

Developmental Disabilities Administration

October 2025 Waiver Changes and You Frequently Asked Questions (FAQ)

General Questions

- 1. What changes were made to the DDA-operated Medicaid waiver programs?
 - The State combined the Family Supports and Community Supports Waivers into the Community Pathways Waiver. The State combined the waiver programs to:
 - Make services easier and quicker to access,
 - Provide more consistent, person-centered support, and,
 - Improve the overall system for everyone.
 - As part of the changes to the waiver, the DDA made changes to some of the services in the Community Pathways Waiver. These changes apply to you if you get services from a provider or if you self-direct your services.
- 2. When do these changes go into effect?
 - These changes start on October 6, 2025.
- 3. What new opportunities (choice, control, flexibility, and individual planning) are available?
 - Dedicated support, also known as one-on-one staff support or two-to-one staff support, can be approved temporarily, for up to 6 months.
 - You can now get Behavioral Support Services while you get Medical Day Care services.
 - Monthly service fees for Assistive Technology are now included and covered in the waiver.

- Virtual appointments are now allowed for behavioral assessments and behavioral consultations. This means you can meet with your provider online instead of in person, if that works better for you.
- Smart home devices that need to be attached to your home are now covered under Environmental Modifications. Examples include: voice-activated door openers, blinds, and shade openers.
- Updated Family and Peer Mentoring Services provider qualifications.
 - Family mentors must have lived experience. That means they are a parent or family member who has gone through similar experiences themselves.
 - Peer mentors are people with disabilities who also have lived experience. They support others by sharing what they have learned.
- Organized Health Care Delivery System Providers can offer Family Caregiver
 Training and Empowerment Services, as well as Participant Education, Training,
 and Advocacy Supports. In the Self-Directed Services Delivery Model, each
 Financial Management and Counseling Services provider is an Organized Health
 Care Delivery System Provider.
- You can now get Housing Support Services virtually (online). You do not have to meet with someone in person.
- You can turn off Remote Support Services.
- Transition Services can pay for the cost of training staff before you move.
- There is a new Self-Directed Services orientation, checklist and frequently asked questions.
- There is a new Day-to-Day Administrative Supports Decision Tree (for Self-Directed Services only). This new form helps you and your team decide what kinds of help you may need from Day-to-Day Administrative Supports.

4. What information is available regarding the amendment?

- The DDA has developed a new website, shared information and guidance, and conducted webinars on the amendment.
 - DDA Website: October 2025 Waiver Changes and You
 - **■** DDA Amendment Webinar Series:

- Family Supports Waiver and Community Supports Waiver
 Participant Medicaid Notice September 2, 2025
 - o <u>Presentation</u>
 - o <u>Webinar</u>
- Waiver Changes and You September 16, 2025
 - o <u>Presentation</u>
 - o <u>Webinar</u>
- Provider Opportunities and Requirements September 19, 2025
 - <u>Presentation</u>
 - o <u>Webinar</u>
- Self-Directed Services Updates September 19, 2025
 - o **Presentation**
 - o <u>Webinar</u>
- New and Updated Forms October 1, 2025
 - o <u>Presentation</u>
 - o <u>Webinar</u>
- LTSSMaryland Updates October 3, 2025
 - o <u>Presentation</u>
 - o <u>Webinar</u>
- New Provider Enrollment for Behavioral Support Services
 Specialists and Nurse Individual Providers
 - <u>Presentation</u>
 - Webinar

■ Guidance:

• Amendment:

- The Easy-to-Understand Guide to October 2025 Waiver
 Changes and You
- The Guide to October 2025 Waiver Changes and You
- o Important Things to Remember Checklist

Self-Directed Services:

- DDA Self Directed Services Manual Revised October 6,
 2025
 - DDA Self-Directed Services Manual Track Changes (black and white) October 6, 2025
 - DDA Self-Directed Services Manual Track Changes (color) October 6, 2025
- Budget Sheet Revised October 6, 2025
- Budget Modification Revised October 6, 2025
- Participant Agreement Revised October 6, 2025
- <u>Family As Staff Form Revised October 6, 2025</u>
- Self-Directed Services Orientation Checklist
- Self-Directed Services Orientation FAQ
- Family Supports and Community Supports Participants Medicaid Notice examples:
 - Medicaid Notice to FSW and CSW Participants
 - Frequently Asked Questions
 - Noticia Medicaid a Participantes de FSW y CSW Español (Spanish)
 - Derechos de Apelación Español (Spanish)
 - Preguntas Frecuentes Español (Spanish)

• The DDA is also updating policies, manuals, and website guidance to align with the approved amendment.

