

# Developmental Disabilities Administration

# The Guide to October 2025 Waiver Changes and You

201 West Preston Street, 4th Floor

Baltimore, Maryland 21201

Issue Date: September 24, 2025

Effective Date: October 6, 2025, unless otherwise noted in the guidance

## Introduction

The Maryland Department of Health (MDH) is making changes to the Developmental Disabilities Administration (DDA) Medicaid waiver programs. Starting in October 2025, the Family Supports Waiver and Community Supports Waiver will be combined into one program called the Community Pathways Waiver.

This change is part of an official update (called a waiver amendment). It will help make services easier to access, faster to receive, and more focused on each person's needs.

These changes are planned to go into effect on October 6, 2025. Once the amendment is approved, participants enrolled in the Family Supports Waiver and Community Supports Waiver programs will move into the Community Pathways Waiver program.

We want to make this change as easy as possible for children and adults receiving services, their families, providers, and community partners. This guide explains the changes.

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#### Want more information?

There is a lot more to know about the DDA and its services that is not in this guide. If there is something in this guide you do not understand or you want more information, you can talk to:

- Someone you know and trust. This might be a family member, friend, or someone else who knows about the DDA.
- Your Coordinator of Community Services.
- Someone at the DDA. The DDA has offices in four (4) different parts of Maryland. They are called Regional Offices. Click <a href="here">here</a> for information about the Regional Office closest to you. That information is also at the end of this guide.

If you cannot find someone to help you, try the DDA's main office at: 410-767-5600 or 844-253-8694.

Note: This guide is a summary with important information. For more details, visit DDA's website to see DDA's waiver application, laws, regulations, guidance, and policies.

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# I. What is a Medicaid waiver or waiver program?

- A. A Medicaid waiver is a program that lets some Medicaid rules be set aside to help more people get the services they need at home or in the community instead of in a facility or institution.
- B. A Medicaid waiver program lets people get services or benefits that Medicaid normally does not pay for.
- C. A waiver is not an automatic benefit (an entitlement). This means:
  - 1. Even if the person is eligible, the person does not automatically get services.
  - 2. There are only a limited number of spots in the program.
  - 3. If all spots are full, the person will be placed on a waitlist until a spot becomes available.

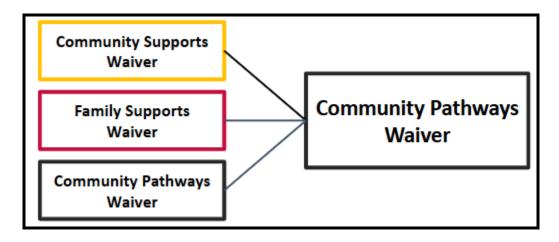
# II. What DDA-operated Medicaid waiver programs are being consolidated?

A. Starting in October 2025, the Family Supports, Community Supports, and Community Pathways waivers will be combined into one program called the Community Pathways waiver.

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#### DDA-Operated Medicaid Waiver Programs



# III. Why are these changes happening?

- A. The State is combining waiver programs to:
  - 1. Make services easier and quicker to access;
  - 2. Provide more consistent, person-centered support; and
  - 3. Improve the overall system for everyone.

# IV. What does this mean for Family Supports and Community Supports Participants?

- A. No action is needed from Family Supports and Community Supports participants and their families.
- B. The Maryland Department of Health will automatically move people who are now in the Family Supports waiver and the
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- Community Supports waiver program into the Community Pathways waiver.
- C. All the same services available under the Family Support waiver will be available under the Community Pathways waiver.
- D. All the same services available under the Community Support waiver will be available under the Community Pathways waiver.
- E. Participants in the Family Supports Waiver and Community Supports Waiver have been sent a letter letting them know about their program change. This letter is a Medicaid notice about automatically moving people into the Community Pathways Waiver program.
  - 1. This letter is to provide information only.
  - 2. Participants do not need to take any action.

#### Resources:

- Notification Letter Example
- Notice FAOs

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## V. What updates are being made to services?

Below is a summary of some DDA services, including descriptions, updates and reminders. Not all DDA services have been updated.

**A. Assistive Technology and Services:** Assistive Technology includes devices and equipment that help participants do everyday activities or improve how the participants function. This service also includes checking the participant's technology needs and helping the participant choose, get, use, and take care of the technology. Training on how to use the technology is included too.

- 1. Assistive Technology and Services monthly services fees:
  - a. Monthly service fees can be added to the Person-Centered Plan service authorization section.
  - b. Coordinators of Community Services can add the monthly service fee (as applicable) during the next Revised or Annual Person-Centered Plan.
  - c. Service providers will send separate bills for assistive technology devices and equipment and for the monthly service fee.
- 2. Personal Emergency Response Systems are no longer covered under this service.
  - a. Personal Emergency Response Systems are devices, also called medical alert systems, that include a base unit and a
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- wearable button. They let a person quickly contact emergency services. These devices are covered by the Maryland Community First Choice Program.
- b. Coordinators of Community Services will support the participant with the Community First Choice program application and service request, or help find other ways to pay for this device.
- 3. Assistive Technology Specialists with a Shift Enabling Technology Integration Specialist (ETIS) Certification can now provide services.

#### Resource:

- Assistive Technology and Environmental Modifications Chart
- **B. Behavioral Support Services:** These services support participants if they are experiencing, or are likely to experience, difficulty at home or in the community as a result of behavioral, psychological, social, or emotional challenges.

Based on the participant's need, this service includes a behavioral assessment, behavioral consultation, and development of a Behavior Support Plan. It also can include Brief Support Implementation Services (BSIS). Brief Support Implementation Services is a time-limited service that provides direct assistance and modeling to the family, staff, and other caregivers so they can support the participant with behavioral, psychological, and emotional needs.

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- 1. The Behavior Support Plan must clearly show when one-on-one staff support or two-to-one staff support, enhanced supports, or overnight services are needed. It must also describe any risks and how to reduce (mitigate) them.
- 2. Behavioral Consultation includes, but not limited to:
  - a. Graphing and analysis of collected data to identify trends and patterns of target behaviors that can be shared with other team members in consultation and educational efforts.
  - b. Providing ongoing education on recommendations, strategies, and next steps to the participant's support network (i.e., caregivers, family members, agency staff, etc.).
    - Ongoing education involves understanding the current environment or adapting to a new one, including activities and communication methods to support the individual; and
    - ii. Helping the participant to participate in environments to optimize the participant's community inclusion in the most integrated environment.
- 3. Only one Behavioral Assessment and Behavior Support Plan is allowed per Person-Centered Plan year.
- 4. Behavioral Assessment and Behavioral Consultation services can now be completed by the following additional professionals:
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- a. Licensed graduate-level professional counselor. The counselor must be working under the license of the Licensed Clinical Professional Counselor (LCPC).
- b. Licensed masters-level social worker. The social worker must be working under the license of the Licensed Certified Social Worker-Clinical (LCSW-C).
- c. Board Certified Behavior Analyst (BCBA).

