



MINUTES
Waiver Structure Work Group Meeting
Tuesday, 11/9/21 from 10:00AM - 12:00PM
Held via: Zoom Webinar

Attendance: Rebecca Bryant, Pamela Dushan, Lenore Sciuto, Tim Leach, Krista Gilbert, Jennifer Pineo, Sarah Menard, Jennifer Cordaro, Renee Fisher, Michelle Donovan, Deborah DeScenza, Nancy Rollins, Jessica Gorton, Drew Smith, Alecia Ortiz. *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.

| Major Topics and Themes | Key Discussion Areas |
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| <ul style="list-style-type: none"> • Service Mapping (NH Service Review) | <ul style="list-style-type: none"> • BDS presented the results of the most recent homework assignment in which work group members identified which services should be considered for change and which services are appropriate for which waiver. The group identified Community Participation Services and Service Coordination as services to consider for change. The majority of services were identified as being appropriate for both waivers, with the exception of Community Support Services and Residential Habilitation. • A member noted that Residential Habilitation has multiple shared living models. • A member asked if an individual could be included in two waivers and noted the transactional difficulty of reassessing waiver eligibility. <ul style="list-style-type: none"> ○ BDS and A&M responded that Medicaid does not allow an individual to have eligibility for two waivers and noted that pursuing flexibility in the waiver design is important. • A member asked how detailed the service definitions and levels will be. <ul style="list-style-type: none"> ○ BDS and A&M clarified that the more detail the rate setters have, the more likely it is that the new rates will accurately capture the costs of providing service. • A member asked if one of the main changes related to this work is an improved ability for BDS to collect data. <ul style="list-style-type: none"> ○ BDS and A&M clarified that equity was a primary concern- the alignment of service need with service delivery, and noted that the new rate structure will eventually have operational impacts. • Many members noted that the flexibility afforded with Community Participation Services as a part Appendix K has been welcome and successful. <ul style="list-style-type: none"> ○ BDS noted that to maintain flexibility, new practices would have to comply with CMS oversight and protect individual privacy. • A member noted that COVID-19 and staffing shortages have led to creative operational adjustments. <ul style="list-style-type: none"> ○ BDS noted that it would be interesting to hear about these adjustments more broadly. • Members discussed the difficulty in ensuring seniors have access to services that are a good fit for their needs. |

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| | <ul style="list-style-type: none"> • Members discussed breaking out Personal Care. • Members discussed telehealth and other virtual strategies. • Members identified case management activities and specialty services as activities that benefit from telehealth. • One member asked if there were examples of virtual Residential or virtual Day Services. |
| <ul style="list-style-type: none"> • DSP Training and Credentialing Opportunities | <ul style="list-style-type: none"> • A member noted that the DD Council has been devoting resources to exploring the DSP issue. • The group discussed credentialing and was supportive of the idea. • A member expressed an interest in ensuring that DSP training included content specific to individuals with high needs and individuals with out verbal language. • The group discussed moving to one primary platform for training delivery and noted that Relias aligns well with regulatory training. • The group discussed the need for more robust training. • Open Futures and CSNI were referenced. • The group was in-favor of developing a career ladder for DSPs, but a member did express hesitation about making training requirements too burdensome and limiting labor supply in a way that impacts service delivery. |
| <ul style="list-style-type: none"> • Assignment and Next Steps | <ul style="list-style-type: none"> • <i>Please refer to the corresponding work group PPT for details on assignments (if any) and next steps.</i> |