MINUTES
Waiver Structure Work Group Meeting
Tuesday, 10/5/21 from 10:00AM - 12:00PM
Held via: Zoom Webinar

Attendance: Rebecca Bryant, Pamela Dushan, Lenore Sciuto, Tim Leach, Krista Gilbert, Jennifer Pineo, Dirk Doughy, Sarah Menard, Jennifer Cordaro, Renee Fisher, Michelle Donovan, Deborah DeScenza, Sandy Hunt, Jessica Gorton, Drew Smith, Ozzie Chung. Note: Members of the public who joined as attendees in listen-only mode are not included in this list.

Please reference the corresponding slide presentation for the detailed agenda, including topics and themes covered in the meeting and corresponding takeaways and applicable action items. This document provides context into areas of substantive discussion by major topic and theme.

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<thead>
<tr>
<th>Major Topics and Themes</th>
<th>Key Discussion Areas</th>
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<tr>
<td>• Introductions and Ground Rules</td>
<td>• N/A</td>
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| • Waiver Discussion | • A member asked to define the term ‘24/7 residential’.
  o A&M defined 24/7 residential, typically, as a group home / congregate structure (as opposed to Enhanced Family Care or Independent Living).
• A member inquired about the rationale for splitting the current DD waiver into two.
  o BDS responded that the A&M recommendations resulted from an effort to ensure that individuals were receiving the right amount of services.
  o BDS responded that the goal of tiering waivers is to make sure people can get the services they need based on individualized need.
• A member asked for clarification between the existing and new approach to waiver structures.
  o BDS responded that the new waiver approach is more defined and would provide the State more flexibility to identify what needs are going unmet, why they are unmet, and how to provide services based on individualized need. BDS is looking at reviewing definitions, caps, requirements, provider qualifications etc. as part of this process.
• A member asked about the role of self-direction in the new approach.
  o BDS responded that Self-direction, or PDMS (Participant Directed Managed Services), is not going away. In the most recent waiver renewal, PDMS was pulled out from a waiver service to a method of service delivery. PDMS is highlighted as the preferred method of service delivery so people have control over their services.
• A member inquired about how the new approach was different from and more effective than a single, comprehensive waiver.
**BDS responded** that the discussion later into the presentation may be helpful to provide clarity.

- **A&M provided clarification on questions asked during this section. A&M noted the list of services for review are substantively different from what is currently on the waiver renewal with an emphasis on family supports, intermittent supports, etc.**
  - A member stated that the data held by the State is not reflective of current service delivery.
  - A&M responded that the intent of this initiative is to provide the community with a billing structure which can be formalized in the planning process.

- **A member noted that current usage of services is below budget given the lack of staff.**
- **A member noted that individuals that are being served are not using all the hours. The member noted that low utilization could be a transportation issue, support staff issue, etc.**
  - There was a dialogue between two members regarding whether an individual’s low utilization was due to a lack of need or a lack of staff.
  - BDS responded that both scenarios exist and are not mutually exclusive.
  - A member was concerned around messaging - the member noted there are individuals who do not fit into a ‘low needs’ or ‘high needs’ category, and that there is a continuum of individuals in the middle.
  - A member noted the current system is not flexible or fluid enough, thus resulting in underservice and overservice.
  - A member noted that, from their experience, the system was person centered. The member was interested in the system change process and continues to see the discussion of system change as person centered.

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<tr>
<th>Planning for Change</th>
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<td>Assignment and Next Steps</td>
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<td>BDS noted that one of the outcomes of the group is, if BDS decides to add services, doing that within a supports or comprehensive waiver would allow program staff to still demonstrate cost neutrality to CMS. A supports waiver with a lower per-individual unit cap would also allow the State the ability to add some more supports in. What BDS offers for each of the two waivers is not a list of services to choose from, but the right list. This is an opportunity to add services but still meet cost neutrality.</td>
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<td>Please refer to the corresponding work group PPT for details on assignments (if any) and next steps.</td>
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