#### Reminders:

- Behavioral Support Services shall be provided in a holistic manner including assessments, consultations, and development of behavioral strategies in all environments (e.g., home, community, employment, day program, residential program). There may only be one Behavioral Support provider authorized, at a time, to support a participant.
- 2. Progress notes must include the following components:
  - a. Assessment of behavioral supports in the environment;
  - b. Progress notes detailing the specific interventions implemented in accordance with the behavior plan and outcomes for the participant;
  - c. Data, trend analysis, and graphs to detail progress on target behaviors identified in a behavior plan; and
  - d. Recommendations.
- 3. Behavioral Assessments and Behavioral Consultation services can be provided virtually.
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- a. Providers interested in providing services virtually must have this service model approved in their Provider Program Service Plan.
- 4. Brief Support Implementation Services must be provided in person.
- **C. Career Exploration:** This is a short-term service to help participants learn new skills they will need in a competitive and integrated job they are interested in.

1. Career Exploration services for participants accessing this service for the first time are limited to up to 720 hours for the plan year.

#### Reminders:

 Participants must have an employment goal within their Person-Centered Plan. The goal outlines how the person will transition to community integrated employment (such as participating in discovery and job development) or another service.

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**D. Community Development Services:** This service supports participants to be more connected to their community. Staff will support participants to develop or maintain social and other skills they need to feel confident interacting with all types of people in their community.

#### What's New:

- DDA may authorize dedicated support for participants new to services and participants in services who have a specific, documented behavioral need for up to 6 months while a Behavior Support Plan gets authorized and developed.
- The DDA may authorize Nursing Support Services in an Emergency Revised Plan for participants in services who have a specific, documented health and safety need to support the development of a Nursing Care Plan and subsequent request for dedicated support.

#### Reminders:

- Participants currently receiving dedicated supports will continue to receive them. The participant will need to ask for dedicated supports in their Annual Person-Centered Plan. Requests with supporting documentation of need can be approved for the entire plan year.
- 2. Virtual supports can be provided at home or in a licensed residential setting when the participant doesn't need paid direct help.
- 3. Participants may go home or to the provider's site for short periods during the day to take part in virtual supports, as listed in their file and service implementation plan.
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- 4. Residential and Personal Support Services cannot be billed during these times.
- **E. Community Living Enhanced Supports:** This service supports participants to develop and keep skills needed for: everyday life, spending time with others, and keeping participants and others safe. It does this by providing additional behavioral supports, observation, and supervision in a home rented or owned by a provider. This service supports people with severe, challenging behaviors and people with court-ordered restrictions.

- 1. Community Living Enhanced Supports provides the participant, who exhibits challenging behaviors or has court ordered conditions for release or probation, with residential supports.
- 2. The participant must be 18 years of age or older.
- 3. DDA may authorize dedicated support for participants new to services and participants in services who have a specific, documented behavioral need for up to 6 months while a Behavior Support Plan gets authorized and developed.
- 4. The DDA may authorize Nursing Support Services in an Emergency Revised Plan for participants in services who have a specific, documented health and safety need to support the development Nursing Care Plan and subsequent request for dedicated support.

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#### Reminder:

Participants currently receiving dedicated supports will continue to receive them. The participant will need to ask for dedicated supports in their Annual Person-Centered Plan. Requests with supporting documentation of need can be approved for the entire plan year.

**F. Community Living - Group Home:** This service supports participants to build and keep skills they need for everyday life, including spending time with others. This service supports participants in a home rented or owned by a provider.

#### What's New:

- 1. The participant must be 18 years of age or older.
- 2. DDA may authorize dedicated support for participants new to services and participants in services who have a specific, documented behavioral need for up to 6 months while a Behavior Support Plan gets authorized and developed.
- 3. The DDA may authorize Nursing Support Services in an Emergency Revised Plan for participants in services who have a specific, documented health and safety need to support the development Nursing Care Plan and subsequent request for dedicated support.

#### Reminder:

Participants currently receiving dedicated supports will continue to receive them. The participant will need to ask for dedicated supports in

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their Annual Person-Centered Plan. Requests with supporting documentation of need can be approved for the entire plan year.

**G. Day Habilitation:** This service supports participants to build skills and participate in social activities. Support is provided in small and large groups of people. It is provided in provider programs or in the community.

- DDA may authorize dedicated support for participants new to services and participants in services who have a specific, documented behavioral need for up to 6 months while a Behavior Support Plan gets authorized and developed.
- The DDA may authorize Nursing Support Services in an Emergency Revised Plan for participants in services who have a specific, documented health and safety need to support the development Nursing Care Plan and subsequent request for dedicated support.
- 3. Day Habilitation services are separate and distinct from residential services.
  - a. Participants may return home or to the provider-operated site during time-limited periods of the day to participate in virtual supports as indicated in the participant's file and service implementation plan.
  - b. Supports delivered virtually can happen in the home or a licensed residential setting when the participant does not need paid direct support.
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c. Residential and Personal Support Services cannot be billed during these times.

#### Reminders:

- DDA may authorize dedicated support for participants new to services and participants in services who have a specific, documented behavioral need for up to 6 months while a Behavior Support Plan gets authorized and developed.
- 2. Virtual supports can be provided at home or in a licensed residential setting when participants don't need paid direct help.
- 3. Participants may go home or to the provider's site for short periods during the day to take part in virtual supports, as listed in their file and service implementation plan.
- 4. Residential and Personal Support Services cannot be billed during these times.
- **H. Employment Services:** This service helps participants find out or discover what job may best fit with the participant's strengths and what they want to do.

This service can include:

- Discovery,
- Job Development,
- Ongoing Job Supports,
- Follow Along Supports,

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- Co-worker Employment Supports, and
- Self-Employment Development Supports.

- Ongoing Job Supports various supports a participant may need to successfully maintain and advance their job. This includes Nursing Support Services based on assessed need.
- 2. Employment Services are separate and distinct from residential services.
  - a. Participants may return home or to the provider operated site during time-limited periods of the day to participate in virtual supports as indicated in the participants file and service implementation plan.
  - b. Supports provided virtually can happen in the home or a licensed residential setting when the participant does not need paid direct support.
  - c. Residential and Personal Support Services cannot be billed during the times virtual supports are provided.
- 3. For the Provider Managed Services Delivery Model:
  - a. Participants who have newly added an employment goal, including participants new to service, Employment Services
     Follow-Along Supports and/or Employment Services
     Ongoing Job Supports may be authorized even if the participant is not currently employed.
  - Participants who have been authorized for Employment
     Services Follow-Along Supports and/or Employment
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- Services Ongoing Job Supports for one (1) previous plan year without securing employment during the previous plan year, may be authorized these services for 1 additional plan year even if the participant is not currently employed.
- c. Participants who have been authorized for Employment Services Follow-Along Supports and/or Employment Services Ongoing Job Supports for two consecutive plan years without securing employment, may not be authorized these services for any subsequent plan year unless the participant secures employment.
- d. For participants who are not currently authorized for Employment Services - Follow-Along Supports and/or Employment Services - Ongoing Job Supports:
  - i. If a participant subsequently secures employment during the course of their plan year, and this employment is assessed to require these services, the Coordinator of Community Services must submit a Revised Person-Centered Plan.
  - ii. The Revised Person-Centered Plan should note that employment was secured and marked as an "urgent" plan.
- 4. Discovery services are limited to once every 2-years.
- 5. Job Development services cannot exceed a total maximum of 90-hours per plan year.
  - a. If currently approved above the limit, they may continue until the end of the authorized plan year.
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- 6. Co-Worker Employment Supports are limited to the first three months of employment.
  - a. If currently approved above the limit, they may continue until the end of the authorized plan year.

