



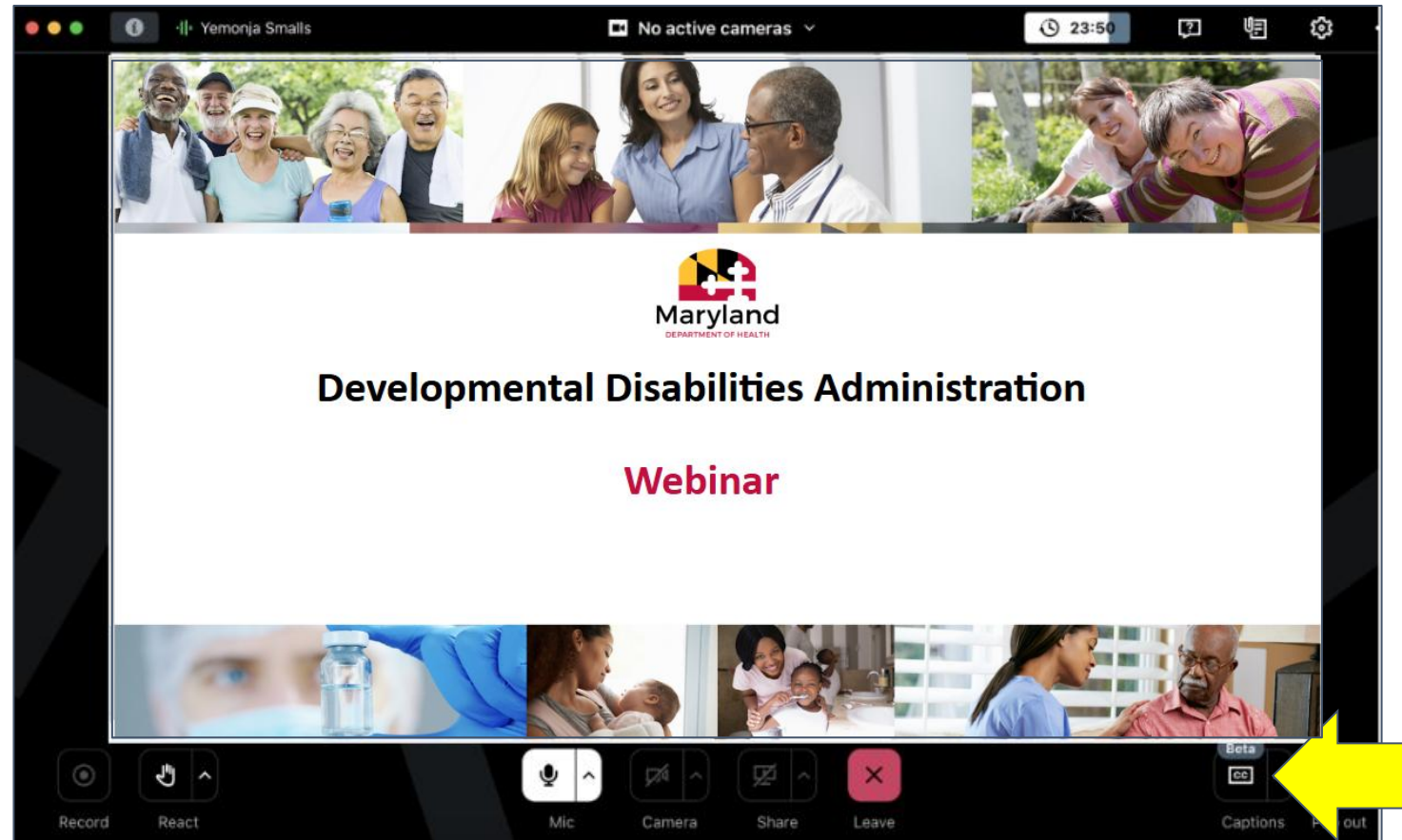
Developmental Disabilities Administration

