Assisted Living Facility certified providers.

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## New Provider Types

- **Direct Care Provider**

- Can offer: Personal Care, Respite Care, Companion, LRI Personal Care, and Independence Skills Building.
- Required certification in CPR, Basic First Aid, and Abuse/Neglect/Exploitation Training.

- **Non-Care Provider**

- Can offer: Chore and Home Again.
- No personal care or hands-on assistance may be provided.
- Must have the qualifications, experience, and abilities necessary to carry out services.

- **Community Respite Provider**

- Community organizations, such as religious organizations, gyms/studios, and creative organizations which provide respite, not as their primary business.

- **Other Providers Consolidated**

- Agency PERS, specialized equipment, suppliers, and home repair companies combined.
- Certified Commercial Carrier/Common Carrier and PSC Exempt Provider combined.

# Appendix D: Participant-Centered Planning and Service Delivery

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## For the AD and TBI Waivers

- Removed Registered Nurse from responsibility for service plan development.
- Updated HCBS Settings Requirements for Service Plans.
- Updated language to reflect that relevant service providers are included in the development of the person-centered plan (PCP) and must attend the PCP meeting.

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# Appendix D: Participant-Centered Planning and Service Delivery

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## For the TBI Waiver only

- Update professional qualifications for Service Coordination to align with changes previously made on the AD waiver.

# Appendix F: Participant Rights

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- Added the definition of “participant.”

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# Appendix G: Participant Rights

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- Updated language to comply with the HCBS Final Settings Rule.
- Updated “Assisted Living” to “Supported Residential Living.”
- Updated references to the Quality Council and replaced with QI Committee.

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# Appendix I: Financial Integrity and Accountability

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- Updated how payments are made, removing NFOCUS and changing to the state-mandated web-based case management system.
- Added LRI Personal Care to services billing under EVV in TBI Waiver.

# Appendix J: Cost Neutrality Demonstration

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- Updated cost analysis information.

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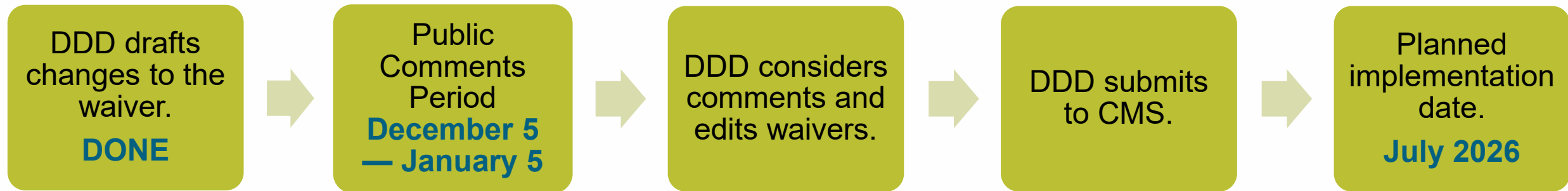
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# Waiver Timeline



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# Resources

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Public Comment information, including copies of HCBS waiver applications on the DDD website:



<https://dhhs.ne.gov/Pages/DD-Public-Comment.aspx>

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# SHARE YOUR THOUGHTS

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**Public comments will be accepted  
December 5, 2025 through January 5, 2026.**

[DHHS.HCBSPublicComments@nebraska.gov](mailto:DHHS.HCBSPublicComments@nebraska.gov)

**DDD Public Comment website: <https://dhhs.ne.gov/Pages/DD-Public-Comment.aspx>**



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