#### Reminders:

- 1. Job Development is support for a participant to get an individual job or explore new work options in a competitive integrated employment setting in the general workforce, including:
  - a. Direct and Indirect Supports This service uses a mix of direct and indirect support. At least half (50%) of the service should be direct, working hands-on with the participant. Up to half (50%) can be indirect, such as planning or coordinating, but it must clearly help the person reach their job goals.
- 2. Follow-Along Supports This includes at least two in-person support visits with the participant each month. It may also include other types of support, such as:
  - a. Phone calls to the person and/or employer; and
  - b. General coordination needed to support a person to maintain their employment.
- 3. To get or keep Employment Services like Follow-Along Job Supports or Ongoing Job Supports, the person's job must be a competitive, integrated job. This means the job should have:
  - a. Competitive wages- minimum wage or above;
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- b. Integrated location- A workplace where people with and without disabilities work together (integrated); and
- c. Same opportunities for advancement and benefits as other employees.
- 4. The person-centered planning team will use the Competitive Integrated Employment Checklist to decide if a job meets the requirements of competitive integrated employment.
- I. Environmental Assessment: Environmental Assessment is an in-person assessment done with the participant, in their home. The assessment is to see if changes to the home and/or assistive technology are needed to support independence, health, or safety. The assessment is completed by an Occupational Therapist.

- 1. Environmental Assessment Professional must:
  - a. Be properly licensed by the State;
  - b. Be in good standing with the State Department of Assessments and Taxation to provide the service;
  - c. Maintain Commercial General Liability Insurance;
  - d. Obtain and maintain worker's compensation insurance sufficient to cover all employees, if required by law; and
  - e. Be bonded as is legally required.

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#### Reminders:

- The assessment must be conducted by an Occupational Therapist licensed in the State of Maryland or a Division of Rehabilitation Services approved environmental assessment vendor.
- 2. DDA Organized Health Care Delivery System providers provide this service.
- **J. Environmental Modification:** Environmental Modification services provide changes or additions to the home so that the participant can be more independent. These adaptations also help make the home safer and healthier.

#### What's New:

- 1. Environmental Modification includes smart home devices that require attachment to the home, such as voice activated door openers, blinds and shade openers.
- 2. The DDA may accept less than three bids due to lack of contractors.
- 3. Environmental Modification providers must have a current license with the Maryland Home Improvement Commission or be a Division of Rehabilitation Services approved vendor.

#### Resource:

Assistive Technology and Environmental Modifications Chart

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**K. Family and Peer Mentoring Supports:** Family and Peer Mentoring Supports connects participants and family members, including siblings, to peer mentors with experiences. Peer mentors can explain community services, programs, and strategies they have used to obtain resources, supports, and services. This can help participants and their family members learn about and access community resources beyond those offered through the DDA Waiver.

- 1. Family and Peer Mentoring Supports are provided by DDA-approved Family and Peer Mentors.
  - a. Family Mentoring is provided to the participant's primary unpaid caregiver.
  - b. Peer Mentoring is provided to the participant.
- Family Mentors must have lived experience in caring for and supporting a family member with intellectual and developmental disabilities to help them live their best life. They must have knowledge and firsthand experience in navigating and accessing State and local resources, supports, and services.
- 3. Peer Mentors must have an intellectual and developmental disability themselves, and they offer valuable insights from their own experiences, helping others access resources and supports to live their best life.

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- **L. Family Caregiver Training and Empowerment Services:** Family Caregiver Training and Empowerment Services cover costs for educational materials, training programs, workshops, and conferences that help the participant's unpaid family caregiver:
  - Understand the participant's unique abilities and challenges
  - Enhance their ability to support the participant
  - Develop and get community and other resources and supports
  - Develop or enhance parenting skills
  - Develop or enhance advocacy skills
  - Support the participant in developing self-advocacy skills

- 1. Organized Health Care Delivery System Providers may apply to provide this service.
- **M. Housing Support Services:** Housing Support Services are time-limited supports to assist participants to:
  - Identify and navigate housing opportunities
  - Address or overcome barriers to housing
  - Obtain housing or remain in their current rented or leased home.

#### What's New:

1. Housing Support Services can be provided virtually.

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- 2. Providers interested in providing services virtually must have this service model approved in their Provider Program Service Plan.
- 3. Housing Support Services includes both direct and indirect supports.
  - a. Direct supports involves in-person assistance provided directly to the individual. Examples include helping complete housing applications, understanding lease agreements, or budgeting for housing-related expenses.
  - b. Indirect supports are supports for the person that do not happen in-person. Examples include making calls to properties, attorneys offices, social security to gather documentation; assisting with document gathering; filling out applications for various rental assistance programs; reaching out to non-profits to find financial assistance for items or deposits the person may need; and completing reasonable accommodation request.
- 4. Housing Support Services can be provided virtually.
  - a. Providers interested in providing services virtually must have this service model approved in their Provider Program Service Plan.
- **N. Individual and Family Directed Goods and Services:** Individual and Family Directed Goods and Services are available to people that self-direct their services.

Individual and Family Directed Goods and Services address an assessed need or goal in a participant's Person-Centered Plan, which includes

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improving and maintaining the participant's opportunities for full engagement in the community.

Individual and Family Directed Goods and Services include:

- Recruitment and Advertising Dedicated funding for staff recruitment and advertising efforts (up to \$500);
- Day-to-Day Administrative Supports Assistance with household management and scheduling medical appointments; and
- Other Allowable Goods and Services Goods and Services purchased using cost savings or unallocated funds as listed in the Self-Directed Services Policy and Manual.

- 1. Day-to-Day Administrative Supports
  - a. Up to 10 hours per month of Day-to-Day Administrative Supports are available if approved in the Person-Centered Plan.
    - i. This service is paid for through the waiver and cannot be covered using cost-savings funds.
    - ii. This service is a new drop down option in the Person-Centered Plan detailed services authorization.
  - b. Updated definition: Day-to-Day Administrative Supports
     provide assistance with the participant's household
     management and scheduling their medical appointments.
     Household management means organizing and taking
     care of essential household needs and repairs for things
     like:
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- i. Scheduling house maintenance (e.g. furnace checks) and repairs (e.g. dishwasher repair);
- ii. Scheduling snow removal; and
- iii. Scheduling lawn care.
- c. Day-to-Day Administrative Supports will only be available to participants who are 18 years of age or older and currently unable to do these tasks independently
- d. Day-to-Day Administrative Supports must:
  - i. Meet an outcome and be clearly documented in the participant's Person-Centered Plan;
  - ii. Be authorized by the DDA or its designee; and
  - iii. Be linked to a team decision tree checklist. The DDA will provide a step-by-step form to help participants meet this requirement:
    - The Day-to-Day Administrative Supports
       Decision Tree Form will be required for all
       Person-Centered Plans requesting Day-to-Day
       Administrative Supports after October 6, 2025.
    - 2. Participants who have Day-to-Day Administrative Supports approved in their current Person-Centered Plan will not need to complete the Decision Tree Forme *until the new plan year*.
    - 3. The Decision Tree Formwill be included in the Self-Directed Services Manual.
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- e. A full list of updates to this service is available in the <u>Self-Directed Services Manual</u>.
- 2. Other Goods and Services
  - a. Updated maximum: Up to \$5,000 per plan year.
    - i. After October 6, 2025, if a participant has already been approved for more than \$5,000 in Goods and Services for their plan year, those services can continue until the end of the plan year.
    - ii. New and additional requests after October 6, 2025 are limited to up to \$5,000 per plan year.
  - b. Updated requirement: If public programs or activities are available for free or at a lower cost, they should be used first.
  - c. Updates to what is allowable:
    - i. Fees for community programs and activities *must be inclusive* (be available to people without disabilities).
    - ii. Small kitchen appliances and laundry appliances are only available if the participant lives independently.
    - iii. Fitness items may not exceed \$1000 per item.
    - iv. Toothbrushes, weight loss programs, and nutritional supplements must be related to the participant's disability.
    - v. Initial internet services startup costs are only covered like purchase of modem or other startup.
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- d. Updates to what is **not allowable**:
  - i. Goods and Services that exceed reasonable and customary costs (more expensive than usual).
  - ii. Tuition and other fees associated with programs or activities at educational institutions.
  - iii. Items purchased prior to the approved Person Centered Plan; including items purchased prior to DDA approval of the Individual and Family Goods and Services request.
  - iv. Goods, services, equipment, and supplies intended for commercial use, such as commercial washers and dryers.
  - v. Goods, services, equipment, and supplies that are diversional (for fun) or recreational are not covered under section Medicaid 1915(c) of the Social Security Act.
  - vi. Goods, services, equipment, and supplies that any household would pay for as household expenses are not covered. Examples include monthly internet and subscriptions for television subscriptions..
  - vii. Programs and activities that are exclusive for individuals with disabilities.
  - viii. Monthly internet services as per federal rules.
- e. A full list of updates to this service is available in the <u>Self-Directed Services Manual</u>.