Proposed - 2026 Community Pathways Medicaid Waiver Amendment

May 12, 2026

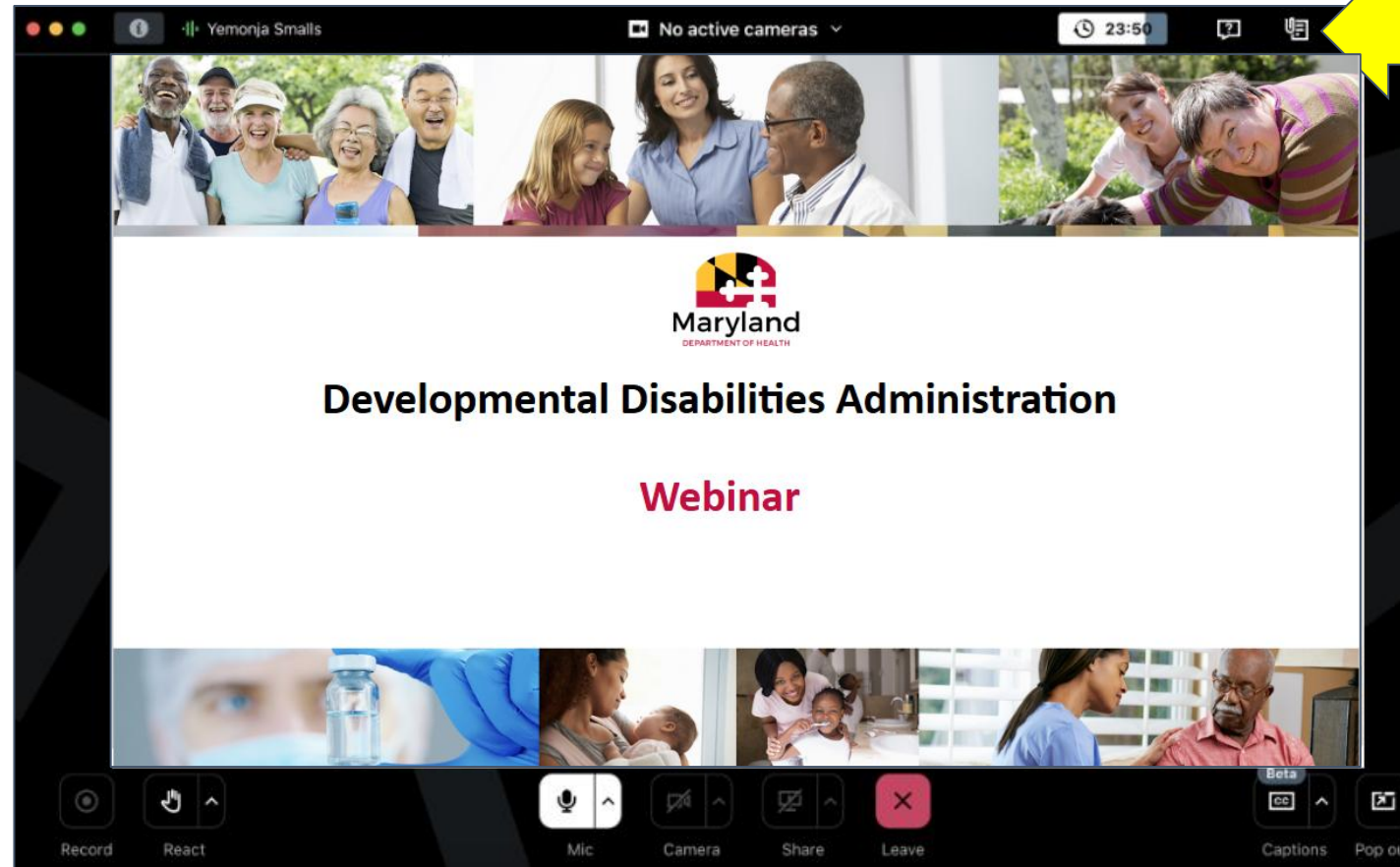