5. Who do I contact with additional questions?

- You can reach out to:
 - Your Coordinator of Community Services, or
 - Your <u>DDA Regional Office</u>

Community Engagement

6. What additional community engagement is DDA planning?

- The DDA is working with stakeholders to establish:
 - The Substitute Judgement process and reporting form. This process is to be implemented by April 2026.
 - Orientation video and information for both service delivery models.
- The <u>DDA Waiver Advisory Council</u> is reviewing the <u>public comment suggestions</u> for future amendments.
- The DDA is also conducting listening sessions and community meetings. For
 more information, please see sign up for email updates from the DDA at this <u>link</u>.
 You can also view events on the <u>DDA Events Calendar</u>.
 - The DDA launched a <u>Stakeholder Engagement Survey</u> on September 30, 2025. You are encouraged to take this short survey to help the DDA better understand what's working well and what can be improved when it comes to community engagement.

7. What is the "Sustainability Committee" and how does it relate to the amendment?

 What was first referred to as the "Program Sustainability Committee" has been renamed the Maryland Intellectual and Developmental Disabilities Sustainability and Equity Committee (MIDSEC). The first meeting of the MIDSEC took place on October 7, 2025. More information about MIDSEC will be posted on the DDA website in the near future.

Involuntary Termination

8. What are the reasons a person can be removed from the Self-Directed Service Delivery Model?

- Failure to follow laws, regulations, policies, or guidance may result in the participant being removed from the Self-Directed Services Model. This is not a new requirement.
- When a participant is not following rules (including going over authorized hours or funds), before involuntarily terminating the participant from the Self-Directed Services model, the DDA may first:
 - Require a meeting to review the rights and responsibilities of self-directed services; and/or
 - Require a corrective action plan.
- These are additional safeguards introduced in the new consolidated waiver, providing participants with further opportunities before discharge from the model (previously, discharge from the model was the only available option).
- Determined Fraud, Waste, and Abuse may result in immediate termination of the participant from the Self-Directed Services Model.

Supported Decision Making and Substitute Judgment

9. What is Supported Decision Making?

- Supported Decision Making is a way for adults to receive help from others to make choices and decisions for themselves.
- An adult can use supported decision-making to obtain help in making choices and decisions regarding their services, hiring staff, and other matters.
- The person who helps an adult is called a supporter. A supporter can be a family member, friend, staff, or professional. It is someone the adult knows and trusts.
- The adult who uses Supported Decision Making must choose the supporter. There can be more than one supporter.

- Resources: Parents' Place of Maryland
 - Supported Decision-Making
 - Toma de decisiones con apoyo
 - Supported Decision-Making for Youth and Adults with Intellectual and Developmental Disabilities (IDD)
 - Supported Decision-Making: Getting Started
 - Supported Decision-Making: The Role of the Supporter
 - Supported Decision-Making: How to Be a Self-Advocate
 - The Role of the Decision-Maker
 - Supported Decision-Making: Real-Life Example
 - Supported Decision-Making: Tools for Support
 - Supported Decision-Making: Sample Written Agreement

10. Is a Supported Decision Making agreement required if you hire family as paid staff?

No.

11. What is Substitute Judgement?

- According to the Centers for Medicare and Medicaid Services, legally responsible persons, legal guardians, or relatives who make decisions about waiver service providers must use substitute judgement on behalf of the individual.
- 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.
- Effective April 1, 2026, a substitute judgement process and form will be required when a legally responsible person, legal guardian, or relative makes or supports the person in making waiver service and provider decisions.

FMCS Payments

12. How are goods and services purchased in the Self-Directed Services Delivery Model?

- 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.
 Services include:
 - Assistive Technology;
 - Environmental Assessments and Modifications;
 - Participant Education, Training, and Advocacy;
 - Individual and Family Directed Goods and Services;
 - Recruitment and Advertising;
 - Respite Care Services (including Respite Camp), and
 - Transportation Services (including public transit, taxi, and ridesharing [Uber/Lyft] costs).
- 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 family members or other team members for Individual and Family Directed Goods and Services (Other Goods and Services) purchased after October 5, 2025.

13. What can self-directed services employees get reimbursed for?

- 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.
- Family members and other team members who are not employees may not be reimbursed for employee benefits and training.

14. What are health insurance premiums?

• Participants who self-direct their services may reimburse their employees' health insurance premiums.

