



# **State of New Hampshire Department of Health and Human Services**

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**Division of Long Term Supports and Services  
Bureau of Developmental Services  
Acquired Brain Disorder Waiver  
Waiver Years 11/1/2021 – 10/31/2026**

# Acquired Brain Disorder Waiver

**The goal of this presentation is to provide an overview of the Acquired Brain Disorder (ABD) Waiver**

The purpose of the Acquired Brain Disorder (ABD) Waiver is to provide services which maximize the ability and informed decision-making authority of people with acquired brain disorders and which promote the individual's personal development, independence and quality of life in a manner that is determined by the individual.

The waiver incorporates the core beliefs that individuals with acquired brain disorders live, work and pursue their life aspirations within their communities.

It is the State's intention to support positive life trajectories, particularly through identified transitions that are known to be challenging, in a manner that ensures that waiver participants receive the necessary supports to access the broader community, build upon relationships, aspire to meet personal goals, and have access to technology, goods & services as well as access to qualified providers in order to lead a good life.



# ABD Waiver – Changes

- Additional services added!
  - Goods and Services
  - Personal Emergency Response Services (PERS)
  - Non-Medical Transportation
  - Community Integration Services
  
- All references to Recreation/Therapeutic Recreation have been removed. These services have been moved into the new service category, “Community Integration Services”.
  
- "Residential Habilitation" replaced "Residential Habilitation/Personal Care". Personal Care services are still included in the service definition of Residential Habilitation.
  
- Some service delivery has been modified to allow for remote service provision.
  
- Temporary provision of services in acute care hospitals, based on an individual's needs.



# ABD Waiver - Changes, continued

- Participant Directed and Managed Services (PDMS) has been deleted as a “service”, however, services can **still** be delivered via PDMS. In the last Waiver, although PDMS was identified as a service, it was solely a method of service delivery and no additional services were included. There are no reduction in services due to this change.
- A Long Term Supports and Services (LTSS) Participant Directed and Managed Services (PDMS) committee with broad stakeholder membership will develop a PDMS manual, which will clearly define the rights and responsibilities of individuals and/or guardians relative to managing Medicaid funds and detail budget authority and employment authority.
- The Supports Intensity Scale (SIS) and Health Risk Screening Tool (HRST) will still be covered but will no longer require prior authorization to bill.



# ABD Waiver - Changes, continued

- The Waiver includes the compliance and implementation of the Center for Medicare and Medicaid Services (CMS) approved NH Corrective Action Plan regarding conflict of interest requirements, direct bill, and provider selection requirements.
- The Waiver details compliance with the Home and Community Based Service's (HCBS) Final Rule and Regulations per 42 CFR 441.301(c)(4).
- Performance measures have been updated to reflect the changes in the new Waiver.



# Participant Access and Eligibility

The ABD Waiver seeks to provide services and supports to individuals who:

- Are no younger than 22 years.
- Individuals who have sustained a brain or spinal cord injury, as specified in NH Law RSA 137:K. Pursuant to He-M 522.02 (a)(3), the acquired brain disorder shall have occurred prior to the age of 60.
- Meet level of care criteria, as outlined in the ABD Waiver.



# Participant Access and Eligibility

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## RSA 137:K

- “Brain and Spinal Cord Injury” means:  
Any injury to the brain or spinal cord which causes death or requires medical care and treatment or results in long-term disability.



# Participant Access and Eligibility

**There are factors that impact eligibility. In order to be eligible for services through the ABD Waiver, the individual must require the following:**

Pursuant to State Administrative Rule He-M 517, an individual requires a skilled nursing facility level of care, which means requiring skilled nursing or skilled rehabilitative services on a daily basis for at least one of the following:

Services on a daily basis for:

- Performance of basic living skills;
- Intellectual, physical, or psychological development and well-being;
- Medication administration and instruction in, or supervision of, self-medication by a licensed medical professional; or
- Medical monitoring or nursing care by a licensed professional person;





# Participant Access and Eligibility

**There are factors that impact eligibility. In order to be eligible for services through the ABD Waiver, the individual must require the following:**

- Services on a less than daily basis as part of a planned transition to more independence; or
- Services on a less than daily basis but with continued availability of services to prevent circumstances that could necessitate more intrusive and costly services.
- The state utilizes the Functional Screen, submitted by the area agency, to determine if an individual meets the level of care for the ABD Waiver. The Functional Screen details the individual's diagnosis, support needs in the areas of activities of daily living and instrumental activities of daily living, communication and cognition, behavior, and risk to community safety, and other medical conditions.