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**O. Live-In Caregiver Supports:** This service helps cover the cost of rent and food for someone who provides supports and services to the participant while they live in the participant's home.

#### What's New:

- 1. A live-in caregiver is someone who lives in the same home as the participant and also provides support and services there.
- 2. Live-in Caregiver Supports are not available if the participant lives in their family's home, the caregiver's home, or in a home owned or rented by a DDA-licensed provider
- 3. Siblings can be paid to provide this Waiver service, unless they are the participant's legal guardian or legally responsible person.

#### Reminder:

- 1. The Medicaid waiver will only pay for this service in months when the service agreement is fully carried out. When making the agreement with the caregiver, the participant (or their legal representative) is responsible for any unpaid rent.
- 2. Live-in Caregiver is a waiver service.
- 3. Live-in caregiver exceptions for Electronic Visit Verification (EVV) are different. Exceptions are for Personal Supports and Respite Care Services.
- **P. Medical Day Care:** This service supports participants to participate in a group program that provides health care, nursing, physical therapy, occupational therapy, nutrition, personal care, social, and related activities. This is in provider programs or in the community.
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Participants can receive Behavioral Support Services while attending Medical Day Care.

**Q. Nursing Support Services**: Based on the participant's assessed need, Nursing Support Services provides a Registered Nurse licensed in Maryland to perform Nursing Consultation, Health Case Management, and Nursing Delegation services.

- Nursing Support Services provides a Registered Nurse (RN), licensed in the State of Maryland, or who has an active compact license, to perform Nursing Consultation, Health Case Management, and Delegation.
- 2. The purpose of this initial nursing assessment is to determine whether:
  - a. The participant's health needs require administration of medication;
  - b. The participant's health needs are delegable in accordance with the Maryland Board of Nursing's regulations; and
  - c. The participant's health needs are exempt from delegation in accordance with the Maryland Board of Nursing's regulations.
- 3. Health Case Management services:
  - a. Health Case Management services do not include delegation of medications and medical/health/nursing treatments to direct support staff.
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- Health Case Management services do not require continuous nursing assessments of the participant or monitoring of the provision of services by direct support staff.
- c. Participants are eligible for Health Case Management services when:
  - There are no medications or medical treatments or the administration of medication provided by paid staff, or the participant is able to self-medicate as determined by the Nurse based on a self-medication screening;
  - ii. Completion of medical treatments are completed by a gratuitous (unpaid) caregiver; and
  - iii. The participant's health needs are exempt from delegation of medication and treatment administration in accordance with applicable Maryland regulations.
- 4. Nurse Delegation services include:
  - a. Developing a Nursing Care Plan and skills protocols (instructions) on the participant's specific health needs following nursing regulations and standards of nursing care;
  - Providing training to direct support staff on how to address the participant's specific health needs and to perform the delegated nursing tasks, in accordance with the Nursing Care Plan and skills protocols developed;
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- c. Monitoring, evaluating, and supervising the direct support staff's performance of delegated nursing tasks, including reviewing required records according to nursing rules and standards of nursing care; and
- d. Continually monitoring and evaluating the participant's health by conducting nursing assessments and reviewing health data documented and reported by direct support staff, in accordance with applicable regulations and standards of nursing care.
- 5. According to <u>Code of Maryland Regulations 10.27.11</u>, the delegating nurse shall be readily available when delegating a nursing task to an unlicensed individual, certified nursing assistant, or medication technician, and to address the participant's health needs as may arise emergently.
- 6. A legally responsible person, legal guardian, or relative (that is not a spouse) cannot be paid by the Medicaid waiver program, either directly or indirectly, to provide Nursing Support Services.
  - a. If a participant is using a legally responsible person, legal guardian, or relative as paid staff, Coordinators of Community Services will assist participants with choosing another service provider.
- 7. Nurse Consultation services Assessment and document revisions and recommendations of the participant's health needs, protocols, and environment are limited to no more than 4 hours once every three months.
- 8. Nurse Health Case Management services are limited to no more than 4 hours once every three months.
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#### 9. Nurses must:

- a. Successfully complete the DDA Registered Nurse Case Manager/Delegating Nurse (CM/DN) Orientation training;
   and
- b. Attend all mandatory DDA-provided nurse meetings.

#### Reminders:

- 1. Children have access to any medically-necessary preventive, diagnostic, and treatment services under Early and Periodic Screening, Diagnostic, and Treatment services to help meet children's health and developmental needs.
  - a. This includes age appropriate medical, dental, vision, and hearing screening services; diagnostic and treatment services to correct or ameliorate identified conditions; and skilled nursing services and behavior supports.
  - b. Supports provided under the Waiver's Nursing Support Service are to improve and maintain the ability of the child to remain in and engage in community activities.

### R. Participation, Education, Training, and Advocacy Supports:

Participation, Education, Training, and Advocacy Supports can help the participant learn how to speak up for themself and gain skills to live their best life. It can pay for training programs, workshops, or conferences. Important topics may include fair housing, equal opportunity in jobs, knowing their rights, and managing their services. Depending on the participant's needs, this service can cover the cost of enrollment, materials, and transportation.

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- 1. Transportation services may not compromise the entirety of this service.
- 2. Organized Health Care Delivery System Providers may apply to provide this service.
- **S. Personal Supports:** Personal Supports help participants with daily living skills and support their participation in the community. This service can also provide overnight support.

#### What's New:

- DDA may authorize dedicated support for participants new to services and participants in services who have a specific, documented behavioral need for up to 6 months while a Behavior Support Plan gets authorized and developed.
- 2. The DDA may authorize Nursing Support Services in an Emergency Revised Plan for participants in services who have a specific, documented health and safety need to support the development Nursing Care Plan and subsequent request for dedicated support.
- 3. Personal Supports (enhanced service rate) and overnight supports cannot be provided virtually.