Housekeeping - Closed Captioning



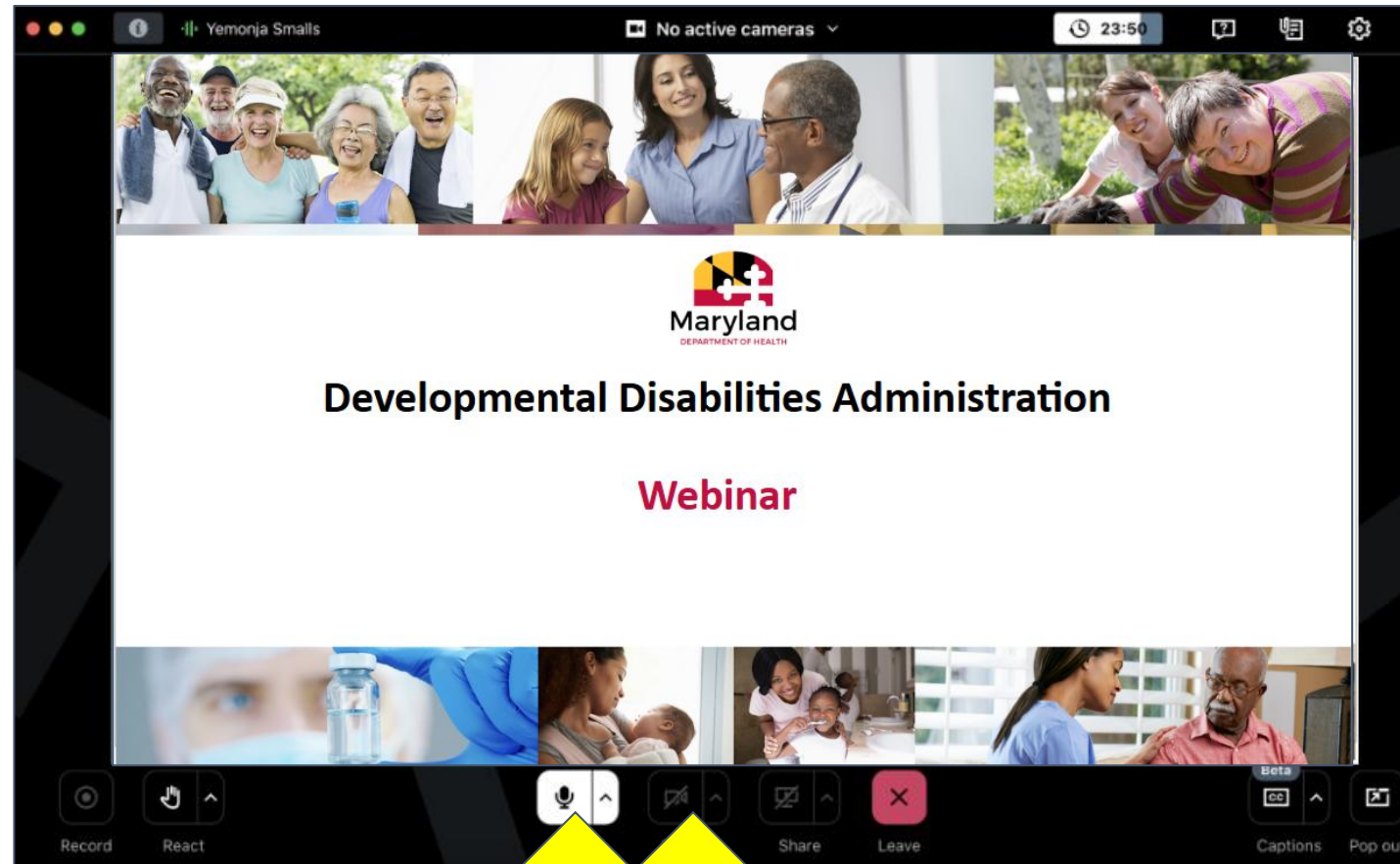
Click the CC button in the lower right corner for closed captioning