# For All Services Within the ABD Waiver:

- Items and services covered by the Waiver must not otherwise be covered by other entities, agencies or insurances such as, but not limited to, the NH Medicaid State Plan, the Local Education Authority (LEA) nor the Division of Children Youth and Families (DCYF). The Waiver is the payer of last resort.
- The terms “Plan of Care”, “Service Agreement”, and “Service Plan” are all used interchangeably throughout the Waiver and this presentation. They are all referring to the Individual Service Agreement.



# New Services

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Individual Goods and Services

Personal Emergency Response Services (PERS)

Non-Medical Transportation

Community Integration Services



## Individual Goods and Services

- Services, equipment, or supplies not otherwise provided through this Waiver or through the Medicaid State Plan that address an identified need in the individual service agreement (ISA) (including improving and maintaining the participant's opportunities for full membership in the community) and meet the following requirements:
  - The item or service would decrease the need for other Medicaid services;  
and/or
  - Promote inclusion in the community; and/or
  - Increase the participant's safety in the home environment; and
  - The participant and their family does not have the funds to purchase the item or the service is not available through other sources.
  - Must not be an otherwise covered State Plan service.



## Individual Goods and Services: Limits

- ✓ There is an annual \$1,500 service limit. An individual may exceed this service limit cap with prior authorization approval from BDS.
- ✓ The item or service must be identified as necessary in the individual service agreement and include a goal related to the item(s).
- ✓ Documentation related to the use of the item should be available for review in monthly notes.
- ✓ This item should have an anticipated shelf life. The frequency of purchase would be contingent upon the continued need of the item and the item's ability to continue to meet that need.
- ✗ The item or service cannot be covered by another funding source.
- ✗ Experimental or prohibited treatments are excluded.
- ✗ Individual Goods and Services cannot be used to cover costs of room and board.



# New Services

## Personal Emergency Response Services (PERS)

- Smart technology that may include various types of devices such as electronic devices that enable participants at risk of institutionalization to summon help in an emergency.
- Covered devices may include wearable or portable devices that allow for safe mobility, response systems that are connected to the participant's telephone and programmed to signal a response center when activated, staffed and monitored response systems that operate 24 hours/day, seven days/week and any device that informs of elopement such as wandering awareness alerts.
- Other covered items may include seatbelt release covers, ID bracelets, GPS devices, monthly expenses that are affiliated with maintenance contracts and/or agreements to maintain the operations of the device/item.
- Various devices can be an option to consider as a part of a multifaceted safety plan, specific to a participant's unique needs.
- ✓ There is an annual service limit of \$2,000. An individual may exceed this service limit cap with prior authorization approval from BDS.



# New Services

## Non-Medical Transportation

- Transportation services are designed specifically to improve the individual's and the caregiver's ability to access community activities within their own community in response to needs identified through the individual's service agreement.
- Services can include, but are not limited to:
  - Transport for safe movement from one place to another;
  - Travel training such as supporting the individual and family in learning how to access and use informal and public transport for independence and community integration;
  - Transportation service provided by different modalities, including; public and community transportation, taxi services, transportation specific to prepaid transportation cards, mileage reimbursement, volunteer transportation, and non-traditional transportation providers, and
  - Prepaid transportation vouchers and cards.
  - Parking and toll fees.



# New Services

## Non-Medical Transportation: Limits

- ✓ There is a \$5,000 annual service limit. There is a \$10,000 annual service limit for specialized transportation including wheelchair van/lift and/or a van that allows the individual to “not be within arm’s reach” of the driver for safety reasons. The BDS Administrator reserves the right to approve requests that exceed the cap on a case by case basis.
- ✓ Coverage may be permitted when non-medical transportation is not otherwise available through a service in the Waiver or the State Plan. Payment under the Waiver is limited to the costs of non-medical transportation needed to access a Waiver service included in the participant’s service plan or access to other activities and resources identified in the service plan.

