DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services 601 E. 12th St., Room 355 Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

June 26, 2025

Drew Gonshorowski State Medicaid Director Division of Medicaid and Long-Term Care PO Box 95026 Lincoln, NE 68509-5026

RE: 1915(c) Developmental Disabilities Day Services Waiver for Adults – NE 0394.R04.02 amendment

Dear Director Gonshorowski:

The Centers for Medicare & Medicaid Services (CMS) is approving your request to amend 1915 (c) Developmental Disabilities Day Services Waiver for Adults for Intellectual Disability or Developmental Disability or both. The CMS Control Number for the amendment is NE 0394.R04.02. Please use this number in future correspondence relevant to this waiver action.

With this amendment, the state is:

- Updating Public Input
- Correcting spelling and grammar mistakes in all Appendixes
- Updating all mentions of the ICAP to the state-mandated ICF/IID level of care assessment tool
- Specifying the target group for eligibility and enrollment in the DDAD waiver
- Selecting option that the state does not limit the number of participants that it serves at any point in time during a waiver year Removed reserved capacity (B-3-c)
- Removing reserved capacity
- Updating Level of Care (LOC) criteria and process for evaluation/reevaluation
- Replacing Individual Support Plan (ISP) language with person-centered plan (PCP)
- Updating Qualifications of Individuals Performing Initial Evaluation
- Replacing Disabilities Service Specialist (DSS) with DDD Personnel
- Specifying plan access to services for individuals with Limited English Proficiency (LEP)
- Adding the following services to better address participant needs
 - o Benefits Counseling
 - o Employment Exploration

- Health Maintenance Monitoring
- o Legally Responsible Individuals (LRI) Personal Care; and
- o Remote Supports.
- Updating language for all services related to school hours set by the local school district
- Updating language for all services that offer virtual supports as a modality to remote support
- Updating applicable services to include services may be offered by legal guardians
- Updating Participant Services General Service Specifications to include payments for LRIs and Relative/Legal Guardians
- Updating Qualifications of Service Coordinators
- Replacing Individual Support Plan (ISP) language with person-centered plan (PCP)
- Updating reasons for grievances
- Updating Participant Direction of services
- Updating language to comply with the HCBS Final Settings
- Adding Critical Incident performance measure
- Updating supervision requirements for board-certified behavioral analysts (BCBAs)
- Updating wording to reflect review of critical incidents and completion of reports and report format by the contracted Quality Improvement Organization (QIO)-like entity
- Adding risk tiers
- Updating cost analysis information

The effective date of the amendment is July 1, 2025.

This approval is subject to your agreement to serve no more individuals than the total number of unduplicated participants indicated in Appendix J.2 of the waiver. If the state wishes to serve more individuals or make any other alterations to this waiver, an amendment must be submitted for approval.

It is important to note that CMS' approval of this waiver amendment solely addresses the state's compliance with the applicable Medicaid authorities. CMS' approval does not address the state's independent and separate obligations under federal laws including, but not limited to, the Americans with Disabilities Act, Section 504 of the Rehabilitation Act, or the Supreme Court's Olmstead decision. Guidance from the Department of Justice concerning compliance with the Americans with Disabilities Act and the Olmstead decision is available at http://www.ada.gov/olmstead/q&a_olmstead.htm.

CMS reminds the state that maintenance of effort requirements under Section 9817 of the American Rescue Plan apply until all additional HCBS funding has been expended and approval of this action does not constitute a close out of the state's spending plan therefrom.

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Thank you for your cooperation during the review process. If you have any questions concerning this information, please contact me at (410) 786-7561. You may also contact Rhonda Wells at Rhonda. Wells@cms.hhs.gov or (816) 426-6486.

Sincerely,

George P. Failla, Jr., Director Division of HCBS Operations and Oversight

cc: Tyson Christensen
Bernice Denbow, CMS
Jayson Sam, CMS