#### Reminders:

1. DDA may authorize dedicated support for participants new to services and participants in services who have a specific,

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- documented behavioral need for up to 6 months while a Behavior Support Plan gets authorized and developed.
- 2. If direct support staff perform delegated nursing tasks as part of this service, then:
  - a. The participant must also receive Nursing Support Services; and
  - Any delegated medication tasks must be done by staff certified as Medication Technicians by the Maryland Board of Nursing.
  - c. Health tasks cannot make up the entire service.
- 3. Personal Supports hours are authorized based on assessed needs.
- **T. Remote Support Services:** Remote Support Services help participants live independently at home. This service can reduce the number of support staff needed in person. It includes off-site monitoring staff on standby to notify police, fire, or backup support as needed. The service is based on the participant's needs and the technology that works best for the participant. It also includes:
  - Installing the system and devices.
  - Repair, maintenance, and a backup system.
  - Training and technical assistance (help) for the participant and their support team.

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### What's New:

- 1. This service must be set up to:
  - a. Make sure the participant can be independent and have privacy in their own home.
  - b. Give the participant choices to control the equipment, including turning off the remote monitoring device if the participant wants, unless an approved Behavioral Support Plan or Nursing Care Plan states otherwise.
- 2. Each individual living in the home, their legal guardians, and teams must:
  - a. Be made aware of the benefits and risks of the Remote Support Service and their options to control the equipment;
  - Be informed they can turn off the remote monitoring device, unless an approved Behavioral Support Plan or Nursing Care Plan requires it to stay on; and
  - c. Get informed consent for all individuals in the home.

### Reminder:

Remote Support Services must be provided live by awake and alert staff at a monitoring center, who watch and give guidance to the participant through an electronic system.

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**U. Respite Care Services:** Respite Care Services are temporary supports that give a person and their family, or other primary caregiver, a break from daily routines based on their need.

### What's New:

- 1. Respite can be provided in:
  - a. The participant's own home;
  - b. The home of a respite care provider;
  - c. A licensed residential site; and
  - d. In-State overnight or youth camps, certified by the Maryland Department of Health.
- 2. Respite may not be provided by the primary caregiver(s).
- V. Shared Living: This service helps participants learn and keep skills for daily life, including spending time with others. It supports the participant to share a home and experiences with another person, a couple, or a family in the community that the participant chooses. The service is based on trust and commitment between the participant and the people they live with.

What's New: No new changes.

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- **W. Support Broker Services:** This service provides information and assistance in support of self-direction. Support Broker Services are used to:
  - 1. Provide information to ensure that participants understand the responsibilities involved with directing their services; and
  - 2. Assist the participant in developing the skills necessary to independently direct and manage their Medicaid waiver program services and providers (including employees, vendors, and DDA Providers) as the employer of record.

- 1. Support Broker Services are required:
  - a. When a relative, legal guardian, or legally responsible person is hired and paid to work with the participant.
  - b. When the participant chooses a relative, legal guardian, or legally responsible person as their designated representative.
  - c. When the participant hires someone to provide Day-to-Day Administrative Supports.
- 2. Support Brokers must:
  - a. Agree to, sign, and follow a code of conduct.
  - b. Successfully complete all required DDA Support Broker training and requirements.
- 3. Support Broker administrative activities that cannot be billed include:
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- a. Attending training;
- b. Correspondence (writing emails) or doing research;
- c. Creating issuing, or following up on invoices; and
- d. Travel.
- 4. Support Brokers may be sanctioned for violating DDA's waiver requirements, statutes, regulations, policies, guidance, instructions, or the Support Broker's agreements with the Maryland Department of Health or DDA (including the Support Broker Code of Conduct).
  - a. Sanctions include submitting a corrective action plan, withholding payment, recovery of an overpayment, suspension from providing services to participants, or de-certification from providing services to participants with a bar on re-applying to provide support broker services for any length of time.
  - b. Support brokers will have an opportunity to appeal as per the Code of Maryland Regulations (COMAR) 10.01.03.

### Reminders:

- 1. Individuals and organizations providing Support Broker Services cannot be paid for any other service for the participant.
- 2. If any employee is a relative, legally responsible person, representative payee, or legal guardian; then no relative, legally responsible person, representative payee, or legal guardian can serve as Support Broker.
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- 3. A designated representative may never be a Support Broker for that participant.
- 5. Support Brokers cannot make decisions for the participant, sign timesheets or invoices, or hire or fire workers. They can help review timesheets and invoices, but the participant always makes the final decision.
- **X. Supported Living:** This service supports participants to use or develop new independent living skills in their own home. It includes help finding an apartment or house, roommates, and supports based on the participant's preferences and choice.

- DDA may authorize dedicated support for participants new to services and participants in services who have a specific, documented behavioral need for up to 6 months while a Behavior Support Plan gets authorized and developed.
- The DDA may authorize Nursing Support Services in an Emergency Revised Plan for participants in services who have a specific, documented health and safety need to support the development Nursing Care Plan and subsequent request for dedicated support.
- 3. Supported Living services assist the participant to:
  - a. Learn informed decision-making and problem-solving related to performing activities of daily living required for the participant to live independently; and
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b. Engage in community-based activities of the participant's choosing within the participant's personal resources.

### Reminder:

- DDA may authorize dedicated support for participants new to services and participants in services who have a specific, documented behavioral need for up to 6 months while a Behavior Support Plan gets authorized and developed.
- 2. Participants who live in their own home and receive Supported Living need to have a legally enforceable lease that offers them the same tenancy rights that they would have in any public housing option.
- Y. Transition Services: This service helps the participant move from an institution or a home owned or rented by a provider into their own home. Institutions include places like Holly and Potomac Centers and nursing homes. The service can cover costs such as security deposits, utility setup fees, and moving expenses. Talk with the Coordinator of Community Services about what this service does not cover.

- 1. Transition Services may pay for training direct support staff before the participant moves.
  - a. This helps staff support participants with complex medical or behavioral needs and ensures their health and safety on the first day in the community.
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- b. DDA will provide guidance to providers for authorized services to submit an invoice for training costs.
- **Z. Transportation Services:** Transportation Services help a person get to and from community activities and is based on the assessed needs of the person. This service can include learning how to safely navigate the community or use public transportation, as well as mileage reimbursement.

What's New: No new changes

### Reminder:

- 1. The participant's community is defined as places the participant lives, works, shops, or regularly spends their days.
- 2. The participant's community does not include vacations in the State.
- 3. It does not include other travel inside or outside of the State of Maryland unless it is a day trip.
- **AA.** Vehicle Modifications: Vehicle Modifications can cover the cost to modify (change) the participant's or their family/caregiver's vehicle to make it accessible for the participant. It may include:
  - An assessment to determine the participant's specific needs as a driver or passenger, or those of their family/caregiver.
  - Help to modify (change) the vehicle.
  - Help to cover the cost of repairs to the vehicle modifications.
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• Training on the use of the modification.

What's New:

Vehicle Modifications do not include charging electric vehicles.