Housekeeping - Handouts



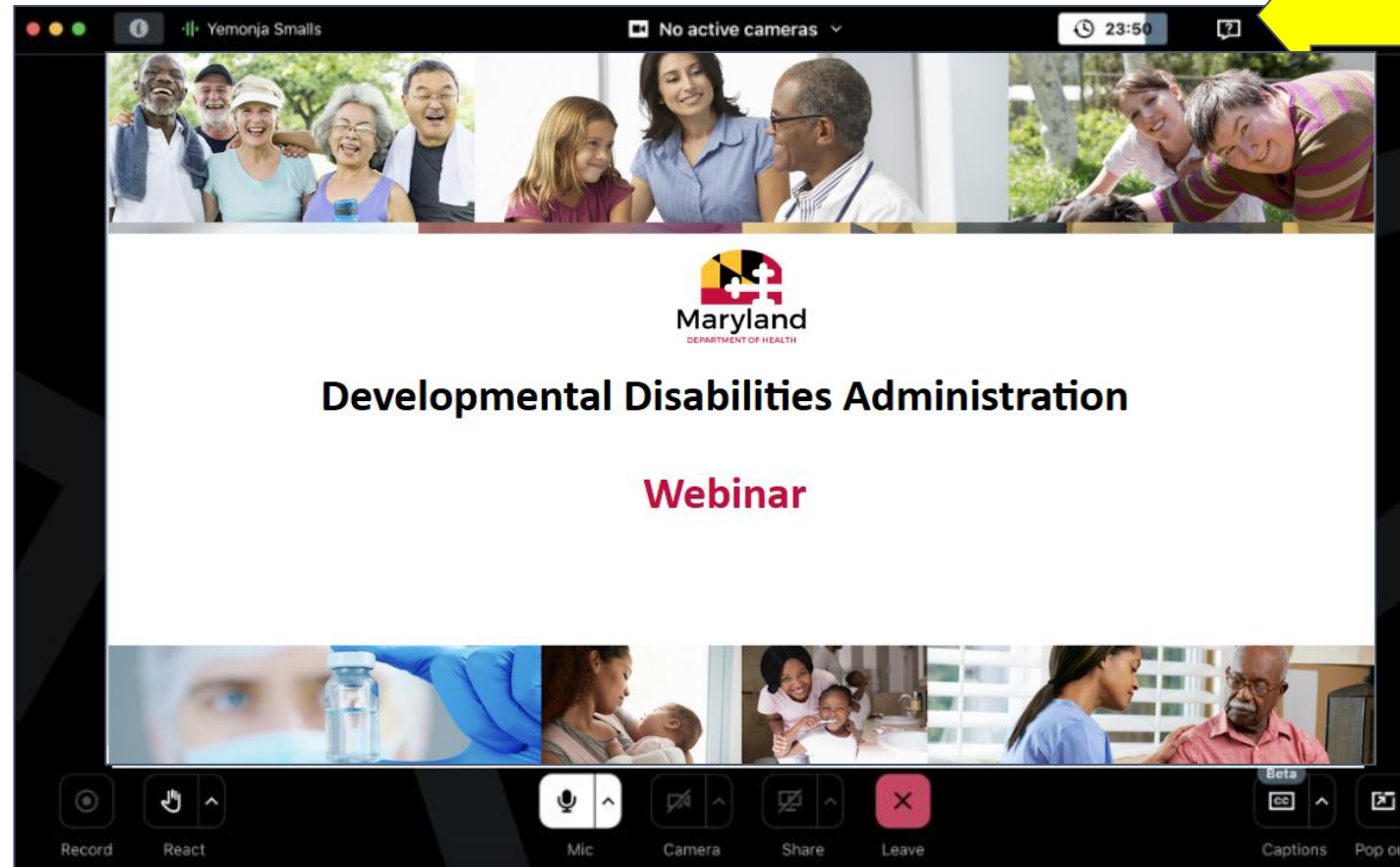
Click the paperclip in the upper right corner to download handouts