The following are specifically excluded:

- ✗ Adaptations or improvements to the vehicle that are of general utility, and are not of direct medical or remedial benefit to the individual;
- ✗ Purchase or lease of a vehicle; and
- ✗ Regularly scheduled upkeep and maintenance of a vehicle except upkeep and maintenance of the modifications.





# New Services

## Community Integration Services

- Community integration services utilize activity-based interventions to address the assessed needs of an individual as a means to health and well being as outlined in the service agreement.
- Designed to support and enhance a person's level of functioning, independence and life activities to promote health and wellness as well as reduce or eliminate the activity limitations and restrictions to participation in life situations caused by a disability.
- The ISA must specify the service, the name of the healthcare practitioner recommending the item (for single services \$2,000 and over), an evaluation or assessment regarding the appropriateness of the service and a goal related to the use of the service.
- A pass or membership for admission to community-based activities is covered only when needed to address assessed needs. Community based activity passes should be purchased as day passes or monthly passes, whichever is the most cost effective.



## Community Integration Services: Limits

- Fees for water safety training are allowable.
- Community based camperships are allowable.
- Community integration services, inclusive of therapeutic services and camperships, will have an \$8,000 cap.
- Any single community integration service over \$2,000 will require a licensed healthcare practitioner's recommendation. A health care practitioner's note is not needed for a campership.



# Services

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Community Participation Services

Residential Habilitation

Respite

Service Coordination

Supported Employment

Assistive Technology

Environmental and Vehicle Modification Services

Community Support Services

Specialty Services

Crisis Response Services

Wellness Coaching



## Community Participation Services

Services that are provided as part of a comprehensive array of community-based services for individuals with Acquired Brain Disorder that:

- Assist the individual to attain, improve, and maintain a variety of life skills, including vocational skills;
- Emphasize, maintain and broaden the individual's opportunities for community participation and relationships;
- Support the individual to achieve and maintain valued social roles, such as of an employee or community volunteer;
- Promote personal choice and control in all aspects of the individual's life and services, including the involvement of the individual, to the extent he or she is able, in the selection, hiring, training, and ongoing evaluation of his or her primary staff and in determining the quality of services; and
- Are provided in accordance with the individual's service agreement and goals and desired outcomes.



## Community Participation Services

All community participation services shall be designed to:

- Support the individual's participation in and transportation to a variety of integrated community activities and settings;
- Assist the individual to be a contributing and valued member of his or her community through vocational and volunteer opportunities;
- Meet the individual's needs, goals, and desired outcomes, as identified in his or her service agreement, related to community-based opportunities for volunteerism, employment, personal development, socialization, communication, mobility, and personal care;



## Community Participation Services

- Help the individual to achieve more independence in all aspects of their life by learning, improving, or maintaining a variety of life skills, such as:
  - Traveling safely in the community;
  - Managing personal funds;
  - Participating in community activities; and
  - Other life skills identified in the service agreement;
  - Promote the individual's health and safety;
  - Protect the individual's right to freedom from abuse, neglect, and exploitation; and
  - Provide opportunities for the individual to exercise personal choice and independence within the bounds of reasonable risks.
- Community participation services shall be primarily provided in community settings outside of the home where the individual lives.



## Residential Habilitation

Residential Habilitation services include a range of individually tailored supports to assist with the acquisition, retention, or improvement of community living skills to assist the individual to reside in the setting most appropriate to his/her needs, including, but not limited to:

- Assistance with activities of daily living and personal care such as meal preparation, eating, bathing, dressing, personal hygiene
  - Medication management
  - Community inclusion
  - Transportation,
  - Social and leisure skills
  - Adaptive skill development
- Services and supports may be furnished in the home or outside the home.
  - Payment is not made for the cost of room and board, building maintenance, upkeep, nor improvement.