# VI. What updates are being made to the virtual support service model?

Virtual supports are an electronic method of service delivery. Virtual supports are online supports that help people learn new things, like career planning or taking classes. They can also help someone do things more independently, such as getting job coaching from a distance

Virtual Supports can be provided for:

- 1. Behavioral Support Services Behavioral Assessment and Consultation only.
- 2. Community Development Services;
- 3. Day Habilitation;
- 4. Employment Services;
- 5. Housing Support Services;
- 6. Personal Supports; and
- 7. Remote Support Services.

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- 1. The provider must have written policies, train direct support staff on those policies, and advise people and their person-centered planning teams regarding those policies that address:
  - a. Identifying whether the participant's needs, including health and safety, can be addressed safely while they are using virtual supports;
  - b. Identifying individuals to intervene (such as uncompensated caregivers present in the participant's home), and ensuring they are present while services are being provided virtually, as indicated, in case the person needs hands on assistance/physical assistance, support with using technology, or experiences an emergency; and
  - c. How a participant will get emergency interventions if the person experiences an emergency, including contacting 911 if necessary.
  - d. Providers providing a Medicaid waiver program service through virtual supports must include it as a service delivery method in their provider Program Service Plan, required by Code of Maryland Regulations Title 10, Subtitle 22.
  - e. Provider Program Service Plans must include details on how they will identify individuals to intervene (such as uncompensated caregivers present in the participant's home), and how they will ensure they are present while services are being provided virtually, by July 1, 2026, if not already included.
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#### Reminders:

- 1. The Coordinator of Community Services is responsible for monitoring the implementation of the Person-Centered Plan on an ongoing basis.
  - a. This includes assessing the quality and effectiveness of virtual supports.
  - b. If there is a desire by the participant to change the way services are delivered, a Revised Person-Centered Plan and service implementation plan are required.
  - c. Health and safety concerns must be reported to the DDA Regional Office and as per the <u>Policy on Reportable</u>
    <u>Incidents and Investigations</u>.
- 2. The Medicaid waiver program will not fund any costs associated with the provider obtaining, installing, implementing, or using virtual supports, such as equipment, internet, software applications, and other related expenses. These costs, in the delivery of new business models, are part of the provider's operating cost.

# VII. What is the Self-Directed Services Orientation?

1. Self-Directed Services Orientation is required for all new applicants interested in self-directing their services and participants using the Provider-Managed Service Delivery Model interested in the Self-Directed Service Delivery Model.

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- a. This DDA Self-Directed Services Orientation must be completed before enrollment in the Self-Directed Services model.
- b. The DDA Self-Directed Services Orientation consists of the
- c. first three modules of the <u>Self-Directed Services Training</u>
   <u>Series</u>:
  - i. Module 1: Self-Direction Overview;
  - ii. Module 2: The Self-Directed Services Team; and
  - iii. Module 3: Person-Centered Planning.
- d. When a participant is interested in the Self-Directed Services model, they must notify their Coordinator of Community Services.
  - i. The Coordinator of Community Services will schedule a meeting to complete the orientation with the participant and any team member the participant would like to be present for the orientation.
  - The Orientation process will include completing an Orientation Checklist and reviewing a Frequently Asked Questions tool.
- e. Participants enrolled in the waiver with an effective date of October 6, 2025 through December 31, 2025, must complete the orientation by or before March 31, 2026 if not already completed. If not completed by March 31, 2026, the participant will be transitioned to the Provider-Managed Service Delivery Model.
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- f. Participants enrolled in the waiver with an effective date of January 1, 2026 or later must complete the orientation before beginning self-directed services.
- g. Additional information regarding the Self-Directed Services Orientation will be included in the <u>Self-Directed Services</u> Manual.

# VIII. What does exploration of other resources mean?

### Reminders:

Before using DDA funding waiver services, participants should first use any other available funding. This can include private insurance, Maryland Medicaid, the local school system, Maryland Department of Rehabilitation Services (DORS), Maryland Department of Human Services (DHS), or other state or federal programs that apply.

### Resources (not complete listing):

- <u>Durable Medical Equipment/Durable Medical Supplies</u>
- Non-Emergency Medical Transportation (NEMT)
- Maryland Medicaid Approved Items
- Maryland Durable Medical Equipment Re-Use
- Maryland Statewide Resources, Support and Services

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## IX. What are the updated and new forms?

Medicaid waiver programs use forms to collect, organize, and process information, and to make decisions. Below is a list of updated and new forms.

### A. **Updated Participant Agreement** (form for Self-Directed Services)

What's New:

- 1. Anyone under the age of 18 must designate a representative (Option 2).
- 2. If a designated representative is a relative, legally responsible person, or legal guardian, no other relative, legally responsible person, or legal guardian may provide waiver services.
- 3. The updated Participant Agreement should be completed during a participant's next Person-Centered Plan submission or if the participant would like to change their Participant Agreement during the plan year.

### **B. Updated Budget Sheet** (form for Self-Directed Services)

- 1. Clerical updates were made, including:
  - a. Financial Management and Counseling Services provider name update to "Fello", and
  - b. Spelling out acronyms for greater accessibility.
- 2. The updated Budget Sheet should be used when the participant is submitting a new budget sheet.
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### **C. Updated Budget Modification Form** (form for Self-Directed Services)

### What's New:

- 1. Allowable benefits are listed in the instructions.
- 2. Individual and Family Directed Goods and Services Other Allowable Goods and Services are limited to \$5,000 per year (due to the updates in the waiver).
- 3. Notice included in the instructions that budget modifications cannot be completed while a Person-Centered Plan is in an auto-extend status.
- 4. The Updated Budget Modification Form must be used for any budget modifications on and after October 6, 2025.

# **D. New Form: Day-to-Day Administrative Supports Decision Tree** (form for Self-Directed Services)

- 1. The Decision Tree Form will be required for all Person-Centered Plans requesting Day-to-Day Administrative Supports *after October 6, 2025.*
- 2. Participants who have Day-to-Day Administrative Supports approved in their current Person-Centered Plan will not need to complete the Decision Tree Form *until the new plan year*.
- 3. Instructions on how to complete the Decision Tree Form will be included in the Self-Directed Services Manual.
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# **E.** New Form and Process: Self-Directed Services Orientation (form for Self-Directed Services)

#### What's New:

- 1. DDA Self-Directed Services Orientation is required for all new applicants interested in self-directing their services and participants using the Provider Managed Services Delivery Model interested in the Self-Directed Services Delivery Model.
- 2. Participants enrolled in the waiver with a Person-Centered Plan effective date of October 6, 2025, through December 31, 2025, must complete the orientation by or before March 31, 2026 if not already completed. If not completed by March 31, 2026, the participant will be transitioned to the Provider-Managed Services Delivery Model.
- 3. Participants enrolled in the waiver with an effective date of January 1, 2026, or later must complete the orientation before beginning self-directed services.
- 4. Additional information regarding the Self-Directed Services Orientation will be included in the <u>Self-Directed Services Manual</u>.

# **F. Family as Staff Overtime Request Form** (form for Self-Directed Services)

### What's New:

As of October 6, 2025, there will no longer be an exception process to approve relatives, legally responsible persons, or legal guardians to work more than 40 hours per week. The Family as Staff Overtime Request Form will no longer be available.