Housekeeping - Mics and Cameras



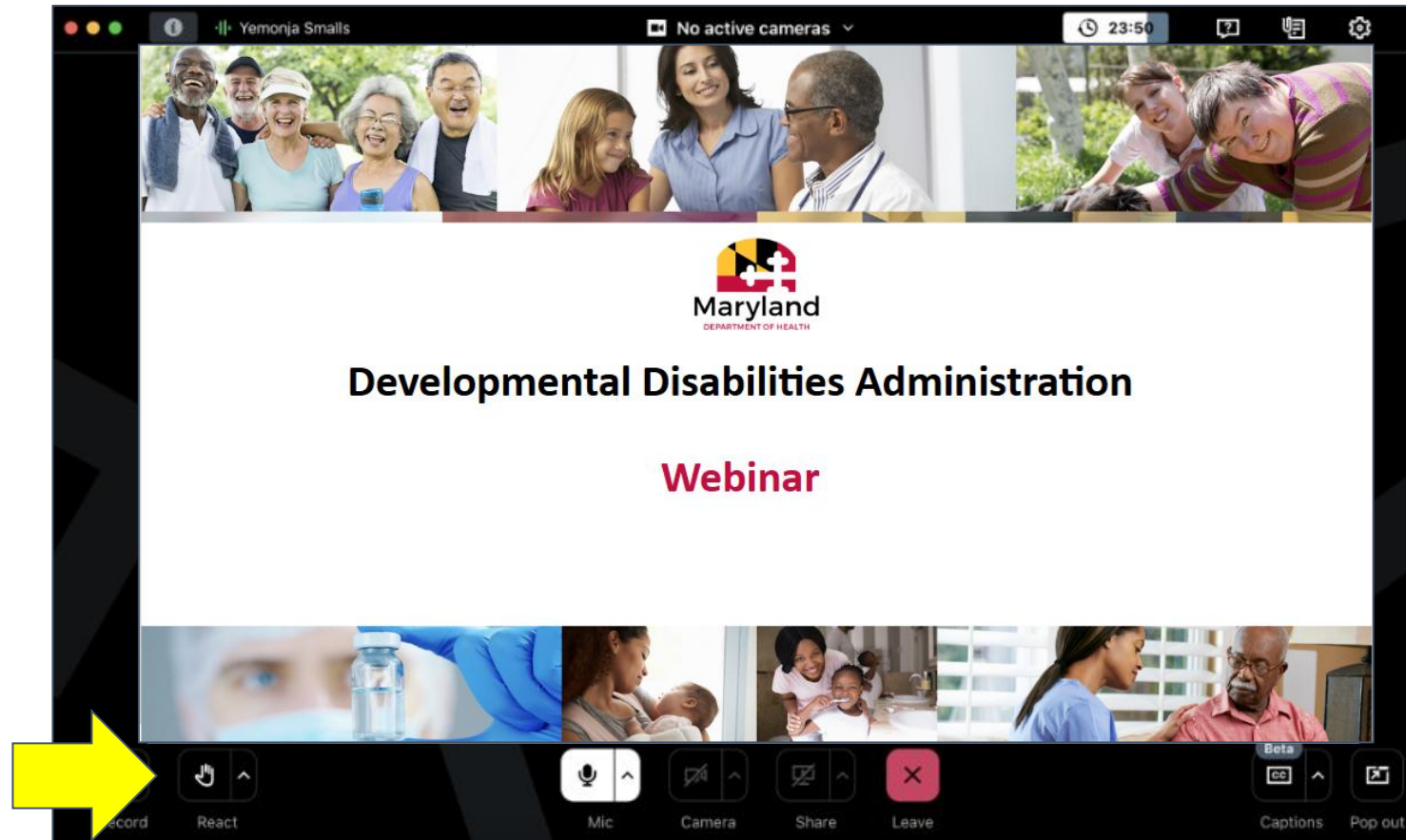
Microphones and Cameras are turned off

Housekeeping - Questions



Click the question mark in the upper right corner to type a question for us

Housekeeping - Raise Hand



Click the hand icon in the lower left corner to raise your hand

Conduct

The open exchange of diverse perspectives is an important value of our group. We ask that everyone engage in a respectful and constructive way, treating one another with dignity and good faith.

To help maintain a positive and productive environment, we ask participants to avoid disruptive behavior, inappropriate language, or personal attacks. If needed, facilitators may step in to address concerns and support a respectful meeting space for all.

Welcome

Agenda

- What is a Medicaid waiver amendment
- What DDA is proposing to change – and why
- How you can provide feedback
- Where to find more information

*Proposed 2026 Community Pathways Medicaid
Waiver Amendment*

What is a Medicaid Waiver Amendment?

Medicaid Waiver Amendment

- A request to make changes to a Medicaid waiver program.
- Must be approved by the federal Centers for Medicare and Medicaid Services.
- DDA is proposing changes that would take effect September 1, 2026.