## Respite

- Respite services consist of the provision of short-term care for participants unable to care for themselves because of the absence or need for relief of those persons who live with and normally provide care for the individual.
- Respite can be provided in or out of the individual's home.
- Respite can be family arranged or agency arranged.
- Respite shall occur in accordance with He-M 513.04 or 513.05.
- Respite provided as a service in a Participant Directed and Managed Service (PDMS) program shall not exceed 20% of the overall budget. The BDS Bureau Chief has the ability to determine limits on a case by case basis due to capacity issues.





## Service Coordination

- Services which will assist eligible individuals in gaining access to needed Waiver and/or State Plan services as well as needed medical, social, educational and other services, regardless of the funding source.
- Administrative Rule, He-M 522.09 outlines Service Coordination criteria.
  - An individual's right to choice of a Service Coordinator
  - Roles and responsibilities of Service Coordinators
  - Requirements and exclusions for Service Coordinators
- Administrative Rule, He-M 522.10 outlines Service Planning
  - Roles and responsibilities of a Service Coordinator in service planning.
- Administrative Rule, He-M 522.11 outlines Service Agreements
  - Roles and responsibilities of a Service Coordinator in developing the service agreement and monitoring services, including monthly and quarterly contacts as well as home visits.



## Supported Employment

Employment services will provide access to community-based employment and make available, based upon individual need and interest: employment supports, transportation to work, training and educational opportunities, the use of co-worker supports and generic resources to the maximum extent possible.

All employment services shall be designed to:

- Assist the individual to obtain employment, customized employment or self-employment, including the development of microenterprises that are integrated in the community, that is based on the individual's employment profile and goals in the service agreement;
- Provide the individual with opportunities to participate in a comprehensive career development process that helps to identify the individual's employment profile;



## Supported Employment

All employment services shall be designed to:

- Support the individual to develop appropriate skills for job searching, including:
  - Creating a resume and employment portfolio;
  - Practicing job interviews; and
  - Learning soft skills that are essential for succeeding in the workplace;
- Assist the individual to become as independent as possible in his or her employment, internships, and education and training opportunities by:
  - Developing accommodations;
  - Utilizing assistive technology; and
  - Creating and implementing a plan to fade services;



## Supported Employment

Help the individual to:

- Meet his or her goal for the desired number of hours of work as articulated in the service agreement; and
- Earn wages of at least minimum wage or prevailing wage, unless the individual is pursuing income based on self-employment;
- Assess, cultivate, and utilize natural supports within the workplace to assist the individual to achieve independence to the greatest extent possible;
- Help the individual to learn about, and develop appropriate social skills to actively participate in, the culture of his or her workplace;
- Understand, respect, and address the business needs of the individual's employer, in order to support the individual to meet appropriate workplace standards and goals;



## Supported Employment

- Maintain communication with, and provide consultations to, the employer to:
  - Address employer specific questions or concerns to enable the individual to perform and retain his/her job; and
  - Explore opportunities for further skill development and advancement for the individual;
- Help the individual to learn, improve, and maintain a variety of life skills related to employment, such as:
  - Traveling safely in the community;
  - Managing personal funds;
  - Utilizing public transportation;
  - Other life skills identified in the service agreement related to employment;
  - Promote the individual's health and safety;
  - Protect the individual's right to freedom from abuse, neglect, and exploitation; and
  - Provide opportunities for the individual to exercise personal choice and independence within the bounds of reasonable risks.



## Assistive Technology

- This service covers assistive technology and any related assistive technology services.
- Assistive technology means an item, piece of equipment, certification and training of a service animal, or product system, whether acquired commercially, modified or customized, that is used to increase, maintain or improve functional capabilities of participants. The Americans with Disabilities Act definition of a service animal is used.
- Assistive Technology Services means a service that directs/assists an individual in the selection, acquisition or use of an assistive technology device.
- The ISA must specify the item, the name of the healthcare practitioner recommending the item, an evaluation or assessment regarding the appropriateness of the item and a goal related to the use of the item, the anticipated environment that the item will be used, Current modifications to item/product and anticipated future modifications and anticipated cost.



