**Summary of Proposed Changes in ABI/MFP Waiver Renewal Applications**

**Proposed changes to the 2 ABI Waivers to align with the MFP Waivers:**

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| --- | --- |
| **Adding to ABI-N**  *(to align with MFP-CL)* | **Adding to ABI-RH**  *(to align with MFP-RS)* |
| Community Behavioral Health Support & Navigation | Community Behavioral Health Support & Navigation |
| Community Family Training | Home Accessibility Adaptations |
| Home Health Aide | Individual Support and Community Habilitation |
| Independent Living Supports | Orientation and Mobility Services |
| Orientation and Mobility Services | Peer Support |
| Peer Support | Prevocational Services |
| Prevocational Services | Residential Family Training |
| Shared Home Supports | Skilled Nursing |
| Skilled Nursing |  |
| Supportive Home Care Aide |  |
| Vehicle Modification |  |

* Adding services
* Adding the opportunity for participant self-direction of services
  + **ABI-N**: Individual Support and Community Habilitation, Peer Support, Personal Care, Adult Companion, Chore Service, and Homemaker.
  + **ABI-RH**: Individual Support and Community Habilitation and Peer Support.
* Adding psychiatric hospitals to the list of acceptable inpatient facilities at which a 90-day stay may qualify an individual for the ABI Waiver to mirror MFP Waiver.
* Making non-substantive wording changes throughout, to mirror the language used in the MFP waivers.

**Proposed Changes to All 4 Waivers:**

Increasing the number of participants that can be served.

Adding a telehealth delivery option for certain waiver services.

* Increasing flexibility for assessments, service planning, and case management to occur remotely/via telehealth by removing some references to specific modalities (i.e., “in person”, “telephone”) while maintaining operational integrity.
* Adding reassurances that providers that offer services via telehealth are following HIPAA requirements.
* Adding Assistive Technology as a new service, in part to cover devices that enable participants to engage in waiver services.
* Adding a unit rate for Partial Day – Day Services, to continue offering Day Services at less than a per diem rate, as authorized through Appendix K authority approved during the Public Health Emergency (PHE).
* Updating verification of provider qualifications from annual to every two-years for many providers.
* Modifying language to reflect the fact that MFP Demonstration eligibility has been changed from a 90-day to 60-day facility stay; this may impact MFP Demo participants ability to transfer to a waiver if their initial facility stay was shorter than 90 days.
* Updating data sources and sampling approaches for several performance measures.
* Changing pronouns throughout to be gender neutral.

**Proposed Changes to only the MFP-CL and ABI-N:**

* Adding Home Delivered Meals as a new waiver services to continue offering this service as authorized through Appendix K authority approved during the PHE
* Adding Laundry as a new service.

**Proposed Changes to only the MFP-CL:**

* Updating staffing requirements for Independent Living Supports

**Proposed Changes to only MFP-RS and ABI-RH:**

* Adding a description of how DDS utilizes Positive Behavior Supports.
* Updating language related to policies, training, and reporting requirements on restraints, restrictive interventions, and seclusion to more accurately reflect current requirements.