*Proposed 2026 Community Pathways Medicaid
Waiver Amendment*

What's Proposed - and Why

What's Changing (1 of 2)

The proposed amendment:

- Makes a technical correction to shared dedicated hours
- Establishes a 60/40 rule for relatives, guardians, and legally responsible persons providing paid services

What's Changing (2 of 2)

- Updates how self-directed budgets are calculated
- Replaces the term “vendor” with individual provider
- Updates Financial Management and Counseling Services (FMCS) fees
- Adds details on self-directed service rates
- Updates cost projections

*Proposed 2026 Community Pathways Medicaid
Waiver Amendment*

Community Living - Group Home Shared Dedicated Support Hours

Shared Dedicated Support Hours

Proposed Waiver Amendment	Reasons
Dedicated hours can be used to support more than one participant when: • The participants are retired, transitioning from one meaningful day service to another, recovering from a health condition, or receive less than 30 40 hours of meaningful day services;	Technical correction Budget bill requirement

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Legal Guardian, Relative, Or Legally Responsible Person 60/40 Rule

Relative, Legal Guardian, Or Legally Responsible Person Standards (1 of 4)

If a **relative, guardian, or legally responsible person** is paid to support you:

- They can work **up to 40-hours per week total** (per participant)
- They can work **up to 60-hours per week total** (across all participants they support)
- You can receive **up to 60-hours per week total** from all relative/guardian/legally responsible providers combined

This helps make sure:

- You get balanced support
- Care is safe and appropriate

Relative, Legal Guardian, Or Legally Responsible Person Standards (2 of 4)

Proposed Waiver Amendment	Reasons
A relative, guardian, or legally responsible person shall provide no more than 40-hours per week of paid services per participant. This includes when the legal guardian, relative, or legally responsible person is an employee for one service and an individual provider vendor for another service. This includes any combination of hours worked by the legal guardian, relative, or legally responsible person as a self-directed participant employee, individual provider, or employee of a provider.	Continue to support health and welfare of the participant and the service provider Budget requirement

Relative, Legal Guardian, Or Legally Responsible Person Standards (3 of 4)

Proposed Waiver Amendment	Reasons
If a legal guardian, relative, or legally responsible person serves more than one participant, they can provide no more than 60-hours per week of paid services across all Medicaid waiver services and across all participants served.	Continue to support health and welfare of the participant and the provider Budget requirement

Relative, Legal Guardian, Or Legally Responsible Person Standards (4 of 4)

Proposed Waiver Amendment	Reasons
If multiple relative, guardian, or legally responsible person are providing services, each participant may receive no more than 60-hours of paid support per week of authorized services from all legal guardians, relatives, or legally responsible persons in total.	Continue to support health and welfare of the participant and the provider Budget requirement

*Proposed 2026 Community Pathways Medicaid
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Appendix E - Participant Directed Services

What is a Self-Directed Services Budget?

If you self-direct your services:

- You get a yearly budget
- Your budget is based on:
 - Your needs
 - Your authorized services within your Person-Centered Plan

Self-Directed Services Budget Methodology

Proposed Waiver Amendment	Reasons
Participants' self-directed budget will be determined based on the approved LTSS <i>Maryland</i> Person-Centered Plan detailed service authorization. The LTSS <i>Maryland</i> Person-Centered Plan detailed service authorization form includes all available services and associated self-directed services rates .	● Support accurate and appropriate rates ● Align with federal (CMS) guidance ● Required by the State's FY 2027 budget The State will continue to monitor how this works in practice and make adjustments as needed.

Self-Directed Services - Providers

Participants self-directing their services:

- Choose, recruit, train, hire, schedule, supervise, and discharge:
 - Employees,
 - Individual providers (vendors), and
 - DDA providers

Clarifying “Individual Providers”

Proposed Waiver Amendment	Reasons
Updated term: “Vendor” → Individual Provider	“Individual providers” are professionals delivering Nursing Support Services and Support Broker services (non-employees) This definition is aligned with State budget requirements

What are Financial Management and Counseling Services?

Under the self-directed service delivery model, **Financial Management and Counseling Services (FMCS)** help manage:

- Payroll
- Taxes
- Payments

The cost of this service currently comes out of the participant's budget

Financial Management and Counseling Services Fee Update

Proposed Waiver Amendment	Reasons
DDA will pay the fees for FMCS fees directly	Helps participants use their full budget
Treated as an administrative cost	FMCS costs are not included in the new self-directed budget methodology

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Appendix I - Financial Accountability

Appendix I - Financial Accountability

- Explains how the State manages and tracks waiver funding
- Ensures payments are accurate, appropriate, and compliant
- Helps protect the integrity of Medicaid funds
- Covers key areas like:
 - Rates, billing, and payments
 - Federal and State funding
 - Room and board rules
 - Cost sharing and co-payments

What are Self-Directed Service Rates?