## Assistive Technology

Assistive technology includes:

- The evaluation of the assistive technology needs of an individual including a functional evaluation of the impact of the provision of appropriate assistive technology and appropriate services to the individual in their customary environment;
- Services consisting of purchasing, leasing or otherwise providing for the acquisition of assistive technology/devices.
- Services consisting of selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing or replacing assistive technology devices such as therapies, interventions, or services associated with other services in the service plan.
- Coordination and use of necessary therapies, interventions or services associated with other services in the service plan.
- Training or technical assistance for the individual or where appropriate, their family members, guardians, advocates or authorized representatives; and
- Training or technical assistance for professionals or other individuals who provide services to, employ or are otherwise substantially involved in the major life functions of the individual.



## Assistive Technology

- Devices, controls, or appliances, specified in the individual service agreement that enable the individual to increase their ability to perform activities of daily living, and/or perceive, control, or communicate with the environment in which they live will be covered.
- Adaptive equipment may only include items of durable and non-durable medical equipment necessary to address the individual's functional limitations and specified in the plan of care.
- Adaptive equipment may be covered so long as it is necessary to address the individual's functional limitations and is not to be used for recreational purposes.
- May include performance of assessments to identify type of equipment needed by the participant.
- ✓ There is a service limit of \$10,000 over the course of a five-year period (2021-2026). An individual may be able to exceed this cap on a case by case basis with the prior approval of BDS.





## Environmental and Vehicle Modifications

- Physical adaptations to the private residence of the participant or vehicle that is the Waiver participant's primary means of transportation, required by the individual's service plan, that are necessary to ensure the health, welfare and safety of the individual, or which enable the individual to function with greater independence in the home and community, and without which, the individual would require institutionalization.
- Adaptations may include the installation of ramps and grab-bars, widening of doorways, modification of bathroom facilities, or installation of specialized electric and plumbing systems, which are necessary to accommodate the medical equipment and supplies, which are necessary for the welfare of the individual.
- All modifications will be provided in accordance with applicable State or local building codes.



## Environmental and Vehicle Modifications: Limits

- ✓ For individuals with unsafe wandering and running behaviors, outdoor fencing may be provided under this Waiver. Waiver funds allocated toward the cost of such a fence shall not exceed \$2,500 which can provide approximately 3,500 square feet of a safe play area. Exceptions to this service limitation may be made on a case-by-case basis.
- ✗ Excluded are those adaptations or improvements to the home, which are of general utility, and are not of direct medical or remedial benefit to the individual, such as carpeting, roof repair, central air conditioning, etc.
- ✗ Adaptations that add to the total square footage of the home are excluded from this benefit except when necessary to complete an adaptation (e.g., in order to improve entrance/egress to a residence or to configure a bathroom to accommodate a wheelchair).



## Environmental and Vehicle Modifications: Limits

- Relative to vehicle modification, the following are excluded:
  - ✗ Those adaptations or improvements to a vehicle that are of general utility, and are not of direct medical or remedial benefit to the individual;
  - ✗ Purchase or lease of a vehicle;
  - ✗ Regularly scheduled upkeep and maintenance of a vehicle apart from upkeep and maintenance of the modifications.
  - ✗ Payment may not be made to adapt the vehicles that are owned or leased by paid providers of Waiver services.



## Community Support Services

- Community Support Services are intended for the individual who has developed, or is trying to develop, skills to live independently within the community.
- Community Support Services consist of assistance provided to an individual to improve or maintain their skills in basic daily living, transportation and community integration; to enhance his or her personal development and well-being in accordance with goals outlined in the individual's service agreement.
  - ✓ Community Support Services are capped at 30 hours per week.
  - ✓ Services may begin and continue for up to 24 consecutive months (two years) while the individual is still residing with their family. The BDS Administrator reserves the right to exceed the cap and/or time limitations placed on this service on a case by case basis.
  - ✗ This service does not include costs related to room and board.



## Specialty Services

- Specialty Services are intended for recipients whose needs in the areas of medical, behavioral, therapeutic, health and personal well-being require services which are specialized pertaining to unique conditions and aspects of Acquired Brain Disorder.
- Specialty Services are utilized to provide assessments and consultations and are used to contribute to the design, development and provision of services, training support staff to provide appropriate supports as well as the evaluation of service outcomes and transportation if applicable.
- Any items provided under this category must be based on an assessed need by a qualified provider and cannot be available as a benefit under the NH State Medicaid Plan.