- Reimbursements may only be made to the employee's health insurance coverage. Coverage for spouses, children, and other family members cannot be reimbursed.
- Only policies purchased directly by the employee qualify for this reimbursement.
 The following do not qualify for reimbursement:
 - Retirement plan health policies,
 - Medicaid policies,
 - Medicare policies,
 - Policies provided by another employer, including those purchased by unions, and
 - Policies provided by a former employer, including Consolidated Omnibus Budget Reconciliation Act (COBRA) policies.
- Note: Any policies that have been previously reimbursed for employees that do
 not meet these standards may continue to be reimbursed. The DDA will
 collaborate with stakeholders to develop a transition plan for reimbursing
 employee health insurance benefits in accordance with the new standards.
- Participants who want to offer health insurance premium reimbursement must follow the new standards. Employees may be reimbursed for their health insurance premiums. Family members and other team members who are not employees may not be reimbursed for health insurance.

Individual and Family Directed Goods and Services

15. What is the new cost limit for Individual and Family Directed Goods and Services?

- Other Goods and Services has a yearly cost limit of \$5,000.
 - Starting October 6, 2025, the limit is for the total amount of Other Goods and Services requested in a year. Note that Recruitment and Advertising and Day to Day Administrative Supports, which are also Individual and Family Directed Goods and Services, have separate limits.
 - If something was already approved before that date, you can keep using it through the end of your plan year.

■ New requests after October 6, 2025 cannot go over the \$5,000 yearly limit.

16. What are the changes to allowable Individual and Family Directed Goods and Services?

- Allowable goods and services include but not limited to:
 - Fees for community programs and activities must be inclusive (be available to people without disabilities).
 - Small kitchen appliances and laundry appliances are available if you live independently.
 - Fitness items may not go over \$1,000 per item.
 - Toothbrushes, weight loss programs, and nutritional supplements must be related to your disability.
 - Initial internet services startup costs only (purchase of modem or other startup).
- Not allowable goods and services include but not limited to:
 - Goods and Services that exceed reasonable and customary costs (more expensive than usual).
 - Tuition and other fees associated with programs or activities at educational institutions.
 - Items purchased prior to the approved Person-Centered Plan. This includes items purchased prior to DDA approval of the Individual and Family Goods and Services request.
 - Goods, services, equipment, and supplies intended for commercial use, such as commercial washers and dryers.
 - Diversional or recreational items and activities. These are things used just for fun like events, sports, games, or toys.
 - Goods, services, equipment, and supplies that a household that does not include a person with a disability would pay for as household expenses.
 Examples include monthly internet services and subscriptions for television services.

- Programs and activities that are exclusive for individuals with disabilities.
- Monthly internet services as per federal rules.
- Note: If something was already approved, you can keep using it through the end
 of your plan year. New requests must align with approved amendment.

17. What are reasonable and customary goods and services?

- The DDA has established Reasonable and Customary Standards for purchasing Other Goods and Services.
- The standards will help make sure that Goods and Services requests are reviewed in the same way across the DDA Regional Offices.
- The standards will also help you know what you are able to request under Other Goods and Services.
- The standards are listed in the <u>Self-Directed Services Manual</u> and will apply for requests that are submitted on and after October 6, 2025.

18. What is the roll out plan (glide path) for updates to Other Individual and Family Directed Goods and Services?

- You can continue to receive all goods and services that were approved through the end of your plan year.
- Goods and Services requests that were submitted before October 6, 2025 will be reviewed using the old rules and standards.
- New requests after October 6, 2025 cannot go over the \$5,000 yearly limit and will be reviewed using the new rules and updated Reasonable and Customary standards.

19. What are Individual and Family Directed Goods and Services Day-to-Day Administrative Supports?

- This service can provide you assistance with household management and scheduling medical appointments.
- Household management means:
 - Scheduling house maintenance (like furnace checks) and repairs (like dishwasher repair);

- Scheduling snow removal; and
- Scheduling lawn care.
- Up to 10 hours per month of Day-to-Day Administrative support is available to you if this service is approved in your Person-Centered Plan.
- A Decision Tree Form will be required for all Person-Centered Plans requesting Day-to-Day Administrative support after October 6, 2025.
- Participants who have Day-to-Day Administrative Supports approved in their current Person-Centered Plan will not need to complete the decision tree until the start of the new plan year.
- For more information, please see the <u>Self-Directed Services Manual</u> (p66-71 of the October 6, 2025 revision).

20. What is the rollout plan (glide path) for Day-to-Day Administrative support?

- If you are currently receiving Day-to-Day Administrative support, you can continue to do so in the same manner until your next plan year.
- The updates to Day-to-Day Administrative support will apply to you in your next Person-Centered Plan.
- This is when you will work with your team to complete the Decision Tree.
- This is when Day-to-Day Administrative support will be limited to up to 10 hours per month.

Support Brokers

21. When was the Support Brokers Code of Conduct first issued?

• The Support Broker Code of Conduct was shared in the Self-Directed Services Manual on October 24, 2024.