Self-directed service rates are:

- Rates used to create the self-directed budget allocation

Important to know:

- Rates are based on:
 - The type of service
 - Include cost for employer related expenses, training, and transportation
- May differ from provider agency rates
- Not the same as reasonable and customary wage for employees or rates for Individual Providers

Self-Directed Service Rates (1 of 3)

Proposed Waiver Amendment	Reasons
Self-directed services - employee rates were noted for the following employer authority services: ● Community Development Services ● Employment Services (on-going) ● Day-to-Day Administrative Supports ● Personal Supports (including enhanced) ● Respite Care Services ● Nursing Support Services ● Support Broker Services.	● Align with CMS guidance ● Support accurate and appropriate rate setting ● Required by the State's FY 2027 budget

Self-Directed Service Rates (2 of 3)

Proposed Waiver Amendment	Reasons
Self-directed Services - Individual Provider Rates are noted for: ● Nursing Support Services ● Support Broker Services	● Align with CMS guidance ● Support accurate and appropriate rate setting ● Required by the State's FY 2027 budget

Self-Directed Service Rates (3 of 3)

Proposed Waiver Amendment	Reasons
Self-Directed Services - DDA Provider Service Rates will mirror provider-managed service rates.	● Align with CMS guidance

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Appendix J - Cost Neutrality Demonstration

Appendix J - Cost Neutrality (1 of 2)

- Required for waiver approval by CMS
- Shows the waiver does not cost more than institutional care
- Demonstrates cost neutrality for each year of the waiver
- Two main parts:
 - J-1: Overall cost neutrality summary
 - J-2: Details behind the estimates and assumptions

Appendix J - Cost Neutrality (2 of 2)

Proposed Waiver Amendment	Reasons
Updates: ● Cost neutrality calculations ● Users to average cost ● Units per user	Align with CMS guidance to use actual claims for projections

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Next Steps and Timeline

Timeline

- Public Comment Period
 - **April 29, 2026 - May 28, 2026**
- Center for Medicare and Medicaid Services Review
 - **June 1, 2026 - August 31, 2026**
- Changes take effect
 - **September 1, 2026**

Public Comment Process

- Comments can be:
 - Submitted to wfb.dda@maryland.gov
 - Mailed to: DDA Federal Programs at 201 West Preston Street, 4th Floor, Baltimore MD 21201
- Comments must be submitted electronically or postmarked by **11:59 PM on May 28, 2026.**

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Where to Find More Information

Where to Find More Information (1 of 2)

The screenshot shows the website for the Maryland Department of Health Developmental Disabilities Administration. The header includes a search bar and navigation links for Individuals and Families, Providers and Professionals, Media and Publications, and Offices and Administrations. The main navigation bar contains links for Home, About, Apply, People & Families, Services, CCS & Providers, Waivers & Policies, and Crisis. On the left, a 'Quick Links' sidebar lists several options, with a red arrow pointing to 'Waiver Changes'. The 'Waiver Changes' section is titled 'Coming Soon: Changes to the Community Pathways Program.' and contains text about planned changes for the 2027 fiscal year, required by the State's 2027 budget or federal guidelines. It also mentions that some changes take effect on July 1, 2026, and others on September 1, 2026. A section titled 'Input Needed: Proposed Amendment to the Community Pathways Waiver Amendment' states that some changes require approval from the Centers for Medicare and Medicaid Services, and that a public input period is open from April 29, 2026, to May 28, 2026. A list of items for public input includes waiver amendment documents, plain language summaries and Spanish materials, and instructions for submitting public comments. A red speech bubble icon is visible in the bottom right corner of the page content.

Search...

Individuals and Families ▾ Providers and Professionals ▾ Media and Publications ▾ Offices and Administrations ▾

MARYLAND DEPARTMENT OF HEALTH
Developmental Disabilities Administration

Home About Apply People & Families Services CCS & Providers Waivers & Policies Crisis

Quick Links

- Waiver Changes
- Guide to Services
- Easy-to-Understand Guide to Services (English)
- Easy-to-Understand Guide to Services (Spanish)
- Maryland Statewide Resources
- Report Abuse or Concern
- Person-Centered Planning

Waiver Changes

Coming Soon: Changes to the Community Pathways Program.