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# X. Coordinators of Community Services Reminders

### Reminders:

- 1. The Coordinator of Community Services is responsible for monitoring the implementation of the Person-Centered Plan on an ongoing basis.
- 2. Within each quarter of the Person-Centered Plan Annual Plan Date, at a minimum, the Coordinator of Community Services must monitor service delivery in person at the place of service, as specified in the approved Person-Centered Plan.
- 3. The Coordinator of Community Service must visit the person at different places for each quarterly visit.
- 4. The Coordinator of Community Services also monitors that the services and supports meet the participant's privacy, health, and safety needs, and that the participant remains satisfied with their services and supports, including virtual supports, as identified in the approved Person-Centered Plan.

# XI. Financial Management and Counseling Services Providers Updates

Financial Management and Counseling Services providers support participants using the Self-Directed Services Delivery Model.

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- 1. Financial Management and Counseling Services providers are updating their participant portals to support the updated changes to the waiver.
- 2. Provider qualifications processes and requirements are included in the <u>Self-Directed Services Manual</u>.
- 3. Each Financial Management and Counseling Services provider is an Organized Healthcare Delivery System. This means the Financial Management and Counseling Services providers may directly purchase this service for the participant.
  - a. Beginning October 6, 2025, the Financial Management and Counseling Services providers will make payments for waiver services easier by directly purchasing approved services, goods, and other items outlined in Person-Centered Plans.
  - b. This new approach makes sure that Financial Management and Counseling Services providers, as an Organized Healthcare Delivery System providers, are actively supporting participants by directly managing the receipt of authorized services and making sure providers are qualified.
  - c. This process must begin with any new service, good, or item that needs to be bought for a participant on or after October 6, 2025.
    - This means that the Financial Management and Counseling Services providers may not reimburse
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- family members or other team members for waiver services after October 6, 2025.
- ii. This process does not apply to reimbursements for employee benefits. **Employees** may be reimbursed for mileage, training, and health insurance premiums when the benefit is allowable and within the DDA's established Reasonable and Customary standards.

# XII. Service Provider Updates and Reminders

Anyone who is paid to provide a Medicaid waiver service—including a participant's employees—is considered a Medicaid provider and must follow all related laws and regulations.

- Medicaid providers who only support Family Supports or Community Supports participants must update their DDA application and Program Service Plan to indicate Community Pathways waiver.
  - a. If not interested in continuing to support participants, providers will not need to add the Community Pathways waiver program.
  - b. Coordinators of Community Services will assist participants in identifying new service providers.

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- 2. Medicaid Enrolled Community Supports Providers:
  - a. Providers enrolled with Medicaid have the option to select whether they would support children, adults, or both children and adults.
  - b. Providers that want to expand their services to children or adults must update their Community Pathways provider information including their program service plan and information in ePREP.

Note: DDA Provider Services is available to assist providers.

- 3. Direct Support Professionals (as applicable) must:
  - a. Have a current First Aid and CPR certification or be a certified Emergency Medical Technician (EMT).
  - b. The First Aid and CPR training must include a hands-on, in-person session.
  - c. At minimum, employees must participate in an in-person skills session that will require them to show that they are able to perform CPR and First Aid skills.
- 4. Staff Training Attestations (Confirmations)
  - a. DDA providers are required to ensure that they are delivering services that meet the training requirements outlined in the DDA-operated Medicaid waiver at the time of service.
  - b. Beginning on October 6, 2025, DDA providers must complete an Attestation (a formal confirmation) and submit it with their initial application and quarterly via a DDA form:
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- i. 1st Quarter Report Due October 5th (includes training completed in July, August and September).
- ii. 2nd Quarter Report Due January 5th (includes training completed in October, November, and December.
- iii. 3rd Quarter Report Due April 5th (includes training completed in January, February and March).
- iv. 4th Quarter Report Due July 5th (includes training completed in April, May and June).
- 5. 120-calendar days before the provider's DDA-license/certification expiration:
  - a. Regional Office staff will email the providers with renewal instructions and a self-assessment tool.
  - b. Providers must submit the self-assessment tool at least 90-days before the expiration of their DDA-license/certification.
  - c. DDA Regional Offices will provide technical assistance with the process.

### Reminders:

- 1. DDA-Licensed and DDA-Certified providers must:
  - a. Submit a provider renewal application at least 60- days before their current approval expires, following DDA policy.
  - b. 75–90 calendar days before expiration:
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- i. If the provider has not completed the self-assessment tool or requests help, DDA Regional Office will meet with providers to review it.
- ii. The review covers the provider's current status, updates, challenges, and concerns with the renewal application.
- iii. Staff will also review policies and procedures,Program Service Plans, Quality Assurance Plan,community settings, incident reporting, and provider performance.
- c. Technical assistance is provided, and remediation strategies and due dates developed as applicable.
- d. The renewal license is good for a 3-year period unless otherwise noted in the approval letter.
- A. Direct Support Professionals (as applicable) must:
  - 1. Satisfactorily complete required orientation and training designated by DDA.

References: <u>DDA PolicyStat</u> and <u>DDA Provider Training</u> <u>Matrix</u>

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# XIII. Legally Responsible Persons, Legal Guardians, and Relatives Updates and Reminders

The following updates and reminders are about the use of Legally Responsible Persons, Legal Guardians, and Relatives as paid caregivers.

### What's New:

- A. Relatives are defined as a natural or adoptive parent, step-parent, grandparent, step-grandparent, child, stepchild, sibling, step-sibling, aunt, uncle, niece, or nephew.
- B. Relatives, legally responsible persons, and legal guardians may not provide Nursing Support Services or Participant Education, Training and Advocacy Supports.
- C. In Self-Directed Services, relatives, legally responsible persons, and legal guardians who provide waiver services must be reported using the Family as Staff Form. The Family as Staff Form has been updated to include the changes outlined in this guide and the Self-Directed Services Manual.
- D. Effective April 1, 2026, participants seeking to use a legally responsible person, legal guardian, or relative to provide paid services must submit a reporting form. The reporting form is required for both service models (Self-Directed Services and Provider Managed). The DDA will continue to work with stakeholders to create a reporting form.

### E. Substitute Judgement

- 1. According to the Centers for Medicare and Medicaid Services, legally responsible persons, legal guardians, or relatives who
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- make decisions about waiver service providers must use substitute judgment on behalf of the individual.
- 2. Substitute judgement means making decisions for someone else based on what the person believes the participant would want, rather than what they want for them.
- 3. Effective April 1, 2026, a substitute judgement document will be required when a legally responsible person, legal guardian, or relative makes or supports the person in making waiver service and provider decisions.
- 4. The DDA will continue to work with stakeholders to create a reporting form that outlines a substitute judgment process.
- F. No relative, legally responsible person, or legal guardian may provide waiver services for more than 40 hours per week. This includes when the person is an employee for one service and a vendor for another service.
  - a. Before October 6, 2025, the DDA may review requests for relatives, legally responsible persons, and legal guardians to work more than 40 hours per week [Family as Staff Overtime Request Form].
  - b. As of October 6, 2025, there will no longer be an exception process to approve relatives, legally responsible persons, or legal guardians. The Family as Staff Overtime Request Form will no longer be available.
  - c. Any hours worked over 40 hours by relatives, legally responsible persons, or legal guardians **will not be paid** using Medicaid waiver funds. This means that Financial Management and Counseling Services providers will not pay for those hours.
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Note: If a participant has paid staff that are not relatives, legally responsible persons, and legal guardians, those staff members can work more than 40 hours per week. If the participant wants the staff to work more than 40 hours, the participant must make sure they have funding and hours in the budget to cover the increased cost of services.