Enhanced Service Denials

22. What was updated for dedicated support services?

- Dedicated support, also known as one-on-one staff support or two-to-one staff support, can be approved temporarily for up to 6 months.
 - 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.
- If you currently get dedicated support services, you will continue to receive them. You will need to request dedicated support each year when you create a new Person-Centered Plan. You must provide information to demonstrate why you require dedicated support.

Case Resolution Conferences

23. What is a Case Resolution Conference (CRC)?

- A Case Resolution Conference is a process where the applicant or participant and the DDA meet to discuss a decision that has been made. The person's legal representative and/or other individuals supporting the applicant or participant with their consent (if applicable) can also attend the meeting.
- Case Resolution Conferences are now related to DDA's eligibility determination.

24. What can a participant do if they disagree with a denial of services?

- The Maryland Department of Health informs the individual and their family or their legal representative of the opportunity to request a Medicaid Fair Hearing by providing a written explanation of the right to appeal certain adverse decisions made by the DDA or the Maryland Department of Health.
- Participants may appeal denials of services requested in a Person-Centered Plan.

 The Maryland Department of Health has a <u>dedicated website</u> - "Request a Fair Hearing. File an Appeal" - that includes information regarding Fair Hearings and how to file appeals.

Training

25. What training is available for DDA providers, Coordinators of Community Services, and providers of Financial Management and Counseling Services?

- The DDA has developed a new website, shared information and guidance, and conducted webinars on the amendment, all of which are available to all stakeholders.
- The DDA meets with providers to provide information and guidance including:
 - Weekly and monthly meetings with Coordination of Community Services Providers.
 - Weekly meetings with Financial Management and Counseling Services Providers.
 - Quarterly regional meetings with DDA-licensed/certified providers.
- The DDA also conducted training for Coordinators of Community Services on the DDA application and Medicaid waiver application processes.
- DDA providers (including DDA-licensed/certified providers, Coordination of Community Services, and Financial Management and Counseling Services providers) also develop and conduct their own provider-specific training, tailored to their business and service delivery model.
- The DDA Regional Offices are available to provide additional training and technical assistance upon request.

Nurses and Behavioral Specialists

26. What supports are available to Nurses and Behavioral Support Services Specialists to become Maryland Medicaid providers?

Beginning January 1, 2026, individual Nurses and Behavioral Support Services
 Specialists will be required to become Maryland Medicaid providers. This means

DDA must approve them to deliver services and enroll in the Maryland Electronic Provider Revalidation and Enrollment Portal (ePREP) to receive a Medicaid number.

- Individual Nurses and Behavioral Support Services Specialists who are already approved by DDA do not need to reapply until their certification expires. They do need to enroll in ePREP.
- This requirement applies only to individual providers and does not apply to Nurses and Behavioral Support Services Specialists who work for a DDA agency.
- Information related to this new provider enrollment has been shared with all known Nurses and Behavioral Support Services Specialists currently billing for services, as well as with any nurse on the DDA nurse registry. Information has also been shared with the public through the DDA Connection.
- DDA has streamlined the DDA approval and ePREP enrollment process to avoid disruption to services. This means that the DDA application process does not require all of the paperwork and information as would be required for an agency provider. There is a <u>form</u> available for application. The ePREP application process has been simplified so that only the most basic information is required and there is no addendum.
- A <u>webinar</u> was held on October 3, 2025 to share information about DDA certification and provide instructions on how to enroll in ePREP.
- Technical assistance is available from the <u>DDA Regional Office staff</u>.

Family Staff Hours

27. What are the limits for family members to provide paid services?

- Relatives, legally responsible persons, and legal guardians may work up to 40 hours per week for you across all waiver services.
 - This applies when a relative, legally responsible person, or legal guardian works as your employee, for a vendor, and for a DDA Provider.
 - If currently approved to work more than 40 hours, they may continue until the end of the Family as Staff Overtime Request Form approval.

- Under the Self-Directed Services Delivery Model, the updated Family as Staff Form must be used after October 6, 2025 for all Person-Centered Plans
- Remember: If you have staff who are not relatives, legally responsible persons, or legal guardians, they can work more than 40 hours a week. If you want them to work more than 40 hours a week, you must ensure that you have sufficient funding and hours in your budget to compensate them.

28. What support is available to identify new staff?

- In the Provider-Managed Services Delivery Model, the DDA-licensed/certified provider recruits staff.
- In the Self-Directed Services Delivery Model, participants have the option to hire employees, vendors, and DDA-licensed/certified providers.
 - \$500 for Recruitment and Advertising can be approved in your Person-Centered Plan. Recruitment and Advertising is a part of Individual and Family Directed Goods and Services.
 - Support Broker Services can also assist you in advertising, interviewing, and hiring new staff.