A number of changes are planned for the Community Pathways Medicaid waiver program for the 2027 fiscal year.

These changes are required by the State's 2027 budget or to comply with federal guidelines. Even more important, these changes are needed to ensure DDA can continue delivering the essential services thousands of Marylanders with intellectual and developmental disabilities depend upon to live in the community – and to provide services to more people.

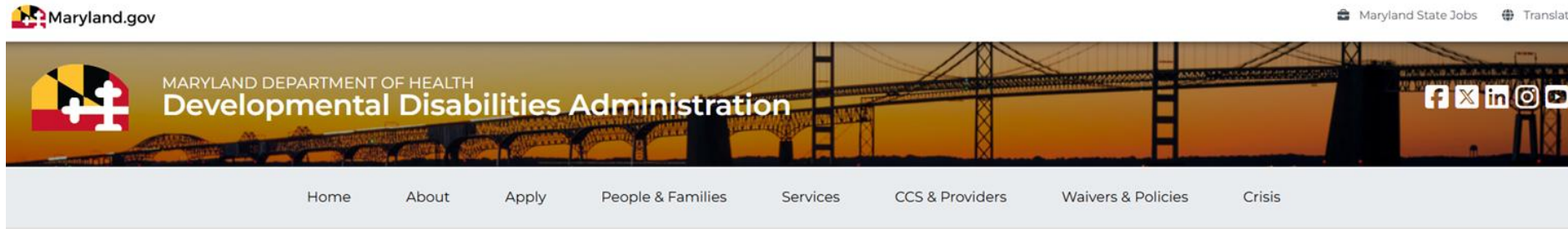
Some of these changes take effect on July 1, 2026. Others take effect on September 1, 2026.

Input Needed: Proposed Amendment to the Community Pathways Waiver Amendment

Some of these changes require approval from the Centers for Medicare and Medicaid Services, through the formal waiver amendment process. The first step in that process is collecting public input for 30 days. That comment period opened April 29, 2026 and will remain open through May 28, 2026. Our [2026 Community Pathways Medicaid Waiver Amendment](#), has more information, including:

- Waiver amendment documents
- Plain language summaries and Spanish materials
- Instructions for submitting public comments

Where to Find More Information (2 of 2)



2026 Community Pathways Medicaid Waiver Amendment

The FY 2027 budget for the state of Maryland includes provisions that require changes to the Community Pathways Medicaid waiver program.

To make these changes, the Maryland Department of Health is proposing a waiver amendment to the Centers for Medicare and Medicaid within the U.S. Department of Health and Human Services. The proposed amendment also includes changes to ensure the Community Pathways program can continue to provide services and supports to Marylanders with intellectual and developmental disabilities.

As part of that process, we are seeking input on the proposed amendment from our stakeholders. You can submit comments until 11:59 p.m. on Wednesday, May, 28, 2026.

The resources below provide details on the proposed changes and how you can submit feedback. We also are hosting a series of webinars to explain the changes and answer your questions. We hope you will join us!!

Overview of the Proposed Amendment

- [Easy-to-Read Summary](#)
- [Resumen de Fácil Lectura](#)



Webpage:
[Community Pathways Waiver Amendment](#)

Where to Find More Information

Request a printed copy of the proposed amendment:

- Email: wfb.dda@maryland.gov
- Call us:
 - Central Maryland Regional Office: 410-234-8200
 - Eastern Shore Regional Office: 417-572-5920
 - Southern Maryland Regional Office: 301-362-5100
 - Western Maryland Regional Office: 301-791-4670
 - DDA Headquarters: (410) 767-5600
- Visit a [DDA Regional Office](#) or [MDH headquarters](#)
- Ask your Coordinator of Community Services or service provider for help

Questions and Public Comment

- Please raise your hand if you would like to speak
- Each person will have two (2) minutes to speak

NOTE: To ensure confidentiality, if you have a question specific to an application, eligibility, or services, please contact the DDA Regional Office directly

Comments and Questions