## Crisis Response Services

- Crisis Response Services include direct consultation, clinical evaluation, staffing supports and transportation to individuals who are experiencing a behavioral, emotional or medical crisis or challenge.
- These services are intended to address the individual's specific problems, thereby reducing the likelihood of harm to the individual or others, and assisting the individual to return to his/her pre-crisis status.
- This Waiver service is not available to individuals who are eligible to receive such service through the Medicaid State Plan (including EPSDT benefits).
- Limited to six month approval. Six month approvals may be renewed based on individual need.



## Wellness Coaching

- Plan, direct, coach and mentor individuals with disabilities in community based, inclusive exercise activities based on a licensed recreational therapist or certified personal trainer's recommendation.
- Develop specific goals for the individual's service agreement, including activities that are carried over into the individual's home and community; demonstrate exercise techniques and form, observe participants, and explain to them corrective measures necessary to improve their skills and transportation, if applicable.
- Collaborate with the individual and guardian, if applicable, other caregivers and with other health and wellness professionals as needed.
- ✓ There is an annual cap of \$5,000.
- ✗ The Services must not otherwise be covered by NH State Plan Medicaid.



# Services in an Acute Hospital

## Some services may be provided in an acute hospital...

Individual Goods and Services, Personal Emergency Response Services, Assistive Technology, Community Participation Services, Residential Habilitation, Respite, Service Coordination, Supported Employment, Environmental Modifications, Community Support Services, Specialty Services, Crisis Response Services and Wellness Coaching.

### Criteria:

- Identified in an individual's person-centered service plan;
- Provided to meet needs of the individual that are not met through the provision of hospital services;
- Not a substitute for services that the hospital is obligated to provide through its conditions of participation or under Federal or State law, or under another applicable requirement; and
- Designed to ensure smooth transitions between acute care settings and home and community-based settings, and to preserve the individual's functional abilities.





## Provider Qualifications

- All Waiver services must be provided by an entity that meets Waiver provider qualifications requirements.
- Each Waiver service outlines its own provider qualification criteria.
- Additional provider qualification criteria may also be outlined in state administrative rule, federal rule, and/or law, etc.



# Participant Direction of Services

## What are Participant Directed and Managed Services (PDMS)?

- PDMS is a method of service delivery that enables people to maximize self-direction and affords participants the option to fully exercise choice and control over the menu of Waiver services through active engagement in the planning, design, provision, and or delegation of the monitoring of services and allocation of authorized service funding.
- The participant and guardian, if applicable, family, service coordinator, area agency, provider and the Bureau of Developmental Services (BDS) collaborate to identify the necessary level of service provision and funding while ensuring supervision, safety, satisfaction, and effective utilization of authorized funds.



# Participant Direction of Services

## Participant Employer Authority

- The participant is supported to recruit, hire, supervise, and direct the workers who provide supports.
- In some cases, the participant is the co-employer of record of these workers who are referred to as Family Managed Employees (FME).
- The participant is responsible to document the training of the employee on the unique aspects of the person to whom they are assisting.
- Additional training responsibilities are outlined within the Waiver and further identified in He-M 525 and He-M 506.

## Participant Budget Authority

- The participant has the authority and accepts the responsibility to manage their support plan and budget.
- The participant has the authority to make decisions about the acquisition of Waiver goods and services that are authorized and documented in the individual's service plan and to make decisions based on a budget.
- Participants are expected to approve expenses within the budget and be provided assistance to prioritize the use of their funds, if needed.



# Waiver Appendices

Appendix A: Waiver Administration and Operation

Appendix B: Participant Access and Eligibility

Appendix C: Participant Services

Appendix D: Person-Centered Planning & Service Delivery

Appendix E: Participant Direction of Services

Appendix F: Participant Rights

Appendix G: Participant Safeguards

Appendix H: Quality Improvement Strategy

Appendix I: Financial Accountability

Appendix J: Cost Neutrality Demonstration