- G. Unqualified providers, including family members and team members, may not be reimbursed for purchasing services directly.
  - 1. Reimbursements to unqualified providers cannot be made for any waiver service, including:
    - a. Assistive Technology;
    - b. Environmental Assessments;
    - c. Environmental Modifications;
    - d. Participant Education, Training, and Advocacy;
    - e. Individual and Family Directed Goods and Services;
    - f. Recruitment and Advertising; and
    - g. Respite Care Services (including Respite Camp).
  - 2. DDA Organized Healthcare Delivery System directly purchases authorized services for the participant.
  - 3. For the Self-Directed Services Delivery Model, each Financial Management and Counseling Services provider is an Organized Healthcare Delivery System provider. This means the Financial Management and Counseling Services provider directly purchases the listed services for the participant.
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- H. The federal government requires safeguards to ensure that a non-legal representative acts in the best interests of participants.
  - 1. The Coordinator of Community Services is responsible for monitoring the implementation of the Person-Centered Plan on an ongoing basis.
  - 2. The Coordinator of Community Services also monitors that the services and supports meet the participant's privacy, health, and safety needs, and that the participants remain satisfied with their services and supports including the use of a representative for directing services.
  - 3. Coordinators of Community Services and Financial Management and Counseling Services providers report concerns to the DDA Regional Office when representatives do not appear to be functioning in the best interests of the person.
  - 4. Coordinators of Community Services and team members support participants in identifying new representatives as applicable.
  - 5. Coordinators of Community Services also submit incident reports, including but not limited to abuse, neglect, and exploitation as per the Policy on Reportable Incidents and Investigations.
  - DDA and the Office of Health Care Policy review any investigation incidents as per the Policy on Reportable Incidents and Investigations.

### Reminders:

1. "Legally Responsible Person" means a person who, according to the rules in Maryland, has a legal duty to take care of someone else. This can be:

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- a. A parent of a minor (whether they are born to them or adopted);
- b. A person who is officially responsible for the well-being of another person as their legal guardian; or
- c. Someone else who is legally in charge of taking care of a minor, like a foster parent or a family member chosen by a court.
- 2. "Legal guardian" is either:
  - a. A natural or adoptive parent of a participant under the age of 18; or
  - b. An individual who has been appointed by a court order as guardian of the person.
    - Note: "Unpaid legal guardians" are legal guardians who are not paid to provide legal guardianship.
- 3. Relatives, legally responsible persons, and legal guardians may provide the following services:
  - a. Community Development Services;
  - b. Employment Services (Ongoing Job Supports and Follow Along Supports);
  - c. Day-to-Day Administrative Supports (Relatives may only provide this service if they are not a legally responsible person or guardian);
  - d. Live-in Caregiver Supports (Siblings only: siblings may provide this service if they are not a legally responsible person or guardian);
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- e. Personal Supports and Personal Supports Enhanced Services;
- f. Respite Care Services (May not be provided by a primary caregiver);
- g. Support Broker Services; and
- h. Transportation Services (Relatives may only provide this service if they are not a legally responsible person or guardian).

## XIV. LTSSMaryland Updates

To support the amendment and enhance the electronic service record, the following updates will be made to LTSS*Maryland*.

- A. Service Authorization Section
  - 1. Assistive Technology monthly service fees will be available to select as a service option.
  - 2. Coordinators of Community Services can select this option for participants. This fee applies during the next Revised or Annual Person-Centered Plan.
  - 3. The monthly service fee should continue to be reflected under Assistive Technology and Services until the new service authorization drop-down option implementation.
    - a. Effective date: November 10, 2025
  - 4. Individual and Family Directed Goods and Services Day-to-Day Administrative Supports
    - ▶ Issue Date: September 24, 2025
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- a. Day-to-Day Administrative Supports will be available to select as a service option on October 6, 2025.
- b. Coordinators of Community Services can select this option for participants during the next Revised or Annual Person-Centered Plan.
- c. Participants currently receiving this support may continue to receive it through the end of their Person-Centered Plan year.

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# XV. Who do I contact with questions?

Participants can reach out to their:

- Coordinator of Community Services, or
- DDA Regional Office

These are the DDA Regional Offices:

If you live in Anne Arundel, Baltimore, Howard or Harford County, or Baltimore City

### **Central Maryland Regional Office**

410-234-8200

Free long-distance call: 877-874-2494 Maryland Relay: 800-735-2258

If you live in Caroline, Cecil, Dorchester, Kent, Queen Anne's, Somerset, Talbot, Wicomico, or Worcester County

### **Eastern Shore Regional Office**

Telephone: 410- 572-5920 Free long-distance call: 888-219-0478 Maryland Relay: 800-735-2258

If you live in Calvert, Charles, Montgomery, Prince George's, or St. Mary's County

### **Southern Maryland Regional Office**

Telephone: 301-362-5100 Free long-distance call: 888-207-2479 TDD: 301-362-5131

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If you live in Allegany, Carroll, Frederick, Garrett, or Washington County

### **Western Maryland Regional Office**

Telephone: 301-791-4670 Free long-distance call: 888-791-0193 Maryland Relay: 800-735-2258

### XVI. Reference Materials

- October 2025 Waiver Changes and You Website
- Easy-to-Understand Guide to October 2025 Waiver Changes and You
- Medicaid Notice to Family Supports and Community Supports
   Participants
  - o FAQs
- Community Pathways Waiver Amendment #3 2025

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### **Assistive Technology and Environmental Modifications Chart**

The chart below includes examples of items for the home. It can help participants and their teams identify technology solutions that will best support full use of the home.

Item	Assistive Technology	Environmental Modification	Reasoning
Smart Assistance			These items do not require installation in the home structure, but may require the use of tape to stabilize in the desired place in the home.
Amazon Echo Alexa			
Google Nest Hub			
Apple HomePod			
Smart Lighting			
Smart light bulbs			
Smart dimmers and switches			Requires wiring to the home
Smart Blinds		•	
Switch Boxes			This is a device that turns regular blinds into smart blinds that pair with Google or Apple device

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Item	Assistive Technology	Environmental Modification	Reasoning
Smart Security			Needs to be built into or attached to the home
Smart Door Locks		•	
Video doorbells			
Security Cameras		•	
Smart Alarms and motion detectors		•	
Smart Kitchen Appliances			Examples of these Items that may be requested for health and safety purposes include countertop stoves, conduction plates that work with Al
Bathroom			
Bidet with spray and blow-dry features		•	
Colgate Hum Toothbrush that connects to iPad	•		
Wi-Fi-connected smart appliances	•		
Smart Plugs			

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Item	Assistive Technology	Environmental Modification	Reasoning
Tracking Systems			Requires extensive wiring and installation in the home structure
Health Monitoring			Things that are attached to the home for health monitoring, but do not have to be attached to the structure of the home
Wall sensors that track health Radar-based Sensors Motions Sensors			
Other Smart Home Tech			
Smart home kits			These are items that can be installed to make multiple items in the home voice-activated and sync with one's Google Dot or Apple Home. The plan or attachment needs to describe the device because some may require attaching to the structure of the home, and some can be attached using some form of tape

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ltem	Assistive Technology	Environmental Modification	Reasoning
Cleaning and Automation			
Robot Vacuum			
Smart Plugs			

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