

**Family Supports, Community Supports, and Community Pathways
Waiver Amendment #1- 2023
Public Comment Summary**

The Maryland Department of Health’s (MDH) Family Supports, Community Supports, and Community Pathways Medicaid home and community-based services waivers provide individual and family support for persons with developmental disabilities. The public comment period for the Waiver Amendment #1 - 2023 proposal was held from May 31, 2023 - June 30, 2023. In total, 64 unduplicated individuals, families, providers, and advocacy agencies submitted input. Below is a summary of the specific recommendations from the public and responses. All comments received apply to all three waivers.

Appendix I - Financial Accountability

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Comment	Dept. Response
<p>1. Comments in favor of an Electronic Visit Verification (EVV) exemption option noting the following reasons:</p> <ul style="list-style-type: none"> a. EVV requirements for live-in caregivers are burdensome and inflexible. b. EVV requirements make it difficult to maintain necessary direct care to the participant due to unnecessary timekeeping, which could compromise health and safety. c. EVV requirements take away from quality time spent with the person and their family. d. Exempting EVV will: <ul style="list-style-type: none"> i. Make it easier for caregivers that do not have time to clock in and out to provide care; ii. Remove undue burden of learning the EVV system requirements 	<p>The DDA values this feedback and thanks all stakeholders for contributing to the waiver amendment process.</p>
<p>2. Comments not in favor of EVV exemption option noting the following reasons:</p> <ul style="list-style-type: none"> a. Concerns about services not being provided appropriately, misuse of dollars and funds, and adequate safeguards. b. Concerns about duplicative billing across programs (i.e. staff who work for people getting services through both waiver and state funded programs). c. Removal of EVV requirements for live-in caregivers could pose a conflict of interest. 	<p>The DDA values this feedback and thanks all stakeholders for contributing to the waiver amendment process.</p>

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<p>d. Potential additional auditing and utilization reviews.</p> <p>e. Department Response</p>	
<p>3. Recommendations:</p> <p>a. Consider exempting provider staff as well as non-live in family caregiver supports, from EVV requirements.</p> <p>b. Consider exempting EVV requirements for Respite Care Services.</p>	<p>The Maryland Department of Health is only providing an option to exempt live-in caregivers who provide Personal Support and Respite Care Services from Electronic Visit Verification (EVV) requirements.</p> <p>This applies to both the traditional and self-directed services delivery model. The exemption is that live in caregiver staff do not have to clock in and out in real time.</p>

Other

Other	
Recommendation	Dept. Response
<p>2. Recommendation: To exempt caregivers from using the participant’s Financial Management and Counseling Services (FMCS) agency’s electronic billing system.</p>	<p>The amendment exempts live-in-care from Electronic Visit Verification (EVV) for Personal Support Services and Respite Care Services. Live-in-caregivers who support people in self-direction must continue to use their FMCS</p>

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	<p>Agency's electronic billing system. (Evvie, GT Portal and Caregiver App)</p>
<p>3. Recommendations: The DDA received the following additional comments un-related to the Waiver amendment:</p> <ul style="list-style-type: none"> a. Combine Community Development Services (CDS) and small group Day Habilitation into one service with a maximum group size of 4. b. Combine competitive integrated employment and Career Exploration into one service with a broader definition of paid employment. c. Create a daily rate for large group Day Habilitation, small group Day Habilitation and CDS similar to the daily rate for respite. d. Enhance Respite Care Services to support people with skilled nursing and behavioral services needs. e. Waivers should be written in more plain language for people and families. f. Increase the number of services provided to children through the waiver programs. g. Consider including service dogs for children in the waivers. h. Consider making Coordinator of Community Services monitoring visits more flexible. i. Support Brokers should not be a requirement for people self-directing their services with family as staff. j. Add skilled nursing service as a stand alone nursing service and include delegatable and non-delegatable tasks. k. Add stand-alone services for Speech/Language Pathologists (SLPs) and Registered Dietitian Nutritionists (RDNs) in the treatment of dysphagia for individuals with intellectual developmental disabilities. l. Allow access for children under the age of 18 to Community Living and Supported Living Services. m. Add transportation as a stand-alone service for all services. n. Allow people moving from family home to community living services to access transition services. o. Make Individual and Family Directed Goods and Services available to all people. p. Exempt volunteers from DDA Training. q. Amend language in the waivers requiring that service only be considered as a last resort r. Allow a person to have more than one Behavioral Supports provider if supports are needed in different settings. 	<p>The DDA appreciates all feedback received from stakeholders.</p> <p>Questions and comments received regarding specific waiver services unrelated to the Waiver Amendment #1 will be shared with the appropriate units within DDA and considered for future amendments.</p>